Dear Colleague,

Welcome to our Men’s Health League Program Manual. For more than 50 years, men living in the United States have experienced a silent health crisis. To address this challenge in Cambridge, Massachusetts, we have encouraged men to make health a priority by implementing the Men’s Health League. With this in mind, we have developed a tool for organizations interested in promoting men’s health in their community.

In this manual, you will find examples of strategies used to develop a meaningful partnership among community groups, implement programs that fit a community’s needs, and generate an interest in health among men in local neighborhoods. In order to assist with your wellness efforts, we have included program templates, forms, and charts that relate to our Men’s Health League programs to guide as you develop related programs in your community.

We hope that this manual benefits your organization as we work to improve upon the health and well-being of the communities whom we serve.

Sincerely,

Albert W. Pless, Jr.
Program Manager, Men’s Health League
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Tip:
Use the bookmarks bar in the left margin to easily access program materials like checklists, sample program templates, and charts.
Acknowledgements

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Finally, we would like to recognize the contributions of the Men of Color Task Force, which has helped to provide a voice to the plight of men of color in the Cambridge community for nearly two decades.
Introduction: Why Men’s Health?
Introduction: Why Men's Health?

Why Men's Health?

Men of color in the United States today are disproportionately affected by cardiovascular disease and type II diabetes, as well as other chronic diseases. The Men's Health League is a community-based initiative in Cambridge, Massachusetts that addresses the prevention of these chronic diseases, especially targeting men of color. The Men's Health League is a demonstration project utilizing local assets such as the formal partnership established between a minority-serving community organization, a health care system, and a fitness/community center to develop and implement programs that help to reduce health disparities by implementing wellness initiatives to increase physical activity, support healthy eating, and educate men about key health topics.

The City of Cambridge has a strong foundation in men's health, starting with the formation of the Men of Color Task Force in 1991 and subsequently the Men of Color Health Initiative (MOCHI) in 1993. Through a partnership established between the Margaret Fuller Neighborhood House, Cambridge Health Alliance, and the Cambridge Family YMCA, the Men's Health League works to expand on this foundation and connect community-based organizations with health care services.

The Men's Health League encourages men throughout the City of Cambridge to make health a priority. Organizations, businesses, civic associations, and a broad spectrum of stakeholders have engaged with the Men's Health League to highlight health in a way that speaks to their constituents.

The State of Men's Health: A National Issue

Men in the United States have been experiencing a silent health crisis for more than 50 years. Men's life expectancy is shorter than women's - women of all races now live 80.1 years, compared to men's, who average 74.8 years. According to a Report on Men's Health released by the Cambridge Public Health Department in 2008, men of all races experience a higher death rate than women for heart disease, cancer, HIV/AIDS, and many other conditions. Men are also often reluctant to seek medical care unless they are very sick, and are twice as likely as women to report that they have no usual source of health care.

Additional findings from the report include:

- Among men and women of different races and ethnicities in the U.S., black males have the highest rate of cancer diagnoses and death. The leading cancer killers among black men are lung, prostate, and colorectal cancers.
- Black males have the highest death rate from heart disease, followed by white males, Hispanic/Latino males, American Indian males, and Asian males.
- The Centers for Disease Control and Prevention estimates that among U.S. males diagnosed with HIV/AIDS, about 49% are black and 18% are Hispanic/Latino. In addition to experiencing much
Introduction: Why Men’s Health?

higher infections rates than white males, black and Hispanic/Latino males also have a higher rate of death from the disease.

• African American and Hispanic/Latino men suffer higher rates of sexually transmitted diseases (e.g., gonorrhea, chlamydia, syphilis and herpes infection) than white men.

• Men of color account for over two-thirds of deaths by homicide in the U.S. Homicide is the leading cause of death for African American men between the ages of 15 and 24 and the second leading cause of death for Hispanic/Latino men in the same age group.

A landmark 2002 report, *A Poor Man’s Plight: Uncovering the Disparity in Men’s Health*, examined the health status of black, Hispanic/Latino, Asian/Pacific Islander, Native American, and mixed race men and identified strategies to overcome obstacles that men of color face in accessing appropriate health care.

These recommendations include:

• Expanding health insurance coverage for men of color.

• Establishing enhanced points of entry into health care for men of color.

• Increasing the availability of community-based screening and services, and increasing outreach to men of color.

• Building a culturally competent workforce.

• Expanding research and data collection on the health of men of color.

• Developing community coalitions of health, public health, and social service providers who serve men of color.

• Developing national, state, and local policy agendas for the health of men of color.

The Response: The Men’s Health League

In October 2007, the Margaret Fuller Neighborhood House and its partners (Cambridge Health Alliance and Cambridge Family YMCA) received a three-year grant from the U.S. Department of Health and Human Service, Office of Minority Health to reduce health disparities among men of color in the City.

In addition, the Cambridge Public Health Department received a three-year state grant to expand health outreach efforts and provide technical assistance to the Men of Color Task Force, an advisory group of community stakeholders.

The two grants are supporting a broad health disparities initiative aimed at improving the health of men of color in Cambridge. The initiative, called The Men’s Health League: A Community Health Partnership for Men, reaches out to men of color who have diabetes or hypertension, or may be at risk for developing these conditions.
Program Evaluation

The Institute for Community Health (ICH), a public health research institute, serves as the evaluator for the Men’s Health League (MHL) project. ICH was founded in 2000 by Cambridge Health Alliance, Mt. Auburn Hospital, and Massachusetts General Hospital of Partners HealthCare. ICH focuses on building sustainable community health through research, evaluation, facilitation and capacity building. ICH also works in partnership with local public health departments and community-based agencies to help stimulate the creation of innovative programs and health policies through a community based approach that promotes long-term healthy lifestyles.

The MHL is being evaluated using a mix of qualitative and quantitative methods such as surveys, in-depth interviews, focus groups, and clinical screening data.

Accomplishments and Challenges

The Men’s Health League in Cambridge can serve as a model for addressing health issues for men in communities. To date, the Men’s Health League has designed and implemented the following programs:

- **Men’s Health Team**: A group of approximately 10 men who provide direct community outreach and mentoring.

- **Fit for Life**: The Fit for Life program focuses on men at risk for heart disease, stroke, and/or type 2 diabetes.

- **Navigated Care**: A Health Care Navigator tracks individual men to ensure they have access to health care, meet regularly with their primary care providers, and follow up with referrals.

- **Fitness Brothers**: Based on an award-winning community fitness program developed by the Cambridge Public Health Department, Fitness Brothers inspires “healthy competition” between teams of men to encourage exercise and learn about healthy lifestyles.

- **Community Outreach and Education**: The Men’s Health League organizes neighborhood-based events throughout the year, some of which are open to the public and others that are available exclusively to program participants.

It is essential for communities throughout the nation to make men’s health a priority in order to redress the inequalities in their health outcomes. The Men’s Health League: A Community Health Partnership for Men offers one model to help men take care of their own health, connect to health care, and build essential community partnerships to promote health and wellness.
STRATEGIES

Men’s Health in Your Community: Strategies to get you started

This section will introduce strategies and procedures common to all Men’s Health League programs. The success of the Men’s Health League programs depends on community awareness and support. Three main strategies are described that can help build relationships in the community.

Community Needs Assessment
Using a needs assessment can help determine whether a neighborhood can benefit from a Men’s Health League Program. For Cambridge, the community needs assessment consisted of a men’s health survey and multi-lingual, men’s health focus groups.

The men’s health survey asked men about different health indicators. Topics included primary care access, cardiovascular health, sexual health, and mental health.

The multi lingual focus groups gathered men who spoke English, Amharic, Spanish, Haitian-Creole, and Portuguese. Their behaviors and attitudes about men’s health were examined. Example questions that could be used in a focus group include:

- In your culture, what makes a man healthy?
- What do you think men should get checked for to stay healthy?
- Think back to a time when you felt you were very healthy—what did you do to stay healthy?
- Is there something in your community that helps you be healthy?
- Is there something in your community that stops you from being as healthy as you would like? What is it?
- What can be done to change the things in your community that stop you from being healthy?
- What is the most important thing for you when choosing a primary care provider (medical doctor, nurse practitioner or physician assistant)?
- For those of you who don’t like going to see a physician, what would make you more likely to go? How else could you see such a person helping a man take care of his health?

Stakeholder Identification
Engaging community stakeholders is critical to the success of a program. Potential stakeholders include those individuals in local government, local agencies, grassroots organizations, health and fitness centers, health care systems, and community centers who have an interest in health, health disparities, and community building.

Stakeholders provide support and offer ideas about and unique insight into the community. Stakeholders can also help identify potential community partners. It is important to engage in stakeholder interviews
before a men’s health program is implemented to ensure that community leaders know about and are supportive of the program.

Once the stakeholders are identified, set up an individual meeting with each stakeholder. Prepare questions for the meeting that center on characteristics of the community, relating to men’s health. Examples of questions include:

- What is your perspective on the community’s attitude toward men’s health?
- What is the history of men’s health in our community?
- Are there organizations, campaigns, or agencies that champion men’s health in our community?

Don’t forget that issues and questions may arise as the community men’s health program develops. Therefore, make certain that stakeholders’ contact information is readily accessible for follow-up questions. Maintain a good relationship and openly communicate with stakeholders on a regular basis to establish rapport within the men’s health community.

Community Partnership Development

Community partnerships have been essential to the success of the Cambridge Men’s Health League programs because they bring expertise about the community, knowledge from previous experience, and a perspective unique to the organization.

Community partnerships can be developed through a variety of venues, and function best when the partnered organizations have similar goals, but different areas of expertise. The Cambridge Men’s Health League is a partnership between the Cambridge Margaret Fuller Neighborhood House—a community-based organization; the Cambridge Health Alliance—a regional health system; and the Cambridge Family YMCA—a fitness organization.

Communicating goals, values, and objectives to each of the partners is essential to ensure that all partners get from the programs what they need. Organizational protocols around media, publication, production, and event planning can be defined and integrated into the newly developed program. The partnership must achieve a balance of expectations around organizational needs, organizational policies, and procedures.

These three strategies, Community Needs Assessment, Stakeholder Identification, and Community Partnership Development, interact to develop community relations conducive for successful implementation of a wellness promotion effort.
Men’s Health Team
INTRODUCTION AND OBJECTIVES

What is the Men’s Health Team?
The Men’s Health Team is a group of men who provide direct community outreach and mentoring for the Men’s Health League. Team members are recruited for their ability to connect with men around issues of health and to be role models and coaches for the participants. They bring a range of skills and serve as the face of the various program components of the Men’s Health League.

The objective of this program is to build grassroots health leadership by recruiting mostly African-American men from Cambridge, training them to be men’s health coaches, and utilizing them in program activities. They serve as peer role models and mentors, and are trained and supported to become community leaders in men’s health. This is a unique role that combines effective the use of natural social networks to enhance community outreach, and expands capacity by developing trained peer leaders.

What are the key objectives of this program?
Every community event should have a goal or objective in mind. Objectives to consider include:

- Build grassroots health leadership
- Encourage men to seek health care
- Inspire and maintain physical activity and healthy lifestyles

FRAMEWORK AND PROTOCOL

Program Development

Why develop a Men’s Health Team program?
The Men’s Health Team is an effective way to develop community capacity and support men at risk for chronic diseases related to obesity. The most important benefit is the service that the Men’s Health Team provides to peers, especially men of color, that helps them take steps to improve their health. The Men’s Health League relies on the enthusiasm and value that members place on personal health. In sharing these values, the Men’s Health Team not only helps the programs be successful, but also engages a wider audience in making men’s health a priority in Cambridge.

How are Men’s Health Team participants recruited?
Effective recruitment requires community support. Be sure to ask community partners to display and distribute fliers and applications in areas where men congregate: barbershops, health centers, grocery stores, college campuses, and community centers.

Applications for the Men’s Health Team must be reviewed fairly and consistently to ensure fairness, evaluated based upon the community’s language needs, and the applicant’s motivation, commitment, and previous experience. In addition, final applicants must be interviewed to determine motivation, base knowledge and to review team requirements.
Program Establishment

How is the program introduced?
Orientation is required for participation. The initial orientation should be approximately one hour in length to introduce the tasks and requirements of participants.

What is required of Men’s Health Team participants?
Men’s Health Team members must commit to one year of service, and are expected to:

- Provide mentoring and one-on-one coaching to Fit for Life participants to ensure program compliance and effectiveness.
- Lead and recruit teams for the Fitness Brothers program.
- Refer men to the Navigated Care program.
- Participate in Men’s Health League community events.
- Attend monthly Men’s Health Team meetings which include educational sessions about men’s health.

In return for a one year commitment, Men’s Health Team Members receive:

- Cambridge Family YMCA membership
- Training on men’s health issues and mentoring skills

How are Men’s Health Team members educated about health and wellness?
Once participants are informed of expectations and agree to the conditions of the program, you will schedule the first training session.

The first session gives your program an opportunity to:

- Get baseline measurements
- Map expectations
- Collect informed consent forms (if your program is being formally evaluated)
- Distribute training curriculum
- Sign commitment contracts
- Introduce the gym or facilities that the team will be using

Baseline data consist of health screenings that measure weight, BMI, blood pressure, blood sugar, cholesterol, body fat, and height.

Training Tip:
Use community partners for health trainings. Partners usually have both the expertise and experience needed to run a successful workshop.
Team members are required to attend an orientation and three workshops. Please see the orientation checklist and workshop checklist for more detailed information.

A community fitness partner, the Cambridge Family YMCA, leads a partner orientation to review safety during an exercise for the Fit for Life partner. Safety topics include warning signs of heart attacks and stroke, exercise precautions, and a tour of the YMCA.

*How are Men’s Health Team members partnered with a Fit for Life member?*
Both Men’s Health Team and Fit for Life members are asked about their schedules and are matched by shared interests and schedule availability.

**Program Logistics**

*What is the staffing structure?*
The Men’s Health Team requires a program manager and men’s outreach coordinator. The program manager develops and implements trainings for the men’s health team, while the men’s outreach coordinator addresses the daily needs of the men’s health team, and oversees the progress of the team members. It is important that workshop presenters be well-versed in the topic of discussion, and aware of the specific needs and interests of the Men’s Health Team members.

*What is the budget?*
Every program is different, depending on scope, available resources, and the needs of your community. Here are some general costs to consider:

- **Staffing**
  - Program management
  - Recruitment of participants
  - Training
  - Outreach activities

- **Stipends for Men’s Health Team members**

- **Gym membership for team members**

- **Outreach materials**
  - Fliers
  - Posters
  - Educational materials

- **Refreshments served at workshops and meetings**

- **Evaluation**

*How does the program motivate and manage the Men’s Health Team members?*
Men’s Health Team members receive monthly check-in worksheets and weekly exercise logs.
Potential Challenges

What if paired partners are not working well together?
It is important that program managers and staff keep in close contact with both the Men's Health Team members and their Fit for Life partners. If the match between the Men's Health Team member and the Fit for Life participant is not working well, program staff should help mediate. In some limited instances, switching partners may be an option, however, consider the effects on your evaluation efforts.

What if Team members are not compliant with their responsibilities?
Making sure that Men's Health Team members understand and sign a contract at the beginning of their training has proved a very powerful tool. Review contract terms and expectations carefully, and consider tying stipends to meeting or event attendance to encourage regular participation.

Team building activities generate support within the Men's Health League. Please refer to the World Health Organization’s team building document for more information.

PROGRAM MATERIALS

Framework and Protocol
- Recruitment flier
- Application
- Finalist interview questions
- Liability waiver
- Commitment contracts
- Orientation checklist
- Workshop checklist
- Check-in worksheets
- Exercise logs
- Communication scenarios

Resources

Nutrition:
http://mypyramid.gov/
http://www.nutrition.gov/nal_display/index.php?info_center=11&tax_level=1
http://www.fruitsandveggiesmatter.gov/
http://www.cdc.gov/nccdphp/dnpao/index.html

Physical Activity:
http://www.health.gov/paguidelines/
The Men’s Health League is a partnership of the Margaret Fuller Neighborhood House, Cambridge Health Alliance, and the Cambridge Family YMCA. Funding is provided by the U.S. Department of Health and Human Services, Office of Minority Health.

http://www.cdc.gov/physicalactivity/everyone/guidelines/index.html

Men’s Health:
http://www.menshealthnetwork.org/stateofmenshealth/

CAMBRIDGE EVALUATION RESULTS

The evaluation of the Men’s Health League has been conducted by the Institute for Community Health, a public health research institute dedicated to community-based participatory research, assessment, dissemination, and educational activities. Evaluation activities for the Men’s Health League included surveys, focus groups, pre- and post-tests, and clinical screenings.

The Men’s Health League was successful in recruiting a team of 10 men of color, 70% of whom maintained their commitment to the program over time. Of these men, 38% increased the number of times they exercise each week and 100% stated they would participate in a similar program again.
Men’s Health Team

wanted: a few good men to join the Men’s Health Team

Give a helping hand to Cambridge men who want to get healthier

you will be a role model
you will be a mentor
you will be a volunteer coach
you will make a difference

What you will do:
- Work out with the participants at the YMCA
- Help with health outreach events in the community
- Be a role model
- Complete 12 hours of training
- Get health screenings

Who can apply:
- Men of color from Cambridge preferred, but open to all
- Demonstrated commitment to improving your health
- Effective motivator and leader
- Willingness to commit for one year
- A diverse group of 16 men will be selected

What you will get:
- Free 6-month YMCA membership (1390 value)
- Training in men’s health and fitness
- Opportunity to be a mentor/community leader
- $1,000 stipend

Orientation (required for all Men’s Health Team members)
Tuesday, March 4 from 4:00-5:00 PM or 5:00-7:00 PM
at the Windsor Street Health Center, 119 Windsor Street, Cambridge

For information, call 617-665-2655 or email mlarson@challiance.org
Men’s Health Team Application

Name: First __________________________________________ Last ____________________________

Address: Street __________________________________________ City __________ State __________ Zip ______

Phone: Home ( ) ______________ Mobile ( ) __________________________

Email: __________________________ Date of Birth: ____________

We need to contact you frequently during the program. How can we best reach you? (Check one)

☐ Email    ☐ Home phone    ☐ Mobile phone

Language(s) spoken at home: ☐ English    ☐ Spanish    ☐ Haitian Creole    ☐ Portuguese

☐ Other: __________________________

How did you hear about the Men’s Health Team?

☐ Friends/word of mouth    ☐ Cambridge Public Health Department website    ☐ Flyer

☐ Other: __________________________

Why would you like to become a Men’s Health Team member? (Use additional space if needed)

____________________________________________________________________________________

____________________________________________________________________________________

Check the item(s) below in which you had significant training or experience, including volunteer or community service experience.

☐ Communication skills    ☐ Outreach    ☐ Health Education    ☐ Public Speaking    ☐ Men’s Health

☐ Working with low income and/or ethnically diverse populations    ☐ Community Organizing

Men’s Health Team members must have a “demonstrated commitment to improving their own health”. What are you doing to improve your health?

____________________________________________________________________________________

____________________________________________________________________________________

All Men’s Health Team members must complete a CORI at the Cambridge Public Health Department.

Please submit this application by Friday, November 7, 2008 via fax, mail, or in person to:

Cambridge Public Health Department
119 Windsor St., Cambridge, MA 02139
Ground Level
Fax: (617) 665-3888
Tel: (617) 665-3830
Albert Pless (apless@challiance.org)
INTERVIEW QUESTIONS FOR MEN’S HEALTH TEAM PROGRAM PARTICIPANTS

Thank you for agreeing to participate in this interview. We are interested in your thoughts about the Men’s Health Team program. Please answer these questions as accurately and honestly as possible. Your individual comments will be kept confidential. At the end of all interviews, a general report will summarize your thoughts and those of other team members anonymously.

1) What inspired you the most to take part in the Men’s Health Team program?  
   Probe: Why did you decide to get involved?

2) How well did the Men’s Health Team workshops prepare you to be an effective Men’s Health Team member?

3) What could have made the Men’s Health Team workshops more helpful or useful to you as a Men’s Health Team member?

4) What did you gain from your experience working with Fit for Life men as a Men’s Health Team member.

5) Please describe a successful interaction you may have had as a Men’s Health Team member, working with a Fit for Life man. What was successful about this experience?

6) Please describe a time when being a Men’s Health Team member was challenging or difficult for you. What made it difficult? What could have prevented this situation?

7) Do you feel that your role in your community has changed since you have become a Men’s Health Team member? How?

8) During your time in the Men’s Health Team, did you feel that you received enough support to be an effective Men’s Health Team member? From whom? Please explain.

9) How has your participation as a member of the Men’s Health Team changed your own health and how you think about men’s health?

10) When your participation in the Men’s Health Team is over, what will you miss the most about being a Men’s Health Team member?

Thank You!
LIABILITY WAIVER

Explanation of the Program
The Men’s Health Team exercise program emphasizes basic aerobic conditioning, strength training, and stretching exercises for all levels of fitness for men over the age of 18. You may choose your own activities under the recommendation and supervision of The Men’s Health League staff. Exercise intensity must be appropriately based on your health history and current level of fitness.

Attendant Risk
There are inherent risks to any exercise program, including muscle and joint soreness, dizziness, abnormal blood pressure changes, chest pain, and other discomforts. If you have considerable discomfort (i.e. chest pain, dizziness etc…), you should discontinue exercising seek medical attention.

Benefits Participant can Expect
It is expected that you will see benefits as a result of regular and consistent exercise. Strength training typically results in numerous physical benefits (including improved muscle strength and increased bone density) which may lead to an improvement in physical tasks associated with work, recreation, and every day life. Aerobic conditioning typically results in health benefits, including improved body composition, reduced blood pressure, and reduced risk of cardiovascular disease, increased aerobic capacity, and improved circulation.

Participant Responsibilities
To promote the safety and benefit of your participation in the Men’s Health Team exercise program, it is important that you disclose any uncomfortable symptoms that you may be experiencing during exercise, including joint pain, light headedness, or tightness and pressure in your chest. It is also important that you adhere to the recommendations of the fitness staff, especially with regard to the choice and intensity of exercises you perform. You should not exercise when you are injured, sick, or not otherwise feeling well.

Freedom of Consent
I agree to voluntarily participate in the Men’s Health Team exercise program. I understand that I am free to deny consent if I so desire now or at any point in the program.

Waiver of Liability
I am in good health or have consented with my doctor about participating in physical activity. I shall not hold the instructors, The Cambridge Health Alliance, Cambridge Family YMCA, or The Margaret Fuller Neighborhood House responsible for any injuries. I hereby covenant not to sue and agree to release, discharge, hold harmless, and indemnify The Cambridge Health Alliance, Cambridge Family YMCA, and Margaret Fuller Neighborhood House, its trustees, officers, affiliates, and assigns (collectively "The Men’s Health League") from and against any and all liability, claims, damages, actions of causes of action whatsoever, for loss, damage, or injury to person or property, including but not limited to, all acts or omissions constituting negligence on The Cambridge Health Alliance, Cambridge Family YMCA, or The Margaret Fuller Neighborhood, except for willful or wanton negligence or misconduct. I acknowledge that I have been advised of potential dangers inherent in the program and that I am personally responsible for and voluntarily assume the risks of injury or damage to person or property, except as limited above.

Signature                                      Date
Men’s Health Team Contract
Between the Margaret Fuller Neighborhood House and the Men’s Health Team (MHT) member

I (printed name) _______________________________________ agree to the following:

1) Attend and participate fully in all trainings, workshops, and community events. Trainings and workshops are 1-2 times monthly.
2) AT A MINIMUM, workout 2 times per week at the YMCA with my assigned Fit for Life participant. Check-in conversation (telephone, face to face) one additional time per week with my assigned Fit for Life participant.
3) Assist in organizing and promoting health education and outreach events.
4) Provide information, education for men in the community, and recruit participants for Men’s Health League programs.
5) Serve as a role model for men in the community.
6) Report weekly on communication and progress of my assigned Fit for Life participant.
7) Be screened for height/weight/blood pressure/cholesterol at beginning and end of program.

I will receive the benefit of a YMCA membership during my participation as a Men’s Health League Team member.

