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# **Highway Safety Needs of U.S. Hispanic Communities: Issues and Strategies**

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16. Abstract <p>Growing diversity within the U.S. population is presenting new challenges to the National Highway Traffic Safety Administration and other agencies that serve the public. One of the fastest growing demographic groups is the Hispanic population. The term Hispanic encompasses a number of communities that differ in their cultural heritage. The objective of this study was to identify the highway safety needs of Hispanic communities within the United States. The study also explored how best to promote highway safety issues to those communities and identified similarities and differences among the Hispanic communities on highway safety issues. Telephone discussions were held with representatives of public and other agencies actively engaged with Hispanic communities in California, Texas, Colorado, the District of Columbia, New York City/New Jersey, and Florida. In addition, focus groups were conducted with adolescent males, young adult males, young adult females, and parents of young children.</p> <p>Drinking and driving was the safety problem most frequently identified by the organizational representatives and community members, followed by nonuse of safety belts. In promoting health and safety, community members recommended developing themes that have some relationship to their lives, and agreed that the family is one of the most powerful symbols in the Hispanic community. The organizational representatives emphasized the importance of personal contact and establishing relationships within the community.</p>					
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Representatives of 129 agencies and organizations participated in telephone discussions with project staff. The CDM Group appreciates the time these busy community leaders willingly devoted to this study. In addition, other agency and organization personnel responded to our requests for reports, surveys, and public education materials. Appendix A contains a complete list of the representatives of participating agencies and organizations who provided time, data, and valuable insights to this study.

Over three hundred community members participated in the forty-eight focus groups conducted during the study. The CDM Group appreciates the generous contribution of time and the wealth of ideas expressed by community members in the focus group locations. The CDM Group also appreciates the contribution of community members who served as focus group moderators. They assisted in the development of the moderator's guide and the recruitment of focus group participants and facilitated eight focus groups in their target areas. Focus group moderators for the study were:

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Los Angeles, California

Ben A. Romero, Interim Director  
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Front Range Community College  
Westminster, Colorado

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New York, New York

Rebeca Ramos, Director  
Training and Technical Assistance Project  
United States-Mexico Border Health Association  
El Paso, Texas

The CDM Group collaborated with several organizations in the target sites to plan and implement focus groups. CDM appreciates the contribution of the staff members who ensured that the focus groups would take place in comfortable and secure surroundings and that community members would participate. The following organizations served as focus group hosts: Barrio Action Group, Los Angeles, California; Mexican American Community Services Agency, San Jose, California; Denver Social Services Department, Denver, Colorado; Adams County Department of Social Services, Commerce City, Colorado; Valley-Wide Health Services, Alamosa, Colorado; Carlos Manuel Rosario Adult Education Center, Washington, DC; Bell Multicultural Senior High School, Washington, DC; Barbara Chambers Children's Center, Washington, DC; Wilson Center, Washington, DC; La Clinica Del Pueblo, Washington, DC; Vecinos en Acción, Miami, Florida; Val River & Son, Inc., Miami, Florida; Bronx Community College, Bronx, New York; Our Lady of Good Counsel, Staten Island, New York; Latino Civic Association, Staten Island, New York; El Paso YWCA, El Paso, Texas; and Avance, Rio Grande Valley Area Chapter, McAllen, Texas. Additional information about these organizations is provided in Appendix A.

Finally, Gerardo Berthin, Beverly Vigil Ellermann, and Elizabeth Younger worked with CDM staff as expert consultants during the course of the study.

## **EXECUTIVE SUMMARY**

### **Introduction**

The Hispanic population in the United States is growing seven times faster than the U.S. population as a whole. Hispanics are projected to compose at least 11 percent of the U.S. population by the year 2000, and 22 percent by 2050, becoming the Nation's largest minority group. This rapid population growth means that Hispanics will constitute an increasing proportion of crash injuries and fatalities. Moreover, Hispanics may be at greater crash risk than other segments of the population. Data collected by the National Vital Statistics System show that between 1988 and 1990, the death rate among Hispanics from motor vehicle crashes surpassed the death rates for African Americans and for whites.

This report presents the results of a study designed to identify the highway safety needs of Hispanic communities in the United States and determine how best to promote safety to those communities. Communities included in the study were Hispanics of Central American origin in the District of Columbia; Hispanics of Cuban origin in Florida; Hispanics of Mexican origin in California, Colorado, and Texas; and Hispanics of Puerto Rican origin in the New York City/New Jersey area.

### **Methodology**

The study involved telephone and onsite discussions with representatives from highway safety, law enforcement, emergency medical services, health, education, and general service agencies and organizations in the study's target sites. Telephone discussions consisted of five major topics: (1) agency involvement with the Hispanic community, (2) highway safety problems as perceived by community members, (3) relevant cultural factors to be considered in designing and implementing health promotion and injury prevention programs, (4) examples of successful program activity, and (5) referrals for data sources, additional telephone contacts, and focus group moderators.

Nearly 50 focus groups with community members were also conducted across the study sites. Separate focus groups were conducted with adolescent males, adult males, adult females, and parents of young children. Focus group moderators were bilingual and of the same Hispanic

ancestry as focus group participants. Focus group topics included perceived highway safety problems, characteristics of effective health and safety promotion messages, and access to community institutions and services.

### **Perceived Highway Safety Problems**

This report identifies the major highway safety problems in Hispanic communities and discusses the issues surrounding those problems. Although agency and organization representatives predicted that the degree of awareness and concern about highway safety would be low among community members, focus group participants turned out to be quite concerned about traffic safety problems in their communities. Community members most often cited drinking and driving as a problem, followed by nonuse of safety belts, speeding, inattention, and disregard for signs and signals. Agency and organization representatives agreed that drinking and driving is the number one problem and also mentioned nonuse of child safety seats as a serious issue.

### **Connectedness to Community Institutions**

This report also explores the connectedness of Hispanics to various community institutions, including those involving health, education, law enforcement, emergency medical services, and highway safety. Focus group participants indicated that the element of trust in agencies is the most important criteria for seeking services and choosing where to go for them. The presence of bilingual staff is also an important factor. They considered law enforcement and government agencies the most difficult organizations with which to work.

### **Effective and Ineffective Strategies**

Lastly, this report identifies effective and ineffective strategies for promoting health and safety to Hispanics. Focus group participants and telephone respondents expressed support for programs which are (1) highly personalized, (2) family-oriented, (3) culturally sensitive and relevant, and (4) non-confrontational. Community members were emphatic about the need to develop central themes that have some relationship to their lives. They called for graphic and explicit depictions of motor vehicle crashes and the impact on families. Study participants all agreed that the family is one of the most powerful symbols in the Hispanic

community. They emphasized that any public awareness campaign for the Hispanic community must feature the family. For example, study participants indicated that even males who may be hard to reach with messages about changing their driving behavior will respond positively to information about safety risks presented in the context of protecting family and friends from harm.

Agency and organization representatives emphasized the importance of personal contact and establishing relationships within the community. Building trust and confidence is integral to obtaining the community's involvement and commitment. The representatives stressed that an intervention is more acceptable to community members when there has been community involvement in the planning and implementation process. Programs that are perceived as having been developed by entities distant from the community are generally not received well. This is especially true when it is evident that decisions have been made about what is most beneficial for community members without any attempt to elicit their ideas and suggestions.

Study participants pointed out several strategies that should be avoided when working with Hispanic communities. They advised against impersonal approaches, the use of aggressive or enforcement-oriented messages, and the tendency to ignore the diversity within Hispanic communities. Presentations that could be construed as disrespectful or condescending must be avoided. For example, machismo should not be attacked or insulted; elders and women should be shown respect. Excluding key members of the community from program development and implementation is another key ingredient for failure, as this seriously undermines credibility.

