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TITLE: "La Clinica Day"

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CONTRACTING ORGANIZATION: Northern Illinois University
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PREPARED FOR: U.S. Army Medical Research and Materiel Command
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THIS TECHNICAL REPORT HAS BEEN REVIEWED AND IS APPROVED FOR PUBLICATION.

Carol B. Christians

4/23/03
# Abstract
A series of health fairs, known as La Clinica Days were offered by Northern Illinois University School of Nursing’s nurse-managed rural health clinic. The health fairs were modeled after what immigrants from Mexico encountered in their native country when seeking health care. The health fairs provided health screenings, clinical exams and health information that was applicable to the entire family. Appointments were not needed, all information was provided in Spanish and with culturally appropriate models. Key Hispanic community leaders were involved in program design and marketing. Women who participated in La Clinica Days received breast cancer prevention education, a free clinical breast exam and referral for a free mammogram. A pre- and post-intervention design was used to measure each Latina woman’s knowledge about breast cancer screening and seeking mammograms for early detection of breast cancer. Knowledge regarding breast cancer screening was improved following participation in La Clinica Day events (paired t-test comparing the mean total score for the knowledge test at time 1 and time 2 was statistically significant). Behavior regarding breast cancer screening was improved following participation in La Clinica Day events (83% of women referred for screening mammogram obtained the mammogram).
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INTRODUCTION

A series of health fairs, known as La Clinica Days were offered in the geographic area served by TriCounty Community Health Center, the Northern Illinois University School of Nursing nurse-managed rural health clinic. The health fairs were modeled after what immigrants from Mexico encountered in their native country when seeking health care. The health fairs provided health screenings, clinical exams and health information that was applicable to the entire family. Appointments were not needed, all information was provided in Spanish and with culturally appropriate models. Key Hispanic community leaders were involved in program design and marketing. Women who participated in La Clinica Days received breast cancer prevention education, a free clinical breast exam and referral for a free mammogram. A pre- and post-intervention design was used to measure each Latina woman’s knowledge about breast cancer screening and seeking mammograms for early detection of breast cancer.

- Knowledge regarding breast cancer screening was improved following participation in La Clinica Day events (paired t-test comparing the mean total score for the knowledge test at time 1 and time 2 was statistically significant)
- Behavior regarding breast cancer screening was improved following participation in La Clinica Day events (83% of women referred for screening mammogram obtained the mammogram)
BODY

**Research Hypothesis:** Knowledge of breast cancer detection practices and participation in breast cancer screening will increase among rural Hispanic women if the health information and breast cancer screening program are provided in a venue that is similar to the health care system to which they were socialized.

**Objectives:**

1. Develop a *La Clinica Day* with leaders and members of the Hispanic community that is consistent with the health care system of rural Mexico from which local community members have immigrated.
2. Investigate the impact of *La Clinica Day* on knowledge and behavior related to breast cancer screening among women who attend the event.

**Activities to meet objective 1:** Develop a *La Clinica Day* with leaders and members of the Hispanic community that is consistent with the health care system of rural Mexico from which local community members have immigrated

A Community Health Nurse (CHN) was hired and oriented to TriCounty Community Health Center and outreach programming of the Center. Once the orientation was completed, the CHN, Stephanie Semaan collaborated with Gabriella Cintora, RN, Clinic Nurse for the Center. Ms. Cintora is a recent immigrant from Mexico, having come to the United States in 1996. Ms. Semaan and Ms. Cintora developed an interview for patients of the Center. Ms. Cintora, who is fluent in Spanish and English interviewed 25 Mexican-American patients of the Center, all of whom were identified as having immigrated from Mexico in the last 10 years. The interview consisted of two questions. The first question related to clients use of / awareness of a curandero, or Mexican folk-healer in the local community. No clients admitted to use or awareness of a curandero in the local area. When asked whom they turn to for health advice, the majority answered family members (48%). Of those who consulted someone outside the family, the most frequent answer was Anna Garcia, RN, Public Health Nurse for DeKalb County Health Department (26%).