The Margaret Fuller Neighborhood House agrees to pay me a $1,000 stipend in three to four payments during my participation in the Men’s Health Team beginning December 3, 2008 and ending September 30, 2009.

Note: Your membership privileges will be suspended if you have two consecutive weeks (without approval) of non-participation.

Both parties have the right to terminate this agreement at any time.

____________________________________
MHT Member Signature

____________________________________
Date

____________________________________
Barbara Kibler, Executive Director
Margaret Fuller Neighborhood House

____________________________________
Date
The Men’s Health League is a partnership of the Margaret Fuller Neighborhood House, Cambridge Health Alliance, and the Cambridge Family YMCA. Funding is provided by the U.S. Department of Health and Human Services, Office of Minority Health.

Orientation Checklist

☐ Orientation I
  - Orientation I introduces team members to the Men’s Health League. The goal is to introduce staff and give team members time to get to know one another.
  - Set an agenda
    - Welcome and introduce the staff and other team members
    - Provide a history of the Men’s Health League, and an overview of Men’s Health League programs
    - Introduce the contract
    - Outline next steps
  - Reserve a venue
    - Determine technology needed
      - Speakers
      - Projector
      - Screen
      - Electrical outlet
      - Internet access
  - Allocate orientation tasks to staff
  - Send reminders to new Men’s Health Team members
  - Order healthful meals for the orientation
  - Prepare materials
    - Prepare handouts
    - Provide:
      - pens
      - nametags
      - markers
      - Men’s Health Team promotional pins or bracelets
    - Compile business cards of staff members

☐ Orientation II
  - Orientation II is specifically called “Partner Orientation.” It allows Team members to learn safety precautions for exercise with a Fit for Life partner.
  - Set an agenda
    - Tour the gym
    - Review warning signs of heart attacks and stroke and exercise precautions
Workshop Checklist

The Men’s Health Team workshops follow a predetermined format that integrates three essential components: team building, health education, and program implementation. These three aspects work to form a knowledgeable team atmosphere during each monthly meeting.

Not only are men’s health team members educated about men’s health, but also each workshop focuses on troubleshooting, motivational strategies, and communication tactics. This workshop works best by giving team members scenarios to practice and discuss.

The table below shows components of each workshop: team building, health education, program implementation, and miscellaneous topics.

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<tr>
<td></td>
<td>Health Insurance</td>
<td>Emotional Wellness</td>
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<tr>
<td></td>
<td></td>
<td>Stress Management</td>
<td></td>
</tr>
</tbody>
</table>

Men’s Health Team Check-In

<table>
<thead>
<tr>
<th>MHT Member:</th>
<th>FFL Participant:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

Have you set up a regular time and date to meet with your FFL partner?

Has your partner set up his Personal Training Sessions?
Will you join them?
Comments:

Has your partner set up his Nutritionist Meeting?
Will you join them?
Comments:

Week 1 Have you worked out at least 2X with your FFL partner this week?
Yes ☐ No ☐
<table>
<thead>
<tr>
<th>Week</th>
<th>Question</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>Have you worked out at least 2X with your FFL partner this week?</td>
</tr>
<tr>
<td></td>
<td>Yes □ No □</td>
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<tr>
<td>3</td>
<td>Have you worked out at least 2X with your FFL partner this week?</td>
</tr>
<tr>
<td></td>
<td>Yes □ No □</td>
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<tr>
<td>4</td>
<td>Have you worked out at least 2X with your FFL partner this week?</td>
</tr>
<tr>
<td></td>
<td>Yes □ No □</td>
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<tr>
<td>5</td>
<td>Have you worked out at least 2X with your FFL partner this week?</td>
</tr>
<tr>
<td></td>
<td>Yes □ No □</td>
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<tr>
<td></td>
<td><strong>HALF TIME CHECK IN</strong></td>
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<tr>
<td></td>
<td>What have been any key successes so far with your FFL Partner?</td>
</tr>
<tr>
<td></td>
<td>Have you had any major challenges?</td>
</tr>
<tr>
<td>6</td>
<td>Have you worked out at least 2X with your FFL partner this week?</td>
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<tr>
<td></td>
<td>Yes □ No □</td>
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<tr>
<td>7</td>
<td>Have you worked out at least 2X with your FFL partner this week?</td>
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<tr>
<td></td>
<td>Yes □ No □</td>
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<td>8</td>
<td>Have you worked out at least 2X with your FFL partner this week?</td>
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<td></td>
<td>Yes □ No □</td>
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<td>9</td>
<td>Have you worked out at least 2X with your FFL partner this week?</td>
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<td></td>
<td>Yes □ No □</td>
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<td>10</td>
<td>Have you worked out at least 2X with your FFL partner this week?</td>
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<td></td>
<td>Yes □ No □</td>
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<tr>
<td>11</td>
<td>Have you worked out at least 2X with your FFL partner this week?</td>
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<tr>
<td></td>
<td>Yes □ No □</td>
</tr>
<tr>
<td>12</td>
<td>Have you worked out at least 2X with your FFL partner this week?</td>
</tr>
<tr>
<td></td>
<td>Yes □ No □</td>
</tr>
<tr>
<td></td>
<td><strong>Now that your first round is over what are some lessons learned for the next round?</strong></td>
</tr>
<tr>
<td></td>
<td><strong>What are some specific ways the Men’s Health League can better support you in your next cycle?</strong></td>
</tr>
<tr>
<td></td>
<td><strong>What suggestions, if any do you have for the League?</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Thank you so much for your efforts and presence with the initiative!</strong></td>
</tr>
</tbody>
</table>
Exercise Log:
Men’s Health Team members
(Must be returned before Monday)

Name: ________________________________

Use this log to record when and how long you exercise. Also check (✓) the day you made contact (telephone/email) with your assigned Fit For Life member. You are encouraged to exercise as often as you can, but at a minimum, once per week, you are required to exercise at the YMCA. These log sheets will be collected and reviewed each week.

<table>
<thead>
<tr>
<th>Time</th>
<th>Exercise Type</th>
<th>How long? (min)</th>
<th>Telephone or email contact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monday</td>
<td>Weight training / Cardio</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>Other:</td>
<td></td>
<td></td>
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<tr>
<td>Tuesday</td>
<td>Weight training / Cardio</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>Other:</td>
<td></td>
<td></td>
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<tr>
<td>Wednesday</td>
<td>Weight training / Cardio</td>
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<td></td>
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<td></td>
<td>Other:</td>
<td></td>
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<tr>
<td>Thursday</td>
<td>Weight training / Cardio</td>
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<td></td>
<td>Other:</td>
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<tr>
<td>Friday</td>
<td>Weight training / Cardio</td>
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<td>Other:</td>
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<tr>
<td>Saturday</td>
<td>Weight training / Cardio</td>
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<td></td>
<td>Other:</td>
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<td></td>
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<tr>
<td>Sunday</td>
<td>Weight training / Cardio</td>
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<td></td>
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<td></td>
<td>Other:</td>
<td></td>
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</tr>
</tbody>
</table>

Notes:
Men’s Health Team

Men’s Health Team
Agenda
July 28, 2008
Cambridge Public Health Department

6:00 - 6:45pm (eating during this time)

Updates/Marketing
- Updates and logistics- Log sheets, Y changes, Fill out scheduling calendars, review and sign new contract, discuss pay cycle AP and HL- 10 min
- Discuss timeline- Where are we? When does the program end? When is the next FFL group start? AP- 5 min
- Discuss some marketing strategies-SK

6:45 - 7:45pm

Communication (discuss scenarios)

Scenario # 1

Albert Pless (MHT member) and Henry Lewis (FFL participant) both attend the YMCA regularly. Albert has had several conversations with Henry about getting together to workout. They have agreed to different times, and Henry is always a no show. With subsequent phone calls and attempts to reschedule Albert and Henry have yet to workout together. There is also a report that Henry was a no show for his personal training session with Richard Harding.

Who is at fault?

What are the steps the MHT member could have taken to rectify this communication breakdown?

What role could the Men’s Health League have played in helping facilitate this situation?

Scenario # 2

During the early months of the program both Barack Obama and his FFL partner John McCain were going to the gym on a regular basis. All of a sudden John stopped going and mentioned to Barack that he was frustrated at his lack of results and wanted to drop out.

What would be your first response or action step?

What information would be helpful for you to have to help John?

What are some other reasons that (you think) John stopped going to the Gym?
Scenario # 3

You find out your FFL participant (Paul Pierce) does not like working out with you, and in fact have requested that you let the Men’s Health League know that he wants a new partner. He wishes you no hard feelings, but just felt like it wasn’t a match.

What are some of the questions you would ask him?

How would this make you feel?

What could the Men’s Health League have done to make this situation better?

7:45 - 8:00pm

Wrap up and Evaluation

Notes from the Men’s Health League team meeting held on July 29, 2008 @9:30 AM.

Topic: Debrief of MHT meeting held on July 28th.

- We need to be very clear when we explain each of the programs that the Men’s Health League offers so that the MHT understands all of the components of each program.
- The Men’s Health League will try to schedule small group meetings with the MHT to explain in detail all of the program offerings.
- MHT needs to create a short easy to read summary for each of the programs: Nav care, FFL, Fitness Brothers.
- AP will set up a meeting with the YMCA to make sure they are clear with program components and MHT is clear on YMCA’s role in FFL/MHT.
- Recruitment for Fitness Buddies has to be the priority for the Men’s Health League.
- Men’s Health League will explore some of the original recruitment techniques used by the old fitness buddy staff.
- Compile Fitness Brothers materials for circulation by Aug 4th.
- Men’s Health League will try to model MHT member’s workout plan to use as an example for other MHT members to follow with their FFL partner. (AYANO’s PLAN)
- Look at scheduling and other issues that are obvious obstacles for fit for life participants.

Set up a meeting before the Aug. 4th FFL orientation to look at pairing FFL participants with their MHT partner.
Fit for Life
INTRODUCTION AND OBJECTIVE

What is Fit for Life?
Originating from the Men of Color Health Initiative, Fit For Life is a 12-week program for men at risk for heart disease, stroke, and type 2 diabetes. The program includes a 3-month membership to the Cambridge Family YMCA, an assigned health support mentor from the Men’s Health Team, three personal training sessions with a professional fitness trainer, one nutrition counseling session with a Registered Dietitian, and three interactive, educational workshops focusing on nutrition, fitness and men’s health issues.

What are the key objectives of this program?
Every community event should have a goal or objective in mind. Objectives to consider include:

- Engage high-risk men in a regular fitness routine.
- Build community support for Men’s Health
- Teach men knowledge about and skills for healthy eating, exercising and cooking for daily healthy living.
- Improve the clinical profile of participants in the following areas: BMI, total cholesterol, blood glucose, and blood pressure.

FRAMEWORK AND PROTOCOL

Program Development

Why develop a Fit for Life program?
The Fit for Life program helps high risk men in the community exercise regularly, adopt a healthful diet, and be mindful of pertinent health screenings. The program does this by building engaging men in a community men’s health campaign and providing support from the Men’s Health Team) and personal training sessions.

Men need personalized care to reduce risk of heart disease, stroke, and type II diabetes. Data collected on hospitalizations from the Massachusetts Department of Public Health (MDPH) between the years 2000 and 2005 highlight the need to target men of color specifically. Men had about 15% more diabetes-related hospitalizations, about 33% more major CVD hospitalizations, and 26% more major CVD emergency department discharges than women. Black men were more likely to undergo diabetes-related hospitalizations than white or Hispanic/Latino men –one of the most compelling reasons for addressing the burden of disease in this local community area. The baseline data collected from the target group demonstrates the need to improve the health status for these underserved men across the specific diabetes and heart disease objectives. There is great potential to increase access, improve health education levels and improve upon the nutrition and physical activity of this population, which could contribute to improved diabetic and heart disease-related outcomes.
How are Fit for Life participants recruited?
Fit for Life provides mentorship and guidance to individuals at risk for chronic diseases. Participants learn about the Fit for Life program through their doctor, word-of-mouth, and through Men’s Health League community outreach.

Fit for Life targets men at risk or already suffering from heart disease, diabetes, or those with a BMI>25. A physician’s permission to participate is required. Participants must be affiliated with the city of Cambridge and be 18 years or older. Although this program targets men of color, participants are not excluded based on race/ethnicity.

Once recruited, potential Fit for Life participants complete an application. This application is reviewed and program leaders determine which applicant fits best in the program by considering the target population of the program, motivation of the applicant, and risk factors.

Program Establishment

How is the program introduced?
Once the client is screened, he is invited to orientation, where the program is introduced. The orientation provides an overview of the program by distributing a resource guide and providing an informed consent form. Participants who sign the informed consent form are then asked to complete a contract, media release form and pre-test.

The contract requires the Fit for Life member to pledge to:

- Attend and participate fully in all trainings/workshops.
- Exercise at least 2 times per week at the YMCA with an assigned Men’s Health Team (MHT) member.
- Converse (telephone, face to face) with an assigned Men’s Health Team member one time per week in addition to the YMCA exercise sessions.
- Provide weekly documentation of program participation using a personal fitness log.
- Get screened for height/weight/blood pressure/cholesterol at beginning and end of program.
- Update coordinator if contact information (address, phone number) is changed.
- Notify coordinator if participation is discontinued.

Training Tip:
A fitness contract generates commitment from participants. Use “contracts” to build in motivation and introduce your program.
In addition, the contract notes that Fit for Life privileges will be suspended if there are two consecutive weeks of non-participation (without prior approval).

What is required of Fit for Life participants?
The program includes clinical screenings, physical activity and mentoring requirements, and Men’s health workshops.

The services offered by the program include:

- 3 month YMCA membership
- 3 personal fitness training sessions
- 1 nutrition counseling session
- 3 health workshops
- 2 health screenings: one at the beginning and one at the end of the program
- 1 Men’s Health Team mentor

How are Fit for Life participants educated about health and wellness?
Fit for Life participants can become empowered to live healthy lifestyles through education, social support, and active practice. Try these approaches when empowering program participants:

Men’s Health Workshops
Program participants also attend health workshops. The program includes a maximum of 13 Fit for Life Participants for each three-month cycle. The program provides support, education, and tools to empower participants who are overweight and at-risk for chronic diseases to engage to live healthier lives.

Clinical Screenings
Offer free clinical screenings for height, weight, blood pressure, total cholesterol, and blood glucose, preformed both at the baseline of the program and after twelve weeks.

Physical Activity and Mentorship
The participants are required to engage in exercise at the YMCA two times a week, and are mentored three times a week by a trained member of the Men’s Health Team. Participation is recorded by the YMCA, as participants swipe their membership card at the YMCA before entering.

Program Logistics

What is the staffing structure?
The Fit for Life program is run by the men’s outreach coordinator, who arranges for the workshops and connects the Men’s Health Team members with the Fit for Life members.

What is the budget?
Fit For Life

Every program is different depending on implementation, current resources, and regional variation. Here are some general costs to consider:

- **Staffing for:**
  - Program management
  - Recruitment
  - Workshop organization and presentation
  - Outreach activities
- **Gym membership for Fit for Life participants**
  - Personal training sessions
  - Nutrition Sessions
- **Outreach materials**
  - Fliers
  - Posters
  - Educational materials
- **Meals served at workshops and meetings**
- **Evaluation**
  - Staff to conduct health screenings

How does the program motivate and manage the Fit for Life participants?
A Fit for Life contract delineates expectations, and signing this contract is a requirement; this generates a sense of commitment and requires participants to submit a daily exercise log. In addition, participants work with a Men’s Health Team member to generate a physical activity plan that works for them. Participants are given three free sessions with a personal trainer, who is trained in motivational support. In addition, the program design itself creates a sense of community and team that perpetuates support and motivation.

Potential Challenges

What if participants are not compliant?
Participants lose gym membership privileges if they are not meeting expectations.

PROGRAM MATERIALS

Framework and Protocol

- Application
- Contract
- Personal exercise log
- Workshop checklist
- Physical activity plan
- Recruitment guidelines for health care providers
• Flier for participants
• Welcome package: frequently asked questions, mentor worksheet, and letter

Evaluation
• Medical clearance form
• Media release form
• Pre- and Post- test survey
• Pre- and Post- health screening
• Interview

Resources
• Fit for Life Manual
• 5-2-1 flier

CAMBRIDGE EVALUATION RESULTS

The evaluation of the Men’s Health League has been conducted by the Institute for Community Health, a public health research institute dedicated to community-based participatory research, assessment, dissemination, and educational activities. Evaluation activities for the Men’s Health League included surveys, focus groups, pre- and post- tests, and clinical screenings.

Fit for Life participants increased the number of days in a week that they exercise for at least 20 minutes from baseline to endline by 38.2%.
**Fit for Life (FFL) Membership Application**

Please complete the form. Print clearly. Send the application by **Wednesday, February 18th** to Albert Pless by fax or mail.

**Albert Pless, Jr.**  
**Cambridge Public Health Department**  
**119 Windsor Street**  
**Cambridge, MA 02139**  
**FAX: (617) 665-3888**  
**TEL: (617) 665-3677**

<table>
<thead>
<tr>
<th>Name</th>
<th>Date of Birth</th>
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<th>Street Address</th>
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<tr>
<th>City/State</th>
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<tr>
<th>Telephone (Home)</th>
<th>Cell</th>
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<tr>
<th>Email</th>
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</table>

1. How do you describe your cultural background? (Mark ALL that apply.)

- [ ] American Indian or Alaska Native
- [ ] Black or African American
- [ ] Native Hawaiian or Other Pacific Islander
- [ ] Asian
- [ ] Hispanic or Latino
- [ ] Other, Explain______________________________

2. What language do you speak often at home?

- [ ] English
- [ ] Spanish
- [ ] Other (What language?)______________________________

3. How did you hear about the Fit for Life (FFL) program?

- [ ] Doctor
- [ ] Friend or relative
- [ ] Poster
- [ ] Other: Please describe: ____________________________
4. Have you ever or are you currently participating in any exercise programs or training classes? Please check all that apply.

☐ Weight training  
☐ Walking  
☐ Structured fitness class  
☐ Stationary cycling  
☐ Jogging  
☐ Intramural sports  
☐ Other: Please describe: _______________________________

5. Do you currently have a primary care physician?

☐ Yes  ☐ No

6. If you marked “Yes” to question 5, when did you last visit with your physician?

☐ 1-6 months ago  
☐ 6-12 months ago  
☐ 1-2 years ago  
☐ Other: Please describe: _______________________________

7. How would you rate your current health status?

☐ Excellent  
☐ Good  
☐ Fair  
☐ Poor

8. Do you currently have any fitness goals? If so, how would your participation in the Fit for Life program assist you in achieving this goal?

9. What makes you a good candidate for the Fit for Life program?
MEN’S HEALTH LEAGUE
CONTRACT

Between the Margaret Fuller Neighborhood House and the
Fit for Life (FFL) participant

I (printed name) _______________________________________ agree to the following:

1. Attend and participate fully in all trainings/workshops.
2. **At a minimum**, workout 2 times per week at the YMCA with your assigned Men's Health Team (MHT) member. Check-in conversation (telephone, face to face) one additional time per week with your assigned Men's Health Team member.
3. Provide weekly documentation of program participation.
4. Get screened for height/weight/blood pressure/cholesterol at beginning and end of program.
5. Update Coordinator if contact information (address, phone number) is changed.
6. Notify Coordinator if and when you plan to discontinue participation in the program.

Note: Your membership privileges will be suspended if you have two consecutive weeks (without approval) of non-participation.

______________________________
Fit for Life Participant Signature

______________________________
Date

______________________________
Barbara Kibler, Executive Director
Margaret Fuller Neighborhood House

______________________________
Date
Publicity Release Form

We are hoping to draw local media attention to the Fit for Life program to further our goal of getting the message out about the Men’s Health League. It is not certain that we will have any media coverage, however we also plan to take photos to further publicize the event.

Please note in the section below if we have your permission to film or photograph you participating in the Fit for Life program.

_______________________________________________________________________

I grant permission for any pictures or video footage taken by Cambridge Public Health Department or other media representatives to be used for publicity or instructional use without compensation.

Print your name: _________________________________________

Signature: ________________________________

Today’s Date: _____________________________

Please Check here if we can contact you to be part of a story about your involvement in the Fit for Life program:

Yes, it’s okay      No, please don’t
Fit for Life Pre- and Post- Test Survey

We would like to thank you for your participation in the Fit for Life workshops. We want to make the workshops as effective as possible, in order to improve knowledge and ability to respond to men’s health needs. Your feedback is invaluable to us.

The following questionnaire is designed to assess your knowledge about health prior to and at the end of the workshops. This survey is voluntary and is completely confidential. In order to ensure confidentiality, we ask that you provide a unique identifier, consisting of the last two digits of the year you were born, the first three letters of your mother’s maiden name and the last two digits of your social security number.

This identifier will only be used by the research staff to match your pre- and post-workshop survey results, but the staff will not be able to identify you based on this code. We ask that you please respond as honestly as possible. Your answers will help us to ensure that the workshops are as comprehensive as possible. The survey should take about 10 minutes to complete.

Thank you for your participation.

Unique Identifier:

Last Two Digits of the Year You Were Born: □ - □
First Three Letters of Your Mother’s Maiden Name: □ - □ - □
Last Two Digits of Your Social Security Number: □ - □

Name: _______________________________
Date: ____________________________

Prepared by the Institute for Community Health (www.icommunityhealth.org)
Fit For Life

Fit for Life Pre- and Post- Test Survey Questions

Please answer the following questions to the best of your knowledge.

### Demographic Information

<table>
<thead>
<tr>
<th>1. What is your age?</th>
<th>□ 18</th>
<th>□ 19-29</th>
<th>□ 30-45</th>
<th>□ 46-59</th>
<th>□ 60-70</th>
<th>□ 71+</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>2. What language do you speak most often at home?</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ English □ Portuguese □ Spanish □ Haitian Creole</td>
</tr>
<tr>
<td>Other: ____________________</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>3. How would you describe your cultural background? (You can check more than one)</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ African  □ Eritrean □ Ethiopian □ Somali □ Other ____________________ (please specify)</td>
</tr>
<tr>
<td>□ Caribbean Islander (please specify ____________________)</td>
</tr>
<tr>
<td>□ European □ Portuguese □ Other ____________________ (please specify)</td>
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<tr>
<td>□ Haitian</td>
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<tr>
<td>□ Hispanic/Latino □ Dominican</td>
</tr>
<tr>
<td>□ Asian □ Bangladeshi □ Chinese □ Hmong □ Indian □ Korean</td>
</tr>
<tr>
<td>□ Mexican American, Chicano □ Puerto Rican □ Other ____________________ (please specify)</td>
</tr>
<tr>
<td>□ Middle Eastern (please specify ____________________)</td>
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<tr>
<td>□ Other (please specify ____________________)</td>
</tr>
<tr>
<td>□ Unknown/not specified</td>
</tr>
</tbody>
</table>

Brazilian
4. Where do you live?  
- Cambridge  
- Somerville  
- Everett  
- Malden  
- Other: __________________________

5. Do you have a primary care doctor or nurse practitioner that you see at least one time a year?  
- Yes  
- No  
- Not Sure/Don’t know

6. Do you have health insurance?  
- Yes  
- No  
- Not Sure/Don’t know

7. On average, how many times per week do you exercise?  
- None  
- 1-2 times  
- 3 times  
- 4 or more times

8. Are you concerned about your weight?  
- Yes  
- No

9. What kind of transportation do you use on a regular basis?  
- Car  
- Taxi  
- Bus or Train  
- Walk  
- Other: __________________________

10. Do you care for a child or an elderly person on a regular basis?  
- Yes  
- No

11. Would you say your general health is excellent, good, fair or poor?  
- Poor  
- Fair  
- Good  
- Excellent

**Nutrition**  

12. How often do you think about your health when deciding what to eat?  
- None of the time  
- A little bit of the time  
- Some of the time  
- All of the time

13. The new “My Pyramid” describes a useful way to meet your daily nutritional needs.  
- True  
- False
14. In “5-2-1” what does each number stand for?
   What does the “5” stand for? __________________________ I don’t know __________
   What does the “2” stand for? __________________________ I don’t know __________
   What does the “1” stand for? __________________________ I don’t know __________

15. Nutrition labels can help me decide how to buy groceries.
   - True
   - False
   - I don’t know

16. Drinking sugar sweetened beverages (e.g. soda, juices or sports drinks) is one way to lose weight—because they make you feel full so you eat less food.
   - True
   - False
   - I don’t know

17. Please indicate your level of agreement with the following statement:
   a. It is easy for me to set realistic goals to eat healthy.
      - Strongly disagree
      - Slightly disagree
      - Slightly agree
      - Strongly agree
   b. It is easy for me to reach my goals to eat healthy.
      - Strongly disagree
      - Slightly disagree
      - Slightly agree
Exercise and Fitness
18. How would you describe your current level of physical activity?

