Your future health ...  
Su salud de mañana ...

in your hands today  
en sus manos hoy
I. STUDY HIGHLIGHTS

• The three risk factors that contribute up to a 60% of possibility of developing cancer are:
  ✓ Smoking
  ✓ Poor diet, and
  ✓ Physical inactivity

• The Mexican American Cohort Study has made great strides in understanding not only this three factors but additional ones in our community
1. **Acculturation**

- It’s the process of learning about a new culture and incorporating some of its aspects (language, food, etc.) into the background culture.
- Our study has demonstrated that among Mexican-born participants, a higher level of acculturation:
  - not only predicted **history of**, but also **resulted in a higher prevalence of smoking**
  - Was directly associated with **risk of obesity** in US-born Mexican Americans.
- Our study actively collaborates with other research groups developing interventions aimed at providing health education and promoting healthy behaviors taking into account the cultural beliefs of our community.
2. SMOKING

- Smoking continues to be the number one cause of preventable deaths in the US. One out of three cancer deaths in the United States is caused by smoking. Longer duration and greater intensity of smoking increase the risk of lung cancer significantly.

- Our study has shown that smoking-susceptible Mexican-American adolescents were more likely to:
  - hold more positive expectations about smoking
  - have a parent, brother, or friend who smoked
  - believe their peers approve of their smoking
  - report more temptations to try smoking
  - report lower subjective social status at school
  - have had a detention during the school year

- Our study actively collaborates with other research groups developing interventions aimed at providing health education and promoting healthy behaviors taking into account the cultural beliefs of our community.
Baseline questionnaire sections

I. DEMOGRAPHICS
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I. DEMOGRAPHICS

This page covers basic demographics for the participants of the cohort study. The percentage born in Mexico by gender. As well as education level broken down by gender.

- Total households: 18,962
- Total Participants: 26,672
- FU rate: ~78%

In the bar chart, 23% of participants are male and 77% are female. In the pie charts, 67% of males and 74% of females are born in Mexico. For education level broken down by gender, 83% of males and 83% of females have an HS education level.
II. PAST MEDICAL HISTORY

• In the past medical history, we collect information from participants detailing any medically diagnosed conditions.

• Hypertension and Diabetes are two that are high in the Mexican American community.

• The following slide has cancer cases reported to the cohort. Prevalence is the number of cases while incidence is the number of new cases.
## II. Past Medical History - Cancer Cases (Until June 30th, 2018)

<table>
<thead>
<tr>
<th>Type of Primary Cancer Confirmed from TCR and MR</th>
<th>Prevalent (38.7%)</th>
<th>Incident (61.3%)</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Female</td>
<td>Male</td>
<td>TOTAL</td>
</tr>
<tr>
<td><strong>All Cancers</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Breast</td>
<td>176</td>
<td>0</td>
<td>176</td>
</tr>
<tr>
<td>Digestive System</td>
<td>35</td>
<td>28</td>
<td>63</td>
</tr>
<tr>
<td>Female Reproductive System</td>
<td>89</td>
<td>89</td>
<td>89</td>
</tr>
<tr>
<td>Lymphatic and hematopoietic tissue</td>
<td>35</td>
<td>15</td>
<td>50</td>
</tr>
<tr>
<td>Male Reproductive System</td>
<td>45</td>
<td>45</td>
<td>45</td>
</tr>
<tr>
<td>Endocrine</td>
<td>32</td>
<td>1</td>
<td>33</td>
</tr>
<tr>
<td>Urinary System</td>
<td>13</td>
<td>16</td>
<td>29</td>
</tr>
<tr>
<td>Lungs</td>
<td>8</td>
<td>5</td>
<td>13</td>
</tr>
<tr>
<td>Other &amp; unspecified sites</td>
<td>37</td>
<td>24</td>
<td>61</td>
</tr>
</tbody>
</table>
III. ACCESS TO HEALTH CARE AND SCREENINGS

• The following slides show data on participant access to health care. If they have access, what kind of insurance provider do they have.