Communication preferences vary for Hispanics based on their country of origin, immigration status, age, socioeconomic status, and rural or urban location. Recent immigrants may require basic information presented in Spanish. Service providers should avoid communicating in English when Spanish is more appropriate. Moreover, direct translation of materials from English to Spanish can lead to unfortunate errors and there may be differences in the way different Hispanic communities use the same Spanish words. When developing materials, program planners must involve individuals in the process who understand the nuances of the language and are sensitive to local usage. The Spanish media, including television, radio, and newspapers, has much potential for use in health and safety promotion.

But study participants indicated that they would welcome a greater Hispanic presence in reality-based shows and public service announcements on English television.

## **Conclusions**

This study found more similarities than differences among Hispanics of Central American, Cuban, Mexican and Puerto Rican ancestry when it comes to the safety problems that most affect their communities. There are of course differences in how programs might be developed and implemented with each of these Hispanic subgroups. In addition to a knowledge of respective cultural histories and traditions, program planners must account for the differences brought about by the degree of acculturation and the length of residence in the United States, as well as differences in urban and rural locations. But for all these populations the following guidelines for program development seem to apply.

- Community residents, particularly community leaders, should be involved in needs assessment and planning activities.
- Programs that focus on the good of the family or the community as a whole are generally more effective than those that focus on the individual.
- The use of community members as lay educators and the use of “real people” in public service announcements and posters or other print materials are preferred.
- Community-based organizations and key community institutions serving Hispanics are a valuable resource and can be used in program planning and implementation.
- Language issues are local issues. National programs must be developed carefully to accommodate local usage and should be field tested with different Hispanic groups to make appropriate corrections. Bilingual materials are generally preferred, but English only may sometimes be appropriate. To account for differences in literacy levels and to make materials more attractive and interesting, the use of photographs and illustrations is recommended.

- The Spanish print and electronic media can be used to advantage to transmit messages related to health and safety and to inform community members about new programs. The most effective medium may differ based on location. In this study, focus group participants in rural Texas and Colorado relied more on the radio, but District of Columbia participants also spoke highly of radio programs. In Los Angeles, television was the medium of choice whereas in San Jose, California, Spanish radio and the local Spanish language newspaper are important in disseminating information to the Hispanic community. In New York City, print materials were mentioned often, especially Spanish language newspapers and the opportunity to place print materials in designated areas on subway cars.
- Although Hispanic residents of the target sites criticized law enforcement and government agencies, they also expressed a respect for the role of these agencies in promoting public safety. Focus group participants merely asked that in accomplishing their mission, these agencies might strive to learn more about Hispanic culture and treat community members with more respect. The *El Protector* program (called *El Guardian* in San Jose, California) has had a positive effect in the communities where it has been established.

A list of the agency and organizational representatives who participated in this study is presented in Appendix A. Addresses and telephone numbers of the organizations are included.

# **I. INTRODUCTION**

## **Study Objectives**

The objective of this study was to identify the highway safety needs of Hispanic communities in the United States. This study also explored how best to promote safety issues to those communities. Further, the study identified similarities and differences among the Hispanic communities on highway safety issues. Objectives were achieved through:

(1) discussions with representatives from public and other agencies actively engaged with the Hispanic communities; (2) discussions with designated activists within those communities; and (3) focus groups with community members.

This study acknowledged the diversity among the U.S. Hispanic population by focusing on the following target groups and sites:

- Hispanics of Mexican ancestry residing in California, Colorado, and Texas;
- Hispanics of Cuban ancestry residing in Florida;
- Hispanics of Central American ancestry residing in the District of Columbia;  
and
- Hispanics of Puerto Rican ancestry residing in the New York City/New Jersey area.

## **Background**

Based on 1990 Census data, Hispanics are one of the most rapidly growing segments of the U.S. population. The Hispanic population totaled 22 million people, or 9 percent of the U.S. population in 1990, increasing 53 percent since 1980. The Hispanic population is growing seven times faster than the U.S. population as a whole, and is projected to comprise at least 11 percent of the U.S. population by the year 2000 and 22 percent of the population by 2050, becoming the nation's largest minority group (Day, 1993).

Half of all Hispanics in the United States live in California and Texas, and over 90 percent of Hispanic households are located in urban areas. In 1990, nearly seven out of every ten Hispanic Americans were younger than 35 years of age, compared to just over five out of every ten non-Hispanics. Only about five percent of Hispanics in the U.S. were age 65 or older compared to over 13 percent of non-Hispanics. In 1992, among Hispanic subgroups, persons of Cuban origin were oldest with a median age of 40, while persons of Mexican origin were the youngest with a median age of 24 years (U.S. Bureau of the Census, *Hispanic Americans Today*, 1993).

In 1991, one of every four Hispanic families lived below the poverty level. Included in this number are 25 percent of all families of Mexican origin, 37.5 percent of all families of Puerto Rican origin, 13.8 percent of all families of Cuban origin, 22.2 percent of all families of Central and South American origin. Hispanics with a family income of \$50,000 or more per year in 1990 (14.7 percent) include 12.2 percent of all families of Mexican origin, 14.1 percent of all families of Puerto Rican origin, 23.9 percent of all families of Cuban origin, and 16.6 percent of all families of Central and South American origin (U.S. Bureau of the Census, *Statistical Abstract*, 1993).

Hispanics of Mexican origin comprise approximately 64 percent (13.5 million persons in the 1990 census) of the Hispanic population in the United States and reside primarily in California, Texas, Arizona, New Mexico, and Illinois (U.S. Bureau of the Census, *Statistical Abstract*, 1993). Some Mexican Americans trace their U.S. citizenship to the early 1800s, when Mexico lost control of parts of the Southwest and Far West (now the states of New Mexico, Colorado, Utah, Nevada, Arizona, and California) and the Mexican natives living there became United States citizens. Others came into this country between World War II and the early 1960s, as agricultural workers.

According to the 1990 census, there are approximately 1.3 million Central American Hispanics in the United States. Salvadorans (565,000 persons), Guatemalans (269,000 persons), and Nicaraguans (203,000 persons) are the largest groups (U.S. Bureau of the Census, *Hispanic Americans Today*, 1993). The Central American Hispanic population is the newest subgroup to arrive in the United States, with most leaving El Salvador, Guatemala, and Nicaragua to escape political turbulence, civil wars, and economic hardship.

Hispanics of Puerto Rican ancestry, over 2.7 million persons, are concentrated primarily in New York, New Jersey, and Connecticut, and account for close to 13 percent of the Hispanic population (U.S. Bureau of the Census, *Statistical Abstract*, 1993). Puerto Ricans began to come to the mainland United States in significant numbers around 1900, settling in the New York City area. They continue to settle in this area, taking advantage of the familiar cultural environment and employment opportunities.

Hispanics of Cuban origin have settled primarily in Florida and account for 5 percent (slightly over one million persons) of the Hispanic population (U.S. Bureau of the Census, *Statistical Abstract*, 1993). Cuban immigrants have been arriving in waves directly related to the political turmoil in their home country. The first wave of immigrants was primarily upper class individuals who fled the onset of Communism with the rise to power of Fidel Castro in 1959. The influx of Cubans continued throughout the 1960s and 1970s and culminated in the Mariel boatlift which brought approximately 125,000 Cubans to the Miami area in a five month period. Additional waves of immigration have occurred in response to economic hardship and the Cuban political climate.