- Not very active
- Somewhat active
- Very active

19. How many days per week do you exercise for at least 20 minutes?

- Less than one day a week
- One day a week
- Two days a week
- Three days a week
- Four days a week
- Five or more days a week

20. Please choose one of the following:

- I intend to increase my current level of physical activity
- I intend to keep my current level of physical activity about the same
- I intend to decrease my current level of physical activity

21. Please indicate your level of agreement with the following statement:

a. It is easy for me to set realistic goals to be physically active.

- Strongly disagree
- Slightly disagree
- Slightly agree
- Strongly agree

b. It is easy for me to reach my goals to be physically active.

- Strongly disagree
- Slightly disagree
- Slightly agree
- Strongly agree
Men's Health

22. The checkups all men should regularly have to stay healthy include:
(Please check all that apply)

- A physical exam once every year or every 2 years
- A blood pressure check once every year
- A rectal exam once every year
- Testicular, skin and oral health self-exams every month
- Tetanus booster every 10 years
- Prostate blood test once a year for men 40 years old and older
- None of the above
- I don't know

23. Cardiovascular disease is the number one cause of death among men:

- True
- False
- I don't know

24. Which of the following factors may explain why men of color have high rates of heart disease and stroke
(check all that apply)

- Cultural barriers (e.g. distrust of health care system)
- Language barriers (e.g. difficulty communicating with doctor)
- Limited knowledge of available community health resources
- Limited knowledge of healthy habits and behaviors
- I don't know

Thank you!

Prepared by the Institute for Community Health (www.icommunityhealth.org)
**Exercise Log:**

Fit for Life

(Get this information to your mentor weekly)

Name: 

Week of: 

Use this log to record when and how long you exercise. You are encouraged to exercise as often as you can, but at a minimum, twice per week. These log sheets will be collected by your team captain each week.

<table>
<thead>
<tr>
<th>Day</th>
<th>Exercise Type</th>
<th>How long? (min)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monday</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tuesday</td>
<td></td>
<td></td>
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<tr>
<td>Wednesday</td>
<td></td>
<td></td>
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<tr>
<td>Thursday</td>
<td></td>
<td></td>
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<tr>
<td>Friday</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Saturday</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sunday</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Workshop Checklist

- Topics include:
  - Nutrition
  - Physical Activity
  - Men's clinical health
- Arrange for a venue to hold the workshop
  - Determine the number of people attending your workshop
  - Determine the technology needed for the workshop
    - Computer or laptop-based presentation
    - Screen and projector
- Find a workshop facilitator
- Work with the facilitator to come up with a specific topic
- Gather workshop materials:
  - Tape
  - Posters
  - Handouts
  - Pens and pencils
  - Markers
  - Nametags
  - Sign-in sheet with contact information
  - Food
FIT FOR LIFE – PHYSICAL ACTIVITY PLAN A

Congratulations. You said you are ready to increase your physical activity. You are taking a big step toward improving your health. Let's work together to create an activity program for you.

What are the two main benefits you hope to get from being active? Write them down here:

1. ____________________________________  2. ____________________________________

MAKE A PHYSICAL ACTIVITY PLAN

Let's look at the “Examples of Activities” below. Which one do you enjoy most? Can you do it all year? Sometimes it helps to have a second activity as a back-up.

Examples of Moderate Physical Activity
There is often confusion as to what is "moderate physical activity." The following list is meant to provide examples of activities that may be considered moderate physical activity. Be sure to consult a physician before beginning a new physical activity program.

- Walking, wheeling, or bike riding instead of driving
- Walking up stairs instead of taking an elevator
- Getting off the bus a few stops early and walking the remaining distance
- Mowing the lawn with a push mower
- Raking leaves
- Gardening
- Pushing a stroller
- Cleaning the house
- Doing exercises while watching television (stationary bike; arm, shoulder, or other exercises with weights)
- Brisk walking or wheeling (around neighborhood, park, etc)
- Taking a brisk 10+ minute walk in the morning, at lunch, and after dinner
- Jogging
- Bicycling
- Swimming or water aerobics
- Racket sports
- Golf (carry clubs)
- Traditional sports
- Dancing
- Participating in an exercise program at work, home, school, or the gym
### Example 1: Moderate Intensity Activity and Muscle Strengthening Activity

<table>
<thead>
<tr>
<th>Sunday</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
<th>Saturday</th>
</tr>
</thead>
<tbody>
<tr>
<td>30 minute brisk walk</td>
<td>30 minute brisk walk</td>
<td>30 minute brisk walk</td>
<td>Weight training</td>
<td>30 minute brisk walk</td>
<td>30 minute brisk walk</td>
<td>Weight training</td>
</tr>
</tbody>
</table>

Total: 150 minutes moderate-intensity aerobic activity + 2 days muscle-strengthening activity

### Example 2: Vigorous Intensity Activity and Muscle Strengthening Activity

<table>
<thead>
<tr>
<th>Sunday</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
<th>Saturday</th>
</tr>
</thead>
<tbody>
<tr>
<td>25 minute jog</td>
<td>25 minute jog and weight training</td>
<td>Weight training</td>
<td>25 minute jog</td>
<td>25 minute jog</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total: 75 minutes vigorous-intensity aerobic activity + 2 days muscle-strengthening activity

### Example 3: Mix of Moderate & Vigorous Intensity Activity and Muscle Strengthening Activity

<table>
<thead>
<tr>
<th>Sunday</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
<th>Saturday</th>
</tr>
</thead>
<tbody>
<tr>
<td>30 minute brisk walk</td>
<td>15 minute jog</td>
<td>Weight training</td>
<td>30 minute brisk walk</td>
<td>Weight training</td>
<td>15 minute jog</td>
<td>30 minute brisk walk</td>
</tr>
</tbody>
</table>

Total: The equivalent of 150 minutes of moderate-intensity aerobic activity + 2 days muscle-strengthening activity
The Men's Health League is a partnership of the Margaret Fuller Neighborhood House, Cambridge Health Alliance, and the Cambridge Family YMCA. Funding is provided by the U.S. Department of Health and Human Services, Office of Minority Health.

| Type of Activity: |  
| Where will you do your activity? At home? In the neighborhood? At the park? At a gym |  
| Place for Activity: |  
| What time of day will you do your activity? |  
| Day and Times for Activity: |  
| How long will you do your activity each time? You should build up time gradually over several weeks. |  
| Length of Activity |  
| Your MENTOR and friends can help you with your new activity program? It is good to have someone to be active with, or just to encourage you |  

Teammates:

<table>
<thead>
<tr>
<th>Name</th>
<th>Phone</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>
### Fit For Life

<table>
<thead>
<tr>
<th>Goals</th>
<th>Objectives</th>
<th>Baseline Data</th>
<th>Activities</th>
<th>Process Measures</th>
<th>Outcome Measures</th>
<th>Impact</th>
<th>OMH P. Measures</th>
<th>HP 2010 Measures</th>
<th>Objectives</th>
</tr>
</thead>
<tbody>
<tr>
<td>To promote increased physical activity and good nutrition habits among men of color who are at high risk for heart disease, diabetes or stroke in Cambridge.</td>
<td>To increase knowledge and promote behavioral change around nutrition, physical activity, and men's health in at least 60% of fit for life participants from the beginning to end of program</td>
<td>Pre-test survey collecting data on: nutrition and healthy eating, physical activity, and men's health.</td>
<td>Three workshops focused on nutrition, physical activity, and men's health.</td>
<td>Proportion of Fit for Life participants who attended all 3 workshops, as measured by the completion of both pre-test and post-test surveys.</td>
<td>% change in knowledge and behaviors around nutrition, physical activity, and men's health as measured by comparing pre-test and post-test survey results.</td>
<td>R-3, R-4</td>
<td>O-2, O-3</td>
<td>19.5 Increase the proportion of persons aged 2 years and older who consume at least two daily servings of fruit.</td>
<td>19.6 Increase the proportion of persons aged 2 years and older who consume at least three daily servings of vegetables, with at least one-third being dark green or orange vegetables.</td>
</tr>
<tr>
<td>To develop and put in place a structure that engages at least 60% of program participants in weekly physical activity interactions with men's health team members</td>
<td>a) First weekly YMCA usage report and b) pre-test survey on: 1) activity level, 2) number of days of exercise, and 3) intention to increase physical activity</td>
<td>Fit for Life participants' weekly meetings at the YMCA with a men's health team member to engage in physical activity.</td>
<td>Proportion of Fit for Life members who participated in weekly meetings as measured by usage logs and program manager's attendance counts.</td>
<td>Self-reported: 1) increase in activity level, 2) increase in number of days of exercise, and 3) intention to increase physical activity as measured in a) in-depth interviews with a sample of men, and b) comparison of pre and post-test survey results.</td>
<td>Reduction in diabetes, heart disease, and stroke risk for men of color in Cambridge.</td>
<td>R-3, R-6</td>
<td>12.11 Increase the proportion of adults with high blood pressure who are taking action (for example, losing weight, increasing physical activity, or reducing sodium intake) to help control their blood pressure.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Fit For Life Personal Health Information
(Pre- and Post Screening)

YOUR UNIQUE IDENTIFIER
Using information about yourself, please fill in:

Last Two Digits of the Year You Were Born: ______ - _____
First Three Letters of Your Mother's Maiden Name: _______ - _____ - ______
Last Two Digits of Your Social Security Number: ___ - _____

Date: / /  Time: _____ AM _____PM  Screener initials:_____

The following section will be filled out when you are screened:

<table>
<thead>
<tr>
<th>Tests</th>
<th>Normal Range</th>
<th>Your Results</th>
<th>Screener Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Blood Pressure</td>
<td>110/80</td>
<td>/</td>
<td></td>
</tr>
<tr>
<td>Blood Sugar</td>
<td>80-120</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cholesterol</td>
<td>Under 200</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Body Fat</td>
<td>10-20 percent</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Height</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Weight (in pounds)</td>
<td></td>
<td></td>
<td>A ☐ B ☐ C ☐</td>
</tr>
<tr>
<td>BMI (see chart below)</td>
<td>A</td>
<td>A ☐ B ☐ C ☐</td>
<td></td>
</tr>
</tbody>
</table>

Have you had anything to eat or drink in the past 8 hours?  YES  NO
(BMI) Body Mass Index Chart

Find your height in the column on the left. Move across the table until you find your weight. The letter at the top of the column is your BMI group. Chart values are for adults only. This information is not intended to replace advice given by your health care provider. Please contact your health care provider for additional information concerning your screening results.

<table>
<thead>
<tr>
<th>Height</th>
<th>A</th>
<th>B</th>
<th>C</th>
</tr>
</thead>
<tbody>
<tr>
<td>4'11&quot;</td>
<td>94 - 123</td>
<td>124 - 147</td>
<td>148 - 188</td>
</tr>
<tr>
<td>5'0&quot;</td>
<td>97 - 127</td>
<td>128 - 152</td>
<td>153 - 194</td>
</tr>
<tr>
<td>5'1&quot;</td>
<td>100 - 131</td>
<td>132 - 157</td>
<td>158 - 201</td>
</tr>
<tr>
<td>5'2&quot;</td>
<td>104 - 135</td>
<td>136 - 163</td>
<td>164 - 207</td>
</tr>
<tr>
<td>5'3&quot;</td>
<td>107 - 140</td>
<td>141 - 168</td>
<td>169 - 214</td>
</tr>
<tr>
<td>5'4&quot;</td>
<td>110 - 144</td>
<td>145 - 173</td>
<td>174 - 221</td>
</tr>
<tr>
<td>5'5&quot;</td>
<td>114 - 149</td>
<td>150 - 179</td>
<td>180 - 228</td>
</tr>
<tr>
<td>5'6&quot;</td>
<td>118 - 154</td>
<td>155 - 185</td>
<td>186 - 235</td>
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<td>121 - 158</td>
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<td>6'1&quot;</td>
<td>144 - 188</td>
<td>189 - 226</td>
<td>227 - 288</td>
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<td>6'2&quot;</td>
<td>148 - 193</td>
<td>194 - 232</td>
<td>233 - 295</td>
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<tr>
<td>6'3&quot;</td>
<td>152 - 199</td>
<td>200 - 239</td>
<td>240 - 303</td>
</tr>
<tr>
<td>6'4&quot;</td>
<td>156 - 204</td>
<td>205 - 245</td>
<td>246 - 312</td>
</tr>
</tbody>
</table>

BMI  
Normal: A  Overweight: B  Obese: C
INTERVIEW QUESTIONS FOR FIT FOR LIFE PROGRAM PARTICIPANTS

Thank you for agreeing to participate in this interview. We are interested in your thoughts about your participation in the Fit for Life program. Please answer these questions as accurately and honestly as possible. Your individual comments will be kept confidential. At the end of all interviews, a general report will summarize your thoughts and those of other Fit for Life members anonymously.

1. What inspired you the most to take part in the Fit for Life program? Probe: Why did you decide to get involved?
2. What aspect of the Fit for Life workshops did you find the most useful?
3. What could be improved about the Fit for Life workshops?
4. Tell me about your experience working with your Men’s Health Team member, and being mentored to get healthier? Probe: What was it like for you?
5. What did you gain from your relationship with your Men’s Health Team member?
6. Please describe a successful interaction you may have had in the Fit for Life program, working with a Men’s Health Team member. What was successful about this experience?
7. Please describe a time when being a Fit for Life participant was challenging or difficult for you. What made it difficult? What could have prevented this situation?
8. Do you feel that your role in your community has changed since you have become a Fit for Life member? How so?
9. During your time in the Fit for Life program, did you feel that you received enough social support in becoming healthier? From whom? Please explain.
10. How has your participation as a member of the Fit for Life program changed your own health and how you think about men’s health?
11. When your participation in Fit for Life is over, what will you miss the most about being a Fit for Life member?
12. How has the Fit for Life program helped you change the way you think about exercising and eating healthy?
13. How would you change the Fit for Life program to make it more useful to men in the future?
Welcome to Fit For Life
A roadmap to getting the most out of the program

What is Fit For Life?
Fit For Life is a targeted fitness program of The Men’s Health League, designed to help men decrease their risk of cardiovascular disease and type 2 diabetes. The program was first created by the Men of Color Health Initiative in 2002. It is a 12-week program in which a Fit For Life participant works out twice a week with a health mentor from a group called the Men’s Health Team. The participant attends 3 workshops, and completes a health screening at the beginning and end of the program.

What are the main components of Fit For Life?
- Work out twice a week at the YMCA with your Men’s Health Team mentor.
- Sign up for and complete 3 personal fitness training sessions with a YMCA trainer.
- Sign up for and complete 1 nutrition counseling session with a YMCA dietitian.
- Attend 3 workshops.
- Complete a health survey and a health screening at the beginning and end of the program.

How are Fit For Life participants selected?
Men who are overweight or at risk for heart disease or type 2 diabetes take priority in the selection process. Men must have a connection to Cambridge, either through residency, work, or some other connection. They must demonstrate a commitment to following the requirements of the program and completing the full 12 weeks. Men of color are also given priority, since the funding for the program comes from the Office of Minority Health at the U.S. Department of Health and Human Services.

How many Fit For Life participants are there?
Thirteen. The space is limited because of the number of YMCA memberships we are able to purchase with the federal funding.

What if I can’t continue the Fit For Life program for some reason?
Fit For Life spaces are valuable because of the YMCA membership and because your Men’s Health Team member is dedicating time to work with you. There is always a wait list for Fit For Life. If you are not able to continue the program, please call Albert Pless right away at (617) 665-3830. If you do not use your YMCA membership for 2 weeks, you will be contacted about re-assigning your membership to a Fit For Life applicant on the wait list. It may be possible to join a session later in the year, space permitting.

Who is my Men’s Health Team mentor?
You will be assigned one of these men, based on scheduling. Your Men’s Health Team mentor will contact you to set up a workout schedule, and will help you set up your appointments for personal fitness training and nutrition counseling. He is there to support you throughout the program and help you set – and make progress achieving – your personal goals.

What is the Men’s Health Team? Are Men’s Health Team mentors fitness professionals?
The Men’s Health Team is a group of 10 men who have made a commitment to promoting men’s health in Cambridge. They come from a variety of backgrounds, and were chosen through a competitive process. We believe we have a tremendous Men’s Health Team for the year 2008-2009. Most of them are not fitness professionals. They are partnered with you to help you set goals and make progress in the program.

Why are we working out together twice a week?
Fit For Life workouts are twice a week to accommodate the busy schedules of men involved with the program. More frequent workouts are encouraged, depending on the fitness level of the individual. The national physical activity recommendation is to get at least 150 minutes of moderate intensity aerobic physical activity each week. Strength training has additional benefits and should be done twice a week. If you are not already active, you should work gradually up to this goal. A gradual increase of physical activity is safer and healthier than a sudden increase.

Can I work out at the YMCA more often than my workouts with my Men’s Health Team mentor?
Yes. You have a full membership to the YMCA and we encourage you to use it!

What does the Men’s Health Team mentor do besides work out with me?
He will help you set up your appointments for personal fitness training (3 sessions) and nutrition counseling (1 session). He will remind you of events like workshops. Most importantly he will help you set achievable goals in the Fit For Life program and work with you to make Fit For Life a successful step in your path to better health.

Can we work out in places other than the YMCA?
Yes. However, you are expected to use your YMCA membership twice a week, as it was paid for by our funder, the Office of Minority Health, U.S. Department of Health and Human Services.

What role does the YMCA play in the Fit For Life program?
The Cambridge Family YMCA is one of three partners in The Men’s Health League. The Men’s Health League operates 3 programs: Fit For Life, Fitness Brothers, and Navigated Care. The YMCA is the primary partner in the Fit For Life program, hosting gym memberships as well as workshops and private exercise and nutrition sessions.

How do I set up my fitness training and nutrition counseling sessions at the YMCA?
Talk with your Men’s Health Team mentor to help you do this. You can contact the YMCA Front Desk directly as well. For your first fitness training session, your Men’s Health Team mentor needs to attend with you. This will ensure that you both have a clear understanding of the fitness program recommendations from the personal trainer. You can attend the second and third fitness training sessions, as well as the nutrition counseling session, on your own. Keep your Men’s Health Team mentor in the loop, as he needs to report in to Men’s Health League staff.

What will make this program a success for me?
You will. By signing up for Fit For Life, you have taken a crucial first step in taking charge of your health. That means you are ready to take action and make changes in your life. Remember that small steps are the most important, because they are the easiest to sustain. Set up short term, medium term and long term goals. Make them concrete and achievable. One of the keys to making health behavior changes — and
maintaining them – is experiencing success. It will keep you motivated to work toward other short-term
goals and make progress in achieving and sustaining a medium or long-term goal.

What are the surveys and screenings you are asking me to complete? Why are we doing this?
Our funder requires an evaluation to show how effective the Fit For Life program is, and where we need to
make changes. You will take a survey at the beginning and end of the program which covers health
behaviors. You will also participate in a health screening, measuring blood pressure, height, weight, body
fat, cholesterol, and glucose.

What if I have trouble connecting with my Men’s Health Team mentor?
It is important that you have a good working relationship with your Men’s Health Team mentor, to make
sure you are successful in the Fit For Life program. If you are having trouble meeting with him, contact
Albert Pless at the Cambridge Public Health Department at (617) 665-3830.

Do I need to swipe my YMCA membership card every time I come to the YMCA?
Yes. It’s important that we have a record of your attendance at the YMCA. We use the information for
evaluation of the program and to show our funder that participants are using the memberships. Also, if you
forget to swipe your card for 2 weeks, you may lose your space in the program, because it will appear
that you are not going to the YMCA.

Do I need to record my fitness training workout routines?
It’s optional. The YMCA has fitness training records that you can complete yourself. These records are kept
at the YMCA.

Why are the workshops important?
You will learn about important men’s health issues, as well as nutrition and fitness. It’s a chance for Fit For
Life participants to come together to learn and share their progress and challenges.

Who can I contact if I have any questions or problems regarding the Fit For Life program?
Contact Albert Pless at the Cambridge Public Health Department at (617) 665-3830. Albert is the
program director of The Men’s Health League and oversees the Fit For Life program.
Step By Step with your Men’s Health Team Mentor

Men’s Health Team Mentor
Name ________________________________
Telephone (H) ________________________
Telephone (C) ________________________
Email ________________________________
Best time to call ______________________
Do not call during ____________________

<table>
<thead>
<tr>
<th>Action</th>
<th>Date</th>
<th>Complete</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Workshop #1 + Check-In, Health Survey, Health Screening</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Workshop #2</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Workshop #3 + Check-Out, Health Survey, Health Screening</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Workout Schedule Arranged</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fitness Training #1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fitness Training #2</td>
<td></td>
<td></td>
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<tr>
<td>Fitness Training #3</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nutrition Consultation</td>
<td></td>
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</tbody>
</table>
Dear Fit for Life participants,

Congratulations on being selected as a Fit for Life participant. The partnership between the Margaret Fuller Neighborhood House, the Cambridge Family YMCA and the Cambridge Health Alliance is committed to supporting your efforts in promoting health and wellness among men in the Cambridge community.

The Fit for Life project is a great opportunity to learn more about your health, meet a wonderful group of committed men, and share ideas on how we together can improve the lives of men of color in Cambridge.

In this short period of time that you are in this initiative it is my hope that you achieve some of your fitness goals and connect to the larger work of the Men’s Health League.

I look forward to our time together.

Sincerely,

Manager, The Men’s Health League
The Men’s Health League is a partnership of the Margaret Fuller Neighborhood House, Cambridge Health Alliance, and the Cambridge Family YMCA. Funding is provided by the U.S. Department of Health and Human Services, Office of Minority Health.
Medical Clearance Form

Dear Doctor:

Your patient ___________________________ wishes to take part in Fit for Life, a 12-week health improvement intervention for men at risk for diabetes or heart disease. Participants will receive a free membership to the Cambridge YMCA, an individualized exercise program and regular contact with a trainer. They will work out at least twice per week at the YMCA and attend 3 educational workshops.

Please identify any recommendations or restrictions for your patient's fitness program below (Physician's Recommendations).

<table>
<thead>
<tr>
<th>Physician's Recommendations</th>
</tr>
</thead>
<tbody>
<tr>
<td>My patient is cleared to participate in Fit for Life.</td>
</tr>
<tr>
<td>I believe the applicant can participate, but urge caution because:</td>
</tr>
<tr>
<td>The applicant should not engage in the following activities:</td>
</tr>
<tr>
<td>I recommend the applicant <strong>not</strong> participate in the above fitness program.</td>
</tr>
</tbody>
</table>

Physician's signature | Date:
---|---
Physician's name (print) | Phone: | Fax: |
Address | City | State & Zip: |
Fit for Life Manual

The Fit for Life Manuel is a guide you can use to get started with fitness and track your progress. You will find general information about fitness, safety, and research-based guidelines for nutrition and physical activity. For more information on these areas, we have provided a listing of websites and other resources for you to learn more.

In addition, you will find a directory of resources and facilities around Cambridge which provide instruction, equipment and social opportunities for fitness. There are many informal fitness groups around Cambridge, such as bicycling clubs, basketball leagues, etc…, which are not included – keep an eye out for them, or start your own!

Getting Started

Welcome and Congratulations!

Taking the first small steps on the road to fitness is a big leap – welcome to the journey! As you get started with Fit for Life, challenge yourself, and experience the many benefits of fitness.

You will feel stronger and healthier every week.

Not only will you be improving your quality of life, but you can feel proud that you are contributing to your Fit for Life partner’s health by encouraging and supporting them in their own goals of fitness.

