Published in final edited form as:

Health Promot Pract. 2017 January ; 18(1): 102–109. doi:10.1177/1524839915614800.

Lessons learned about motivation from a pilot physical activity intervention for African American men

Emily K. Cornish, M.P.H.,

Clinical Research Coordinator, Institute for Research on Men's Health at Vanderbilt University Medical Center in Nashville, TN

Dr. Sydika A. McKissic, Ph.D.,

Managing Director, Institute for Research on Men's Health at Vanderbilt University Medical Center in Nashville, TN

Donnatesa A. L. Dean, B.S., and

MPH candidate, Brown School of Social Work, Washington University in St. Louis in St. Louis, MO

Dr. Derek M. Griffith, Ph.D.

Associate Professor, Center for Medicine Health and Society; Director, Institute for Research on Men's Health at Vanderbilt University in Nashville, TN

Abstract

African American men are less likely than white men to meet physical activity recommendations, and few physical activity interventions have focused on the unique needs of African American men. Because health is not more important to men than fulfilling the roles of a provider or other socially important roles, one of the biggest challenges in creating interventions for African American men is helping them identify reasons that they should prioritize both health and life goals. In a recent pilot physical activity intervention for 30–70 year old African American men, we used Self-determination Theory and Motivational Interviewing principles to create worksheets that helped men identify their core values and life goals and asked them to describe how their values and goals were related to health and physical activity. We used basic statistics and thematic analysis to identify and examine key sources of motivation for men to be healthier and more physically active. We found that being healthy, a good Christian, a good spouse/partner, disciplined, and successful were among men's most important life goals. This article highlights a strategy for identifying key sources of motivation in African American men's lives and key themes that can be used in to enhance future interventions.

Keywords

African American men; physical activity motivation; self-determination theory; motivational interviewing; health communications; men's health

Despite the health benefits associated with regular physical activity, approximately half of African American men report no leisure time physical activity. African American men over age 45 are less likely than their white counterparts to participate in leisure time physical activity or walking for exercise (Brownson, Boehmer, & Luke, 2005). One of the biggest barriers to African American men being healthy or physically active is lack of motivation to devise strategies to overcome time, environmental and social barriers (Friedman, Hooker, Wilcox, Burroughs, & Rheaume, 2012). The goal of this study is to identify core values and life goals that serve as sources of motivation for African American men to be healthy and physically active.

Habitual physical activity is protective against a variety of chronic diseases and physiological changes that tend to occur with aging (Griffith, Gunter, & Allen, 2012; Griffith & Thorpe, in press; Kahn et al., 2002)(Kahn et al., 2002). Literature shows that increasing physical activity results in physiologic improvements, affecting endurance, strength, body composition, insulin sensitivity, and lipid levels (Kahn et al., 2002). The National Heart, Lung and Blood Institute (NHLBI) currently recommends that adults participate in at least 150 minutes of moderate-intensity aerobic activity or 75 minutes of vigorous-intensity aerobic activity each week (NHLBI, 2011). While it is important to aim to achieve or exceed NHLBI recommended levels of physical activity, increased physical activity at any level provides a health benefit (NHLBI, 2011).

Reviews of physical activity or physical fitness intervention studies highlight the dearth of knowledge that exists about unique sources of motivation that help African American men initiate and sustain an active lifestyle (Newton Jr, Griffith, Kearney, & Bennett, 2014). Across reviews of physical activity or physical fitness studies with African American adults (Whitt-Glover et al., 2014; Whitt-Glover & Kumanyika, 2009), reviews of faith-based physical activity interventions (Lancaster, Carter-Edwards, Grilo, Shen, & Schoenthaler, 2014) and reviews of studies in men that focused on worksites, walking groups and physical activity (George et al., 2012; Kassavou, Turner, & French, 2013; Wong, Gilson, van Uffelen, & Brown, 2012), few studies included African American men. Despite their high rates of chronic disease, premature mortality and obesity, there have been no rigorously designed community-based, behavioral interventions to promote physical activity for African American men (Newton, Griffith, Kearney, & Bennett, 2014).