Changing demographics can be an indicator of increasing requirements for needs assessment activities and targeted information dissemination to certain population groups. As the Hispanic population has grown, there has been a corresponding increase in death and serious injury resulting from crashes on the nation's highways. Data collected by the National Vital Statistics System show that between 1988 and 1990, the overall death rate for motor vehicle crashes among Hispanics of all ages surpassed the death rates for African Americans and whites (Figure 1).

The National Highway Traffic Safety Administration (NHTSA) and others have achieved success in reducing the overall national rate of death and serious injury due to motor vehicle crashes. But the continuing rise in mortality among the Hispanic population is a matter of great concern and points to a need for intervention that is specifically targeted to those safety issues identified by members of the Hispanic community. Recent studies have become more rigorous in seeking insights about causes of motor vehicle crashes that go beyond the traditional focus on alcohol use, weather conditions, or the age of the driver. As a result, researchers have noted cultural factors that are relevant to safety issues.

Figure 1: Death Rates From Motor Vehicle Crashes (Deaths per 100,000 resident population) <sup>1</sup>						
	Hispanics		African Americans		Whites	
	1985-1987	1988-1990	1985-1987	1988-1990	1985-1987	1988-1990
All ages	16.8	19.7	17.9	18.7	19.6	19.2
1-14 years	5.8	6.4	7.6	7.4	6.9	6.4
15-24 years	28.4	32.0	21.7	23.4	40.1	38.1
25-44 years	19.3	23.0	22.7	23.2	20.8	20.6
45-64 years	16.1	19.1	19.8	20.6	14.9	15.3
65 years and older	20.3	25.0	20.8	22.8	22.3	23.5

In order to explore those cultural factors, this study sought information on similarities and differences in the target communities in areas such as norms and standards of behavior, relationships to key community institutions, length of residence in the United States, and the different challenges posed by urban and rural environments.

These factors are all key to the process of acculturation—the process of learning and behavioral adaptation that takes place as individuals are exposed to a new culture. According to Marín et al. in *Research with Hispanic Populations*, upon contact with a new culture, individuals may undergo a change in any or all of six areas of psychological function: language use, cognitive style, personality, identity, attitudes, and stress. This process of learning and adaptation can include an initial stage of crisis or conflict that is then followed by the acceptance of an adaptation strategy. In terms of attitudes, for example, an individual

<sup>1</sup> This table is adapted from *Health, United States, 1992*, National Center for Health Statistics. Data are shown only for States with an Hispanic-origin item on their death certificates. The 1990 reporting area for Hispanic origin of decedent included 45 States and the District of Columbia. Based on data from the Bureau of the Census, the 1990 reporting area encompassed an estimated 88 percent of the U.S. Hispanic population. (*Health, United States, 1992*)

can adapt by assimilation, integration, or rejection of the attitudes prevalent in the new culture. In terms of language, Hispanics may completely shift to English, become bilingual, or maintain Spanish as the primary language. One of the most easily measured changes produced by acculturation is language use, which is probably the reason why language has become a shorthand measure for evaluating acculturation. Acculturation has been shown to affect among other things Hispanics' mental health status; levels of social support; levels of social deviance, alcoholism, and drug use; political and social attitudes; and health behaviors such as the consumption of cigarettes and the use of preventive cancer screening practices. The process of acculturation may also affect the ease and rapidity with which Hispanics, particularly new immigrants, are integrated into the U.S. highway system.

The diversity of the Hispanic population is a challenge to program developers. Differences in country of origin, length of time in the United States, and reasons for immigrating to the United States are all factors that must be considered during program planning. The diversity of the population makes appropriate targeting of population groups a crucial issue. For example, third generation urban residents of Mexican ancestry may require a different programmatic approach than recent Central American immigrants. This study proceeded on the premise that the way to determine the most effective strategies for the diverse Hispanic population is to learn from community leaders who direct successful programs and from community members themselves.

## II. METHODS

### Selection of Target Sites

NHTSA selected six target areas: California, Colorado, the District of Columbia, Florida, New York City/New Jersey, and Texas. These areas include large concentrations of Hispanics as well as the diverse ancestries required by the study. Counties in each target area (except the District of Columbia) were selected as sites for study activity. The major criterion for selection of a particular county was the size of the Hispanic population, but consideration was also given to the need for inclusion of rural, urban and suburban areas. In California and Texas care was taken to include locations on the Mexican border so that any special problems or strategies unique to border areas could be identified. The following counties were selected for inclusion in the study after review and discussion by NHTSA central office and regional staff:

#### *California*

- Los Angeles County, a major urban/suburban area in southern California, has 2,703,345 residents of Mexican ancestry, the largest number in California.
- San Diego County is on the Mexican border and has the third largest number of residents of Mexican ancestry in California (441,333).
- Santa Clara County includes the city of San Jose and has 251,433 residents of Mexican ancestry, the largest number in northern California.
- Fresno County, a rural area in central California, has 227,096 residents of Mexican ancestry.

#### *Colorado*

- Denver County and Adams County are adjacent urban areas with the highest numbers of residents of Mexican ancestry in Colorado (76,067 and 36,211 respectively).

- Alamosa County, a rural area in the San Luis Valley, has the third highest number of residents of Mexican ancestry (29,872) in the State.

### *Texas*

- Harris County has 556,740 residents of Mexican ancestry, the highest number in Texas, and includes Houston.
- Bexar County has 544,887 residents of Mexican ancestry, the second highest number in Texas, and includes San Antonio.
- El Paso County has 394,255 residents of Mexican ancestry, the third largest number in Texas, and includes the city of El Paso. The county has unique safety concerns because of the proximity to the Mexican border and the heavy vehicle and foot traffic between the city of El Paso and Ciudad Juarez.
- Hidalgo County, a rural area in the Rio Grande Valley, has 317,031 residents of Mexican ancestry, the fourth largest number in the State. The cities of McAllen and Mission are the largest cities in the county and are on the Mexican border.
- Cameron County, also in the Rio Grande Valley, is a rural area with 183,891 residents of Mexican ancestry, the sixth largest number in the State. Cameron County is adjacent to Hidalgo County. Brownsville, the largest city in Cameron County, is on the Mexican border. Both Cameron and Hidalgo Counties are home to many recent immigrants.

### ***District of Columbia***

- Even though Salvadorans are the most populous Hispanic group residing in the Washington, DC area, two other prominent Central American groups included in the study were Guatemalans and Nicaraguans. In addition, the Langley Park area in Maryland was included because of the large number of Salvadoran residents.

### ***Florida***

- Dade County includes Miami and has the highest number of residents of Cuban ancestry (655,727) in the State.
- Broward County includes Fort Lauderdale and has the second highest number of residents of Cuban ancestry (33,594) in the State.
- Hillsborough County, located on the Gulf Coast, includes Tampa and has the third highest number of residents of Cuban ancestry (27,741) in the State.
- Monroe County, a rural area, has one of the largest numbers of residents of Cuban ancestry (5,252) outside the major urban areas of Florida.

### ***New York City/New Jersey***

- The Bronx, New York, has 427,126 residents of Puerto Rican ancestry, the highest number in the New York City/New Jersey area.
- Richmond County, New York, (Staten Island) includes Puerto Rican residents (17,583) who differ in socioeconomic status and levels of education from those residing in the Bronx and thus the data may be different. The driving patterns of Staten Island residents may also differ from those of Bronx residents, for whom public transportation is more accessible.
- Passaic County, New Jersey, has 56,709 residents of Puerto Rican ancestry, the second highest number in the New York City/New Jersey area.