There is no limit to the possibilities you create through fitness… so

Have fun!
The Program Basics

- Free 12 week membership to Cambridge Family YMCA
- Free personal training sessions
- Learn how to be active at your own ability level
- Get started, stay motivated
- Wellness seminars
- Ongoing support

The First Steps

The American College of Sports Medicine is the largest, most respected sports medicine and exercise science organization in the world. The following information is provided by ACSM, and additional tools can be found on their website, www.acsm.org.

Most people can and should exercise. However, there are individuals who should get their doctor’s permission prior to beginning an exercise program. Anyone with an unstable medical condition will want to seek an exercise prescription from their doctor. Injury may also require an individual to wait for the healing to be complete prior to beginning exercise. If you have cardiac, pulmonary, or metabolic disease, you should begin your exercise in a medically supervised environment.

Start slowly - listen to your body and your doctor...

For moderate endurance exercise, simply walk/run a little further each time you exercise and gradually increase the pace of your walks/runs as the weeks pass. For strength exercise, lift a weight that you usually lift but do it more times than normal. Before beginning an aggressive exercise program, you should see your doctor or an exercise professional for screening tests and program advice.

The biggest risk to exercise is not starting...

You should consider several factors when choosing an aerobic activity for your personal fitness program.

Impact

Some activities involve jumping or pounding that may be uncomfortable or can lead to injury. Swimming, cross country skiing, in-line skating, cycling, and rowing are easier on the joints.

Convenience

Some aerobic activities require expensive equipment, are seasonal, or are not readily available in certain locations.

Skill

Activities that require a lot of skill may discourage you. Try to avoid activities that do not fit with your skill base, and don’t quit before you’ve developed the skills you need for the activity to become enjoyable.

Social factor

Exercising with a group can be fun and beneficial. Sometimes exercising with other people is such fun that you’re more likely to continue your fitness program. For safety reasons, some aerobic activities are best done with a group - From the ACSM Fitness Book, Second Edition published by Human Kinetics.
You should always be able to catch your breath and speak comfortably while exercising. It is also normal to sense effort, and maybe even discomfort, but you should never sense pain. Learn to use a Rating of Perceived Exertion Scale. Always remember to warm up slowly and to cool down gradually. If you use a trainer, be sure to check credentials. The exercise industry is not well regulated, so be sure to ask questions and seek ACSM certified individuals.

Assessing Your Fitness

What is your current level of fitness and nutrition? Take this quiz from the American Cancer Society for a snapshot of your current eating and physical activity behaviors – then take it again after 10 weeks and check your progress.

Nutrition and Activity Quiz
Are you living smart?

Check Yes or No next to each question, and see how you can keep living smart!

Yes  No
☐ ☐ I eat at least 5 servings of fruits and vegetables every day.
☐ ☐ I eat at least 6 servings of bread, rice, pasta, and cereal every day.
☐ ☐ I drink reduced-fat or fat-free milk and yogurt, and seldom eat high-fat cheeses.
☐ ☐ I rarely eat high-fat meat like bacon, hot dogs, sausage, steak, or ground beef.
☐ ☐ I take it easy on high-fat, baked goods such as pies, cakes, cookies, sweet rolls, and doughnuts.
☐ ☐ I rarely add butter, margarine, oil, sour cream or mayonnaise to foods when I'm cooking or at the table.
☐ ☐ I rarely (less than twice a week) eat fried foods.
☐ ☐ I try to maintain a healthy weight
☐ ☐ I am physically active for at least 30 minutes on most days of the week.
☐ ☐ I usually take the stairs instead of waiting for an elevator.
☐ ☐ I try to spend most of my free time being active, instead of watching television or sitting at the computer.
☐ ☐ I never, or only occasionally, drink alcohol.

How many times did you answer “Yes”? If you answered “Yes” to many of the questions, you are on the right track! If you answered “No” to most of the questions, pick one or two small changes that you can commit to, and use your Fitness Log to help track your new, healthier behaviors.
Body Mass Index (BMI)

The following information can be found on the CDC’s website, [www.cdc.gov/nccdphp/dnpa/bmi/](http://www.cdc.gov/nccdphp/dnpa/bmi/)

The term BMI is often used when discussing the obesity epidemic, but what is BMI?

BMI stands for Body Mass Index. It is a number that shows body weight adjusted for height. BMI can be calculated with simple math using inches and pounds, or meters and kilograms. For adults aged 20 years or older, BMI falls into one of these categories: underweight, normal, overweight, or obese. On the next page is a table for you to figure out your BMI.

BMI is not the only indicator of health risk.
BMI is just one of many factors related to developing a chronic disease (such as heart disease, cancer, or diabetes). Other factors that may be important to look at when assessing your risk for chronic disease include:

- Diet
- Physical Activity
- Waist Circumference
- Blood Pressure
- Blood Sugar Level
- Cholesterol Level
- Family History of disease

All persons who are obese or overweight should try not to gain additional weight. In addition, those who are obese or who are overweight with other risk factors should consider losing weight. A complete health assessment by a physician is the best way to decide the right steps for you.

Whatever your BMI, talk to your doctor to see if you are at an increased risk for disease and if you should lose weight. Even a small weight loss (just 10% of your current weight) may help to lower the risk of disease.

Physical activity and good nutrition are key factors in leading a healthy lifestyle and reducing risk for disease. Whether or not you are at a healthy weight now, exercising regularly will improve your health and decrease your risk for disease.
The Men's Health League is a partnership of the Margaret Fuller Neighborhood House, Cambridge Health Alliance, and the Cambridge Family YMCA. Funding is provided by the U.S. Department of Health and Human Services, Office of Minority Health.

Body Mass Index Table

To use the table, find the appropriate height in the left-hand column labeled Height. Move across to a given weight (in pounds). The number at the top of the column is the BMI at that height and weight. Pounds have been rounded off.

| Height (inches) | BMI 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 | 32 | 33 | 34 | 35 |
|----------------|--------|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|
| 58             | 91     | 96 | 100| 105| 110| 115| 119| 124| 129| 134| 138| 143| 148| 153| 158| 162| 167|
| 60             | 97     | 102| 107| 112| 118| 123| 128| 133| 138| 143| 148| 153| 158| 163| 168| 174| 179|
| 61             | 100    | 106| 111| 116| 122| 127| 132| 137| 143| 148| 153| 158| 163| 168| 174| 180| 185|
| 62             | 104    | 109| 115| 120| 126| 131| 136| 142| 147| 153| 158| 164| 169| 175| 180| 186| 191|
| 63             | 107    | 113| 118| 124| 130| 135| 141| 146| 152| 158| 163| 169| 175| 180| 186| 191| 197|
| 64             | 110    | 116| 122| 128| 134| 140| 145| 151| 157| 163| 169| 174| 180| 186| 192| 197| 204|
| 65             | 114    | 120| 126| 132| 138| 144| 150| 156| 162| 168| 174| 180| 186| 192| 198| 204| 210|
| 66             | 118    | 124| 130| 136| 142| 148| 155| 161| 167| 173| 179| 186| 192| 198| 204| 210| 216|
| 67             | 121    | 127| 134| 140| 146| 153| 159| 166| 172| 178| 185| 191| 198| 204| 211| 217| 223|
| 68             | 125    | 131| 138| 144| 151| 158| 164| 171| 177| 184| 190| 197| 203| 210| 216| 223| 230|
| 69             | 128    | 135| 142| 149| 155| 162| 169| 176| 182| 189| 196| 203| 209| 216| 223| 230| 236|
| 70             | 132    | 139| 146| 153| 160| 167| 174| 181| 188| 195| 202| 209| 216| 223| 230| 236| 243|
| 71             | 136    | 143| 150| 157| 165| 172| 179| 186| 193| 200| 208| 215| 222| 229| 236| 243| 250|
| 72             | 140    | 147| 154| 162| 169| 177| 184| 191| 199| 206| 213| 221| 228| 235| 242| 249| 256|
| 73             | 144    | 151| 159| 166| 174| 182| 189| 197| 204| 212| 219| 227| 235| 242| 249| 256| 264|
| 74             | 148    | 155| 163| 171| 179| 186| 194| 202| 210| 218| 225| 233| 241| 249| 256| 264| 272|
| 75             | 152    | 160| 168| 176| 184| 192| 200| 208| 216| 224| 232| 240| 248| 256| 264| 272| 279|
| 76             | 156    | 164| 172| 180| 189| 197| 205| 213| 221| 230| 238| 246| 254| 263| 271| 279| 287|

BMI | Weight Status
---|-------------
Below 18.5 | Underweight
18.5 – 24.9 | Normal
25.0 – 29.9 | Overweight
30.0 and Above | Obese
Physical Activity

The following information can be found on the CDC’s website, www.cdc.gov/nccdphp/dnpa/physical

It’s never too late to start an active lifestyle. No matter how old you are, how unfit you feel, or how long you’ve been inactive, research shows that starting a more active lifestyle now through regular, moderate-intensity activity can make you healthier and improve your quality of life.

Adults should strive to meet either of the following physical activity recommendations.

• Adults should engage in moderate-intensity physical activities for at least 30 minutes on 5 or more days of the week. (Centers for Disease Control and Prevention/American College of Sports Medicine)

OR

• Adults should engage in vigorous-intensity physical activity 3 or more days per week for 20 or more minutes per occasion. (Healthy People 2010)

How Many Calories Will I Burn?

On average, regularly participating in one or more moderate-intensity or vigorous-intensity activities is required to burn a minimum of 150 Calories of energy per day, 7 days per week, or total of 1,000 Calories/week (Jones et al., 1998). The time needed to burn 150 Calories of energy in a day depends on the intensity of the activities chosen. For example, if someone selects moderate-intensity activities, the time required to meet the minimum
recommendation would be generally 30 minutes per day. The more vigorous the activities chosen, the less time needed (22 minutes or less) to burn the minimum of 150 Calories during the day.

**Number of Minutes of Activity Required to Burn 150 kcalories**
Calculate this information as a reference:

**Maximum Heart Rate =**

**Lower-limit Exercise Heart Rate =**

**Upper-limit Exercise Heart Rate =**

**My exercise heart range is between**

__________ and ___________

To find out what your heart rate should be for moderate or vigorous intensity workouts, use the following calculations:

**For moderate-intensity physical activity,** my target heart rate should be between 50% and 70% of my Maximum Heart Rate:

50% Max Heart Rate =
70% Max Heart Rate =

**For vigorous-intensity physical activity,** my target heart rate should be between 70% and 85% of my Maximum Heart Rate:

70% Max Heart Rate =
85% Max Heart Rate =
Taking Your Heart Rate

Generally, to determine whether you are exercising within the heart rate target zone, you must stop exercising briefly to take your pulse. You can take the pulse at the neck, the wrist, or the chest. We recommend the wrist. You can feel the radial pulse on the artery of the wrist in line with the thumb. Place the tips of the index and middle fingers over the artery and press lightly. Do not use the thumb. Take a full 60-second count of the heartbeats, or take for 30 seconds and multiply by 2. Start the count on a beat, which is counted as "zero." If this number falls between 85 and 119 bpm in the case of the 50-year-old person, he or she is active within the target range for moderate-intensity activity.

Knowing your own heart rate range will help you achieve the right intensity level.
The Dietary Guidelines for Americans, 2008, gives science-based advice on food and physical activity choices for health.

What is a "Healthy Diet"? The Dietary Guidelines describe a healthy diet as one that
- Emphasizes fruits, vegetables, whole grains, and fat-free or low-fat milk and milk products;
- Includes lean meats, poultry, fish, beans, eggs, and nuts; and
- Is low in saturated fats, trans fats, cholesterol, salt (sodium), and added sugars.

The recommendations in the Dietary Guidelines and in MyPyramid are for the general public over 2 years of age. MyPyramid is not a therapeutic diet for any specific health condition. Individuals with a chronic health condition should consult with a health care provider to determine what dietary pattern is appropriate for them.

The MyPyramid.gov website has a lot of great information. You can personalize your own dietary guidelines and generate a colorful mini-poster similar to the following, just by entering your age, sex and physical activity level:
If you want to track your dietary intake online, for free, go to MyPyramidTracker.gov. Here, you will be able to enter the foods you eat and activity levels, and find out detailed information about how well you are meeting your nutritional needs.


<table>
<thead>
<tr>
<th>Dietary Guidelines Recommendations</th>
<th>Emoticon</th>
<th>Number of cup/oz. Eaten</th>
<th>Number of cup/oz. Eqv. Recommended</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grain</td>
<td>🍴</td>
<td>5.7 oz equivalent</td>
<td>6 oz equivalent</td>
</tr>
<tr>
<td>Vegetable</td>
<td>🥗</td>
<td>2 cup equivalent</td>
<td>2.5 cup equivalent</td>
</tr>
<tr>
<td>Fruit</td>
<td>🍎</td>
<td>0.8 cup equivalent</td>
<td>2 cup equivalent</td>
</tr>
<tr>
<td>Milk</td>
<td>🥛</td>
<td>2 cup equivalent</td>
<td>3 cup equivalent</td>
</tr>
<tr>
<td>Meat and Beans</td>
<td>🌰</td>
<td>5.2 oz equivalent</td>
<td>5.5 oz equivalent</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Dietary Guidelines Recommendations</th>
<th>Emoticon</th>
<th>Amount Eaten</th>
<th>Recommendation or Goal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Fat</td>
<td>🍎</td>
<td>45.9% of total calories</td>
<td>20% to 35%</td>
</tr>
<tr>
<td>Saturated Fat</td>
<td>🍎</td>
<td>14.6% of total calories</td>
<td>less than 10%</td>
</tr>
<tr>
<td>Cholesterol</td>
<td>🍎</td>
<td>250 mg</td>
<td>less than 200 mg</td>
</tr>
<tr>
<td>Sodium</td>
<td>🍎</td>
<td>7406 mg</td>
<td>less than 2300 mg</td>
</tr>
<tr>
<td>cal.</td>
<td>🍎</td>
<td></td>
<td>*</td>
</tr>
<tr>
<td>Discretionary calories (sodium, added sugars, and alcohol)</td>
<td>🍎</td>
<td>*</td>
<td>*</td>
</tr>
</tbody>
</table>
Resources Around Cambridge

**Healthy Living Cambridge**
In 2005, the City of Cambridge implemented Healthy Living Cambridge to help residents of all ages eat better, be active, and watch less TV on a daily basis. Cambridge is among the most progressive cities in the country in promoting healthy behaviors in school-age children. Involving community members of all ages makes a big difference in making both children and adults healthier — together.

**Healthy Eating and Physical Activity Guidelines**
Most of us know the basics of healthy lifestyle goals but need help making the choices permanent. Healthy Living Cambridge teaches us how to focus our efforts, using the following three guidelines from the Institute for Community Health, a Cambridge-based health research partnership:

- **5 Servings of fruits and vegetables a day**
- **2 Hours or less of TV or videos a day**
- **1 Hour of physical activity a day**

*By making “5-2-1” a goal, you are already well on your way to better health!*

**Programs, Events and People**
As a resident, you may already be aware of ways that Cambridge promotes healthy living. Extensive bike paths, Cambridge Walks, and farmers markets are examples of the community working together to encourage healthy eating and physical activity.

**Places to Exercise**
Cambridge has an inspiring array of options for active healthy living. Try them out and discover the variety of activities only minutes away from your home or workplace! On the next few pages you will find a directory of physical activity providers in Cambridge. The list is not comprehensive. Please let us know of any other programs and organizations which should be added to this list!

**Walking and Biking Routes**
Cambridge Walks is a citywide campaign, led by the Cambridge Public Health Department that encourages residents of all ages to walk or otherwise be active. It is a collaboration among various city departments, businesses, health care organizations, and private citizens to promote physical activity in Cambridge. Some excellent walking routes have been developed, and a sample is included here, called “The Cambridge Flavors Walk”. Other walks can be found on the Cambridge Public Health Department’s website, [www.cambridgepublichealth.org](http://www.cambridgepublichealth.org).

Some other walking/running areas and route suggestions include:
- The Cambridge Arts Council (linked from www.cambridgema.gov) has excellent walk suggestions, under “Public Art > Tour the Art.”
- The Cambridge Public Library, relocated to Longfellow school at 359 Broadway, is a great indoor walking space where you can get books on tape to listen to while you walk.
- Fresh Pond
- The Charles River
• Local malls, including the Watertown mall which is accessible by bus from Central Square

Resources on the Web

If you have access to the internet, there are excellent websites available for in-depth information about your area of interest, including interactive tools. Below is a brief sampling, which offer sound, research-based information from reputable organizations. Be aware that the web is also a source of misinformation about health and fitness. Check with your physician about any questions or concerns regarding your health.

Learn more about healthy eating and physical activity
Center for Disease Control (Physical Activity)
www.cdc.gov/nccdphp/dnpa/physical/index.htm

USDA Dietary Guidelines for Americans' new pyramid
MyPyramid.gov (Nutrition)

Assess your diet, fitness level and risk of chronic disease
American Heart Association
www.americanheart.org

American Diabetes Association
www.diabetes.org

Track your health behaviors and progress
Small Steps (Activity Tracker)
www.smallstep.gov

MyPyramid Tracker (Nutrition and Physical Activity)
www.mypyramidtracker.gov
Healthy Living Cambridge

In 2005, the City of Cambridge introduced Healthy Living Cambridge to help residents of all ages eat better, be active, and watch less TV on a daily basis.

Cambridge is among the most progressive cities in the country in promoting healthy behaviors in school-age children, and in 2007 was awarded the prestigious Innovations in Prevention award by the U.S. Department of Health and Human Services.

Involving community members of all ages makes a big difference in making both children and adults healthier — together.

✔ 5 servings of fruits & vegetables
✔ 2 hours or less of TV/screen time
✔ 1 hour of physical activity

Every Day!

Use “5-2-1 Every Day!” as your own simple healthy living guide. It focuses on the most important behaviors to reach and maintain a healthy weight.

For more information, call (617) 665-3852 or email seking@challiance.org.

CAMBRIDGE PUBLIC HEALTH DEPARTMENT
Cambridge Health Alliance

www.cambridgepublichealth.org
Fit For Life Recruitment Guideline

Thank you for agreeing to help recruit participants for Fit For Life, a 12-week program of the Men’s Health League which addresses heart disease, stroke, and type 2 diabetes through a fitness-based approach. Your help is critical at this early stage in the program. Please keep this guideline as a handy reference when men about this program.

Program Background and Partners
This men’s health program is funded through a grant from the U.S. Department of Health and Human Services, through the Office of Minority Health. Partners include the Margaret Fuller Neighborhood House, Cambridge Health Alliance and the Cambridge Family YMCA. The primary staff for the program is based at the Cambridge Public Health Department.

What Is Fit For Life?
Fit For Life is a 12-week program for men at risk for heart disease, stroke, and type 2 diabetes. The program includes a 3-month membership to the Cambridge Family YMCA, an assigned health support mentor from the Men’s Health Team, three personal training sessions with a professional fitness trainer, one nutrition counseling session with a Registered Dietitian, and three interactive, educational workshops focusing on nutrition, fitness and men’s health issues.

Program Objectives
1. Support men in developing a regular fitness routine.
2. Teach men knowledge and skills in healthy eating, fitness and cooking for daily healthy living.
3. Improve clinical profile of participants in the following areas: BMI, total cholesterol, blood glucose, and blood pressure.

Eligibility Requirement
1. Participants must be men who are affiliated with Cambridge, through residency, work, health care or some other connection.
2. Minimum age: 18
3. Race/ethnicity: Men of color are the target population. However, a participant cannot be excluded based on race/ethnicity.

Target Population
1. Men of color
2. At risk for heart disease and/or type 2 diabetes
3. BMI > 25

Exclusion Criteria
None.
Program Design
1. **Clinical screenings** at Baseline and 12 weeks. Screenings will be conducted by the Volunteer Health Advisor team of the Cambridge Health Alliance. Measurements taken are: height, weight, blood pressure, total cholesterol, and glucose.
2. Participants will receive the following benefits: 3-month membership at the Cambridge Family YMCA (including 3 personal training sessions, 1 nutrition counseling session). Each participant is assigned a mentor from the **Men's Health Team**, a group of Cambridge men recruited to serve as mentors and outreach volunteers for The Men's Health League.
3. They will sign an **Informed Consent Form** at the Orientation session, which will be reviewed orally, together as a group.
4. **Participants may withdraw from the program at any time.**
5. **Program location:** Windsor Street Health Center and at the Cambridge Family YMCA.

Recruiting Procedure
Please advise men in your clinic about the opportunity to participate in this program using the following guidelines:
1. Tell them about the program objectives and the program design.
2. Give them a recruitment packet (information flyer, application form and informed consent).
3. Show them the flyer and the application form. **IMPORTANT:** Tell them that if they are interested in the program, they should fill out the application form **TODAY BEFORE THEY LEAVE** and give it to the Front Desk (or designated, secure location). Our goal is to sign up participants before they leave the clinic.
4. They do not have to sign the Informed Consent form now. We will review the Informed Consent orally at the Orientation and will take all questions at that time, or they are welcome to call the program director beforehand. It is for their information only at this time.
5. Thank them for their interest, and encourage them to call Albert Pless with any questions. The number is 617-665-3677. They can email him at apless@challiance.org.
6. Please return applications forms right away by fax as they are turned in. Fax them to Albert Pless at the Cambridge Public Health Department (**fax number:** 617-665-3888). Applicants will be contacted to review their application and advised if they have been accepted to the program.

Contact Information
Project Manager
Navigated Care
INTRODUCTION AND OBJECTIVES

What is the Navigated Care program?
Navigated Care is a program to help men access health care services and receive the most complete care possible through their provider. It provides information, guidance, motivation, and enhanced care coordination for men who need health care services and health insurance.

What is the key objective of this program?
Find health care, testing, medications, and insurance for those men who:

- Are not currently seeking a primary care physician
- Do not have health insurance
- Have health issues which require regular follow-up care

FRAMEWORK AND PROTOCOL

Program Development

Why develop a Navigated Care program?
American men are reluctant consumers of health care services. According to national survey data, about 20% of U.S. males did not seek any type of medical care in the previous year compared to 11% of U.S. females.\(^1\) Gender health researchers have pointed out that because men are often taught at an early age to ignore or minimize pain, they may view seeking medical care as a sign of weakness.\(^2\) In a 1998 national survey by the Commonwealth Fund, men were asked how quickly they would seek care if they were in pain or feeling sick. Among men under age 65 who had continuous health insurance coverage in the past year, 21% responded that they would wait as long as possible to seek care and another 16% said they would wait at least a week. Only 17% of insured men reported they would seek care as soon as possible.\(^3\) American men are also more likely than women to have no usual source of health care. About 23% of U.S. men (age 18 to 64) do not have a regular health care provider or place of care, compared to 13% of women in the same age group.\(^4\) People without a usual source of medical care may have chronic diseases or conditions that go undiagnosed and untreated. When they are sick, they may delay getting treatment or seek care in hospital emergency departments.

By providing services and support to navigate health care, this program will help men obtain the necessary health screenings and follow up care that is required for chronic disease management.

---

\(^1\) *Health, United States, 2007.* National Center for Health Statistics, 2007, Table 82, p. 204.


Navigated Care

How does a Navigated Care program begin?
A Patient Navigator must have access to medical records for the program to be successful. It is important that a relationship develops between a health care network and this program to ensure that clients get the best care. Most hospitals require that patient navigators be trained to get access to medical records.

How are Navigated Care clients recruited?
Participants learn about the Navigated Care program by physician referral, inter-program referral, community organization referral, proactive program outreach, or word of mouth. Upon receiving a referral, the Navigated Care Coordinator gives the potential client a screening form.

To participate in the program, clients must be:

- Connected to the Cambridge Health Alliance (CHA) health network or are willing to join the CHA network
- Between 25 and 60 years

Preferred clients are those that:

- Are men of color
- Are in need of health care services
- Lack insurance
- Lack primary care
- Maintain a chronic condition
- Are at risk for diabetes or heart disease
- Have a body mass index over 25

Program Establishment

How is the program introduced?
If the potential client meets the screening criteria, the client is invited to meet with the Care Coordinator. He fills out both a consent form and the Navigated Care entry form. This form then allows the Navigated Care Coordinator to determine the client’s health care service needs and action plan.
Consenting Navigated Care Client

Completes an Entry Form

If Client Needs:

Health Insurance

Receives health education about health insurance, navigating the health system, and primary care

Receives help with paperwork to obtain health insurance

If Client Needs:

Primary Care provider and health screenings

Completes a pre-test

Receives education about health screenings and medical appointments

Goes to the appointment scheduled for him.