Self-Determination Theory and Motivational Interviewing principles provide guidance on identifying sources of motivation that are personally relevant and rewarding for their own sake. Autonomous motivation is the primary factor that can help people find the resources to overcome environmental, social and psychological factors that limit physical activity (Ryan, 1997). Interventions that enhance autonomous motivation and perceived competence and are consistent with a person's values and goals are believed to be more effective at increasing physical activity than messages focusing on external rewards (e.g. pleasing others, fear of disease, avoiding guilt, anxiety, shame or consequences) (Resnicow et al., 2008). Thus, interventions that promote physical activity and healthy lifestyles in African American men should use principles of Self-Determination Theory and Motivational Interviewing by connecting health promotion to personally relevant values and goals within study messaging and communication (Newton et al., 2014).

Men on the Move – Nashville was a pilot physical activity intervention for African American men ages 30-70. An aspect of this pilot study was to identify strategies to motivate middle-aged and older African American men (ages 30-70) to be more physically active. In this paper, we present data from the small group worksheets that participants completed during the intervention to help them articulate their sources of motivation and how being healthier and more active could help them achieve their goals.

Methods

Setting

We conducted this study in Nashville, Tennessee (Davidson County), the second largest metropolitan statistical area in Tennessee (U.S. Census Bureau, 2012). Comprising approximately 28.4% of the population (U.S. Census Bureau, 2012), African Americans in Nashville have increased morbidity rates from diseases such as diabetes, lung, prostate and colorectal cancer, and heart disease (Davidson County Health Department, 2014). African American men also have a shorter life expectancy than Non-Hispanic white men living in the area (Davidson County Health Department, 2014).

Recruitment and Study Enrollment Criteria

Using snowball sampling, we recruited participants via word of mouth, fliers, staff and partner organization social networks and our database of people interested in participating in our studies. Men were eligible to participate if they met all of the following criteria: 1) primarily identified their race/ethnicity as African American or Black; 2) were between the ages of 30-70; 3) were overweight (BMI > 25) or obese (BMI ≥ 30); 4) weighed less than 400 pounds; 5) were physically inactive (defined as <8 days of gym membership use in past 30 days); 6) used a cell phone with texting capabilities; and 7) were at low risk of contraindications of physical activity based on the Physical Activity Readiness Questionnaire (PAR-Q): a screening tool to determine the safety or possible risk of exercising for an individual, based on his self-reported answers to health history questions. If men answered yes to one or more questions on the PAR-Q, we required physician's approval to participate in the study (American College of Sports Medicine, Tharrett, & Peterson, 1997).

Participants

Table 1 summarizes the demographics and health characteristics of the intervention participants. We enrolled a total of 40 men in the pilot study and all were assigned to the intervention group. The mean age of the participants was 47 years old. Three-quarters of the men were married and approximately three-fifths of the men were obese (BMI ≥ 30). Though we did not recruit through churches, well over 90% of the men considered themselves very religious or very spiritual.

Study Context

Men on the Move – Nashville was a 10-week behavioral intervention that was conducted from August to October 2014. The main goal of this study was to pilot a multi-component intervention to increase physical activity in middle-aged and older African American men

who were overweight or obese. The intervention components included: 1) a Fitbit (accelerometer) to wear throughout the study, 2) SMS text messages sent three-times a week for eight-weeks and 3) weekly small group sessions led by certified personal trainers and included both group discussion and physical activity. Participants could receive a maximum of \$140 in incentives for completing biometric measurements and health assessment surveys throughout the study. All study protocols were approved by the Vanderbilt Institutional Review Board and we obtained informed consent from all participants.

In a previous iteration of the study that did not include utilization of a Fitbit, SMS text messaging or small group discussions, participants significantly improved self-reported levels and intensity of physical activity, perceived self-efficacy to sustain physical activity, overall health status, stress level and overall physical activity (Griffith, Allen, Johnson-Lawrence, & Langford, 2013). Despite these improvements, participants had difficulty finding the motivation to engage in physical activity outside of their small group sessions with the personal trainer (Griffith, Allen et al., 2013). Consequently, in addition to including Fitbit and SMS text messaging, this version of *Men on the Move* added worksheets to help men identify sources of motivation to be healthier and more physically active outside of the weekly sessions with a trainer.