The second interview question asked clients to describe how they experienced health care services in their hometowns in Mexico. One hundred percent of clients reported that public health clinics were staffed periodically by nurses and doctors and hours available were advertised. Clients did not make appointments but attended the clinic, primarily for health complaints on a walk-in basis. Clients usually had several family members attend with them. Only 12% reported regular use of a curandero for health concerns in Mexico. In Mexico, health promotion information was delivered to clients in schools and churches by public health nurses and included health education and occasionally disease screenings for health problems such as high blood pressure or tuberculosis. No clients had experienced health promotion programming via teatro popular, or popular theater, but 90% were familiar with television soap operas which periodically delivered community service messages such as practicing safe sex.
Following the completion of these interviews, a planning committee was formed for *La Clinica Days*. Local Hispanic leaders and community health workers were invited to attend. The planning committee met on two occasions and included:

- Anna Garcia, RN, Public Health Nurse
- Mary Uscian, RN, Center Director
- Marilyn Frank-Stromborg, Chair NIU School of Nursing and Principal Investigator for this grant
- Andrea Diedrich, RN, Kishwaukee Hospital Community Education Coordinator
- Minerva Rodriguez, Client Advocate for DeKalb County Health Department
- Kathy Ferguson, RN, Ogle County Health Department representative
- Jilda Madrid, Advocate and Translator for Kishwaukee College English as A Second Language Program
- Jennifer Hulfridge, RN, Diabetes Educator for Rochelle Community Hospital
- George Gutierrez, Representative from Connexion Communidade, Hispanic Outreach Program, DeKalb Area
- Ruth Ann Belknap, Professor, NIU School of Nursing, Bilingual Counselor for H.O.P.E. Domestic Violence Shelter

The planning committee established goals and objectives for the overall health fair and discussed and approved plans for the displays, marketing and location of events. All committee members concurred with plans to host the health fairs at local churches as the overwhelming majority of Mexican immigrants had ties with the Catholic Churches in the communities of DeKalb, Ogle and Lee counties.

Churches were contacted and St. Catherine Church in Genoa (DeKalb County) and St. Patrick Church in Rochelle (Ogle County) eagerly agreed to host health fairs. St. Mary's Church in DeKalb initially declined the request to host a health fair. Since so many clients of TriCounty Community Health Center identified Anna Garcia, RN, Public Health Nurse as a trusted source of health information, it was then decided to host a third fair at DeKalb County Health Department.

Extensive marketing was organized and completed. A large poster and flyers were developed with information about the dates, times, locations and activities available. The marketing materials were in Spanish and English. Free services and fun for the whole family was highlighted. Posters and flyers were placed in 36 different locations in 5 towns throughout the target area. These locations included Mexican grocery and video and other small business operated by and targeted toward Hispanics. Lunch rooms of industries employing large numbers of Hispanics, laundromats, social service agencies and discount stores known to be frequented by Hispanics had posters and flyers posted. All area churches received information and 5 churches with large Hispanic membership included flyers in the Sunday bulletin and announced the health fairs at Sunday services.

Displays were organized, health education materials were identified, ordered and translated as needed. Sigma Lambda Gamma, the NIU Latino Fraternity was contacted for assistance with translation at the fairs.
Activities to meet Objective 2: Investigate the impact of *La Clinica Day* on knowledge and behavior related to breast cancer screening among women who attend the event.

The health fairs were targeted exclusively to Hispanic community residents. All information at the fairs was provided in Spanish. The first fair was held at DeKalb County Health Department, DeKalb on Tuesday April 9th from 5 p.m. to 8 p.m. The second fair was held at St. Patrick Church, Rochelle on Thursday April 11th from 5 p.m. to 8 p.m. This time and location was chosen to coincide with Religious Education Classes held at this site in Spanish for Spanish speaking parishioners. The third fair was held at St. Catherine’s Church in Genoa on Saturday April 13th from 9 a.m. to 2 p.m. Attendance at these three fairs was significantly below expectations. At total of 163 individuals participated in the three fairs. Due to this low attendance, a fourth fair was planned to coincide with Spanish Mass at the Catholic Church with the largest Hispanic membership. This fourth fair was held at St. Mary’s Church, in DeKalb on Sunday July 7th.