## **Telephone Discussions**

### **Selection of Participating Agencies and Organizations**

Project staff developed a list of agencies and organizations operating within the target sites to participate in indepth telephone discussions. Agencies and organizations were drawn from a variety of sources, including recommendations from NHTSA staff and the use of reference materials. Sources used to identify agencies and organizations included the following:

- *The National Library of Medicine's Directory of Information Resources Online (DIRLINE);*
- *The Hispanic Americans Information Directory;*
- *Guide to Multicultural Resources;*
- *Taking the Lead: A Student Traffic Action Handbook*, a NHTSA publication with information about Governors' Highway Safety Offices in the target States;
- Clearinghouses and resource centers, such as the Office of Minority Health Resource Center within the U.S. Department of Health and Human Services; and
- Federally funded prevention projects with a multicultural focus, such as the Center for Substance Abuse Prevention's Community Partnership Demonstration Grant Program.

### **Development of Discussion Guides**

One hundred fifty-eight organizations were approved for inclusion in the study based on their geographic location, focus on health and safety issues, and degree of involvement with the Hispanic community. These organizations were grouped into six categories: Education, Emergency Medical Services (EMS), Health, Highway Safety, Law Enforcement, and General. Included in the General category were Hispanic Chambers of Commerce, media,

Offices of Hispanic/Latino Affairs, advocacy groups, and other community-based organizations whose activities were outside the scope of the more specific categories.

Separate discussion guides were developed for each of the six types of organizations to ensure that unique perspectives and programmatic activity were captured. The guides covered five main topic areas: (1) general information about the agency or organization and the extent of its involvement with the Hispanic community; (2) major highway safety problems as perceived by the agency and organization representatives; (3) cultural factors that should be taken into account when designing health promotion and injury prevention programs; (4) examples of successful programmatic activity; and (5) referrals for data sources, study participants, and focus group moderators.

### **Protocol for Telephone Discussions**

An introductory letter signed by the Director of the NHTSA Office of Program Development and Evaluation was mailed to the presidents or executive directors of the selected organizations in February 1994. The Governor's Highway Safety Office and State and City Departments of Transportation were contacted first in each target area. After contacting these agencies, project staff proceeded to contact the remainder of the organizations in their respective target areas. Telephone calls ranged from 45 minutes to three hours. Discussions were conducted in Spanish if that was the representative's preference, but most discussions were conducted in English. All discussions with agency and organization representatives in the District of Columbia were conducted at the agency/organization site. A thank-you letter was sent to all participants in the telephone discussions. Telephone discussions began in February 1994 and ended in June 1994.

## **Focus Groups**

Focus groups were conducted in Los Angeles and San Jose, California; Denver and Alamosa, Colorado; El Paso, Brownsville, La Casita, Colonia Linda Vista, and McAllen, Texas; the District of Columbia; Miami, Florida; and the Bronx and Staten Island, New York. Criteria for site selection included size of the Hispanic population, the need to have focus groups in urban and rural areas, and the desire to explore perspectives in border areas. Eight focus groups were conducted in each State and the District of Columbia. Focus groups were conducted from June 1994 through August 1994.

## **Selection of Categories of Focus Group Participants**

During the telephone discussions, agency and organization representatives provided their insights on those individuals within the targeted Hispanic communities that are most in need of traffic safety information and education. They identified young adult males as a significant cause of traffic safety problems and expressed the need for more programmatic activity targeted toward this group, particularly Hispanic males in their late teens and early twenties. They also expressed concern that parents of young children are in many cases reluctant to use child safety seats and seat belts despite numerous educational efforts and targeted programs. A perceived difference in male and female attitudes toward safety and prevention was also raised, with females being more likely to wear seat belts and use child safety seats, but showing reluctance to intervene to prevent an inebriated male from driving a vehicle. In addition, more young Hispanic women are driving, particularly in urban areas, and according to agency and organization representatives, these young women are displaying many of the same unsafe behaviors as young men. These considerations led to the selection of four categories of focus group participants:

- Adolescent males just beginning to drive (15–17 years old);
- Adult males 20 to 25 years of age;
- Adult females 20 to 25 years of age; and
- Parents of children six years of age and younger.

## **Selection of Focus Group Moderators**

During the telephone discussions, agency and organization representatives were asked for the names of suitable candidates for focus group moderators. Moderators selected to facilitate focus groups were from the area in which focus groups were held, were bilingual and of the same Hispanic ancestry as focus group participants, and had training and experience in group dynamics and group facilitation. A moderator's guide was developed for each of the four categories of focus group participants. The guides contained questions in four broad topic areas—perceived highway safety problems, integration into the highway system, effective safety messages, and access to community organizations and institutions. Each guide was developed in Spanish and in English.

A two-day training session for moderators in May 1994 provided an opportunity to discuss the goals and objectives of the project, the roles of moderator and notetaker, focus group logistics, and recruitment strategies. The moderators suggested revisions to the moderator's guide and revisions were implemented with NHTSA approval.

## **Focus Group Facilitation**

Project staff collaborated with community-based agencies and organizations for assistance in recruitment and logistical preparations for the focus groups. Moderators and host organizations used a screening questionnaire in recruiting participants. Potential focus group participants were asked if they drove, their ancestry, age, and their preference for having the focus group conducted in Spanish or English. Potential participants in the groups for parents were asked about the number and ages of their children. Project staff recruited 12 to 15 participants for each focus group, anticipating that no-shows would result in a group of approximately nine persons. Recruitment strategies included nominations from interested organizations, local newspaper advertisements in English and Spanish, and flyers.

Each focus group session lasted approximately two hours. In most groups, moderators and participants used both English and Spanish during the course of the discussion. The focus group notetaker, a member of the study staff, prepared a written report. These reports supplemented the audiotapes of the discussions.

## **Site Visits**

Project staff traveling outside the Washington, DC area to conduct focus groups also visited highway safety and health promotion programs identified during the telephone discussions. During these visits staff members observed programmatic activities, discussed outreach strategies, and collected materials produced by the programs. Staff submitted site visit reports describing these visits.

## **Data Analysis**

Notes from telephone discussions, reports and audiotapes from focus groups, and reports from site visits were reviewed and analyzed by study staff in order to compare and contrast the responses of agency and organization representatives to community members in regard to the identification of safety problems, the role of various agencies and organizations in alleviating those problems, and the most effective strategies for promoting increased awareness and safer behaviors among members of the Hispanic communities. Study staff looked for similarities and differences both within and among the different communities in regard to community norms and cultural distinctions.

## **Structure of Report**

Study findings are presented in three areas:

- Highway Safety Problems in Hispanic Communities.
- Connectedness of Hispanic Community Members to Highway Safety Organizations and Other Societal Institutions.
- Effective Strategies for Health and Safety Promotion.

Statements by study participants are summarized throughout the presentation of study findings. In some cases direct quotes from participants are used. Unless otherwise noted, quotes from agency and organization representatives are identified by State and quotes from focus group participants are identified by city, State, and focus group category.

### III. HIGHWAY SAFETY PROBLEMS IN HISPANIC COMMUNITIES

Most of the agency and organization representatives who participated in telephone discussions indicated that highway safety is not a major concern in any of the Hispanic communities targeted by the study. They mentioned housing, health care, employment and other economic issues, crime, gangs, and domestic violence as issues with far greater priority. As discussions continued, however, the degree of concern about highway safety issues and the extent of the problems related to driver, passenger, and pedestrian safety were revealed. In some of the target sites, tragic and well-publicized crashes involving Hispanics have raised the level of community awareness about traffic safety. Agency and organization representatives expressed concern that the increased awareness and possible behavior modification that occur after a tragedy do not last.