What is required of Navigated Care clients?
Navigated Care clients are expected to attend appointments, read and listen to health education, and maintain a relationship with the navigated care coordinator.

How are Navigated Care members educated about health and wellness?
Once in the program, the client receives levels of service, depending on the length of time he participates in the program.

To learn more about each aspect of service, see the checklists below:

- Reminder/Check-In Communication Checklist
- Health Insurance Checklist
- Primary Care Physician Checklist
- Follow-Up Visit Checklist

Participation can be up to 24 months. The client receives information, guidance, and support to obtain:

- Health education
- Health insurance
- Primary care physician
Navigated Care

- Health screenings
- Medical appointments
- Injury rehabilitation, as needed
- Management of chronic conditions

How are clients of Navigated Care discharged?
Clients may participate in the navigated care program for up to twenty-four months. Once the client has completed the program, he completes a Navigated Care Exit Assessment. Exit criteria include:

- Navigated Care client has been in the program for 3-6 months
- Navigated Care client has a primary care provider (PCP)
- Navigated Care client has health insurance coverage
- Navigated Care client has seen a PCP at least one time upon enrolling in the Navigated Care program
- Navigated Care client is successfully managing his chronic condition as stated by a doctor’s note or some clinical results (e.g. improved A1C levels)

Additionally, circumstances leading to discharge from the Navigated Care program are:

- Navigated Care client has insurance and a primary care physician who reports that his chronic diseases are being successfully managed.
- Navigated Care client moving away from the Cambridge/Greater Boston area
- Navigated Care client is no longer responsive to outreach. This is defined as not responding to at least five attempts by mail, phone, or in-person to make contact in a time interval of 3 months.

Follow-up occurs on an as-needed basis. The program aims to empower the client to seek regular care and to have the knowledge to navigate the health care system, as seen by the success stories from program participation.

Program Logistics

What is the staffing structure?
The Navigated Care program requires two main staff members: a program manager and men’s outreach coordinator. The program manager supports the men’s outreach coordinator, and the men’s outreach coordinator addresses the daily needs of the clients of the navigated care program, and oversees the progress of the clients.

What is the budget?
Every program is different, depending on scope, available resources, and the needs of your community. Here are some general costs to consider:
• Staffing
  o Community partnership and Health Services partnership development
  o Program management
  o Recruitment
  o Program implementation
• Outreach materials
  o Fliers
  o Posters
  o Educational materials
• Evaluation

Potential Challenges

How does the program retain clients?
Check-in/Reminder communications is important to retain clients.

How does the program keep lines of communication open?
There should be consistent communication between clients and the patient navigator to ensure that change in contact information is communicated.

PROGRAM MATERIALS

Framework and Protocol
• Sample brochure
• Reminder communication checklist
• Health insurance checklist
• Primary care physician checklist
• Follow up checklist
• Logic model
• Success stories

Evaluation
• Entry assessment
• Pre- and Post- test
• Exit assessment

Resources
• How to talk to your doctor
• Medical appointments flier
• Health screening flier
CAMBRIDGE EVALUATION RESULTS

The evaluation of the Men’s Health League has been conducted by the Institute for Community Health, a public health research institute dedicated to community-based participatory research, assessment, dissemination, and educational activities. Evaluation activities for the Men’s Health League included surveys, focus groups, pre- and post- tests, and clinical screenings.

100% of Navigated Care participants strongly agreed or agreed that they learned more about the health conditions that they have as a result of participating in Navigated Care program.
Navigated Care

Sample Brochure

It’s time to talk about the big picture.

Better health makes us better fathers, sons, and partners.

Getting regular physicals and health screenings keeps you on track for optimal health. Be an active partner with your doctor in making decisions and understanding your options.

Your health is not just important to you. It’s important to the people closest to you, and your Cambridge community.

Navigated Care is a program of The Men’s Health League, a partnership of the Margaret Fuller Neighborhood House, the Cambridge Health Alliance and the Cambridge Family YMCA. Funded by the U.S. Department of Health and Human Services, Office of Minority Health.

For more information, call (617) 665-3685 or email Henry Lewis II at hlewis@challiance.org.
Navigated Care Entry Assessment

Name ___________________________ Date of Birth ___________________________

Street Address ___________________________

City/State ___________________________ Zip ___________________________

Telephone (H) ___________________________ Cell ___________________________

Email ___________________________

PERSONAL HISTORY

1. Do you have health insurance?
   ■ Yes
   ■ No
   ■ I don’t know

2. Do you have a primary care physician
   ■ Yes If yes, please give his or her name and location.___________________________
   ■ No
   ■ I don’t know

3. Do you have any of the following medical problems (check all that apply)?
   ■ Heart disease
   ■ High blood pressure
   ■ Stroke
   ■ High cholesterol
   ■ Diabetes
   ■ Other ___________________________

SOCIOECONOMICS

4. What is your current occupation? ___________________________
5. What is the highest grade or year of school you have completed?
☐ Grade school
☐ High school
☐ College
☐ Graduate school

6. What is your current marital status?
☐ Single
☐ Married
☐ Separated
☐ Divorced
☐ Widowed
☐ Partnered (e.g. Living together in a marriage-like relationship but not married)
☐ Engaged
☐ Other: __________________

7. Do you have any children under the age of 18?
☐ Yes    ☐ No

8. How many adults and children including yourself, live in your household?
_________________

SUBSTANCE USE

9. Have you ever smoked cigarettes in your life?
☐ Yes    If yes, then go to Question 10.
☐ No     If no, then go to Question 14.

10. Do you currently smoke cigarettes?

☐ Yes    If yes, go to Question 11.
☐ No     If no, go to Question 12.

11. On average, how many packs/day do you currently smoke?    __________# packs/day

12. Please answer the following question according to your smoking status.

<table>
<thead>
<tr>
<th>If you currently smoke…</th>
<th>If you don’t currently smoke…</th>
</tr>
</thead>
<tbody>
<tr>
<td>How long have you been smoking?</td>
<td>How long did you smoke during the time when you were smoking?</td>
</tr>
<tr>
<td>______# of years</td>
<td>______# of years</td>
</tr>
</tbody>
</table>
13. During the past 12 months, have you stopped smoking for one day or longer because you were trying to quit smoking?

☐ Yes  Date when you last tried to quit smoking______________________
☐ No

14. Do you currently smoke cigars or use snuff or chew?

☐ Yes  If yes, go to Question 15.
☐ No  If no, go to Question 16.

15. Are you interested in quitting smoking cigars, snuff or chew?

☐ Yes  ☐ No

16. Do you currently drink alcohol?  One drink is equivalent to a 12-ounce beer, a 5-ounce glass of wine, or a drink with one shot of liquor.

☐ Yes  ☐ No

☐ Yes  # of drinks per week______________________
☐ No  If no, go to Question 18.

Is your alcohol use a concern for you or others?

☐ Yes  Why?______________________________________________
☐ No

Do you use any recreational drugs? For example, cocaine or marijuana etc.

☐ Yes  ☐ No

SEXUAL HEALTH

17. Are you sexually active?

☐ Yes  If yes, go to Question 20.
☐ No  If no, go to Questions 21.

18. Do you practice safe sex (e.g. use condoms)

☐ Yes  ☐ No  ☐ I don’t know

19. Have you been tested for HIV or other sexually transmitted diseases?

☐ Yes
20. Are you interested in being screened for sexually transmitted diseases?
   - Yes
   - No
   - I don’t know

**STRESS**

21. Please list any major stressors that you have in your life. *For example, work stress, change in financial status, marriage problems etc.*

____________________________________________________________________________________
____________________________________________________________________________________

22. What do you do to relax?

____________________________________________________________________________________
____________________________________________________________________________________

23. Is there someone you talk to about personal issues? Please explain.

____________________________________________________________________________________
____________________________________________________________________________________

24. Are you concerned about any of your family relationships? Please explain.

____________________________________________________________________________________
____________________________________________________________________________________

**FITNESS AND NUTRITION**

25. What physical activities do you currently participate in?

____________________________________________________________________________________
____________________________________________________________________________________

26. What are your current fitness goals?

____________________________________________________________________________________
____________________________________________________________________________________

27. How do you plan to reach your fitness goals?

____________________________________________________________________________________
____________________________________________________________________________________

28. Do you consider yourself to be a healthy eater?
   - Yes
   - No

29. What did you eat over the last 24 hrs? *Including drinks*
The Men's Health League is a partnership of the Margaret Fuller Neighborhood House, Cambridge Health Alliance, and the Cambridge Family YMCA. Funding is provided by the U.S. Department of Health and Human Services, Office of Minority Health.
The Men’s Health League is a partnership of the Margaret Fuller Neighborhood House, Cambridge Health Alliance, and the Cambridge Family YMCA. Funding is provided by the U.S. Department of Health and Human Services, Office of Minority Health.
Reminder/Check-In Communication Checklist

☐ Maintain a list of scheduled appointments for each client
  • Monitor clients’ appointment attendance
  • Monitor messages from physicians
    o Determine date of the next appointment
    o Determine dates of follow-up and referral appointments

☐ Communicate with patients on a regular basis about
  • Health concerns
  • Social concerns that potentially delay care
The Men’s Health League is a partnership of the Margaret Fuller Neighborhood House, Cambridge Health Alliance, and the Cambridge Family YMCA. Funding is provided by the U.S. Department of Health and Human Services, Office of Minority Health.

Health Insurance Checklist

The patient navigator must maintain open communication with the client to help him obtain the health insurance that fits his financial, health, and familial needs.

- Arrange a meeting with the new navigated care client. Tell him to bring:
  - Proof of income
  - Proof of citizenship
  - Proof of identity

- During the meeting, determine the expectations of the client, and assess his financial situation
- Research local health insurance policy options
- Arrange another meeting to help the Navigated Care client complete health insurance forms
- Send the necessary forms to establish health insurance for the Navigated Care client.
- Review chosen insurance policy with the client
Primary Care Physician Establishment Checklist

☐ Review a list of providers from the client’s health insurance
  ○ Meet with the client to choose a physician
☐ Schedule an appointment with the chosen physician
  ○ Arrange a meeting with the navigated care client prior to his scheduled medical appointment to prepare for the first visit
    • Review:
      ○ How to talk to your doctor
      ○ Medical appointments
      ○ Recommended screenings
      ○ Other screenings
    • Generate goals from the client about the visit
    • Encourage client to arrive early and bring a pen and paper to facilitate communication between the client and the physician
Follow Up Visit Checklist

☐ Read the patient’s medical record
  • Gain a sense of the visit
  • Determine whether referral visits are or should be arranged

☐ Contact the navigated care client.
  • Ask:
    o How did it go?
    o How comfortable did you feel during the visit?
    o Are there things that you need help with?
    o What didn’t go well?
    o Did you schedule another appointment?

☐ Assure the client’s needs are met if the client needs assistance.
Navigated Care Exit Assessment

We would like to thank you for meeting with us at the end of your participation in the Navigated Care program of the Men’s Health League.

The following form asks you about yourself, your health history and status, your thoughts about getting health care, and your views on the Navigated Care program. You can choose not to complete this assessment form. Your name will be removed from this form and the responses from all the men who participated in navigated care will be summarized and shared with program staff.

In order to ensure confidentiality, we ask that you provide a unique identifier, consisting of the last two digits of the year you were born, the first three letters of your mother’s maiden name and the last two digits of your social security number.

This identifier will only be used by the research staff to match your entry and exit assessment answers, but the staff will not be able to identify you based on this code. We ask that you please respond as honestly as possible. The questionnaire should take about 15 minutes to complete.

Thank you for your participation.

Unique Identifier:

Last Two Digits of the Year You Were Born: □ - □
First Three Letters of Your Mother's Maiden Name: □ - □ - □
Last Two Digits of Your Social Security Number: □ - □
Name: _______________________________________
Today's Date:____________________

Prepared by the Institute for Community Health (www.icommunityhealth.org)
Please answer the following questions to the best of your knowledge.

### Demographic Information

1. **What is your age?**
   - [ ] 18
   - [ ] 19-29
   - [ ] 30-45
   - [ ] 46-59
   - [ ] 60-70
   - [ ] 71+

2. **What language do you speak most often at home?**
   - [ ] English
   - [ ] Portuguese
   - [ ] Spanish
   - [ ] Haitian Creole
   - [ ] Other: ______________________

3. **How would you describe your cultural background?** (You can check more than one)
   - [ ] African
   - [ ] Eritrean
   - [ ] Ethiopian
   - [ ] Somali
   - [ ] Other ______________________
     (please specify )
   - [ ] African American
   - [ ] American
   - [ ] Asian
   - [ ] Bangladeshi
   - [ ] Chinese
   - [ ] Hmong
   - [ ] Indian
   - [ ] Korean
   - [ ] Vietnamese
   - [ ] Other ______________________
     (please specify)
   - [ ] Brazilian
   - [ ] Caribbean Islander
     (please specify ______________________)
   - [ ] European
   - [ ] Portuguese
   - [ ] Other ______________________
     (please specify)
   - [ ] Haitian
   - [ ] Hispanic/Latino
   - [ ] Dominican
   - [ ] Mexican American, Chicano
   - [ ] Puerto Rican
   - [ ] Other ______________________
     (please specify)
   - [ ] Middle Eastern
     (please specify ______________________)
   - [ ] Other_____________________
     (please specify )
   - [ ] Unknown/not specified
4. Where do you live?
- Cambridge
- Somerville
- Everett
- Malden
- Other: ______________________

5. What is your current marital status?
- Single
- Married
- Separated
- Divorced
- Widowed
- Partnered (living together)
- Engaged
- Other: __________

6. Do you have a primary care doctor or nurse practitioner that you see at least one time a year?
- Yes
- No
- Not Sure/Don’t know

   If yes, please give his or her name and location ______________________

7. Do you have health insurance?
- Yes
- No
- Not Sure/Don’t know

8. On average, how many times per week do you exercise?
- None
- 1-2 times
- 3 times
- 4 or more times

   If you do exercise, what physical activities do you currently participate in?
   ______________________

9. Are you concerned about your weight?
   - Yes
   - No

10. What kind of transportation do you use on a regular basis (You can check more than one)?
    - Car
    - Taxi
    - Bus or Train
    - Walk
    - Other: ______________

11. Do you care for a child under 18 or an elderly person on a regular basis?
    - Yes
    - No

12. How many adults and children including yourself, live in your household? ____________

13. What is the highest grade or year of school you have completed?
    - Grade school
    - High school
    - College
    - Graduate school

14. What is your current occupation? ______________________
HEALTH STATUS AND HISTORY

15. Would you say your general health is excellent, good, fair or poor?

- Poor
- Fair
- Good
- Excellent

16. Do you have any of the following medical problems (check all that apply)?

- Heart disease
- High blood pressure
- Stroke
- High Cholesterol
- Diabetes
- Other, please specify: ____________________________

17. Are you sexually active?

- Yes
- No

18. Do you practice safe sex (e.g. use condoms, etc)?

- Yes
- No
- I am not sexually active

19. Have you been tested for HIV or other sexually transmitted diseases?

- Yes
20. Are you interested in being screened for sexually transmitted diseases?

- Yes
- No
- I don’t know

21. Have you ever had any of the following exams? If yes please indicate when.

<table>
<thead>
<tr>
<th>Checkups</th>
<th>Yes</th>
<th>No</th>
<th>I don’t know</th>
<th>When?</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Have you ever had a physical exam?</td>
<td></td>
<td></td>
<td></td>
<td>In the past 12 months</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>In the past 1-2 years</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>In the past 2-4 years</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>I don’t remember when</td>
</tr>
<tr>
<td>b. Have you ever had your blood pressure checked?</td>
<td></td>
<td></td>
<td></td>
<td>In the past 12 months</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>In the past 1-2 years</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>In the past 2-4 years</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>I don’t remember</td>
</tr>
<tr>
<td>c. Have you ever had a rectal exam?</td>
<td></td>
<td></td>
<td></td>
<td>In the past 12 months</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>In the past 1-2 years</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>In the past 2-4 years</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>I don’t remember</td>
</tr>
<tr>
<td>d. Have you ever given yourself a testicular exam?</td>
<td></td>
<td></td>
<td></td>
<td>In the past 12 months</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>In the past 1-2 years</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>In the past 2-4 years</td>
</tr>
</tbody>
</table>
## Navigated Care

### The Men’s Health League

A Community Health Partnership for Men

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**PERCEPTIONS OF HEALTH CARE SYSTEM**

22. Please indicate your level of agreement with the following statements:

(Please check one box)

<table>
<thead>
<tr>
<th>Statements</th>
<th>Strongly agree</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. I don’t need to see a doctor unless I’ve hurt myself or I’m really sick.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. I leave it up to the doctor to decide what kind of medicine I should take</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. I trust my doctor to give me the best care possible.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. I am uneasy about taking prescription medications.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e. I have difficulty understanding a lot of medical information I see or hear.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f. I know enough about my health needs to ask my doctor questions about my health.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g. I feel comfortable talking to my doctor about my health concerns.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

---

5 Adapted from Ipsos Insight “Point of View” September 2005

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The Men’s Health League is a partnership of the Margaret Fuller Neighborhood House, Cambridge Health Alliance, and the Cambridge Family YMCA. Funding is provided by the U.S. Department of Health and Human Services, Office of Minority Health.
KNOWLEDGE OF MEN'S HEALTH

23. The checkups all men should regularly have to stay healthy include:
(Please check all that apply)

- [ ] A physical exam once every year or every 2 years
- [ ] A blood pressure check once every year
- [ ] A rectal exam once every year
- [ ] Testicular, skin and oral health self-exams every month
- [ ] Tetanus booster every 10 years
- [ ] Prostate blood test once a year for men 40 years old and older
- [ ] None of the above
- [ ] I don’t know

24. Cardiovascular disease is the number one cause of death among men:

- [ ] True
- [ ] False
- [ ] I don’t know

SATISFACTION

25. Please indicate how strongly you agree or disagree with the following statements:

<table>
<thead>
<tr>
<th>As a result of participating in Navigated Care:</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. I learned how to better ask my doctor questions about my health.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. I learned more about the health conditions I have.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. I improved my emotional health (e.g. I</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
26. Would you participate in a program similar to Navigated Care again?

☐ Yes
☐ No
☐ I don’t know

REASONS AND EXPECTATIONS

27. What did you gain from participating in Navigated Care?
_______________________________________________________________________
_______________________________________________________________________

28. Do you have any suggestions for improving the Navigated Care program?
_______________________________________________________________________
_______________________________________________________________________

Thank You for Completing This Survey!

Prepared by the Institute for Community Health (www.icommunityhealth.org)
Success Stories

A 36 year old Hispanic/Latino male with good health insurance had not visited his primary care physician for a physical exam in 3 years. He enrolled into the Navigated Care program in August, 2008 and got on the waiting list for the Fit for Life program. With support from the patient navigator he did visit his PCP and discovered he had acquired type II diabetes. He is now taking medication for his condition, and was admitted into the Fit for Life program to develop a healthy exercise routine.

A 50 year old African American male with type II diabetes was referred by his PCP to the Navigated Care program in August, 2008. He had trouble keeping medical appointments and wanted to quit his pack a day cigarette habit. With the support of his PCP and his patient navigator he has been on a nicotine patch and has been smoke free for 31 days and counting. He has also lowered his abnormally high A1C level from 8.7 (fair to poor) to 7.9 (good) over a one-year period.
### Navigated Care

<table>
<thead>
<tr>
<th>Goals</th>
<th>Objectives</th>
<th>Baseline Data</th>
<th>Activities</th>
<th>Process Measures</th>
<th>Outcome Measures</th>
<th>Impact</th>
<th>OMH P. Measures</th>
<th>HP 2010 Objectives</th>
</tr>
</thead>
<tbody>
<tr>
<td>To improve access to care and enhance care coordination for high-risk men of color through assistance with health care logistics, support, referrals, and education.</td>
<td>To increase the proportion of men participating in navigated care who have: 1) a PCP, and 2) health insurance coverage by 10% from beginning to end of program.</td>
<td>Pre-test survey on having: 1) a PCP, and having 2) health insurance coverage.</td>
<td>Navigator connects men without a PCP to a PCP. Navigator facilitates acquisition of health insurance for men who do not initially have health insurance.</td>
<td>Proportion of men who have monthly contacts (e.g. phone, in-person, email) with the navigator, as measured by the navigator’s interaction counts.</td>
<td>% change in number of men who report they have a primary care doctor from pre-test/post-test; % change in number of men who have health insurance from pre-test/post-test.</td>
<td>Reduction in diabetes, heart disease/stroke risk for men of color in Cambridge.</td>
<td>O-6</td>
<td>1.1. Increase the proportion of persons with health insurance. 1-4a. Increase the proportion of persons who have a specific source of ongoing care.</td>
</tr>
</tbody>
</table>

The Men’s Health League is a partnership of the Margaret Fuller Neighborhood House, Cambridge Health Alliance, and the Cambridge Family YMCA. Funding is provided by the U.S. Department of Health and Human Services, Office of Minority Health.
Navigated Care Pre Test Survey

We would like to thank you for meeting with us to learn more about the Navigated Care program of the Men’s Health League.

The following survey asks you about yourself, your health and your thoughts about getting health care. You can choose not to complete this survey. Your name will be removed from this survey and the survey responses from all the men who participated in navigated care will be summarized and shared with program staff.

In order to ensure confidentiality, we ask that you provide a unique identifier, consisting of the last two digits of the year you were born, the first three letters of your mother’s maiden name and the last two digits of your social security number.

This identifier will only be used by the research staff to match your pre- and post- workshop survey results, but the staff will not be able to identify you based on this code. We ask that you please respond as honestly as possible. The survey should take about 10 minutes to complete.

Thank you for your participation.

Unique Identifier:

Last Two Digits of the Year You Were Born: □ - □

First Three Letters of Your Mother’s Maiden Name: □ - □ - □

Last Two Digits of Your Social Security Number: □ - □

Name: ____________________________________________

Date: ____________________________

Prepared by the Institute for Community Health (www.icommunityhealth.org)
Please answer the following questions to the best of your knowledge

### Demographic Information

1. **What is your age?**
   - [ ] 18
   - [ ] 19-29
   - [ ] 30-45
   - [ ] 46-59
   - [ ] 60-70
   - [ ] 71+

2. **What language do you speak most often at home?**
   - [ ] English
   - [ ] Portuguese
   - [ ] Spanish
   - [ ] Haitian Creole
   - Other: ______________________

3. **How would you describe your cultural background? (You can check more than one)**
   - [ ] African
     - [ ] Eritrean
     - [ ] Ethiopian
     - [ ] Somali
     - [ ] Other ____________________ (please specify )
   - [ ] African American
   - [ ] American
   - [ ] Asian
     - [ ] Bangladeshi
     - [ ] Chinese
     - [ ] Hmong
     - [ ] Indian
     - [ ] Korean
     - [ ] Vietnamese
     - [ ] Other ____________________ (please specify)
   - [ ] Caribbean Islander
     - [ ] (please specify ________________)
   - [ ] European
   - [ ] Portuguese
   - [ ] Other ____________________ (please specify)
   - [ ] Haitian
   - [ ] Hispanic/Latino
     - [ ] Dominican
     - [ ] Mexican American, Chicano
     - [ ] Puerto Rican
     - [ ] Other ____________________ (please specify)
   - [ ] Middle Eastern
     - [ ] (please specify ________________)
   - [ ] Other
     - [ ] (please specify ________________)
   - [ ] Unknown/not specified
The Men's Health League is a partnership of the Margaret Fuller Neighborhood House, Cambridge Health Alliance, and the Cambridge Family YMCA. Funding is provided by the U.S. Department of Health and Human Services, Office of Minority Health.