• Also a slide on how often the participants frequent their health care provider. As well as how the participant would rate their own health on a scale from 1-5, 1 being poor and 5 being excellent.

• The screening slide has statistical information about how many of our participants have not colonoscopy, mammograms, or PAP tests performed in the past.
III. ACCESS TO HEALTH CARE

Health Insurance

- Self: 54%
- Sp./Prtn: 51%
- Kids: 74%
- W: 85%

Medicare / Medicaid

- Self: 14%
- Sp./Prtn: 10%
- Kids: 59%

Gold Card - CHIP

- Self: 60%
- Sp./Prtn: 55%
- Kids: 45%
- CHIP: 30%

Job

- Self: 16%
- Sp./Prtn: 23%
- Kids: 12%

Private

- Self: 5%
- Sp./Prtn: 4%
- Kids: 3%
### III. ACCESS TO HEALTH CARE

#### Health Score

- **Poor** 6%
- **Fair** 39%
- **Good** 39%
- **Very Good** 10%
- **Excellent** 7%

#### Frequency – Medical Checkup

- **Once a year**: 64%
- **Only when sick**: 19% 13%
- **Rarely or never**: 18% 9%

#### Frequency – Dental Checkup

- **Once a year**: 30% 39%
- **Only when tooth problem**: 36% 39%
- **Rarely or never**: 34% 22%
IV. SCREENING

**RED** denotes “never had” while **GREEN** denotes “have had”

Never had a colonoscopy

- 80%

Ever had a mammogram

- 68%

Ever had a PAP test

- 98%

Mexican American Cohort Study
V. ACCULTURATION

- Acculturation is defined as a cultural modification of an individual, group, or people by adapting to or borrowing traits from another culture.
- This is important because as a new member of society changes to adapt to their new environment, they often change their social structure as well as their eating habits.
- In the following slide, we have data for four acculturation aspects. The percentage of participants which speak Spanish at home, watch Spanish TV, eat a primarily Mexican diet, and have mostly Mexican friends.
V. ACCULTURATION

Speak Spanish at home
- M: 84%
- F: 88%

Watch Spanish TV
- M: 63%
- F: 72%

Have Mexican friends
- M: 67%
- F: 68%

Mexican diet
- M: 50%
- F: 48%
VI. PHYSICAL ACTIVITY

- Physical activity is a key lifestyle factor for maintaining a healthy balance. The data below shows that of all the participants, female participants reported spending more time sitting and less time achieving recommended physical activity.

<table>
<thead>
<tr>
<th></th>
<th>Born in</th>
<th>México</th>
<th>EEUU</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>M</td>
<td>F</td>
<td>M</td>
</tr>
<tr>
<td>Does NOT meet the recommendations for physical activity</td>
<td>55%</td>
<td>81%</td>
<td>58%</td>
</tr>
<tr>
<td>Sitting more than 3 hours every day</td>
<td>21%</td>
<td>79%</td>
<td>26%</td>
</tr>
</tbody>
</table>

Below are the percentage of male and females in the work force and some of the key exposures they face in the workplace.

**VII. WORK HISTORY**

**Currently Work**
- Males: 81%
- Females: 46%

**Exposure to Pesticides**
- Males: 23%
- Females: 10%

**Exposure to Paint / Solvents**
- Males: 33%
- Females: 5%

**Exposure to Cleaning Chemicals**
- Males: 21%
- Females: 26%
VIII. LIFESTYLE HABITS

- There are certain lifestyle habits that raise the risk of developing different diseases, mainly smoking and alcohol.
- These happen to be the most notable set of behaviors with our participants, 55% of males are smoking or quit and 19% of females are smoking or quit. While 74% of our male participants drink alcohol or have quit and 20% of females drink alcohol or quit.
X. MEDIA USAGE

- A key usage of communication technology in the population of the Mano a Mano Cohort is Facebook.
- It is noted that 97% of participants has daily use of the social media platform.
"We decided to participate in this important study because we believe that with the information that gets collected, researchers will be able in the future to prevent disease among the Hispanic population"