*"Traffic safety issues get lost because of so many social concerns. People are concerned after someone gets killed, then it dies down. We need educational reinforcement, not awareness."  
(Agency/Organization Representative, New York City/New Jersey)*

Agency and organization representatives and community members made numerous references to the major role of the Hispanic media in presenting safety issues to the Hispanic communities. Study participants, particularly in Florida and California, mentioned the increasing influence of the media not only in reporting tragedies, but in using those tragedies as teaching opportunities. In areas with a strong Hispanic media, study participants were more likely to cite highway safety as a major concern.

*"There is a developing consciousness [about traffic safety] due to increasing accidents, especially young DUIs. There is more commentary on the radio, more letters to the editor in newspapers, and more coverage on television." (Agency/Organization Representative, Florida)*

Although agency and organization representatives had predicted that the degree of awareness and concern about highway safety might be low among community members, focus group participants were quite concerned

about safety problems in their communities. They described the unsafe behaviors of drivers and pedestrians, but also enumerated perceived infrastructure disparities in their neighborhoods when compared with other, perhaps more affluent, environs. The condition of the roads and the lack of proper signage, warning signals, and crosswalks were highlighted by focus group participants.

The major highway safety problems identified by study participants are listed in Figure 2. Although both agency and organization representatives and focus group participants identified drinking and driving and seat belt use as the biggest problems in the Hispanic community, there were marked differences in the degree of importance assigned to other problems. For example, child safety seat use was far more likely to be mentioned as a serious passenger safety problem by agency and organization representatives than by focus group participants.

**Figure 2. Highway Safety Problems Identified by Study Participants**

<b>Highway Safety Problems Mentioned Most Often by Agency and Organization Representatives</b>	<b>Highway Safety Problems Mentioned Most Often by Focus Group Participants</b>
<ol style="list-style-type: none"><li>1. Drinking and driving</li><li>2. Seat belt use</li><li>3. Child safety seat use</li><li>4. Old unsafe vehicles</li><li>5. Crowded vehicles</li><li>6. Unlicensed and uninsured drivers</li><li>7. Speeding</li><li>8. Elderly drivers</li><li>9. Disregard for signs and signals</li><li>10. Inattention</li></ol>	<ol style="list-style-type: none"><li>1. Drinking and driving</li><li>2. Seat belt use</li><li>3. Speeding</li><li>4. Inattention</li><li>5. Disregard for signs and signals</li><li>6. Elderly drivers</li><li>7. Child safety seat use</li><li>8. Unlicensed and uninsured drivers</li><li>9. School buses</li><li>10. Old unsafe vehicles</li></ol>

## Drinking and Driving

Community members and representatives of community agencies and organizations in each of the target Hispanic communities were united in their view of drinking and driving as the greatest highway safety problem. Among focus groups, this was reported by participants in all age groups and in rural and urban environments. Alcohol was cited as the major influence on driver, passenger, and pedestrian safety.

*"The biggest problems are DUI, passengers under the influence of alcohol, and pedestrians being killed by drunk drivers. Alcohol is a big part of the culture and combined with machismo, heats the problem."  
(Agency/Organization Representative, California)*

Studies of the Hispanic subgroups have shown that alcohol consumption, especially among males, may be generally higher than among the U.S. population as a whole (National Institute on Alcohol Abuse and Alcoholism, 1989; Molina and Aguirre-Molina, 1994). Alcohol has been implicated in vehicular, motorcycle, and pedestrian deaths among Hispanic populations at rates somewhat above the norm for the country.

*"There is a need for more aggressive and culturally sensitive outreach programs on issues related to highway and traffic safety. There is a constant struggle in this community to deal with alcoholism and its impact on the individual, family, and community." (Agency/Organization Representative, District of Columbia)*

A recent study demonstrated that rates of arrest for impaired driving among Hispanic men were disproportionately high: 21

percent of those arrested for impaired driving nationally were Hispanic, while at the time of the study Hispanics accounted for only 9 percent of the population (Shine and Mauer, 1993). Studies sponsored by the Departments of Transportation in Texas and California have shown that Hispanics are disproportionately represented in arrests for driving under the influence of alcohol and other drugs.

Key issues related to alcohol consumption mentioned by study participants include the following:

- **Consumption of alcohol as proof of manhood.** Drinking and driving was described most often as a male problem. In urban areas, however, study participants acknowledged that younger Hispanic women are drinking more. According to women who participated in Miami focus groups, "Everyone thinks they can handle alcohol, especially men. Men take it very personally. They get defensive. Men don't think they're going to crash. They're more concerned that cops will take away their license. It's an image thing. Somewhere they picked up the idea that it's cool." These comments reflect the consensus about males and drinking reached by focus group participants of Central American, Cuban, Mexican, and Puerto Rican ancestry.

*"If you go out with a gang of people, it's important that one person doesn't drink. A lot of young kids do it. It's a macho thing. People think they are not affected by one or two drinks."  
(Adolescent Males, Staten Island, NY)*

*"People who have been driving for a long time get confident about their skills and may think that they can still drive safely, even after drinking. Men need to be educated. People should go out in pairs and if one drinks the other should drive."  
(Adult Females, La Casita, TX)*

- **Lack of knowledge about the effects of alcohol on driving ability.** Study participants emphasized that a major contributor to the problem of drinking and driving is the lack of understanding about the effects of alcohol on driving ability. Although focus group participants were generally quite explicit about the negative effects of drinking and driving, many did not seem to be fully aware of the impact of even one or two drinks on driving ability. Many focus group participants gave examples of relatives and friends

*"People who drink and drive think they are under control and can handle a car better."  
(Adult Females, Bronx, NY)*

*"One of the myths is, 'I'm a better driver when I drink.' A lot of Hispanics think that way. It's the macho male and the woman gives in to the man. Machismo causes this behavior."  
(Parents, Bronx, NY)*

who appear to drive with more skill after a few drinks. Adolescent male focus group participants stated that drivers pay more attention to the road, that is, they "concentrate more," after drinking. According to one adolescent focus group member in the Bronx, "Drinking and driving happens a lot on the weekends. I have an uncle who drives drunk, but he's the best driver I know, even drunk. Not everyone who drinks and drives has an accident. I've seen people make it home. Everyone knows people who handle different amounts of alcohol." Focus group participants, particularly in Cuban and Puerto Rican communities, mentioned that drinking is an important part of family celebrations and parties and that if one is offered a drink at such an affair, it is rude to refuse. In addition, focus group participants indicated that there is a perception among many in the Hispanic communities that beer is somehow more acceptable than other alcoholic beverages.

- **Willingness of passengers to ride with a driver who has been drinking.** A general unwillingness to intervene to prevent a person from driving after drinking was expressed by male and female focus group participants. Female focus group participants in the Bronx felt that if the driver "seems conscious" after three or four beers, it's acceptable to let them drive.

*"Sometimes people think they drive better after drinking. Not everyone has someone who cares enough to take their keys. Pride and machismo stop men from asking for help. Passengers are afraid to go with them and afraid to let them go alone."  
(Adult Females, Denver, CO)*

- **Lack of clarity about the role of the designated driver.** Although many focus group participants mentioned the designated driver concept and several participants, particularly in the parent groups and female groups, indicated that they use designated drivers, definitions of what the practice actually entails varied. In one adolescent group, a participant defined a designated driver as the person who doesn't drink or drinks to a minimum. He was promptly corrected and informed by another participant that the designated driver does not drink at all. One focus group participant also stated that she and her friends use the designated driver plan, but the rules keep changing and the driver is now allowed one drink. Participants in a group composed of Puerto Rican women stated that young people in their early twenties use designated drivers much more frequently than do

older drivers. According to this group, drivers between the ages of 18 and 25 years of age are more aware of the effects of alcohol while drivers between 25 and 38 years of age think they can handle drinking and driving. The opinions of these women were echoed by adolescent focus group participants in Denver who asserted, "The problem of drinking and driving is primarily a problem of older people. Teenagers will usually not drink and drive or allow their friends to. They will crash at the place where they have been drinking or pull over."