<table>
<thead>
<tr>
<th>Question</th>
<th>Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>5. Do you have a primary care doctor or nurse practitioner that you see at least one time a year?</td>
<td>□ Yes □ No □ Not Sure/Don’t know</td>
</tr>
<tr>
<td>6. Do you have health insurance?</td>
<td>□ Yes □ No □ Not Sure/Don’t know</td>
</tr>
<tr>
<td>7. On average, how many times per week do you exercise?</td>
<td>□ None □ 1-2 times □ 3 times □ 4 or more times</td>
</tr>
<tr>
<td>8. Are you concerned about your weight?</td>
<td>□ Yes □ No</td>
</tr>
<tr>
<td>9. What kind of transportation do you use on a regular basis (You can check more than one)?</td>
<td>□ Car □ Taxi □ Bus or Train □ Walk □ Other: ______________________</td>
</tr>
<tr>
<td>10. Do you care for a child or an elderly person on a regular basis?</td>
<td>□ Yes □ No</td>
</tr>
</tbody>
</table>

**HEALTH STATUS AND HISTORY**

11. Would you say your general health is excellent, good, fair or poor?

   □ Poor
   □ Fair
   □ Good
   □ Excellent

12. Have you ever had any of the following exams? If yes please indicate when.

<table>
<thead>
<tr>
<th>Checkups</th>
<th>Yes</th>
<th>No</th>
<th>I don’t know</th>
<th>When?</th>
</tr>
</thead>
</table>

Navigated Care
a. Have you ever had a physical exam?

- In the past 12 months
- In the past 1-2 years
- In the past 2-4 years
- I don’t remember when

b. Have you ever had your blood pressure checked?

- In the past 12 months
- In the past 1-2 years
- In the past 2-4 years
- I don’t remember

c. Have you ever had a rectal exam?

- In the past 12 months
- In the past 1-2 years
- In the past 2-4 years
- I don’t remember

d. Have you ever given yourself a testicular exam?

- In the past 12 months
- In the past 1-2 years
- In the past 2-4 years
- I don’t remember

e. Have you ever had a tetanus booster?

- In the past 12 months
- In the past 1-2 years
- In the past 2-4 years
- I don’t remember

f. Have you ever had a prostate blood test?

- In the past 12 months
- In the past 1-2 years
- In the past 2-4 years
**PERCEPTIONS OF HEALTH CARE SYSTEM**

13. Please **indicate your level of agreement** with the following statements:  
(Please check one box)

<table>
<thead>
<tr>
<th>Statements</th>
<th>Strongly agree</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. I don’t need to see a doctor unless I’ve hurt myself or I’m really sick.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. I leave it up to the doctor to decide what kind of medicine I should take</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. I trust my doctor to give me the best care possible.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. I am uneasy about taking prescription medications.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e. I have difficulty understanding a lot of medical information I see or hear.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f. I know enough about my health needs to ask my doctor questions about my health.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g. I feel comfortable talking to my doctor about my health concerns.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>h. There is nothing I can do about my health problems—I just have to live with them.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**KNOWLEDGE OF MEN'S HEALTH**

14. The checkups **all men should regularly have to stay healthy include:**  
(Please check all that apply)

- A physical exam once every year or every 2 years
- A blood pressure check once every year
- A rectal exam once every year
- Testicular, skin and oral health self-exams every month
- Tetanus booster every 10 years
- Prostate blood test once a year for men 40 years old and older

---

Adapted from Ipsos Insight “Point of View” September 2005
15. **Cardiovascular disease is the number one cause of death among men:**

- [ ] True
- [ ] False
- [ ] I don’t know

**REASONS AND EXPECTATIONS**

16. In a few sentences, please tell us what makes you interested in participating in navigated care?

_____________________________________________________________________

17. What do you hope to gain from participating in navigated care?
Recommended Health Screenings for Men

**Blood Cholesterol Screenings**
Have your cholesterol checked at least every 5 years, starting at age 35. If you smoke, have diabetes, or if heart disease runs in your family, start having your cholesterol checked at age 20.

**Blood Pressure**
Have your blood pressure checked at least every 2 years.

**Colorectal Cancer Tests**
Begin regular screening for colorectal cancer starting at age 50. Your doctor can help you decide which test is right for you. How often you need to be tested will depend on which test you have.

**Diabetes Tests**
Have a test to screen for diabetes if you have high blood pressure or high cholesterol.

**Depression**
If you've felt "down," sad, or hopeless, and have felt little interest or pleasure in doing things for two weeks straight, talk to your doctor about whether he or she can screen you for depression.

**Sexually Transmitted Diseases**
Talk to your doctor to see whether you should be screened for sexually transmitted diseases, such as HIV.

**Prostate Cancer Screening**
Talk to your doctor about the possible benefits and harms of prostate cancer screening if you are considering having a prostate-specific antigen (PSA) test or digital rectal examination (DRE).

(Source: Men: Stay Healthy at Any Age-Checklist for Your Next Checkup, Agency for Health care Research and Quality)

How To Talk To Your Doctor

How do you talk to your doctor? Does he or she do all the talking while you do all the listening? Are you afraid to ask questions? Do you leave the office feeling like you just sat through a foreign language class?

Your relationship with your doctor, including how well you talk with each other, affects your care. A good relationship — where you and your doctor share information and work together to make the best decisions about your health — will result in the best care. You'll also feel more confident in your doctor and the quality of care you're getting. Here are some ways to make talking to your doctor more effective:

Be Prepared

Doctors are busy people and their offices are often abuzz with activity, like ringing telephones and crowded waiting rooms. When you actually see your doctor, your visit probably won't last more than 15 minutes. The best way to make the most of your limited time is to come to your appointment prepared:

- Write down all the questions you have for the doctor in advance and bring a pen and paper to jot down answers and take notes.
- Make and bring a list of symptoms if you're not feeling well. You might want to research your condition at the library or on the Internet if you're visiting your doctor for a specific problem or illness. Learning some related medical terms (see online course below) and common treatments will make it easier to follow what the doctor is telling you.
- Bring a list of all the medicines you take. Write down the doses and how often you take them. Include vitamins and other supplements.
- Arrive early enough to fill out forms.
- Have your insurance card ready and bring your medical records or have them sent in advance if you're seeing the doctor for the first time. Also bring your health care advance directive, which outlines instructions about your care if you become unable to speak for yourself. Go over it with your doctor so that your wishes are clear.

Here are some questions to ask the doctor. You can add to the list as you come up with more questions:

Problem

- What is wrong with me? How do you know?
- What caused this problem?

Tests
Navigated Care

- Must I have tests?
- What tests do I need and why?
- What do the tests involve?
- How do I prepare for the tests?
- When will I know the test results?
- Will my insurance cover the cost of the tests?
- Will I have to take the tests again?

Treatment
- What are my treatment choices?
- What are the benefits and risks of each treatment?
- What are the side effects?
- How good is each treatment?
- Which treatment is most common for my condition?
- What do I do if treatment fails?

Medication
- What kind of medication(s) must I take? For how long?
- What does the drug do? Will there be any side effects?
- What should I do if I have side effects?
- Can I take a generic version of the drug?
- Will the medicine interact with any I am already taking?
- Should I avoid any kind of food or activity while taking this medicine?

Follow-Up
- Do I need to see a specialist?
- Should I get a second opinion?
- Do I need a follow-up visit?

Speak Up
Don’t be put off by big words or a doctor’s impatient manner. If you don’t understand what the doctor is telling you, ask him or her to explain it again. Using different words, or drawing or showing you a picture can help. Don’t leave the office without understanding everything the doctor told you.

If there are issues you want to discuss that the doctor doesn’t mention, raise them yourself. Doctors often are so focused on making sick people better — or so rushed — they forget to talk about important health matters like diet and weight, exercise, stress, sleep, tobacco and alcohol use, sexual practices,
vaccines, and tests to find diseases. Find out what tests you might need for your age, such as a mammogram or colonoscopy, and ask your doctor about getting them. Don’t be embarrassed or ashamed to bring up sensitive topics.

**Don’t Withhold Information**

Speaking up also means telling your doctor everything you know about your body and health, including all your symptoms and problems. The more information you share, the better the doctor will be able to figure out what’s wrong and how to treat you. Don’t make the doctor guess. Be sure to mention any and all medicines, vitamins, and herbs you are taking, and anyone else you are seeing about your health, physical and mental.

**Bring Someone With You**

Sometimes, people like to bring a friend or family member to a doctor appointment for moral support. A companion also could help you relax, remind you of questions you forgot to ask, and help you remember what the doctor said. If you need personal time with the doctor, the person can sit in the waiting room. Having someone join you is especially helpful if you feel too ill to get around easily on your own.

**Follow Up**

If you feel nervous, rushed, or just plain overwhelmed, you might forget to ask a question, even if you wrote it down. If this happens, or if you think of a new question, call the office right away. Be patient but firm if you want to speak directly with the doctor, who might not be able to take your call at that moment. If the doctor wants you to come back for a follow up visit, be sure to set and keep the appointment.

Building a successful partnership with your doctor takes time and effort. It’s not uncommon to have a frustrating doctor visit now and then. But overall, your relationship with your doctor should be positive and comfortable. You should have confidence and trust in his or her medical ability and judgment.

Let your doctor know when there’s a problem. If you can’t resolve things together, you might need to entrust your care to someone else.
INTRODUCTION AND OBJECTIVE

What is Fitness Brothers?
Fitness Brothers is a community-based fitness program for men, designed to promote healthy living through a flexible team approach. Based on an award-winning community fitness program developed by the Cambridge Public Health Department, the Fitness Brothers program allows men to create a social network that inspires and perpetuates physical activity.

A team captain recruits a group of up to four men for a 10-week commitment to increase physical activity. Teams can organize fitness activities together or separately, and must keep track of the number of minutes they exercise each week. Three interactive workshops on healthy living, themed “healthy, wealthy, and wise” are provided. Teams accumulate points by the number of minutes they exercise and by their attendance at workshops. There is a grand prize for the winning team. The program is effective because of a combination of social support, competition, and flexibility in designing exercise programs to suit the men’s lifestyles and schedules.

What are the key objectives of this program?
The key objectives of this program include:

- Build grassroots health leadership
- Train community men’s health coaches
- Educate men about health and wellness
- Inspire and maintain physical activity and healthy lifestyles

FRAMEWORK AND PROTOCOL

Program Development

Why develop Fitness Brothers?
The Physical Activity Guidelines for Americans recommends that adults engage in resistance exercise twice each week, and accumulate 150 minutes of moderate, 75 minutes of vigorous, or a combination of moderate and vigorous activity each week, and that added health benefits come from more activity.¹

Fitness Brothers was modeled after the Fitness Buddies program, which won the National Association of County and City Health Officials “Model Practice” award in 2007. It has been proven effective for individuals who need social support and motivation to become and stay physically active.

How are Fitness Brothers participants recruited?
Program participants are recruited through community partner referrals, strategic flier placement, and community events. Fliers and applications are distributed throughout the community. Chosen participants must be affiliated with the city of Cambridge and must be 18 years or older.

Program Establishment

How is the program introduced?
During initial enrollment and orientation, participants are invited to recruit one or more teammates (i.e. father, son, friend, colleague, Men’s Health Team peer support member, etc.) and commit to doing something active together twice per week over the course of the 10-week program period.

Orientation introduces participants to the program. It consists of physical activity and nutrition information and resources, incentives (e.g. T-shirts, sports bands, pedometers, etc.), and motivational support for getting started. See the Orientation Checklist for more details.

What is required of Fitness Brothers participants?
Participants in the Fitness Brothers program are expected to:

- Exercise at least twice each week
- Attend three fitness brothers workshops
- Record physical activity and report information to team “captains” who in turn report to the Fitness Brothers Coordinator.

In return for participating in the Fitness Brothers program, participants receive:

- A 10-week gym membership
- Three health and wellness workshops
- Physical activity plans that are designed according to Stages of Change Theory: plan A (for those contemplating or ready for action) and plan B (for those wanting to maintain activity level)
- Health education and Fit Kit Manual
- Social support for exercise

What is the role of Fitness Brothers team captains?

Training Tip: Recruit community partners that will contribute to and be involved with the program (for example provide gym memberships).
Team captains are responsible for recording and reporting the time spent exercising, and are expected to lead and motivate team members.

_How are Fitness Brothers participants educated about health and wellness?_  
Fitness Brothers participants are required to attend at least three workshops organized by the Men’s Health League. The workshop series theme is “Healthy, Wealthy, and Wise.” Each workshop addresses a component of the theme. These include screenings, nutrition, physical activity, stress management, and finances. See the workshop checklist for more information.

**Program Logistics**

**What is the staffing structure?**  
The Fitness Brothers Program needs a program manager and men’s outreach coordinator. The program manager supports the men’s outreach coordinator, who arranges for the “Healthy, Wealthy, and Wise” workshops and oversees the progress of the team members.

**What is the budget?**  
Every program is different, depending on scope, available resources, and the needs of your community. Here are some general costs to consider:

- **Staffing**  
  - Community partnership development  
  - Program management  
  - Recruitment  
  - Workshop organization  
  - Outreach activities

- **Outreach materials**  
  - Fliers  
  - Posters  
  - Educational materials

- **Meals served at workshops and meetings**

- **Evaluation**

_How does the program motivate and manage the Fitness Brothers participants?_  
The program design itself creates a sense of community that generates support and motivation. In addition, the program incentivizes participants with free gym memberships and workshops.

**Potential Challenges**

_What if Team members are not compliant?_  
Participants lose gym membership privileges if participants are not meeting expectations.
PROGRAM MATERIALS

Framework and Protocol

- Registration flier and application
- Orientation checklist and orientation agenda checklist
- Physical activity plan A
- Physical activity plan B
- Workshop checklist
- Exercise log
- Sample workshops

CAMBRIDGE EVALUATION RESULTS

The evaluation of the Men’s Health League has been conducted by the Institute for Community Health, a public health research institute dedicated to community-based participatory research, assessment, dissemination, and educational activities. Evaluation activities for the Men’s Health League included surveys, focus groups, pre- and post- tests, and clinical screenings.

At the end of the Fitness Brothers program, over 75% of Fitness Brothers participants felt that they a) gained better control over their weight, b) learned how to provide support to their fitness partner, c) improved their emotional and physical health, and d) developed healthier eating habits.
The Men’s Health League is a partnership of the Margaret Fuller Neighborhood House, Cambridge Health Alliance, and the Cambridge Family YMCA. Funding is provided by the U.S. Department of Health and Human Services, Office of Minority Health.

Fitness Brothers

The Men’s Health League is a partnership of the Margaret Fuller Neighborhood House, Cambridge Health Alliance, and the Cambridge Family YMCA. Funding is provided by the U.S. Department of Health and Human Services, Office of Minority Health.
FITNESS BROTHERS REGISTRATION FORM

Register yourself or your team for Fitness Brothers, and we’ll mail you complete information to give to each of your team members.

It will include brochures, registration forms, blank business cards for you (as team captain, please add your name). If you are not sure how many guys you are recruiting for your team, let us know an estimated number and we’ll send you enough info sets to hand out, plus some extras. As team captain you are recruiting guys to your team and the program. Thank you for being a key partner in The Men’s Health League by making men’s health a priority in Cambridge.

Yes, I am interested in Fitness Brothers. Register me and my team today.

Name:

Address:

Telephone:    Email:

How did you hear about the program?

Are you the team captain?  □ YES  □ NO       If you are the team captain, write your team members’ names in the box below. If no, write in the Team Name, and just the name of the captain and his email.

I will attend the following Orientation meeting (check one):

□ Orientation #1 (Tuesday, May 26th at 6:00 p.m. Citywide Senior Center
□ Orientation #2 (Wednesday, May 27th at 6:00 p.m. Bally Total Fitness

<table>
<thead>
<tr>
<th>Team Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Names of team members (besides you):</td>
</tr>
<tr>
<td>1.</td>
</tr>
<tr>
<td>2.</td>
</tr>
<tr>
<td>3.</td>
</tr>
</tbody>
</table>

I would like to receive more information about future Men’s Health League programs. □ Yes  □ No

Please send this registration form by fax or by mail to the address below. You may also email the information or call us, and we can walk you through the registration by phone.

Please mail this registration to:

Or fax this form to:

Or email the information to:

Or call The Men’s Health League:
Orientation Agenda Checklist

- Welcome/introduction
- What is Fitness Brothers?
  - Free 10 week exercise/wellness program
  - 3 fitness/wellness workshops
    - Healthy, wealthy, and wise
  - Fitness manual
- How does Fitness Brothers work?
  - Commit to exercising at least twice per week
  - Attend 3 exercise/wellness workshops
  - Communicate to your team captain your total exercise time each week
- What is the grand prize?
- How to win the grand prize?
- Giveaways
  - The Men’s Health League
    - Fitness Brothers
    - Fit for Life
    - Navigated Care
    - Community events
    - Men of Color Task Force
    - Men’s Health Report
- The community partnership (Cambridge Health Alliance, Margaret Fuller Neighborhood House, Cambridge Family YMCA)
- Evaluation
  - Informed consent
  - Pre-test survey
  - Post-test survey
  - Health screenings will be offered as a service at the final workshop
Orientation Checklist

☐ Set an agenda
   • Welcome/introduction
   • What is Fitness Brothers?
     o Free 10 week exercise/wellness program
     o 3 fitness/wellness workshops
       • Healthy, wealthy, and wise
     o Fitness manual
   • How does Fitness Brothers work?
     o Commit to exercising at least twice per week
     o Attend 3 exercise/wellness workshops
     o Communicate to your team captain your total exercise time each week
   • What is the grand prize?
   • How to win the grand prize?
   • Giveaways
   • Explain The Men’s Health League program
   • The community partnership
     o Introduce community partners
   • Evaluation
     o Informed consent
     o Pre-test survey and post-test survey
     o Health screenings will be offered as a service at the final workshop

☐ Reserve a venue
   • Determine technology needed
     o Speakers
     o Projector
     o Screen
     o Electrical outlet
     o Internet access

☐ Allocate orientation tasks to staff
☐ Send reminders to Fitness Brothers participants
☐ Order healthful meals for the workshop
☐ Prepare materials
   • Copy handouts
   • Provide pens
   • Nametags
   • Markers
   • Men’s Health Team promotional pins or bracelets
   • Compile business cards of staff members
FITNESS BROTHERS – PHYSICAL ACTIVITY PLAN A

Congratulations. You said you are ready to increase your physical activity. You are taking a big step toward improving your health. Let’s work together to create an activity program for you.

What are the two main benefits you hope to get from being active? Write them down here:

1. ___________________________________  2. ___________________________________

MAKE A PHYSICAL ACTIVITY PLAN

Let’s look at the “Examples of Activities” below. Which one do you enjoy most? Can you do it all year? Sometimes it helps to have a second activity as a back-up.

Examples of Moderate Physical Activity
There is often confusion as to what is "moderate physical activity." The following list is meant to provide examples of activities that may be considered moderate physical activity. Be sure to consult a physician before beginning a new physical activity program.

- Walking, wheeling, or bike riding instead of driving
- Walking up stairs instead of taking an elevator
- Getting off the bus a few stops early and walking the remaining distance
- Mowing the lawn with a push mower
- Raking leaves
- Gardening
- Cleaning the house
- Doing exercises while watching television (stationary bike; arm, shoulder, or other exercises with weights)
- Brisk walking or wheeling (around neighborhood, park, etc)
- Taking a brisk 10+ minute walk in the morning, at lunch, and after dinner
- Jogging
- Bicycling
- Swimming or water aerobics
- Racket sports
- Golf (carry clubs)
- Traditional sports (basketball, football, soccer, etc…)
- Dancing
- Participating in an exercise program at work, home, school, or the gym
## Example 1: Moderate Intensity Activity and Muscle Strengthening Activity

<table>
<thead>
<tr>
<th>Sunday</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
<th>Saturday</th>
</tr>
</thead>
<tbody>
<tr>
<td>30 minute brisk walk</td>
<td>30 minute brisk walk</td>
<td>30 minute brisk walk</td>
<td>Weight training</td>
<td>30 minute brisk walk</td>
<td>30 minute brisk walk</td>
<td>Weight training</td>
</tr>
</tbody>
</table>

**Total:** 150 minutes moderate-intensity aerobic activity + 2 days muscle-strengthening activity

## Example 2: Vigorous Intensity Activity and Muscle Strengthening Activity

<table>
<thead>
<tr>
<th>Sunday</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
<th>Saturday</th>
</tr>
</thead>
<tbody>
<tr>
<td>25 minute jog</td>
<td>25 minute jog and weight training</td>
<td>Weight training</td>
<td>Weight training</td>
<td>25 minute jog</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Total:** 75 minutes vigorous-intensity aerobic activity + 2 days muscle-strengthening activity

## Example 3: Mix of Moderate & Vigorous Intensity Activity and Muscle Strengthening Activity

<table>
<thead>
<tr>
<th>Sunday</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
<th>Saturday</th>
</tr>
</thead>
<tbody>
<tr>
<td>30 minute brisk walk</td>
<td>15 minute jog</td>
<td>Weight training</td>
<td>30 minute brisk walk</td>
<td>Weight training</td>
<td>15 minute jog</td>
<td>30 minute brisk walk</td>
</tr>
</tbody>
</table>

**Total:** The equivalent of 150 minutes of moderate-intensity aerobic activity + 2 days muscle-strengthening activity
Type of Activity: __________________________________________________________

Where will you do your activity? At home? In the neighborhood? At the park? At a gym

Place for Activity: _______________________________________________________

What time of day will you do your activity?

Day and Times for Activity: _______________________________________________

How long will you do your activity each time? You should build up time gradually over several weeks.

Length of Activity _______________________________________________________

Your Fitness Brothers can help you with your new activity program. It is good to have someone to be active with, or just to encourage you

Teammates:

<table>
<thead>
<tr>
<th>Name</th>
<th>Phone</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
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<td></td>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Client Name ___________________________ Date ___________________________

FITNESS BROTHERS – PHYSICAL ACTIVITY PLAN B

Congratulations. You are doing regular physical activity. You should feel proud. What motivates you to stay active?

1. __________________________________ 2. __________________________________

What parts of your activity plan most satisfy you?

Review Your Program

By reviewing the activities you are doing now, you can improve your chances of staying active.

What type(s) of activity do you do? _____________________________________________

How many times a week? _______________________________________________________

How long each time? ___________________________________________________________

Have you had any injuries? _____________________________________________________

What parts of your plan are you most satisfied with? ________________________________

What parts of your plan are you least satisfied with? _________________________________

What can you do to make your activity plan more enjoyable? ____________________________
Think Ahead about Possible Obstacles

What situation is most likely to make you stop being active

What can you do about this obstacle to prevent it or to prepare for it?

What is the best way for you to return to your physical activity program if you stop?

Returning to Physical Activity After a Lapse

Sometimes people who are regularly active stop for weeks, or months. Planning ahead can help you return to your physical activity plan after a lapse.

Think about a time you stopped doing physical activity in the past. Why did you stop?

What could you have done differently? What would have helped you return to your plan?

How confident are you that you will do regular physical activity for the next 3 months?

☐ NOT AT ALL  ☐ SOMEWHAT  ☐ VERY

If you chose “not at all” or somewhat,” what can you do to improve your confidence?
Workshop Checklist

☐ Set an agenda
   • Welcome and introduce the staff and other team members
   • Provide a history of the Men’s Health League and an overview of Fitness Brothers
   • Introduce exercise logs
   • Outline next steps

☐ Reserve a venue
   • Determine technology needed
     o Speakers
     o Projector
     o Screen
     o Electrical outlet
     o Internet access

☐ Allocate orientation tasks to staff
☐ Send reminders to Fitness Brothers participants
☐ Order healthful meals for the workshop
☐ Prepare materials
   • Prepare handouts
   • Provide pens
   • Nametags
   • Markers
   • Men’s Health League promotional materials
   • Compile business cards of staff members

☐ The table below shows examples of the “Healthy, Wealthy, and Wise” workshops

<table>
<thead>
<tr>
<th>Healthy</th>
<th>Wealthy</th>
<th>Wise</th>
</tr>
</thead>
<tbody>
<tr>
<td>Description</td>
<td>Men’s Health Basics</td>
<td>Financial Advice</td>
</tr>
<tr>
<td>Facilitator</td>
<td>Physician</td>
<td>Financial Consultant</td>
</tr>
<tr>
<td>Fitness Component</td>
<td>Physical Activity</td>
<td>Physical Activity</td>
</tr>
<tr>
<td></td>
<td>lead by a personal trainer</td>
<td>lead by a personal trainer</td>
</tr>
</tbody>
</table>
Exercise Log:
Fitness Brothers
(Get this information to your team captain weekly)

Name:

Week of:

Use this log to record when and how long you exercise. You are encouraged to exercise as often as you can, but at a minimum, twice per week. These log sheets will be collected by your team captain each week.