We assigned participants to one of four weekly small groups based on their availability and a maximum of 10 men per group. The weekly sessions lasted one and a half hours and included 45 minutes of discussion and 45 minutes of physical activity. The discussion component of the small group session was led by a certified personal trainer and guided by worksheets designed by the principal investigator and research team to help men identify key sources of motivation to engage in physical activity and lead a healthier lifestyle. Following the discussion, worksheets were collected by the trainer and submitted weekly to study staff.

The *Men on the Move-Nashville* small group worksheets were based on a modified version of the values linkage exercise commonly used in Motivational Interviewing. The questions and format were adapted from a group-based motivational interviewing intervention for women with HIV (Holstad, DiIorio, Kelley, Resnicow, & Sharma, 2011). During the first session, the worksheet included a definition of core values and life goals: "Core values and life goals are your personal beliefs about how you should live your life or what you are trying to achieve in life." We then asked men to respond to the following prompt: "Here is a list of examples but you do not have to choose from our list. Circle 2-3 values or goals that are important to you." The list included 26 characteristics that Resnicow and colleagues found in previous research to be important aspects of African Americans' identities and potential sources of autonomous motivation; these characteristics included: being a good parent; good spouse; good provider; strong; competent; spiritual; good Christian; successful; responsible; etc. (Resnicow et al., 2008). The next question asked, "How might being as healthy as you can be help you to achieve these goals?" Followed by the question, "Health can affect your relationships with others, your work and other areas of your life. What are some areas of your life that could be better if you are healthier?"

In the third session, we asked men to revisit the same list of values and goals, and once again choose 2-3 core values or life goals that were important to them. Instead of following this by asking men about being healthy, we asked men, “How might being more physically active help you to achieve these goals?” We then asked men, “Being more active can help you at home, at work, with friends, with stress or just to feel better. What are some ways you hope being more physically active can help you?” This paper describes the open-ended responses to these small group session worksheet questions.

Data Analysis

Study staff collected the worksheets from the trainers and typed all of the responses verbatim into Microsoft Excel. This paper, however, only includes data from sessions that dealt explicitly with motivation: sessions one and three. Responses to the question that asked men to select 2-3 core values and life goals were recorded and we counted the number of times each value or goal was selected across participants. In addition to examining the frequency of goals and values being selected, we used thematic analysis to qualitatively analyze the responses to the other questions asked within sessions one and three (Miles & Huberman, 1994). Thematic analysis is used to identify, analyze and report themes and classifications that relate to the data, and this type of analysis is considered appropriate when researchers are seeking to discover, organize and describe interpretations of the data (Braun & Clarke, 2006). We used an inductive approach to create themes that best represented key concepts discussed by participants (Braun & Clarke, 2006). Potential questions, connections and implications of these themes were analyzed using our notes and a constant comparison approach to refine our thematic analysis and establish the final themes and identify their associations to motivation and physical activity (Miles & Huberman, 1994). Lastly, we recorded frequencies of the final themes. Quotes presented in this article reflect the diversity of perspectives and opinions that most prominently and reliably emerged from the data.

Results

Men on the Move – Nashville Outcomes

Overall results from this study showed significant increases in total minutes of physical activity ($P < 0.05$) and caloric expenditure ($P < 0.05$) per week for each level of physical activity measured using the CHAMPS questionnaire (i.e., all physical activity, moderate to vigorous, vigorous, and sports). Men also showed significant decreases in weight ($t(33) = 2.86$, $P < 0.05$) and body fat percentage ($t(33) = 2.63$, $P < 0.05$) from baseline to final assessment (Dean, Griffith, McKissic, Cornish, & Johnson-Lawrence, Under Review).