- **The prevalence of underage drinking, particularly in rural and border communities.** Focus group participants in rural areas commented on the lack of recreational opportunities in their communities for young people, with the result that the principal activity is drinking. In border areas the ease with which alcohol can be purchased in Mexico by underage drinkers was also cited as a contributing factor. According to a law enforcement officer in a border city in Texas, "DWI (driving while intoxicated) is our second biggest violation. Between one and four people are picked up during the week and each weekend seven to eight are picked up. Drinking might be due to family problems and people think there is nothing else to do in small towns but to drink. There are 16 to 18 bars in town and not much else to do. High school kids cross the border to go to bars. Mexican laws say they have to be 18 or older to drink but the laws are not enforced." In Miami and New York City, participants also complained about the fact that teenagers are able to purchase alcohol easily. Adolescent participants in the Bronx stated that changes should be made so that only older people can buy alcoholic beverages. At present, they indicated, anyone can have access to alcohol. In most stores, they said, it is easy for 17-year-olds to buy 40 ounce containers of beer. Older teenagers then provide beer to their younger acquaintances.

*"Drinking is a problem because of the dangerous country roads in this area and the fact that young people go drinking on back roads on the outskirts of town or to private parties after being discouraged from congregating at the local hangouts in town." (Adult Males, Alamosa, CO)*

- **The manner in which the alcohol retail industry targets minority communities.** Focus group participants in Denver, Colorado, and the District of Columbia complained about the large number of liquor stores in minority communities and suggested that community-based organizations devise strategies to keep liquor stores out of Hispanic neighborhoods and away from schools.

*"In this community at every street corner there is a liquor store. Drunk driving is bad and many in the community drink and drive. The number of liquor stores should be restricted." (Adolescent Males, District of Columbia)*

- **Driving under the influence of marijuana, cocaine, inhalants, and other drugs.** Focus group participants in urban areas expressed concern about the other drugs that are often combined with alcohol by drivers and passengers. Marijuana smoking is a major problem, they asserted, especially among the young. Some adolescent groups in urban sites defined drinking and driving as a problem of older people, but admitted that young Hispanics frequently drive under the influence of marijuana or cocaine, often combined with alcohol. Inhalant use by young drivers and pedestrians was mentioned by focus group participants in Texas as a major problem. According to a focus group member in El Paso, "Young kids use inhalants. This slows them down and then they get hit by cars [as pedestrians]."

*"We see mostly pot here. Pot is cheaper than other drugs. Lots of folks drive around stoned after using acid, inhalants, or pills." (Adolescent Males, El Paso, TX)*

*"Alcohol use is combined with marijuana and cocaine. The majority of people in our community begin to drink at the age of 10. Men start drinking at an earlier age than women, but women also drink." (Adolescent Males, District of Columbia)*

- **Passengers who drink and inebriated pedestrians compound the problem.** Focus group participants recounted that it is common for drivers and passengers to drink in the automobile. As one male focus group participant in El Paso explained, “It is common to drink while in the car and it is acceptable for the driver to drink as long as he’s not as intoxicated as the passengers—the driver must stay one beer behind the passengers.”

*“Drunk pedestrians and, in general, the level of alcohol consumption is very high in this community. Many accidents have occurred involving drunk pedestrians, but little has been done to address this problem in the community.” (Agency/Organization Representative, District of Columbia)*

Adolescent participants confirmed these statements indicating that they had seen both young men and young women drinking in automobiles and that people often try to hide alcoholic beverages in the automobile because of fear of apprehension by police. In Miami, female focus group participants similarly stated that open containers are frequently seen in automobiles.

- **Use of alcohol to relieve anger and stress.** Although drinking was most often mentioned by focus group participants in the context of socializing and family celebrations, some focus group participants described the stress and anger that cause some Hispanics to use alcohol. As one woman in Miami explained, “People are angry. The alcohol relieves some of the anger. There is constant pressure in Miami.”

*“The great majority in our community drink alcohol. Alcohol is a big problem because many people use it to cope with problems and to socialize.” (Adult Males, District of Columbia)*

- **The lack of an appropriate response from law enforcement.** Focus group participants at every target site indicated that a contributing factor to the prevalence of drinking and driving is the leniency of existing laws related to drinking and driving and the lack of enforcement of those laws. Participants indicated that people who drink and drive should not be given a second chance to drive, once apprehended by police. According to participants in Colorado, “The current belief is that you are let go too easily by the police and charges are dropped or reduced to a lesser charge.”

Participants in the District of Columbia stated that, "The lack of police presence on the street contributes to the continued problem of drivers who drink and drive and pedestrians who do not obey the laws." Participants in Staten Island supported higher fines and weekend police checkpoints to check for drivers licenses and the presence of alcohol.

## **Speeding**

Speeding was discussed most often by residents of urban areas and was of particular concern to study participants in Florida and in New York City. In Miami, both agency and organization representatives and focus group members cited speeding as the greatest safety problem as often as they mentioned drinking and driving. In Miami, the speeding problem appears to be exacerbated by the gift giving practices of some Cuban parents. Young people receive expensive high performance cars when they reach driving age. This practice and other issues related to speeding are discussed below.

- **High performance cars and drag racing among young drivers.** High performance cars were a major topic of discussion in the Miami focus groups. "Young people think they are indestructible and they drag race," according to a participant in a focus group of adult men. The opinions expressed by participants in two adolescent groups are revealing. One group was comprised of residents of a trailer park. The other group consisted of adolescent males from more affluent neighborhoods, most of whom arrived at the site of the focus group in expensive cars that were gifts from their parents. Participants in the first group stated that speeding is a problem because people with high performance cars think they have to take those cars to the highest level. The fact that the cars are so expensive seems to give the drivers the idea that they can do whatever they want.

*"Cuban parents give their kids high performance cars. They get many tickets and get in many accidents. Drag racing is a problem."  
(Agency/Organization Representative, Florida)*

A participant in the more affluent group asked, "Why do they make cars so fast if people can't speed?" One adolescent participant, owner of a Corvette, stated, "Cuban parents always give new cars. If I buy it, I'll take better care of it. If you work for something you value it more. It's kind of stupid. Even if I had money, I wouldn't buy my kid a Corvette."

- **Peer pressure.** Miami adolescents acknowledged that peer pressure is a factor in their decision to violate speed limits. One adolescent participant suggested that a race track be opened so that young people could drive their cars as fast as possible under controlled conditions. Another

suggested raising the driving age to 18 years, but concluded that raising the age limit would merely lead to more young people driving without a license.

Several of the participating adolescents had received tickets for speeding but indicated that speeding is so much fun that the number of tickets received doesn't matter. Participants also declared that Cubans like to take risks.

*"People are always going to speed. There is a lot of peer pressure. People want to be with the 'in crowd'. There is no pressure to drink and drive, but there is pressure to speed. Girls speed too. For a couple of weeks, people went slower after the crash involving the Corvette. But now everyone is speeding again."*  
(Adolescent Males, Miami, FL)

Another stated that parents set the example for their children and if they speed, their sons and daughters will be likely to speed also. "Even though speeding is not right," stated one participant, "driving fast shows that you are a man." In a Miami focus group, a friend of one participant had been killed a week prior to the focus group speeding from police on a motorcycle. He did not have a license. Another participant had lost a friend in a drag racing accident. According to one of the women, "There are so many people with sports cars. Speeding is an ego thing with men."

