Attachment B

Hispanic survey results for Type II Diabetics living within zip codes 14605/14621

Survey Information letter and survey form in English Pages 2-3
Survey Information letter and survey form in Hispanic Pages 4-5
Results of survey tabulation of Hispanic demographics Page 6
Results of survey tabulations of Hispanic food preferences Page 7

Summary: Out of the 75 responses desired to date (November 2004) 15 surveys have been returned and tabulated. The analysis of food habits and preferences are found in the attached pages. A summary of the findings includes:

- The majority of those completing the survey have had Type II diabetes for 8+ years.
- The majority of the respondents to date have indicated they check their blood glucose level once per day.
- The respondents were evenly split between eating 1-2 meals per day with 1-2 snacks and those eating 3-4 meals per day. The survey tool did not define meal versus snack so the results could actually be the same for all people – eating 3-4 meals per day.
- The majority of people indicated they ate the majority of their meals at home, prepared at home.
- The majority of people indicated they bought their food from the grocery store and meat market accessing transportation to the store with a car.
- The average age of the respondents is mid-50's
- The majority of the people completing the survey are Puerto Rican nationality.
- The majority of people indicated Hispanic food preferences. It is apparent there is some Americanization of food selections but the majority of food eaten indicates a strong Hispanic influence.

Rochester Institute of Technology
College of CAST
School of Hospitality and Service Management
14 Lomb Memorial Drive
Rochester, New York 14623

Dear Participant,

Attached please find a survey which asks questions of Hispanic women with diabetes about food preferences and eating habits. We are involved in research for diabetes and work at the Rochester institute of Technology. We are asking adult Hispanic females at the Clinton Family Health Center to complete this survey. This is totally a volunteer effort - you may choose to complete the survey or not. Your decision will not impact upon the care you receive at the clinic. This information will not be reported to anyone at the clinic as it is not part of the care you receive at the clinic.

The reason we are doing the survey is to learn more about food habits of Hispanic adults with diabetes. Specifically we would like to know what food you like, the number of times you eat a day and where you eat your meals. We will use this information to plan nutritional classes, in the future, to teach people with Diabetes to help them manage their diet and keep their diabetes under control.

Please complete as much of the survey as you can and return it to the person who asked you to fill it out. Please do not put your name or any identifying information on the survey. Thank you for your help.

Sincerely,

Linda Underhill,   Barb Cerio-Iocco,   Liz Kmiecinski
Dietitians in Nutrition Education

(Attachment B)Survey for Diabetes

DIRECTIONS: **Please answer the questions below as best as you can.**

1. How long have you had Diabetes?
    ___ Since childhood   7___ 5-7 Years
    4___ 0-1 yr   7___ 2-4 yrs
    12___ 8 or more yrs

2. Do you have equipment to check your blood sugar level? Yes/No **(circle one)** 19

    a. If yes, do you know how to check your blood sugar? **Yes**/No **(circle one)17**
    b. How often do you check your blood sugar level?
        26___ Daily
        2___ Weekly
        ___ Monthly
        ___ Other

3. A. How many meals a day do you eat?   B. How many snacks do you eat per day?
    9___ 1-2   6___ None   6___ 1-2
    19___ 3-4   4___ 3-4   2___ More than 4

4. What type of foods do you normally eat? **(Check all that apply)**
    6___ Fast food   30___ home-cooked
    3___ Restaurant   ___ Other (please specify) _____

5. Where do you buy your food? **(Check as many as applicable)**
    19__ Grocery Store   2__ Deli
    1__ Street Vendor   14__ Meat Market
    10__ Public/Farmers Market   6__ Convenience Store(ex: Wilson Farms)
    3__ Restaurant   3__ Other (please specify)_____

6. What form of transportation do you use to get your food? **(Check as many as applicable)**
    22 __ Car   5__ Walk
    7__ Bus Line   1__ Bicycle
    2__ Taxi   __ other (Please specify) _____

7. Please fill in your AGE_____ Are you <u>Male</u> or **<u>Female</u>**? **(Please circle one)**

8. Please check your ETHNIC BACKGROUND   6__ Mexican American   __African American,

    1__ Cuban American   20 __ Puerto Rican American

    1__ Dominican   2__ Native Hawaiian, Pacific Islander

    __ Other (please specify) _____   *OVER*

9. What kinds of food do you normally eat? **(Please circle all that are applicable)**
   - Please feel free to add any foods to the list below