<table>
<thead>
<tr>
<th>Day</th>
<th>Exercise Type</th>
<th>How long? (min)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monday</td>
<td></td>
<td></td>
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<tr>
<td>Tuesday</td>
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<td>Saturday</td>
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<tr>
<td>Sunday</td>
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</tr>
</tbody>
</table>
Fitness Brothers Workshop # 1
6:00 pm - 7:30 pm

• Welcome

• Warm-up and Stretching Demonstration
  • James Lambert, Personal Trainer, Boston Sports Club

• Men’s Health Discussion
  • Dr. Jeremy Keller, Cambridge Health Alliance

• Question and Answers

• Team Tracking Update
  • Richard Harding, The Men’s Health League

• Giveaways!!!
Fitness Brothers Workshop # 2 and Celebration
6:00 pm – 8:00 pm

- Welcome
- Post-test Survey
- Cardio Training Demonstration
  James Lambert, Personal Trainer
  Boston Sports Club
- Question and Answers
- Nutrition Discussion
  Stacey King
  Cambridge Public Health Department
- Question and Answers
- Fitness Brothers Grand Prize Winner
- Giveaways!!!
- Health Screenings (Optional)
Fitness Brothers Workshop # 3
6:00 pm - 7:30 pm

• Welcome

• Strength Training Demonstration
  James Lambert, Personal Trainer
  Boston Sports Club

• Financial Health Discussion
  Ousmane Diagne, Financial Consultant
  Timbuktu Capital Management, LLC

• Question and Answers

• Team Tracking Update

• Giveaways!!
Community Events
INTRODUCTION AND OBJECTIVES

What are community events?
The Men's Health League engages community members in a variety of health events annually. Most events are open to all men in the community, while some events are offered to men from a particular subpopulation or those who are part of a particular community group. These outreach events are held in churches, community centers, and worksites, range in size from 7 to 1000 participants, and have included:

- An annual athletic competition/men’s health fair called “Hoops ‘N’ Health”
- Small health education events for up to 20 men, for instance a sports league or businessmen’s group
- Food and nutrition events, that include active food preparation
- Faith-based events
- Local activities connected to a national health promotion activities, like Prostate Cancer Month or Stroke Sunday

What are the key objectives of hosting community events?
Every community event should have a goal or objective in mind. Objectives to consider include:

- Disseminate health information and health education
- Provide health screenings and connection to primary care
- Recruit for other Men’s Health League activities
- Create a “buzz” and heightened interest in men’s health
- Provide an opportunity for physical activity
- Promote and celebrate healthful living
- Build a constituency for men’s health
- Present an opportunity for partners to get involved

FRAMEWORK AND PROTOCOL

Program Development

Why develop effective community events?
Planning effective community events requires engaging stakeholders from the local neighborhood. Doing so generates community ownership and loyalty and creates an opportunity for recruitment for other League programs. Disseminating health information in a manner that appeals to men of color creates a more knowledgeable community and a population of men more likely to pass that information along to their friends, colleagues and families.
Community Events

How are participants from the community recruited?
Recruitment occurs through paper and electronic flier distribution and word of mouth. It is helpful to ask staff and partners to commit to a minimum number of participants they will recruit.

Program Establishment

How are events planned?
When planning events, it is critical to consider the target audience, agree on the specific purpose and goals of the event, and identify a lead person to coordinate event planning.

The event coordinator develops a timeline and delegates tasks, including contacting event partners, arranging for a site, speakers, food and incentives. If it is a large event, consider establishing committees for logistics, marketing, or speaker recruitment.

Community events require at least two staff members and work best if community partners are part of the planning and execution.

What is the budget?
Every event is different, depending on scope, available resources, and the needs of your community. Here are some general costs to consider.

- Staffing
  - Outreach
  - Recruitment
  - Health screeners
- Outreach materials
  - Fliers
  - Posters
  - Educational materials
- Screening supplies and equipment
- Publicity materials
  - Fliers
  - Posters
- Venue rental or security costs
- Equipment costs
- Health education materials
- Food
- Giveaways
Potential Challenges

How do you generate consistent participation from community members? Requesting an RSVP from community members not only allows staff to plan for attendance, but it also gives attendees a sense of commitment.

PROGRAM MATERIALS

- Program Planning Checklist
- Recruitment and Publicity Checklist
- Health and Education Fair Participant Checklist
- Food and Entertainment Checklist
Community Events

Program Planning Checklist

☐ Determine the goals of the event
  • Brainstorm ideas for the event
  • Prioritize goals

☐ Establish an agenda for the event
  • Identify contacts
  • Identify stakeholders

☐ Formulate a timeline for the event
  • Determine feasible amounts of time for preparation
    o Allow time to secure entertainment
    o Allow time for contacting community agencies for the health fair
    o Allow time for teams to sign up for the sports events

☐ Develop committees for different components of the event.
  • Recruitment and publicity
  • Sports events
  • Food and entertainment
  • Health education fair
Recruitment and Publicity Checklist

☐ Write Special Invitations
  - Determine stakeholders in the community
  - Write a formal invitation that includes:
    - Information about the Men’s Health League and the Community Partners
    - Information about the Large Community Event
    - Date of the event
    - Contact information of event leaders
    - RSVP information

☐ Distribute Fliers and Posters
  - Develop Fliers and Posters
    - Describe the Men’s Health League and the Community Partners
    - Describe the Large Community Event
    - Include Contact information of event leaders
    - RSVP information
  - Distribute Fliers and hang Posters
    - Identify prominent places to hang fliers
    - Recruit volunteers and partners to hang fliers
    - Supplies needed:
      - Paper, tape or tacks

☐ Men’s Health Team – community volunteers can:
  - Hand out fliers and hang posters
  - Distribute materials at community events
  - Send special invitations

☐ Press release
  - Write a press release, contact the local newspaper
  - Submit to the editor

☐ Event Follow-Up
  - Send attendees and team members a follow up email:
    - Thanking them for attending
    - Providing the results (who won the athletic event, publicizing how many individual participated and attended)
    - Giving them information about both the Men’s Health League and the Community Partners.
Community Events

Health Education Fair Checklist

☐ Arrange Health Education Booths
  • Reserve a venue with space for:
    o Tables and chairs
  • Contact a vendor for a large tent or many small tents for health education booths.
  • Contact city agencies, local health organizations, local community groups, and other community partners (see list of health fair participants for suggestions of organizations to invite)
    o Send them an invitation to host an education booth. Include:
      • A description of the event
      • The number of expected attendees
      • A personal message describing why they are invited to participate in the event and how they might benefit.
  • Arrange for a special men's health Table:
    o Gather pertinent men's health educational brochures
    o Create or order posters and backdrops for each table
    o For the table include:
      • Table cloth
      • Business cards
      • Sign-in sheet with name and email address
      • Promotional giveaway materials
        o Order Men's Health League “Giveaways”
          • Event T-shirt or bracelet
          • Health education brochures
    o Allocate staff to man the booths

☐ Arrange Registration Materials
  • Print a registration Sign-in Sheet
  • Create a Health Education Folder
    o Fliers for programs
      • Advertise for all Men's Health League programs
      • Advertise for upcoming community events
    o Education brochures including:
      • Health Screenings, heart disease, and diabetes
Community Events

Food and Entertainment Checklist

☐ Reserve a venue
  • Contact 2-3 possible venues
    o Must hold 1,000 attendees
    o Must have basketball courts or athletic fields
  • Arrange to visit and view the venues
  • Reserve venue for both date of event and day before to allow time for set-up

☐ Arrange for entertainment
  • Contact 4-5 possible community groups
    o Examples include community arts, singers, dancers; school bands or entertainment groups
    o Arrange a time to meet and schedule their performance
      • Determine technology need for performance
  • Arrange for necessary technology
    o Screen
    o Projector
    o Speakers
    o Computer hook-up

☐ Food supplies
  • Contact a caterer
    o Determine the healthful food to be served
    o Negotiate price and staffing needed
  • Acquire dishes if the caterer does not provide them
    o Utensils, napkins, plates, bowls, and cups
  • Arrange for decorations
    o Flowers and balloons
    o Banner
    o Tape, scissors, and permanent marker
  • Supply the tables
    o Chairs
    o Table cloths and centerpieces
  • Arrange for waste pick-up
Evaluation
PRELIMINARY EVALUATION RESULTS

The Institute for Community Health is working closely with the program partnership (Margaret Fuller House, the Cambridge Health Alliance and the Cambridge YMCA) to implement the evaluation plan. The evaluation is participatory in nature and involves the program participants in all stages of logic model development, instrument development, data collection, analysis and in generating recommendations around program findings.

A critical first step in the evaluation involved the creation of several logic models for each program component. A logic model is a visual representation of the relationship between the program resource inputs, program activities and anticipated program outcomes. The Institute for Community Health and Men's Health League program staff used the logic models to inform the development of surveys, focus groups, pre- and post- tests, clinical screenings and qualitative interviews and focus groups to ultimately evaluate the effectiveness of five Men's Health League program components—the Men's Health League partnership, the Men's Health Team, Fit for Life, Fitness Brothers and Navigated Care.

Below are the key findings from the MHL evaluation from the inception of the program in April 2008 through March 2009.

Men's Health League Partner Organizations
An electronic partnership survey was administered to Men's Health League partners in May 2008 and November 2008 measuring perceptions of the partnership, partner commitment, capacity building, communication and collaboration, evaluation progress and satisfaction with the partnership. In addition, N=5 key partnership members were interviewed in December 2008. Results from the November 2008 survey with N=10 (8 completed surveys) respondents and the N=5 partnership interviews are summarized below.

Partnership Interviews (n=5)
- Benefits to partners included visibility and recognition; research and/or evaluation capacity building; staff diversification bringing new sets of skills; and allowing organizations to further their missions.

Partnership Surveys (n=10)
- 80% said their organization's capacity to provide services had improved as a result of the partnership.
- 80% would like to work with the same partners again to deliver services.

Physical Activity
Participation in physical activity increased among program participants. Findings represent data from N=38 men participating in Fit for Life, Fitness Brothers and the Men’s Health Team.
- 42% had an increase in self-reported activity levels before and after participation.
- 49% increased the number of times per week they exercise.
- 86% intend to increase or continue their current level of exercise.
Evaluation

Diet
Men's Health League program participants improved diet over time. Findings represent data from N=38 men participating in Fit for Life, Fitness Brothers and the Men’s Health Team.

- 75% reported that they had developed healthier eating habits.
- 40% reported having increased their daily consumption of fruits and vegetables.
Clinical Indicators
Clinical indicators improved among Men’s Health League program participants. Findings represent data from men in Fit for Life (n=8) and the Men’s Health Team (n=8).

- 50% of all participants lost weight.
- On average, participants showed a decrease of 21 points in their total cholesterol reading.
- On average, participants showed a decrease of 28 points in their blood sugar reading.

Access to Care
Program participants reported greater access to health care.

- For Navigated Care, 40% entered program with no medical home: at discharge, 100% had a primary care clinician.
- For Fit for Life and the Men’s Health Team (where access to care is not a primary goal), we saw a 13% increase in the percentage of men who reported having a primary care clinician.

Below, are in-depth findings from the Men’s Health League outcome evaluation from March 1st, 2009 through September 1st, 2009
MEN'S HEALTH TEAM

Men’s Health Team Baseline Demographic Data

In December 2008, the second group of (n=10) men joined the Men’s Health Team. Presented below are the sample characteristics (See Table 2) on the n=8 men who completed the program and for whom there is both pre and post test data available.

Table 2: Men’s Health Team Demographics

<table>
<thead>
<tr>
<th>Variables</th>
<th>Categories</th>
<th>Baseline N (%)</th>
<th>Endline N (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>19-29</td>
<td>1 (12.5)</td>
<td>--</td>
</tr>
<tr>
<td></td>
<td>30-45</td>
<td>6 (75.0)</td>
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<tr>
<td></td>
<td>46-59</td>
<td>1 (12.5)</td>
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</tr>
<tr>
<td>Language spoken most often at home</td>
<td>English</td>
<td>8 (100)</td>
<td>--</td>
</tr>
<tr>
<td></td>
<td>Spanish</td>
<td>0 (0.0)</td>
<td>--</td>
</tr>
<tr>
<td></td>
<td>Other</td>
<td>0 (0.0)</td>
<td>--</td>
</tr>
<tr>
<td>Ethnicity</td>
<td>African American</td>
<td>2 (25.0)</td>
<td>--</td>
</tr>
<tr>
<td></td>
<td>American</td>
<td>1 (12.5)</td>
<td>--</td>
</tr>
<tr>
<td></td>
<td>Caribbean</td>
<td>2 (25.0)</td>
<td>--</td>
</tr>
<tr>
<td></td>
<td>Haitian</td>
<td>1 (12.5)</td>
<td>--</td>
</tr>
<tr>
<td></td>
<td>Multiethnic</td>
<td>2 (25.0)</td>
<td>--</td>
</tr>
<tr>
<td>City/Town of residence</td>
<td>Cambridge</td>
<td>6 (85.7)</td>
<td>7 (87.5)</td>
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<td></td>
<td>Boston</td>
<td>1 (14.3)</td>
<td>1 (12.5)</td>
</tr>
<tr>
<td>Has a Primary Care Provider</td>
<td>Yes</td>
<td>7 (87.5)</td>
<td>8 (100)</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>1 (12.5)</td>
<td>0 (0.0)</td>
</tr>
<tr>
<td>Has health insurance</td>
<td>Yes</td>
<td>8 (100)</td>
<td>7 (87.5)</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>0 (0.0)</td>
<td>1 (12.5)</td>
</tr>
<tr>
<td>Number of times one exercise per week</td>
<td>None</td>
<td>1 (12.5)</td>
<td>0 (0.0)</td>
</tr>
<tr>
<td></td>
<td>1-2 times</td>
<td>3 (37.5)</td>
<td>1 (12.5)</td>
</tr>
<tr>
<td></td>
<td>3 times</td>
<td>3 (37.5)</td>
<td>3 (37.5)</td>
</tr>
<tr>
<td></td>
<td>4 times or more</td>
<td>1 (12.5)</td>
<td>4 (50.0)</td>
</tr>
<tr>
<td>Concern about weight status</td>
<td>Yes</td>
<td>3 (37.5)</td>
<td>3 (37.5)</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>5 (62.5)</td>
<td>5 (62.5)</td>
</tr>
<tr>
<td>Transportation used on a regular basis</td>
<td>Car</td>
<td>5 (83.3)</td>
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</tr>
<tr>
<td></td>
<td>Other</td>
<td>1 (16.7)</td>
<td>--</td>
</tr>
<tr>
<td>Caregiver for a child or elder</td>
<td>Yes</td>
<td>5 (62.5)</td>
<td>6 (75.0)</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>3 (37.5)</td>
<td>2 (25.0)</td>
</tr>
<tr>
<td>School completed</td>
<td>High School</td>
<td>2 (25.0)</td>
<td>--</td>
</tr>
<tr>
<td></td>
<td>College</td>
<td>4 (50.0)</td>
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<tr>
<td></td>
<td>Graduate School</td>
<td>2 (25.0)</td>
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</tr>
</tbody>
</table>
Evaluation

Men’s Health Team Matched Pre-Post Data

Presented below) is data in several areas for the Men’s Health Team participants who completed both pre and post test surveys in a range of areas tapped via the pre/post survey.

General Health Status and Physical Activity

1. Perceived Health Status: On a scale from 1 to 5 (1=poor; 2=fair; 3=good; 4=excellent), the mean perceived health status for Men’s Health Team participants was 2.75 at baseline compared to 3.25 at endline. This change is not statistically significant.

2. Current Physical Activity Level: On a scale from 1 to 4 (1=not very active; 2=somewhat active; 3=active; 4=very active) the mean current level of physical activity among Men’s Health Team members at baseline was 3.0 compared to 3.5 at endline. Although this change is not statistically significant, on average, Men’s Health Team members were active at baseline.

3. Days/week of exercise: Similarly, there was an overall 37.5% increase from baseline to endline in the # of days/week the Men’s Health Team members exercised for at least 20 minutes.
   - One (12.5%) Men’s Health Team member improved from 1 day to 2 days of exercise in a week.
   - Five (62.5%) Men’s Health Team members kept their numbers of days of exercise in a week constant from baseline to endline.
   - Two (25.0%) Men’s Health Team members improved from less than 1 day a week to 2 days a week.

4. Future Intention to Change Physical Activity: There was no significant change in Men’s Health Team members’ intention to change their level of physical activity (i.e. 50.0% reported intention to increase their level of physical activity both at baseline and endline).

Nutrition and General Health Knowledge

1. Mindful of Health When Eating: On a scale from 1 to 4 (1=never; 2=a little of the time; 3=sometimes; 4=all the time), there was no change, on average in how often Men’s Health Team members reported being mindful of their health when making nutritional choices (i.e. mean was 3.37 at baseline and endline).

2. Usefulness of Nutrition Labels: Similarly, there was no change in Men’s Health Team members’ knowledge of the usefulness of nutritional labels in helping them make healthful food purchases. (i.e. All Men’s Health Team members (n=8) knew that nutrition labels were helpful at baseline and endline).

3. Sugar Sweetened Beverages: Although at baseline 8 (100%) Men’s Health Team members knew that drinking sugar sweetened beverages could not help one lose weight, only 6 (75.0%) maintained that knowledge at endline.

4. Knowledge about Health Insurance: All 8 (100%) Men’s Health Team members correctly identified the new health insurance law in the state of Massachusetts, at baseline and endline.
Leadership, Communication and Outreach

1. Directing Men to Health Services: On a scale from 1 to 4 (1=not at all confident; 2=somewhat confident; 3=confident; 4=very confident), the mean level of confidence that Men’s Health Team members had in directing men to health services was 3.5 at baseline, and 3.25 at endline. This decline is not statistically significant.

2. Listening Skills: Men’s Health Team members were presented a list of listening skills (e.g. 3 skills were desirable skills to have). Six (75%) Men’s Health Team members indicated they had all 3 listening skills at baseline, compared to all 8 (100%) identifying all 3 skills at endline. In other words, 25% of men reported improvements listening skills from baseline to endline.

3. Talking to Men About Health Issues: On a scale from 1 to 5, (1=not at all comfortable; 2=a little comfortable; 3=somewhat comfortable, 4=comfortable and 5=very comfortable), the mean comfort level among Men’s Health Team members for talking about men’s health issues with other men was 4.37 at baseline and 4.62 at endline. This change is not statistically significant.

4. Seeking Men to Share Health Knowledge: Both at baseline and endline, 6 (75.0%) Men’s Health Team members were likely or very likely to seek out men to share health knowledge with them. Two (25.0%) Men’s Health Team members moved from being not at all likely and from being somewhat likely respectively at baseline, to both being likely at endline to seek out men to share health knowledge with them. This change is not statistically significant.

Program Satisfaction and Challenges

1. Facilitators of Participation: Of factors that helped participants stay involved in the Men’s Health Team program, four most common motivators were: a) motivation to improve health (75.0%), b) the free membership to the YMCA (75.0%), c) motivation to help other men improve their health (75.0%), and d) support from other Men’s Health Team members (62.5%).

2. Challenges to Participation: Of factors that made it hard to be involved in Men’s Health Team, participants’ top 4 challenges were: a) their busy work schedule (50.0%), b) other factors (e.g. challenges meeting with Fit for Life partner) (50.0%), c) their busy home and family schedule (25.0%), and d) other commitments (25.0%).

Overall, all 8 (100%) Men’s Health Team members said that they would participate in a similar program again.

Qualitative Data

As part of the qualitative data collection, participants in the Men’s Health Team were asked to participate in a focus group, to share their thoughts and opinions about the program, and their experience being a member of the Men’s Health Team. The focus group guide was created collaboratively by the evaluation and program teams. It consisted of 12 open-ended questions divided into three categories: 1) the participant’s involvement in the Men’s Health Team, 2) the Men’s Health Team program challenges and support, and 3) the impact of the Men’s Health Team in the community. An
external male facilitator was selected to conduct the focus group. Eight Men's Health Team participants from diverse ethnic backgrounds (White, AA, Caribbean, and Haitian) participated in the focus group on May 6, 2009 at the Cambridge Public Health Department to express their thoughts and opinions about the program. The summary of the focus group is presented below.

<table>
<thead>
<tr>
<th>MEN’S HEALTH TEAM FOCUS GROUP SUMMARY</th>
<th>Findings</th>
<th>Quotes from Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Getting involved in the Men’s Health Team</strong></td>
<td>Participants reported being inspired mostly by the opportunity they were given to make a difference in someone else’s life and get involved in the community to affect change in a positive way. They also reported that the benefits of the program include access to free gym facilities and being inspired by their role as mentor to other men of color.</td>
<td>1) ‘Communication has been the biggest benefit because we can talk about health at home, in the family, and in the community’. 2) ‘In a way we are breaking the cycle of what the community used to be. I don’t want to have a heart attack like my father’.</td>
</tr>
<tr>
<td><strong>Working with Fit for Life Participants</strong></td>
<td>From the experience working with the Fit for Life members, they reported becoming more knowledgeable on health issues of men of color in their community.</td>
<td>‘Working with the Fit for Life members gave me satisfaction. My partner lost 35 pounds. We maintain communication; I went to the doctor with my partner, made him proud of himself. I may have added couple years to this guy’s life’</td>
</tr>
<tr>
<td><strong>Men’s Health Team Program Challenges and Support</strong></td>
<td>It was hard to find the day and the time that work for both Men’s Health Team and Fit for Life. In addition, there were challenges with maintaining active communication with Fit for Life men. Participants reported that they received enough support through the workshops and from the Men’s Health League to be able to deal with the challenges and difficulties described above.</td>
<td>1) ‘In training there was some acknowledgement that partners would have a problem with motivation. Good thing about the program is that as you’ve stuck with it, it becomes easier’.</td>
</tr>
<tr>
<td><strong>Men’s Health Team Program Impact</strong></td>
<td>Participants reported that they became much more aware of their health risk factors and they know about options and steps to take to reduce their risks.</td>
<td>1) ‘A lot of folks are used to feeling like crap, they don’t think they can change, but it’s worth the hard work. The program reinforces that. It’s about’</td>
</tr>
</tbody>
</table>
### FIT FOR LIFE

#### Fit for Life Baseline Demographic Data

Presented below are the sample characteristics (See Table 3) on second group of Fit for Life participants who started in February 2009 and for whom there is both pre and post test data (n=22).

<table>
<thead>
<tr>
<th>Table 3: Fit for Life Demographics</th>
<th>Baseline N (%)</th>
<th>Endline N (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Variables</strong></td>
<td><strong>Categories</strong></td>
<td><strong>Baseline N</strong></td>
</tr>
<tr>
<td>Age</td>
<td>19-29</td>
<td>5 (22.7)</td>
</tr>
<tr>
<td></td>
<td>30-59</td>
<td>16 (72.7)</td>
</tr>
<tr>
<td></td>
<td>60+</td>
<td>1 (4.6)</td>
</tr>
<tr>
<td>Language spoken most often at home</td>
<td>English</td>
<td>22 (100)</td>
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<td></td>
<td>Spanish</td>
<td>0 (0.0)</td>
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<tr>
<td></td>
<td>Other</td>
<td>0 (0.0)</td>
</tr>
<tr>
<td>Ethnicity</td>
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<td>American</td>
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<td></td>
<td>African</td>
<td>0 (0.0)</td>
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<tr>
<td></td>
<td>Haitian</td>
<td>0 (0.0)</td>
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<tr>
<td></td>
<td>Hispanic</td>
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<tr>
<td></td>
<td>Multiethnic</td>
<td>7 (31.8)</td>
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<td></td>
<td>Other</td>
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<tr>
<td>City/Town of residence</td>
<td>Cambridge</td>
<td>15 (71.4)</td>
</tr>
<tr>
<td></td>
<td>Somerville</td>
<td>1 (4.8)</td>
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<tr>
<td></td>
<td>Other</td>
<td>5 (23.8)</td>
</tr>
<tr>
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</tr>
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</tr>
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<td>1-2 times</td>
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</tr>
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<td>3 times</td>
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</tr>
<tr>
<td></td>
<td>4 times or more</td>
<td>3 (13.6)</td>
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</tr>
<tr>
<td></td>
<td>No</td>
<td>2 (9.5)</td>
</tr>
</tbody>
</table>

changing your lifestyle and making it a part of your life'
The Men's Health League is a partnership of the Margaret Fuller Neighborhood House, Cambridge Health Alliance, and the Cambridge Family YMCA. Funding is provided by the U.S. Department of Health and Human Services, Office of Minority Health.