Connecting Core Values & Life Goals with Health

In the first small group session, we asked participants to identify their top 2-3 core values and life goals. The most frequently identified core values and life goals selected were: good Christian, healthy, and good spouse/partner (Figure 1). Following the identification of participants' top 2-3 goals, we asked the men to explain the relationship between their selected values and goals and how being healthy could help them achieve their goals. The themes that emerged in response to this question included: health improving life overall, increased energy level, positive family impact, viewing the body as a temple, physical

improvement, and increased ability for community involvement. The theme with the highest frequency was “health improving life overall”. As one participant described, “By keeping in [good] health allows a person to be a more effective in their personal and professional life.” Another participant mentioned, “It’s [health] the basis, without it, it would be difficult to achieve these goals.” A third stated, “Good health opens the door to a longer and stronger life.”

To deepen the connection, we then asked participants to identify specific areas in their lives that could be better if they were healthier overall. In response to this question, the most common responses included increased energy level, improved family life and improved intimate relationships. One participant said his life would be better if he were healthier overall by having “More energy to keep up with my kids. More confidence to help with [my] job.” Another participant identified the potential to improve the “Relationship with my spouse, my kids, friends, and family.” A different participant said it would help with “My sexual relationship, and performance and stamina. At school I will have more energy to study and achieve academically.”

Connecting Core Values & Life Goals with Physical Activity

In the third small group session, we asked participants to re-identify their core values and life goals. Though initially the most frequently identified goals and values were, good Christian, healthy, and good spouse/partner, in session three the most frequently identified core values and life goals were: disciplined, healthy, and successful (Figure 2). We then asked participants to evaluate how increased physical activity could help them achieve these goals. Themes that emerged in response to this question included: increased energy level, increased self-awareness of one’s health, better quality of life overall, better family life, increased level of success overall, and increased discipline to attain goals. One participant stated, “It [physical activity] will give me more energy, it will give me more discipline, it helps me think better.” To deepen the connection between goal achievement and physical activity, we subsequently asked men, “What are some ways you hope being more physically active can help you?” Themes that emerged in response to this question included: reducing stress, increased energy and productivity, being able to go off medications, increased sense of life purpose, improved relationships and family life, and improved health overall. Participants hoped that being more physically active would help reduce stress and increase energy and productivity throughout the day. One participant identified physical activity as being able to “Reduce my overall stress. It would also give me more energy to spend time doing things that will help me move closer to my life goals.”

Discussion

This study provides insight into the core values and life goals that middle aged and older African American men have, and how they see these values and goals relating to their motivation to be healthier and more physically active. Based on our findings, the top three core values and life goals selected by participants as most important overall include: being healthy, being a good Christian, and being a good spouse/partner. The values and goals men selected are consistent with previous research that found that African American men’s

motivation to be healthy was interdependent with pro-social aspects of manhood (e.g., providing for their families, being a good spouse/partner) (Allen, Griffith, & Gaines, 2012; Griffith, Brinkley-Rubinstein, Thorpe Jr, Bruce, & Metzl, in press; Griffith et al., 2011; Ravenell, Johnson, & Whitaker, 2006; Griffith et al., in press). Health and physical activity often matter to African American men because it provides them the energy and opportunity to fulfill important family and community roles. (Allen et al., 2012; Evans, Frank, Olliffe, & Gregory, 2011; Griffith, Ellis, et al., 2013; Griffith et al., 2011). However, motivation to engage in physical activity is often decreased due to the difficulty and stress that African American men face in their efforts to fulfill key gendered social roles such as: worker, provider, father and spouse/partner (Griffith, Ellis, et al., 2013; Griffith et al., 2011).

Interestingly, the core values and life goals chosen by the men in weeks one and three differed even though they were presented with the same question. In week one the men identified good Christian, healthy and good spouse/partner. In week three the most frequently chosen goals and values were disciplined, healthy and successful. Although the core values and life goals varied between these two weeks, the themes that emerged from the explanation of these responses remained consistent with increased energy level being the most frequent theme for both weeks. This suggests that how men label their core values and life goals may vary over time but how these factors affect health and physical activity may be more stable.

This study also identified spirituality as an especially important and frequently identified value among African American men. When compared with white men, African American men report higher levels of religious participation and spirituality, are more likely to utilize prayer for health reasons, and self-identify spirituality as part of manhood (Hammond & Mattis, 2005). This relationship between spirituality and health is consistent with other research that highlights the significance of incorporating spirituality and religiosity in messages as a source of motivation for healthy behavior change (Resnicow et al., 2002). Thus, it is important to identify strategies to build on African American men's spirituality as a source of motivation in future studies to improve health.