*La Clinica Day Procedure*

Participants were asked to register when greeted at the front door. Registration consisted of completing a form with name, address and phone number. Greeters at the registration table indicated to participants that this information was necessary in order to follow-up with any individual who received a screening test and had an abnormal result. The registration form also asked participants to identify their primary care provider. Participants were then routed to each display. All of the informational and screening booths were prepared and presented by NIU students from the nursing and nutrition departments along with volunteers from Kishwaukee College Nursing School. Other community agencies such as the English As a Second Language Program were present and all participants received information about resources for Hispanics in the community.

Members of Sigma Lambda Gamma, the NIU Latino Student Service Fraternity, assisted with translation at the event. The table in Appendix A describes the content and activities at each display in detail.

Food, music, and prizes were available. A total of 180 individuals attended all four health fairs. The free screenings were popular, with 79 adults receiving blood pressure screenings and 77 receiving blood sugar testing. A total of 15 adults were identified as having either high blood pressure or high blood sugar readings at the screenings conducted during the health fairs. All of these individuals were referred either to their primary care provider, or if they had no provider; to TriCounty Community Health Center. Clients were tracked through phone calls, letters and monitoring of the TriCounty appointment schedule for completion of the referrals they received. The CHN for TriCounty Community Health Center was able to confirm that seven (7) of the 15 (47%) completed follow up for the abnormal screening test. The remaining eight (8) were lost to follow up due to phone disconnection and/or moving from the area.

*Research Activities*

Women approaching the display regarding breast health were first seated at a small table in an area away from the larger crowds. A bilingual nurse from TriCounty Community Health Center explained the study and gave women the letter that can be
found in Appendix B detailing the purpose of the study, rights and responsibilities of study participants and risks to participation. Women who did not wish to participate were routed to the educational display at that point. Women who agreed to participate completed the first questionnaire found in Appendix C. Each woman was assigned a code number which was placed on the questionnaire. They were then routed to the educational display. There they listened to a short lecture on breast cancer and breast self examination. They watched a video on breast self examination and then participated in practice sessions with breast models. Women were encouraged to ask questions throughout the program. The lecture was conducted in Spanish by a bilingual nurse and the video was in Spanish with Hispanic women as the models. Following this program, women were offered a free clinical breast exam and were instructed that after completion of the exam they would receive a referral for a free mammogram if they were 40 years or older. During the breast exam, breast self examination was reviewed and personal risks for breast cancer were discussed. See Appendix D for the history and examination forms utilized. Upon completion of the exam, women age 40 and older met with a bilingual employee of TriCounty Community Health Center and arrangements were made for the free screening mammogram. Women completed a form indicating their preference for days and times for scheduling the mammogram appointment and identified which hospital they preferred to utilize (Rochelle Community Hospital or Kishwaukee Community Hospital in DeKalb). The CHN made appointments for the women and provided them with instructions on completing the appointment in Spanish. Transportation and translator assistance was arranged if needed. Following completion of the mammogram referral and/or breast exam, women participating in the study then completed questionnaire number two using the same code number as an identifier. They were reminded that they would be receiving a third questionnaire in the mail in three months.

Thirty-three (33) women received free clinical breast exams. Six (6) of these women had normal clinical breast exams and were age 40 or over. Each of these women was referred for a free screening mammogram. Five (5) of the six (6) or 83.3% completed the referral and had normal mammogram results. One woman was lost to follow up. Three (3) women had abnormal clinical breast exams and were referred for further evaluation. All three (3), or 100% completed this follow up evaluation and were eventually found to have benign conditions.