Evaluation

<table>
<thead>
<tr>
<th>Transportation used on a regular basis</th>
<th>Car</th>
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<td>Walk</td>
<td>1 (4.6)</td>
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</tr>
<tr>
<td>Multiple means</td>
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<td>Other</td>
<td>2 (9.1)</td>
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<table>
<thead>
<tr>
<th>Caregiver for a child or elder</th>
<th>Yes</th>
<th>3 (17.7)</th>
<th>4 (19.0)</th>
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</thead>
<tbody>
<tr>
<td>No</td>
<td>14 (82.3)</td>
<td>17 (81.0)</td>
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<table>
<thead>
<tr>
<th>School completed</th>
<th>High School</th>
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<tbody>
<tr>
<td>College</td>
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</tr>
<tr>
<td>Graduate School</td>
<td>1 (4.5)</td>
<td>--</td>
<td></td>
</tr>
</tbody>
</table>

Fit for Life Matched Pre-Post Data

Presented below is data in several areas for the Fit for Life participants who completed both pre and post test surveys in a range of areas tapped via the pre/post survey.

General Health Status and Physical Activity

1. Perceived Health Status: On a scale from 1 to 5 (1=poor; 2=fair; 3=good; 4=excellent), the mean perceived health status for Fit for Life participants was 2.20 at baseline and 2.35 at endline. This change is not statistically significant.
2. Current Physical Activity Level: On a scale from 1 to 4 (1=not very active; 2=somewhat active; 3=active; 4=very active), the mean current level of physical activity among Fit for Life participants at baseline was 1.86 compared to 2.52 at endline. This change is statistically significant (p=0.0005).
3. Days/week of exercise: Similarly, there was an overall 38.2% increase in the number of days in a week that Fit for Life participants exercise for at least 20 minutes from baseline to endline. For example:
   - One (4.8%) Fit for Life participant improved from less than 1 day a week to 1 day a week, and two (9.5%) Fit for Life participant improved from less than 1 day a week to 2 days a week.
   - Four (19.1%) Fit for Life participants improved from 1 day to 2 days of exercise in a week, and one (4.8%) improved from 1 day to 3 days of exercise in a week.
   - Twelve (57.1%) Fit for Life participants maintained the numbers of days of exercise in a week constant from baseline to endline.
4. Future Intention to Change Physical Activity: Overall, there was no change in Fit for Life participants' intention to change their level of physical activity, with 89.5% intending to increase their level of physical activity both at baseline and endline.

Nutrition and General Health Knowledge

1. Mindful of Health When Eating: On a scale from 1 to 4 (1=never; 2=a little of the time; 3=sometimes; 4=all the time), the mean value for how often Fit for Life participants think about health when
deciding what to eat was 2.91 at baseline, compared to 3.27 at endline. This change is statistically significant (p value is 0.042).
2. Usefulness of Nutrition Labels: At baseline, 19 (95.0%) Fit for Life participants knew that nutrition labels could help them decide how to buy groceries, compared to 20 (95.2%) at endline. Although this change is not statistically significant, participants maintained their knowledge around the importance of nutrition labels throughout the Fit for Life program.
3. Sugar Sweetened Beverages: Both at baseline and endline, 20 (95.2%) Fit for Life participants knew that drinking sugar sweetened beverages could not help one lose weight. Again there was no improvement here, but participants kept their ability to properly answer that question.
4. Knowledge about Cardiovascular Disease: Fit for Life participants were asked both at baseline and endline to identify factors that may explain high rates of cardiovascular diseases in men of color. Of the 4 possible factors, the mean number of factors identified at baseline was 1.68 compared to 2.41 at endline. This increased ability to identify those factors is statistically significant (p-value=0.0497).

Program Satisfaction and Suggestions for Fit for Life program

1. At the end of the Fit for Life program, over 90% of Fitness Brothers participants felt that they a) gained better control over their weight, b) improved their emotional and physical health, and c) developed healthier eating habits.
2. Facilitators of Participation: Of factors that helped participants stay involved in Fit for Life, top 3 motivators were: a) motivation to improve health, b) the free membership to the YMCA, c) the support from the Men’s Health Team member, and d) the support from other Fit for Life participants.
3. Suggestions for Improvement: One suggestion that many participants had was to extend the program for a longer time period (e.g. of 6 months instead of 3 months), and to provide participants with deals or financial resources at the end of the program so that they could continue their membership at the YMCA. Participants also suggested that the program provide more sessions with nutritionists and personal trainers to better tailor the program to their individual needs.

Overall, all 22 (100%) Fit for Life program participants said that they would participate in a similar program again.

Qualitative Data

As part of the qualitative data collection, participants in Fit for Life were asked to voluntarily participate in an interview, to share their thoughts and opinions about the program, and their experience being a member of the Fit for Life program. The guide for these interviews was collaboratively created by the evaluation and program teams, and contains 7 open-ended questions. An outside male facilitator conducted these interviews. A sample of 3 program participants were interviewed and shared their thoughts, comments and opinions in a formal one-on-one in-depth interview, conducted on March 16, 18 and 19, 2009 at the Cambridge Public Health Department. Interview responses are summarized below.
**Evaluation**

<table>
<thead>
<tr>
<th>Themes</th>
<th>Findings</th>
<th>Quotes from Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Increasing awareness/knowledge of risk factors and health promoting behaviors</strong></td>
<td>Participants found the workshops on nutrition and healthy foods given by the nutritionist to be very helpful.</td>
<td>‘The program opened my eyes to things like saturated fat, unsaturated fat, and healthy foods in general.’</td>
</tr>
<tr>
<td><strong>Reducing high risk behaviors</strong></td>
<td>The program increased self-esteem among participants and helped them to develop a greater sense of pride on a personal level.</td>
<td>‘I feel a lot more confident about myself, a lot stronger and motivated.’</td>
</tr>
</tbody>
</table>
| **Increasing engagement in physical activities** | The program addressed participants’ lack of motivation for engaging in physical activity through providing: (1) access to YMCA facilities, (2) support from mentors, and (3) support and company from peers. | 1) ‘It was a really valuable tool to have a mentor.’  
   ‘I had a hard time getting started but my mentor called me and helped me to schedule work at my own pace.’  
   2) ‘It was encouraging to see other people noticing my weight loss and my physical changes.’ |

**NAVIGATED CARE**

**Baseline Demographic Data**

Presented below are the sample characteristics (See Table 5) for Navigated Care participants who were discharged from Navigated Care.

<table>
<thead>
<tr>
<th>Table 5: Navigated Care Demographics</th>
</tr>
</thead>
<tbody>
<tr>
<td>Variables</td>
</tr>
<tr>
<td>Age</td>
</tr>
<tr>
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<td>Language spoken most often at home</td>
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<tr>
<td>Ethnicity</td>
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### Evaluation

<table>
<thead>
<tr>
<th>Category</th>
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<th>Multiethnic</th>
<th>City/Town of residence</th>
<th>Has a Primary Care Provider</th>
<th>Has health insurance</th>
<th>Number of times one exercise per week</th>
<th>Concern about weight status</th>
<th>Transportation used on a regular basis</th>
<th>Caregiver for a child or elder</th>
<th>School completed</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2 (13.3)</td>
<td>2 (13.3)</td>
<td>Cambridge</td>
<td>8 (57.1)</td>
<td>6 (40.0)</td>
<td>4 (26.7)</td>
<td>Yes</td>
<td>Car</td>
<td>Yes</td>
<td>Grade School</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Somerville</td>
<td>1 (7.1)</td>
<td>9 (60.0)</td>
<td>3 (20.0)</td>
<td>No</td>
<td>Bus/Train</td>
<td>No</td>
<td>High School</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Other</td>
<td>5 (35.7)</td>
<td>15 (100)</td>
<td>4 (26.7)</td>
<td>None</td>
<td>Walk</td>
<td>Yes</td>
<td>College</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2 (13.3)</td>
<td></td>
<td>Multiple Means</td>
<td>8 (61.5)</td>
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<td></td>
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<td></td>
<td></td>
<td></td>
<td>4 (26.7)</td>
<td></td>
<td>Other</td>
<td>3 (60.0)</td>
<td>---</td>
</tr>
</tbody>
</table>

#### General health status
On a scale from 1 to 5, with 1 being poor, 2 being fair, 3 being good and 4 being excellent, the mean perceived health status for Navigated Care participants at baseline was 2.4 compared to 2.9 at endline. This improvement in perceived health status is statistically significant (p-value=0.006).

#### Knowledge
There was a 33.3% increase in the knowledge among Navigated Care participants that cardiovascular disease is the number one cause of death among men, from 60% at baseline to 93.3% at endline.

#### Navigated Care Program Impact

At endline:
14 (93.4%) Navigated Care participants strongly agreed or agreed that they learned how to better ask their doctors questions about their health as a result of participating in Navigated Care program.

At endline, 15 (100%) Navigated Care participants strongly agreed or agreed that they learned more about the health conditions that they have as a result of participating in Navigated Care program.

At endline, 14 (93.4%) Navigated Care participants strongly agreed or agreed that they improved their emotional health as a result of participating in Navigated Care program.

At endline, 13 (86.7%) Navigated Care participants strongly agreed or agreed that they improved their physical health (e.g. lowered cholesterol) as a result of participating in Navigated Care program.

Satisfaction and Suggestions

At endline 12 (80.0%) Navigated Care participants said that they would participate in a program similar to Navigated Care again. The remaining 3 (20.0%) Navigated Care participants did not answer this question.

Many Navigated Care participants suggested that there should be more than one navigator to reach out to men, and that more men needed to be aware of the Navigated Care program and what it offers. In addition, some participants suggested having a well established plan to follow once they are out of the program.

Qualitative Data

As part of the qualitative data collection, participants in Navigated Care were asked to voluntarily participate in an interview, to share their thoughts and opinions about the program, and their experience being a member of the Navigated Care program. The guide for these interviews was collaboratively created by the evaluation and program teams. It was agreed upon that an external facilitator would conduct the interviews to reduce the bias data collection. A sample of 4 Navigated Care program participants was interviewed.

<table>
<thead>
<tr>
<th>Themes</th>
<th>Findings</th>
<th>Quotes from Participants</th>
</tr>
</thead>
</table>
| Increasing awareness/knowledge of risk factors and health promoting behaviors | Participants felt participating in the Navigated Care program helped them to better understand their personal health issues and raised their awareness about unhealthy behaviors and risks that could lead to medical problems. | 1) ‘The program gave me a better look, I was a little laid back, not taking my health too seriously, but think about diabetes… my life is on the line.’
2) ‘I didn’t know what can lead...’ |
Evaluation

<table>
<thead>
<tr>
<th>Reducing high risk behaviors</th>
<th>Participants described their experience with the program to be fruitful and helped them to understand the steps they need to take to address their health issues.</th>
<th>'Changing from junk food to eating more fruits and vegetables was very challenging for me… but no pain, no gain.'</th>
</tr>
</thead>
<tbody>
<tr>
<td>Improving access to healthcare for underserved priority populations</td>
<td>The Navigated Care program assisted participants in connecting with the health care system and in communicating more effectively with their doctors.</td>
<td>1) '(Speaking of the navigator) One thing extremely helpful was to sign me up to be part of the system and make appointments for me.' 2) 'This is the first time in my life I have my own doctor.'</td>
</tr>
</tbody>
</table>

FITNESS BROTHERS

Fitness Brothers Baseline Demographic Data

Presented below are the sample characteristics (See Table 4) on the second group of Fitness Brother participants who started in February 2009 and for whom there is both pre and post test data (n=41).

Table 4: Fitness Brothers Demographics

<table>
<thead>
<tr>
<th>Variables</th>
<th>Categories</th>
<th>Baseline N (%)</th>
<th>Endline N (%)</th>
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<tbody>
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<td>--</td>
</tr>
<tr>
<td></td>
<td>30-59</td>
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<td></td>
<td>60+</td>
<td>2 (5.3)</td>
<td>--</td>
</tr>
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<td>Language spoken most often at home</td>
<td>English</td>
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<td>--</td>
</tr>
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<td></td>
<td>Spanish</td>
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<tr>
<td></td>
<td>Other</td>
<td>1 (2.7)</td>
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</tr>
<tr>
<td>Ethnicity</td>
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</tr>
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<td></td>
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</tr>
<tr>
<td></td>
<td>African</td>
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<td>--</td>
</tr>
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<td>Haitian</td>
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</tr>
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<td></td>
<td>Hispanic</td>
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<td>--</td>
</tr>
<tr>
<td></td>
<td>Multiethnic</td>
<td>3 (7.9)</td>
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</tr>
</tbody>
</table>
Evaluation

The Men's Health League is a partnership of the Margaret Fuller Neighborhood House, Cambridge Health Alliance, and the Cambridge Family YMCA. Funding is provided by the U.S. Department of Health and Human Services, Office of Minority Health.

## Evaluation

### City/Town of residence

<table>
<thead>
<tr>
<th>City/Town of residence</th>
<th>Other</th>
<th>Cambridge</th>
<th>Somerville</th>
<th>Other</th>
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</thead>
<tbody>
<tr>
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<td>16 (40.0)</td>
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<td>Cambridge</td>
<td>16 (40.0)</td>
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<td>16 (39.0)</td>
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<tr>
<td>Somerville</td>
<td>7 (17.5)</td>
<td>7 (17.0)</td>
<td>7 (17.0)</td>
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### Has a Primary Care Provider (PCP)

<table>
<thead>
<tr>
<th>Has a Primary Care Provider (PCP)</th>
<th>Yes</th>
<th>No</th>
<th>Don’t know</th>
</tr>
</thead>
<tbody>
<tr>
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<td>6 (14.6)</td>
<td>1 (2.4)</td>
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<td>No</td>
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### Has health insurance

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<td>No</td>
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<td>2 (4.9)</td>
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### Number of times one exercise per week

<table>
<thead>
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<th>Somerville</th>
<th>Other</th>
</tr>
</thead>
<tbody>
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<td>3 (7.3)</td>
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<td>1 (2.6)</td>
<td></td>
</tr>
<tr>
<td>1-2 times</td>
<td>15 (36.6)</td>
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<td>15 (38.5)</td>
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<td>3 times</td>
<td>14 (34.2)</td>
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<td>10 (25.6)</td>
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</tr>
<tr>
<td>4 times or more</td>
<td>9 (21.9)</td>
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<td>13 (33.3)</td>
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### Concern about weight status

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<thead>
<tr>
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</thead>
<tbody>
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<td>Yes</td>
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</tr>
<tr>
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<td>29 (72.5)</td>
<td>11 (27.5)</td>
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</table>

### Transportation used on a regular basis

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<thead>
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<th>Other</th>
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<th>Somerville</th>
<th>Other</th>
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</thead>
<tbody>
<tr>
<td>Car</td>
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<tr>
<td>Bus/Train</td>
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<td></td>
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<tr>
<td>Walk</td>
<td>2 (4.9)</td>
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<tr>
<td>Multiple means</td>
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<tr>
<td>Other</td>
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### Caregiver for a child or elder

<table>
<thead>
<tr>
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<th>No</th>
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</thead>
<tbody>
<tr>
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<td>12 (30.0)</td>
<td>13 (32.5)</td>
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<tr>
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<td>28 (70.0)</td>
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### School completed

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<th>Other</th>
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<tbody>
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</tr>
<tr>
<td>College</td>
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<td></td>
</tr>
<tr>
<td>Graduate School</td>
<td>12 (29.3)</td>
<td></td>
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</tr>
</tbody>
</table>

### Fitness Brothers Matched Pre-Post Data

Presented below is data in several areas for the Fitness Brothers participants who completed both pre and post test surveys in a range of areas tapped via the pre/post survey.

#### General Health Status and Physical Activity

1. Perceived Health Status: On a scale from 1 to 5 (1=poor; 2=fair; 3=good; 4=excellent), the mean perceived health status for Fitness Brothers participants at baseline was 2.85 compared to 2.88 at endline. This change is not statistically significant.

2. Current Physical Activity Level: On a scale from 1 to 4 (1=not very active; 2=somewhat active; 3=active; 4=very active), the mean current level of physical activity among Fitness Brothers participants at baseline was 2.46 compared to 2.74 at endline. **This change is statistically significant (p-value=0.026).**
3. Days/week of exercise: Similarly, there was a 28.1% overall increase in the number of days in a week that Fitness Brothers participants exercise for at least 20 minutes from baseline to endline.
   - Two (5%) Fitness Brothers participants improved from less than 1 day a week to 1 day a week, and from less than 1 day a week to 2 days a week, respectively.
   - Five (12.8%) Fitness Brothers participants improved from 1 day to 2 days of exercise in a week.
   - Four (10.3%) Fitness Brothers participants improved from 2 days to 3 days of exercise in a week.
   - Twenty-two (56.4%) Fitness Brothers participants kept their numbers of days of days of exercise in a week constant from baseline to endline.

4. Over 80% of Fitness Brothers participants felt that their level of physical activity was affected by the Fitness Brothers program. For instance, 7 (17.5%) Fitness Brothers participants felt that their level of physical activity stayed the same, while 15 (37.5%) felt that their level of physical activity increased a little because of the Fitness Brothers program, and 18 (45%) Fitness Brothers participants felt that their level of physical activity increased a lot because of the Fitness Brothers program.

5. There was no overall change in Fitness Brothers participants’ intention of changing their level of physical activity in the future from baseline to endline.

Nutrition

1. Week Day Fruit and Vegetable Consumption: The mean number of fruits and vegetables consumed on an average week day by Fitness Brothers participants was 2.86 at baseline, compared to 2.83 at endline. This change is not statistically significant.

2. Weekend Fruit and Vegetable Consumption: The mean number of fruits and vegetables consumed on an average weekend day by Fitness Brothers participants was 2.746 at baseline, compared to 3.21 at endline. This mean increased consumption of fruits and vegetable is statistically significant (p-value=0.034).

Satisfaction, Challenges and Suggestions for Fitness Brothers Program

1. Parts of the FitKit manual that Fitness Brothers participants found to be most useful are: a) the nutritional guidelines (56.1%), b) the physical activity guidelines (51.2%), and c) assessing your fitness level (43.9%).

2. Overall, 43.9% and 41.5% of Fitness Brothers participants felt that their Fitness Brother was somewhat important and very important respectively in helping them stick to the program.

3. At the end of the Fitness Brothers program, over 75% of Fitness Brothers participants felt that they a) gained better control over their weight, b) learned how to provide support to their fitness partner, c) improved their emotional and physical health, and d) developed healthier eating habits.

4. Facilitators to Participation: Of factors that helped participants stay involved in Fitness Brothers, top 3 motivators were: a) motivation to improve health (63.4%), b) support from fitness partner (41.4%), and c) skills learned in program showing participant how to be physically active (24.4%).

5. Barriers to Participation: Of factors that made it hard to be involved in Fitness Brothers, participants’ top 3 challenges were: a) their busy work schedule (51.2%), b) their busy home/family schedule (31.7%), and c) other commitments (21.9%).
6. Suggestions for Program Improvement: One suggestion that many participants had was to have access to a personal trainer or individual training sessions in addition to the group physical activity, so as to allow individual needs and target areas to be addressed.

**Overall, 95% of Fitness Brothers program participants said that they would participate in a similar program again.**

**Qualitative Data**

As part of the qualitative data collection, participants in Fitness Brothers were asked to voluntarily participate in an interview, to share their thoughts and opinions about the program, and their experience being a member of the Fitness Brothers program. The guide for these interviews was collaboratively created by the evaluation and program teams. An external male facilitator would conduct the interviews to reduce the bias data collection. A sample of 3 program participants was interviewed. The first two interviews were conducted on Tuesday April 28, 2009, and the third was conducted on Thursday May 7, 2009 at the Cambridge Public Health Department.
Future Directions
MEN'S HEALTH IN CAMBRIDGE

Like many other communities, Cambridge has sought to understand and eliminate health disparities.

For more than 18 years, public health and civic leaders in Cambridge have been concerned about the unique health challenges faced by men of color, especially African-American and black men.

Men's Health League is committed to developing a broader strategic plan of action that may serve as a national model for men’s health programming. The goal is to address the health needs of men in Cambridge by focusing on the national public health goals of increasing length and quality of life and decreasing gaps in health status.

The achievements of the Men’s Health League would not have been possible without a history of men’s health in the community. Therefore, this section will identify the history that aided in the program’s successes, and will recommend future directions for the programs within the Cambridge Men’s Health League.

MEN’S HEALTH LEAGUE PROGRAMS

Men’s Health Team

History
The Men’s Health Team model was inspired by the Cambridge Health Alliance Volunteer Health Advisor (VHA) program. The VHA peer counseling and peer helper model is an evidence-based strategy for providing education and support for health behavior change. Trained VHA participants are able to reach community members often inaccessible to paid staff by providing peer-based support, health education, and health promotion activities where the volunteers live, work, and go to church. With this model already in place, the Men’s Health Team was trained and able to meet the key objectives of the Men’s Health Team.

Future Directions
The Men’s Health Team serves the League as not only as mentors but also provides a critical connection to their local community, church or neighborhood organization. Future team members will have the flexibility to tailor their mentoring and community outreach activities to best meet their own needs and the needs of the programs and communities we engage.

Fit for Life

History
Because the Men’s Health League has ready access to an established health network (the Cambridge Health Alliance), men at risk for heart disease can easily be identified by physicians and then referred
Future Directions

internally to the Fit for Life program. Regular and open communication between physicians and Men’s Health League staff, along with easily accessible electronic medical records, allowed for effective program recruitment.

Future Directions
Fit for Life members benefit from personal training sessions at a gym or fitness center because the sessions reinforce proper exercise technique and behavior. Additional sessions with a trainer will allow program participants to develop a better comfort level at the gym.

Navigated Care

History
The Navigated Care program relies heavily on the Cambridge Health Alliance health care system. This hospital system gives medical record access to patient navigators after specialized training. This access is essential for the Navigated Care program to follow clients. In addition, electronic medical records are critical in allowing quick and easy access to medical records. In addition, because the state of Massachusetts requires citizens to have health insurance, the Care Coordinator can help clients choose the health insurance that best meets their needs and budget.

Future Directions
The Navigated Care program, because it requires individualized time, works best with 25 clients per patient navigator. Expansion of this program requires more men’s outreach/care coordinators.

Fitness Brothers

A collaborating fitness organization that can provide free membership to Fitness Brothers participants allows this program to occur in a low-cost, effective manner. Our fitness partners have found this to be an effective way to increase their membership and are eager to work with us.

Future Directions
The Fitness Brothers program looks to expand outreach to other community organizations that can host teams. This dissemination into other organizations creates a community network supportive of men’s health.

Community Events

History
Unwritten social norms supportive of men’s health have been developing in Cambridge for many years, with the establishment of the Men of Color Task Force in 1991 and Men of Color Health Initiative in 1993. The emphasis placed on men’s health by the community affects the success of the Men’s Health League programs.
**Future Directions**

To develop and expand community partnerships, the Men’s Health League is beginning to “seed” Men’s Health League activities within the community. Mini-grants will be awarded to community organizations for men’s health projects that reduce disparities in diabetes, heart disease or stroke. In addition, established groups, e.g., the fire department, are adapting activities for their use, and a variety of fitness organizations have expressed interest in incorporating Men’s Health League programming into their menu of activities.

On a broader scale, the national public health agenda continues to draw attention to the importance of making men’s health a high priority. It is important that more programs like the Men’s Health League be developed in various communities to decrease gender health disparities across the nation.