In addition to dynamic perceptions of core values and life goals and their relationship to health and health behavior, these findings also are congruent with research that found that time commitments, prioritization of employment, family and community responsibilities are barriers to physical activity (Bopp et al., 2006; Griffith et al., 2011). Furthermore, age and gendered notions have been found to compete with men's efforts to engage in healthy behavior, particularly physical activity (Griffith, Ellis, et al., 2013; Griffith et al., 2012). Men in this study discussed barriers and ways to overcome them, such as finding structured opportunities to engage in physical activities that they enjoyed. In the small groups men also discussed goals and facilitators related to engaging in physical activity. Men reported an overall increase in the average weekly minutes of physical activity, greater than the number of minutes spent in the small group session. From this we gather that the worksheets and messaging within this intervention enhanced motivation and played a role in helping participants overcome barriers and finding time to engage in physical activity outside of their small group session. Because of this, and the fact that manhood among African American men is relationally constructed (Griffith, in press; Griffith et al., in press;

Hammond & Mattis, 2005), it is important for interventions to incorporate messaging that reflect men's goals and values to increase motivation and not just try to encourage men to be more physically active simply for the health benefits.

Study Limitations

Although the men involved in this study provided some unique insights, several limitations of this study should be noted. All men who participated in a given session did not complete or turn in the worksheet. Worksheets were completed anonymously, so we were unable to link demographic information to worksheet responses. If men missed a session, we did not have a mechanism to gather worksheet responses from them. Finally, we did not have a way to connect worksheet responses or responses on the worksheets to physical activity.

Implications for Practice

Research has found that interventions that connect intrinsically motivating factors such as an individual's core values and life goals, are believed to be more effective at increasing physical activity than messages focusing on external rewards (Resnicow et al., 2008). Therefore, interventions seeking to promote physical activity in African American men should aim to enhance autonomous motivation and perceived competence through incorporating personal values and goals and linking them to health and health behavior. The findings of this paper will be used to develop future health communications and behavioral interventions to promote physical activity and healthy lifestyles among this population.

Conclusions

This study highlights core values and life goals that middle-aged and older African American men identified as important to them. Participants also connected these values and goals to their motivation to increase their physical activity and improve their overall health. Furthermore, this study highlights the key roles that relational notions of manhood and health may play in motivating men to be healthier and more physically active. Regardless of setting, it may be important to incorporate spirituality and religiosity in health promoting messages and interventions for middle aged and older African American men.

Acknowledgments

This manuscript has been supported in part by the Vanderbilt Ingram Cancer Center (5-P30-CA68485-17), Aetna Foundation Inc. (15-0046), NIDDK (7 R21 DK095257-02). We would also like to thank the men who participated in Men on the Move – Nashville.

References

- Allen JO, Griffith DM, Gaines HC. "She Looks out for the Meals, Period": African American Men's Perceptions of How Their Wives Influence Their Eating Behavior and Dietary Health. *Health Psychol.* 2012; doi: 10.1037/a0028361
- Tharrett SJ, Peterson JA. American College of Sports Medicine. Human Kinetics. 1997. ACSM's Health/fitness Facility Standards and Guidelines.
- Bopp M, Wilcox S, Laken M, Butler K, Carter RE, McClorin L, Yancey A. Factors associated with physical activity among African-American men and women. *American Journal of Preventive Medicine.* 2006; 30(4):340–346. [PubMed: 16530622]