VEGETABLE	FRUIT	STARCH	FATS/SWEETS	MEAT	COMBINATION FOODS
Viandas 20	Guava Juice 14	Rice 30	Guacamole 11	Chicken 29	Arroz con pollo 29
White & yellow sweet potatoes 11	Plantains 19	Beans-black 3	Deep fried ice cream 4	Pork Sausage 5	Borracha Fritas Cubanas 1
Lettuce salads with tomatoes 21	Green bananas 1	Breads-corn 8	Flan Sopapillas 11	Turkey 11	Burritos 9
Green chiles 3	Taniers 3	Cold Cereal 12	Mexican wedding cakes 4	Beef 16	Enchiladas 3
Salsas 10		Soda Crackers 17	Cachaca 0	Pork Chops 9	Fajita 6
Blue or purple potatoes 2	Guanabana 4	Corn meal 14	Mezcal 1	Spare ribs 6	Gorditas 3
Corn 10	Guayaba 5	Legumes 5	Mojito 2	Marinated Pork 19	Chalupas 5
Chili peppers 5	Guineito nino 11	Spanish rice 8	Amarillo 5	Fish 19	Chitaquiles 3
Pigeon peas 18	Mango 21	Habichuelas Blancas 15	Custard 1	Shredded beef 1	Tacos 10
Yuca 20	Papaya 10	Garbanzos 14	Soft drink 11	Bacalaitos 9	White Chicken Chili 2
Chayote 8	Oranges 17	Coloradas 12	Bread Pudding 5	Camarones al ajillo 8	Menudo 3
Carrots 13	Apples 22	Hot Cereal 7	Butter 18	Ropa Vieja 1	Chili 3
Celery 7	Peaches 1	French Fries 12	Ice Cream 9	Garlic roasted chicken 14	Tamales 1
Tomato 17	Pears 16	Noodles 1		Cod fish 20	Sorullos de maiz 6
Green Beans 4	Grapes 16	Mashed Potatoes 7		Fried pork cracklings 12	Arroz con gandules 21
				Fresh marinated ham 1	Arroz con salchichas 21
				Queso Blanco 17	Hibicheula guisadas 22
				Fried chicken/chicken fingers 17	Dwarf green pepper 1
				Eggs 23	Alcapurrias 17
				Bacon 10	Almojabanas 2
					Deep fried turnover filled with meat
					Arroz con gandules
					Mofongo 13
					Pastelillo 9
					Relleno de Papa con carne 15
					Spaghetti and Meatballs 15

Rochester Institute of Technology
School of Hospitality and Tourism management
George Eastman building
Fourth floor

October, 2004

Estimado Participante,

Estamos conduciendo un estudio para la universidad, Rochester Institute of Technology para saber como el diabetes afecta a las personas Hispanas. Nosotros ayudamos a personas como usted, a planear la comida, para que puedan controlar mejor el diabetes. Para poder conducir este estudio necesitamos preguntarle varias preguntas. Las preguntas son sobre su preferencia de comida, cuantas veces come al dia, y en que lugares come. Este estudio es completamente volunatrio. Su decisión en tomar el estudio no afectara el tratamiento que usted va a recibir en esta clinica. Esta información es confidencial y no sera reportada a ninguna persona en esta clinica.

Esta información sera usada para guiarnos en diseñar clases sobre la nutrición, como vivir sanament con el diabetes, y como controlar el diabetes. Si usted decide tomar el estudio, solo pedimos que conteste todas las preguntas. Cuando termine el estudio, favor de entregarlo a la persona que le se lo a dado. Gracias por toda su ayuda!

Sinceramente,

Linda Underhill
Barbara Cerio-Iocco
Liz Kmiecinski
Bromatologo en la Educación de la Nutricion

Examen para el diabetes

Direcciones: Conteste por favor las preguntas siguientes como mejor usted pueda.