A total of thirty-six (36) women participated in the study by completing questionnaires number 1 and 2 at the health fairs. The third set of questionnaires was mailed three months following each health fair. These questionnaires had only the woman’s code number as an identifier and a return envelope was provided. A total of eight (8) or 22% of questionnaires were returned. When questionnaires were received, they were scored and matched to the code number for the first and second set.

Data for 36 subjects were analyzed using the Statistical Package for the Social Sciences (SPSS v. 11). The knowledge test was administered three times: time 1 (the pretest), time 2 (immediately after the intervention) and time 3 (three months after the intervention). Mean total score for the knowledge test at time 1 was 5.40 with a standard deviation of 0.86. Mean total score for time 2 was 6.58 with a standard deviation of 1.35. Mean total score for time 3 was 6.12 with a standard deviation of 0.50. The range for the total score at time 1 was 4.00 with a minimum of 3.00 and a maximum of 7.00. The range
for time 2 was 6.00 with a minimum of 2.00 and a maximum of 8.00. The range for time 3 was 4.00 with a minimum of 4.00 and a maximum of 8.00. The mean total score at each data collection point was substituted for subjects with missing data.

Paired t-test comparing the mean total score for the knowledge test at time 1 and time 2 was statistically significant with t=5.52, (df=35), p=0.00. This implies that the subjects gained knowledge from time 1 to time 2. Paired t-test comparing the mean total score for the knowledge test at time 2 and time 3 was not statistically significant with t=1.80, (df=35), p=0.08. This implies that the subjects retained their knowledge from time 2 to time 3. Paired t-test comparing the mean total score for the knowledge test at time 1 and time 3 was also statistically significant with t=-4.50, (df=35), p=0.00., meaning that overall the subjects gained knowledge and retained this knowledge for three months.

**Problems accomplishing tasks**

Despite significant involvement by key leaders of the Hispanic community and extensive marketing, attendance at *La Clinica Days* and female subject participation in the research was dramatically below expectations. Feedback was sought from Hispanic community leaders and other agency participants regarding the low attendance. The dynamics of day-to-day life for Mexican immigrants was identified as the likely primary reason for poor attendance. Most Mexican immigrant families in the area consist of two parent families with small children. Both parents are most often employed full time and many families have one parent working two jobs. Time at home for meals and private family conversation is limited. Although the activities and information may have been very attractive to potential participants, time, availability and energy limit the ability to attend events outside of the work-day, including weekends.

Seventy-seven (77) total women attended the health fairs. Thirty-six (36), or 46.75% of women attendees participated in the research study. As reported, only six (6) women were eligible by age for a free screening mammogram. However, of all adults who attended the health fairs, 74% were between the ages of 18 and 39 years old. Feedback from Hispanic community leaders indicated that this is very typical of the demographics of the families in the local community.

**KEY RESEARCH ACCOMPLISHMENTS**

- Knowledge regarding breast cancer screening was improved following participation in *La Clinica Day* events (paired t-test comparing the mean total score for the knowledge test at time 1 and time 2 was statistically significant)
- Behavior regarding breast cancer screening was improved following participation in *La Clinica Day* events (83% of women referred for screening mammogram obtained the mammogram)

**REPORTABLE OUTCOMES**

- No specific reportable outcomes have resulted from this research AT THIS TIME. Manuscripts for publication are planned and have been pending completion of data collection and analysis.
CONCLUSIONS

“So What”:
While the sample size for the study was considerable smaller than anticipated, the approach to breast cancer screening education seemed to be effective in changing knowledge and behavior.

Additional lessons were learned by those involved in the project planning and implementation.