- Braun V, Clarke V. Using thematic analysis in psychology. *Qualitative research in psychology*. 2006; 3(2):77–101.
- Brownson RC, Boehmer TK, Luke DA. Declining rates of physical activity in the United States: what are the contributors? *Annual Review of Public Health*. 2005; 26(1):421.
- Davidson County Health Department. Healthy Nashville. 2014. 2014, from <http://www.healthynashville.org/modules.php?op=modload&name=NS-Indicator&file=index&group=category&breakout=all>
- Dean DAL, Griffith DM, McKissic SA, Cornish EK, Johnson-Lawrence V. Men on the Move - Nashville: Effects of technology-enhanced, culturally-sensitive physical activity intervention for overweight and obese middle and older-age African American men. Under Review.
- Evans J, Frank B, Oliffe JL, Gregory D. Health, Illness, Men and Masculinities (HIMM): a theoretical framework for understanding men and their health. *Journal Of Men's Health*. 2011; 8(1):7–15.
- Fortier MS, Williams GC, Sweet SN, Patrick H. Self-Determination theory: Process models for health behavior change. *Emerging theories in health promotion practice and research: Strategies for improving public health*. 2009; 2:157–183.
- Friedman DB, Hooker SP, Wilcox S, Burroughs EL, Rheaume CE. African American men's perspectives on promoting physical activity: “We're not that difficult to figure out!”. *J Health Commun*. 2012; 17(10):1151–1170. DOI: 10.1080/10810730.2012.665424 [PubMed: 22808914]
- George E, Kolt G, Duncan M, Caperchione C, Mummery WK, Vandelanotte C, et al. Noakes M. A Review of the Effectiveness of Physical Activity Interventions for Adult Males. *Sports Medicine*. 2012; 42(4):281–300. DOI: 10.2165/11597220-000000000-00000 [PubMed: 22350570]
- Griffith DM. I AM a Man: Manhood, Minority Men's Health and Health Equity. *Ethnicity & disease*. in press.
- Griffith DM, Allen JO, Johnson-Lawrence V, Langford A. Men on the Move: A Pilot Program to Increase Physical Activity Among African American Men. *Health Education & Behavior*. 2013; doi: 10.1177/1090198113496788
- Griffith DM, Brinkley-Rubinstein L, Thorpe RJ Jr, Bruce MA, Metzl JM. The interdependence of African American men's definitions of manhood and health. *Family & community health*. in press.
- Griffith DM, Ellis KR, Allen JO. Intersectional approach to stress and coping among African American men. *American Journal of Men's Health*. 2013; 7(4S):16–27.
- Griffith DM, Gunter K, Allen JO. Male gender role strain as a barrier to African American men's physical activity. *Health Education & Behavior*. 2011; 38(5):482–491. DOI: 10.1177/1090198110383660 [PubMed: 21632436]
- Griffith DM, Gunter K, Allen JO. A systematic approach to developing contextual, culturally, and gender sensitive interventions for African American men: The example of Men 4 Health. In: Elk R, Landrine H, editors *Cancer Disparities: Causes and Evidence-Based Solutions*. NY: Springer Publishing; 2012. 193–210.
- Griffith DM, Thorpe RJ. Men's physical health and health behaviors. In: W YJ, Wester SR, editors *APA Handbook on the Psychology of Men and Masculinities*. Washington, DC: American Psychological Association; in press
- Hammond WP, Mattis JS. Being a man about it: manhood meaning among African American men. *Psychol Men Masc*. 2005; 6(2):114–126. DOI: 10.1037/1524-9220.6.2.114
- Holstad MM, DiIorio C, Kelley ME, Resnicow K, Sharma S. Group motivational interviewing to promote adherence to antiretroviral medications and risk reduction behaviors in HIV infected women. *AIDS and Behavior*. 2011; 15(5):885–896. [PubMed: 21165692]
- Kahn EB, Ramsey LT, Brownson RC, Heath GW, Howze EH, Powell KE, et al. Corso P. The effectiveness of interventions to increase physical activity: A systematic review. *American Journal of Preventive Medicine*. 2002; 22(4):73–107. [PubMed: 11985936]
- Kassavou A, Turner A, French DP. Do interventions to promote walking in groups increase physical activity? A meta-analysis. *International Journal of Behavioral Nutrition and Physical Activity*. 2013; 10(1):18. [PubMed: 23388115]
- Lancaster KJ, Carter-Edwards L, Grilo S, Shen C, Schoenthaler AM. Obesity interventions in African American faith-based organizations: a systematic review. *Obesity Reviews*. 2014; 15:159–176. DOI: 10.1111/obr.12207