- **Dangerous urban neighborhoods.** According to women who participated in Miami focus groups, crime influences driving behavior in that some neighborhoods in Miami are so dangerous and threatening that drivers feel they have no choice but to speed through them.

- **Speeding is a symptom of reckless and angry driving.** Female focus group participants in Miami described the driving habits of Miami residents in the following way, "People drive faster and are more reckless. There is so much traffic; people stay out late. Everyone is in a hurry. Everybody is angry." Adolescents residing in Staten Island gave a comparable description of the New York City area, "People tend to speed here, even old people. Drivers have an attitude, they are very aggressive." Focus group participants in Texas attributed the incidence of speeding in their areas to young people who like to race and who don't consider the possible consequences of their behavior, and people who are in a hurry because they don't allow enough time to reach their destination.
- **Insufficient law enforcement and deterrents to speeding.** Focus group participants indicated that a greater police presence, more speed bumps, and higher fines would reduce the number of drivers who violate the speed limit. In New York City, some participants spoke favorably of the cameras that have been installed on major roadways to take snapshots of speeding vehicles so that tickets can be issued to violators.

## Inattention

When asked about risky and dangerous behaviors that they had observed, focus group participants, particularly those in congested urban areas, described the myriad of items that can compete for a driver's attention, including cellular telephones, music, television, application of makeup, and passengers in overcrowded cars. Inattention was also specified by several agency and organization representatives as a major problem, but not to the same extent or with the same fervor as focus group participants.

*"Probably the major driver-related problem is inattention—failure to yield right-of-way, careless driving, people doing too many things, talking on the telephone, putting on makeup, reading. Crash data show that 41 percent of accidents are due to careless driving".  
(Agency/Organization Representative, Florida)*

The following issues related to driver inattention were discussed by study participants.

- **Complacency.** Parents participating in a Miami focus group noted that after driving for awhile, people get too comfortable. “They don't hold the steering wheel with two hands and talk on the cellular phone when they drive. People who really need to make a telephone call should pull over.” Young women in Staten Island also remarked on the laziness and complacency that can affect drivers and suggested that drivers be sent back to school “for a refresher course in handling emergency situations behind the wheel and traffic rules and regulations.” Such a course exists for drivers who have accumulated a certain number of infractions, but focus group members felt that after driving for a certain number of years, all drivers could benefit from the course.
- **Distractions.** Adolescents in Miami recounted observing women applying makeup while driving and a woman who was watching a portable television while she was driving. This group of adolescents felt that cellular telephones should be illegal. Focus group participants in the Bronx mentioned that the powerful sound systems installed in some vehicles are major distractions, as well as drivers wearing headphones, using cellular telephones, and tinted windows that obscure the driver's vision. One adolescent focus group member stated that some sound systems are so powerful that they should not be sold for use in motor vehicles. Female focus group participants in the District of Columbia also complained about drivers who play extremely loud music and the distraction that overcrowded cars cause for drivers.
- **Fatigue.** A group of male focus group participants in the District of Columbia stressed that what appears to be inattention can actually be drowsiness when drivers are excessively fatigued after working long hours.

## Seat Belt Use

As predicted by the telephone discussions with agency and organization representatives, seat belt use was not universally accepted by focus group participants. Women and parents of young children were far more likely to use seat belts. Reasons cited for seat belt use were:

- **Awareness of laws governing seat belt use.** Focus group participants demonstrated an awareness of the laws governing seat belt use in their particular localities. In the adult male focus groups, the fear of being stopped by the police was usually given as the principal reason for seat belt use. Adult females cited safety as their primary reason for wearing a seat belt, although they also showed a knowledge and awareness of the law. In one Texas focus group, a female participant reported that she had received a citation for not wearing a seat belt. Her \$25 fine was reduced to \$10 when she agreed to attend a two-hour class where, she reported, good safety-related videotapes were shown.

*"You especially don't want to be stopped by the police for not wearing a seat belt when you are driving without a license."  
(Adolescent Males, El Paso, TX)*

- **Both the driver and passengers are safer with seat belts on.** Several focus group participants gave detailed descriptions of accidents involving themselves, family, or friends as the principal reason for their seat belt use. One Staten Island focus group participant described a head-on collision with a truck that occurred while she was driving. Her grandmother was a passenger in the vehicle and was not wearing a seat belt. The driver barely prevented her grandmother from going through the windshield. Her grandmother now wears a seat belt, even though she insists that it is uncomfortable and bothers her neck. Female focus group participants in New York City indicated that more women wear seat belts than men because women are more cautious. One focus group member stated, "All Puerto Rican

*"People are not allowed in the car without wearing seat belts. Two years ago I had a bad accident. The seat belt saved my life."  
(Parents, Staten Island, NY)*

women with children make the children wear seat belts.” Adolescent males in all focus groups who reported seat belt use generally cited safety as the primary reason for wearing seat belts.

Focus group members with young children expressed concern about the lack of seat belts on school buses. Several parents adamantly stated that seat belts should be required on school buses.

As predicted by agency and organization representatives, male focus group participants were more likely to avoid wearing seat belts than female participants. Chief among the reasons given for not wearing seat belts were discomfort and mistrust in the safety benefits afforded by the belts. Reasons given by focus group participants for not wearing seat belts included the following:

*“There was a survey in 1987 on demographics and seat belt usage. The rate for Hispanics was very low. Perhaps this is due to economic issues. A higher percentage of Hispanics report that seat belts are not working in older cars.”  
(Agency/Organization Representative, New York City/New Jersey)*

*“Hispanic men resent wearing seat belts because it is not macho. Women do not put kids in safety seats. Women wear seat belts, especially when they become mothers.”  
(Agency/Organization Representative, Florida)*

- **Seat belts are uncomfortable.** Discomfort was the principal reason given for the lack of seat belt use by adolescent males and adult female focus group participants, although the uncomfortable aspects of seat belts were mentioned by participants in all focus groups. Male and female participants mentioned wrinkled clothes, the sensation of being choked, the difficulties belts pose for pregnant women, and other perceived annoyances of seat belts. One male focus group participant indicated that even on long trips, he resists wearing a seat belt, because he does not want to be “tied up for three hours.” Another man stated that “it's hard to look out the window and show off when restrained by a seat belt.” Participants suggested that the design of seat belts be changed in order to make them less cumbersome to wear.

- **Seat belts are unsafe.** Some focus group participants described reports of injuries and fatalities that occurred as a result of motor vehicle crashes where drivers and passengers were trapped in a vehicle because of their seat belts. In addition, participants described motor vehicle crashes in which they had not worn seat belts and had survived unscathed. According to a participant in a focus group of parents in Denver, "I was in an accident, was not wearing seat belts, and wasn't hurt. Seat belts will not help in a crash. You die when it is your time."

*"Seat belts are not always safe. When children ride in the car the seat belt might tie them down if the car turns over; they cannot leave the car easily." (Parents, McAllen, TX)*

*"Seat belts can damage you during an accident. They are not 100 percent safe." (Adult Females, Staten Island, NY)*

- **Older automobiles do not have seat belts.** Focus group participants with older automobiles mentioned that their vehicles were not equipped with seat belts or that the seat belts did not work properly in older vehicles.