1. ¿Cuanto tiempo hace que usted tiene diabetes?
    ___ Desde niñez   ___ 5-7 años
    ___ 0-1 año   ___ 2-4 años
    ___ 8 o más años

2. ¿Usted tiene el equipo para chequear su nivel de azúcar en la sangre? Si/No (círculo uno)

    a. ¿Sabe usted chequear su azúcar de la sangre?
        Si/No (círculo uno)
    b. ¿Cada cuanto tiempo chequea usted su nivel de azucar en la sangre?

    ___ Diario   ___ Semanal
    ___ Mensual   ___ Otro

3. A. ¿Cuántas comidas come usted al dia?   B. ¿Cuántas meriendas come durante el día?
    ___ 1-2   ___ Ninguno   ___ 1-2
    ___ 3-4   ___ 3-4   ___ Más de 4

4. ¿Qué tipo de alimentos come usted normalmente?
    (Marque todo el que le apliqué)
    ___ Alimentos de preparación rápida   ___ Hecho en casa
    ___ Restaurante
    ___ Otro (especifique por favor)_____

5. ¿Dónde compra usted sus alimentos? (Marque todo lo que le aplica)
    ___ Tienda de comestibles   ___ Deli
    ___ Vendedor de calle   ___ Mercado de carne
    ___ Mercado de granjeros (Public Market)   ___ Tienda de conveniencia (ex: Wilson)
    ___ Restaurante
    ___ Otro (especifique por favor)_____

6. ¿Qué forma de transporte utiliza usted para conseguir sus alimentos?
    (Marque todo el que le apliqúe)
    ___ Coche   ___ Caminata
    ___ Línea Del Autobús   ___ Bicicleta
    ___ Taxi
    ___ Otro (especifique por favor)_____

7. ¿Que edad tiene usted?_____   Marque su sexo _____Hombre _____Mujer

8. Favor de marcar su raza
    ___ Mexicano   ___ Negro Africa-Americano
    ___ Cubano   ___ Blanco
    ___ Puerto Riqueno   ___ Indio
    ___ Dominicano   ___ Natural de Alaska
    ___ Otro (especifique por favor)_____

9. ¿Qué tipo de alimentos come usted normalmente? (circule todos los que le aplican)
    *   Por favor agrege otros alimentos a la lista de abajo.

FRUTA	ALMIDÓN	VEHÍCULO	DULCE/GRASOSO	CARNE	ALIMENTOS DE COMBINACIÓN
Jugo de Guayaba	Arroz	Viandas	Guacamole	Pollo	Arroz con pollo
Llantenes	Haba-negro	Batata Amarilla	Helado frito profundo	Longaniza	Borracha Fritas Cubanas
Plátanos verdes	Pan-mai'z	Ensaladas de lechuga con tomates	Flan y Sopapillas	Turquía	Burritos
Taniers	Cereal frío	Chiles verdes	Tortas mexicanas de boda	Carne de vaca	Enchiladas
Alcapurrias	Galletas de Soda	Salsas	Cachaca	Tajadas de Cerdo	Fajitas
Chayote	Harina de maíz	Patatas azules o púrpuras	Mezcal	Costillas de repuesto	Gorditas
Guanabana	Legumbres	Maíz	Mojito	Cerdo Adobado	Chalupas
Guayaba	Arroz español	Pimientas del chile	Amarillo	Pescados	Chilaquiles
Guineito nino	Habichuelas blancas	Gandules	Flan	Pollo Frito/Alas de Pollo	Tacos
Mango	Garbanzos	Yuca	Malta	Bacalaitos	Chile Blanco de Pollo
Papaya	Coloradas	Zanahorias	Pudin	Camarones al ajillo	Menudo
Naranjas	Papas fritas	Apio	Mantequilla	Ropa Vieja	Chile
Manzanas	Tallarines	Tomate	Helado	Pollo asado con ajo	Tamales
Peras	Patatas trituradas	Habas Verdes		Bacalao	Sorullos de maiz
Uvas	Cereal caliente			Chicharron	Arroz con gandules
				Pernil	Arroz con salchichas
				Queso Blanco	Hibicheula guisadas
				Tocino	Aji Dulce
				Huevos	Alcapurrias
					Almojabanas
					Empanadas
					Arroz con gandules
					Mofongo
					Pastelillo
					Relleno de Papa con carne
					Espagueti con albóndigas