- Translation of marketing materials and education materials was provided by bilingual staff of TriCounty Community Health Center and consultation from the bilingual nurse at DeKalb County Health Department and the translator from Kishwaukee College English as a Second Language program. There was considerable disagreement among these translators about how to phrase English statements. The disagreement appeared to be related to the area of Mexico from which the translator originated. There are many idioms and expressions in Mexico that apparently vary geographically. Translation is a complex skill and development of specialists who take into consideration the origin of immigrants now living in local communities in the United States would be highly valuable in assuring understandable translation. Certain phrases in particular were very difficult for health fair participants to understand. Few participants understood any verbal or written translation of the phrase: “Strongly disagree”.

- The literacy level of the participants in La Clinica Days was overall very low. While specific data was not tracked, the providers of information at the health fairs reported that the majority of participants required that forms be read to them as they were unable to read in any language.

- Participation in the prostate cancer information display was very low. A very small number of men appeared to be comfortable enough to approach the display and receive information or ask questions.

- Participants expressed high overall satisfaction with the program delivered. A satisfaction survey was completed upon exiting the health fair by 60 individuals. Responses to the survey can be found in Appendix E.

- Church announcements and bulletin inserts were the most effective means of marketing for the health fairs. Forty-one (41) percent of health fair participants identified having found out about the health fairs from a church. Only seven (7) percent identified a store or business place as the source for finding out about the event.

- TriCounty Community Health Center had considerable secondary gain as a result of the project. While participation was below expectations, the Center had the opportunity to increase networking activities with community health and social service agencies, and churches, stores and local businesses gained awareness of the Center as a resource for their community.
REFERENCES
None

PERSONNEL RECEIVING PAY FROM RESEARCH EFFORT

Mary Uscian, RN, MS  Director
TriCounty Community Health Center

Stephanie Semaan, RN, BS  Community Health Nurse
TriCounty Community Health Center

Patricia Escobar  Translator
TriCounty Community Health Center
## APPENDIX A

<table>
<thead>
<tr>
<th>Theme</th>
<th>Target Group</th>
<th>Activities</th>
<th>Staffed By</th>
</tr>
</thead>
</table>
| Nutrition           | Entire Family         | • Heights and weights measured  
                    | • Counseling regarding normal weight / height  
                    | • Food pyramid information with Mexican food examples  
                    | • Interactive meal planning games                        | Nutrition Students of NIU |
| Heart Health        | Entire Family         | • Blood pressures taken  
                    | • Visual aids demonstrating normal and hardened arteries  
                    | • Information on exercise provided                          | Nursing Students of NIU |
| Diabetes            | Men and Women         | • Diabetes screening provided  
                    | • Information on diabetes prevention                           | TriCounty Center staff |
| Prostate Cancer     | Men Only              | • Pamphlets on prostate cancer  
                    | • 10 minute video on prostate cancer early detection played continuously | Male NIU nursing students |
| Preventing Infections | Children and Parents | • Proper handwashing demonstrated  
                    | • Children practiced using glow in the dark “germs”  
                    | • Coloring books regarding immunizations  
                    | • Information on immunization schedules and local clinics | School of Nursing professors |
| Breast Health       | Women Only            | • Women recruited for the study prior to participating  
                    | • Lecture and video about breast self-examination.  
                    | • BSE practice with breast models  
                    | • Clinical breast exams and referrals for free mammograms  
                    | • Soap opera video portraying Hispanic woman with breast cancer | TriCounty Center staff and NIU Nursing Students |
| Kid Care            | Entire Family         | • Information about the State of Illinois Children’s Health Insurance Program | Illinois Department of Human Services |
| Community Agencies  | Entire Family         | • Domestic Violence Shelter  
                    | • Adult Basic Education Program of Kishwaukee College.  
                    | • Local Health Departments                          | Representatives of agencies |
APPENDIX B

Dr. Marilyn-Frank Stromborg, Chair of Northern Illinois University School of Nursing is conducting a study. The purpose of the study is to research the most effective ways to communicate health messages to Latina women.

If you agree to participate in this study, you will be asked to fill out two questionnaires related to breast health. One questionnaire will be before you start La Clinica Day and one questionnaire at the end of La Clinica Day. You will be asked to fill out another questionnaire on breast health in three months from today and it will be necessary to give your name and address to the investigators so they can send you the final questionnaire.