- Miles MB, Huberman AM. Qualitative Data Analysis: An Expanded Sourcebook. Thousand Oaks, CA: Sage Publications; 1994.
- Newton RL, Griffith DM, Kearney WB, Bennett GG. A systematic review of weight loss, physical activity and dietary interventions involving African American men. *Obesity Reviews*. 2014; 15:93–106. DOI: 10.1111/obr.12209 [PubMed: 25196408]
- NHLBI. Recommendations for Physical Activity. 2011. Retrieved October 19, 2013, 2013, from <http://www.nhlbi.nih.gov/health/health-topics/topics/phys/recommend.html>
- Ravenell JE, Johnson WE, Whitaker EE. African American men's perceptions of health: a focus group study. *Journal of the National Medical Association*. 2006; 98:544–550. [PubMed: 16623067]
- Resnicow K, Davis R, Zhang G, Konkel J, Strecher V, Shaikh A, et al. Wiese C. Tailoring a Fruit and Vegetable Intervention on Novel Motivational Constructs: Results of a Randomized Study. *Annals of Behavioral Medicine*. 2008; 35(2):159–169. DOI: 10.1007/s12160-008-9028-9 [PubMed: 18401673]
- Resnicow K, Jackson A, Braithwaite R, DiIorio C, Blisset D, Rahotep S, Periasamy S. Healthy Body/Healthy Spirit: a church-based nutrition and physical activity intervention. *Health Educ Res*. 2002; 17(5):562–573. [PubMed: 12408201]
- Ryan RM, Frederick CM, Lepes D, Rubio N, Sheldon KM. Intrinsic motivation and exercise adherence. *International Journal of Sport Psychology*. 1997; 28:335–354.
- U.S. Census Bureau. Annual Estimates of the Resident Population: April 1, 2010 to July 1, 2012. American Fact Finder. 2012. Retrieved 12/31/2014, 2014, from <http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?src=bkmk>
- Whitt-Glover MC, Keith NR, Ceaser TG, Virgil K, Ledford L, Hasson RE. A systematic review of physical activity interventions among African American adults: evidence from 2009 to 2013. *Obesity Reviews*. 2014; 15:125–145. DOI: 10.1111/obr.12205 [PubMed: 25196410]
- Whitt-Glover MC, Kumanyika SK. Systematic review of interventions to increase physical activity and physical fitness in African-Americans. *AmJHealth Promot*. 2009; 23(6):S33–S56.
- Wong JYL, Gilson ND, van Uffelen JGZ, Brown WJ. The Effects of Workplace Physical Activity Interventions in Men: A Systematic Review. *American Journal of Men's Health*. 2012; 6(4):303–313. DOI: 10.1177/1557988312436575

Figure 1. Frequency of Core Values and Goals chosen as important by Men on the Move - Nashville participants during session on motivation to be healthy. N=26

Note: The goals and values are presented in this table in the order in which they appeared on the worksheets

Figure 2. Frequency of core values and life goals chosen as important by Men on the Move-Nashville participants during session on motivation to be more physically active, N=21

Note: The goals and values are presented in this table in the order in which they appeared on the worksheets

Table 1
Sample characteristics of Men On The Move Nashville Participants

Characteristic	Percentage	Number
Demographics		
African American men	100%	40
Average age (years)	Mean = 47.2; range = 31-68	
Weight (lbs.)	Mean = 242.08; range = 150-398	
Married/in a relationship	75%	30
Mean household size (people)		3.3
Income		
< \$24,999	15%	6
\$25,000-\$49,999	25%	10
> \$50,000	55.0%	22
Somewhat/very difficult to pay bills	50%	20
Health		
Obese (BMI ≥ 30, kg/m ²)	67.5%	27
Attitudes about physical activity		
Very confident could set aside time for physical activity (at least 30 minutes, 3 times a week)	47.5%	19
Physical Activity Readiness		
Currently engage in regular physical activity	45%	18
Been regularly active for the past 6 months	35%	14
Religion		
Attend religious services	92.5%	37
Moderately or Very Religious	85%	34
Moderately or Very Spiritual	97.5%	39