Your participation is voluntary and may be withdrawn at any time without penalty or prejudice. If you have any additional questions concerning filling out the questionnaires, you may contact Dr. Marilyn Frank-Strombor at 815-753-6550 or Mary Uscian, RN, MS, Director of TriCounty Community Health Center at 815-753-9011.

You may elect to not complete either the first or second questionnaire at any time and you may continue to enjoy and participate in La Clinica Day.

The benefits of this study include seeing if you have new knowledge about breast health at the end of La Clinica Day. Another benefit of filling out the questionnaires is to help health professionals determine the most effective way to share health information with other Latinas.

All of the information that you give is completely confidential and will remain confidential. A number, not your name, will be used to identify all three questionnaires. Your name will not be linked with any of these questionnaires. All medical information gathered during this study will be kept confidential at TriCounty Community Health Center in locked cabinets.

Your consent to participate in this study does not constitute a waiver of any legal rights or redress that you might have as a result of participation.
APPENDIX C

1. Breast cancer is the leading cause of cancer in women in the U.S.
   True _________   False _________

2. There is no way women can detect breast cancer in the early stages.
   True _________   False _________

3. Early detection of breast cancer will increase a woman’s chances of surviving breast cancer.
   True _________   False _________

4. Self-breast examination should be done before a woman’s monthly period.
   True _________   False _________

5. Self-breast examination should begin with the woman standing in front of the mirror.
   True _________   False _________

6. Women over the age of 45 should have a yearly mammogram of the breasts.
   True _________   False _________

7. Injury to the breast will cause a woman to have breast cancer.
   True _________   False _________

8. A woman does not have to worry about having a breast examination by the doctor or nurse as long as she checks her own breasts each month.
   True _________   False _________
1. Breasts visualized sitting with arms over head
2. Breasts visualized with woman leaning forward
3. Breasts palpated with woman sitting
4. Breasts palpated with woman lying down and arms over head
5. Breasts palpated in right and left decubitus position
6. No abnormalities palpated or visualized in all four quadrants
7. Abnormality palpated as shown in below

8. RISK FACTORS

- Relatives with breast cancer
- First child at age 30 or older
- Abnormal breast examination or mammogram previously
- Menses prior to age 12
- Late menopause, after age 50
- Personal history of breast cancer
- Presence of fibrocystic disease or previous disease
- Prior history of breast problems

9. Referred for screening mammogram
10. Referred for diagnostic mammogram/ultrasound
11. Referred to surgeon
12. Referred for repeat exam in one year
APPENDIX E

1. The health information I received today will be helpful to me or my family.

<table>
<thead>
<tr>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Not Sure</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
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<td>0</td>
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2. I am more familiar with available health services for myself or for my family.

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<th>Agree</th>
<th>Not Sure</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
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<td></td>
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</tr>
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3. The health information presented today was easy to understand

<table>
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<th>Agree</th>
<th>Not Sure</th>
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4. I have a better understanding about how my actions affect my health.

<table>
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<tr>
<th>Strongly Agree</th>
<th>Agree</th>
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<th>Disagree</th>
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<td></td>
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5. I would attend another health fair sponsored by TriCounty Community Health Center.

<table>
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<tr>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Not Sure</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
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<td>34.2%</td>
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</table>
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1. The U.S. Army Medical Research and Materiel Command has reexamined the need for the limitation assigned to technical reports written for this Command. Request the limited distribution statement for the enclosed accession numbers be changed to "Approved for public release; distribution unlimited." These reports should be released to the National Technical Information Service.

2. Point of contact for this request is Ms. Kristin Morrow at DSN 343-7327 or by e-mail at Kristin.Morrow@det.amedd.army.mil.

FOR THE COMMANDER:

Encl

PHYLIS M. RINEHART
Deputy Chief of Staff for Information Management