*"Seat belts are a problem with recent arrivals. In Cuba, there are no safety belts, because the cars are from the 1950s." (Agency/Organization Representative, Florida)*

- **Seat belts are unnecessary for short distances or for passengers in the back seat.** Adolescents were more likely than older focus group members to think that seat belts are not necessary for short distances or for passengers riding in the back seat.
- **Sense of fatalism and attitude about risk preclude seat belt use.** Some male focus group participants implied that wearing seat belts would send a negative message about their driving ability. One adolescent participant in the Bronx stated, "Confident drivers who don't drink don't need to wear seat belts." An adult male participant in Staten Island said, "Seat belts make you look like you're paranoid, like you think something is going to happen. This may bring bad luck." Other participants stated that the use of seat belts makes no difference since one's destiny is predetermined. If it is an individual's time to be fatally injured in a crash, this cannot be prevented.

## **Child Safety Seat Use**

Resistance to the use of child safety seats was frequently cited by agency and organization representatives as a major community problem. For example, a representative of the Florida Department of Highway Safety and Motor Vehicles stated that the second biggest problem encountered in the State's Injury Control Program was deaths and injuries due to lack of use or improper use of child safety seats. As part of the Injury Control Program, the Department of Highway Safety finances a program to provide child safety seats to parents who can not afford them. An infant does not leave a Florida hospital unless in a safety seat.

In most focus group locations parents were aware of local laws regarding safety seat use, particularly requirements that newborns leave the hospital in safety seats. Parents were aware of programs providing access to and information about safety seat use. The need for child safety seats was acknowledged by adolescent focus group participants. Several adolescents in an El Paso, Texas, focus group noted that they had seen small children riding unrestrained in vehicles. One participant stated, "It's a problem. It's sad to see parents who do not want to take responsibility." Among those parents who use child safety seats, the following reasons were given:

- **Special programs to increase access to seats and provide instruction in their use.** Parents in a McAllen, Texas, focus group noted that safety seats are available from Avance (a community-based organization and focus group host) for \$1.00 a year. In addition, McAllen parents reported that hospitals will not let parents take an infant home without a safety seat. Parents in District of Columbia focus groups stated that in Maryland, parents are required to attend a two-hour meeting on child safety that includes instructions on how to use child safety seats. Parents in Miami indicated that new parents are not allowed to leave the hospital without an infant safety seat and that they are easy to get through local hospitals. Hospitals in Denver, Colorado, also provide infant seats.
- **Safety concerns and awareness of local laws.** Parents in focus groups were knowledgeable about laws regarding child safety seat use and knew about programs where they could obtain safety seats. Many recounted their experiences in hospitals with regard to infant seats and discussed the information they have received in hospitals and doctors' offices.

Information and access do not guarantee consistent use, however, and several factors for nonuse were cited, including:

- **It is better to hold a child in one's arms.** According to one agency representative from California, "Because Hispanics are a nurturing culture, they carry their children in their laps. While they love to be close, they are not aware of the danger of injuries. The challenge is how to change their behavior without trying to change their values." Parents of young children in a Bronx, New York, focus group agreed that parents need to stop holding babies and young children in their arms because the "impact and mother's weight will crush the baby if there is a crash." These focus group participants indicated that for some parents not using the safety seat may be a form of affection, that is, a way of saying, "I want my baby next to me."

*"There is a belief that Mom's arms are the best place to be so she should hold the baby rather than use a car seat." (Agency/Organization Representative, Texas)*

- **Inability to keep a fussy child in the safety seat.** Although parents were in accord about the need for infant safety seats, if only because in some localities hospitals require them for release of a newborn, there was far more ambivalence about the use of safety seats with toddlers and small children. Parents expressed a need for additional strategies to use with small children who complain about using the seat. It may be true, however, that parents readily give in to a fussy child because they would prefer that the child be held. A representative of emergency medical services in Texas stated that at first he thought Hispanic parents he encountered could not afford child safety seats, but then he realized that many parents have safety seats yet are holding their child anyway. When he inquired about the reason for nonuse of the safety seats, parents told him that the children cry when placed in the seat and that the only way to quiet them is to hold them. Parents in Linda Vista, Texas, all of whom have access to safety seats from the community-based organization, Avance, stated that most people do not put their children in safety seats and that women are generally less insistent with the children than men. "When mom is in the car, the children unbuckle themselves, but when dad buckles them they stay in their seats." A parent in Denver

stated that safety seats are not good for sleeping children and that toddler seats are too high.

- **Large families and small cars preclude the consistent use of the seat.** One focus group participant stated that if she uses the safety seat, her entire family cannot fit in the car.
- **Pickup trucks in rural areas pose a problem regarding safety seats.** Although some localities have passed laws limiting the number of people who can ride in the back of a pickup truck, for some rural families the truck is a primary means of transportation and small children ride in the back of the truck unrestrained.
- **Child safety seats are too expensive.** Focus group participants in Colorado, Texas, Florida, and the District of Columbia all knew about programs where they could rent seats at minimal expense. Parents in New York City complained about the high cost of quality car seats, as did parents in Denver. In addition, New York City parents did not mention any special programs to increase access to child safety seats. All parents agreed that child safety seats are not used consistently. According to parents in Denver, Colorado, "Cost is a factor with car seats. Some costs are outrageous. There should be one affordable car seat, companies should all make the same type. Seats can be rented from social service agencies, but they are not the best or top quality seats." Parents in the Bronx and in Staten Island agreed that seats are expensive and stated that a good seat costs seventy to ninety dollars. These parents called for incentives from car seat manufacturing companies, rebates, income tax deductions, and a special fund to enable the needy to purchase safety seats. According to New York City focus group members, expense is a major deterrent to safety seat use.
- **Child safety seat laws should be more strictly enforced.** Women in a Staten Island focus group declared that the child safety seat law should be enforced more frequently. The participants agreed that, "When children turn one or two, safety precautions seem to be forgotten. Children are not in car seats or buckled in. Cars should be pulled over by the police and parents should be fined."

## Segments of the Hispanic Community With Special Highway Safety Problems

Study participants identified those segments of the Hispanic population who for reasons of age, length of stay in the United States, socioeconomic status, or gender more often seem to display unsafe behaviors as drivers, passengers, and pedestrians.

### Young Inexperienced Drivers

There was nearly universal agreement among agency and organization representatives that males, in general, are the segment of the Hispanic

community with the greatest safety problems. The ages cited ranged from 15 to 40, although most representatives agreed that the most serious problems begin around age 15 and extend to age 25 or 26. In Florida, highway

*"Adolescents and young adult males, and recent immigrants, may be the segments of the community with the greatest traffic safety needs. There is no Spanish language information and education on traffic safety targeting these segments of the community." (Agency/Organization Representative, District of Columbia)*

safety organization representatives indicated that the crash rate among 15 to 22 year olds is very high. This age group was described as reckless, but it was also stated that they drive more and thus have more opportunity for mishaps.

In Texas, highway safety organization representatives reported that young Hispanic males are overrepresented in the fatal and serious crash files. How much of the overrepresentation is related to lack of access to emergency health care because of being in a rural area is not clear. Males in the 25- to 35-year-old range were also mentioned by Texas respondents as a segment with very high crash rates and in need of targeted programs.

It should be noted that within almost any racial or ethnic group, young males would probably be singled out as being the most prone to have serious problems with risky behavior. In the Hispanic community these behaviors may be compounded by the cultural factor of machismo which dictates many aspects of masculine behavior. In living up to machismo ideals, all men, but young men especially, may engage in behaviors that have

undue risks. A respondent in an agricultural area in California stated that the link between machismo and unsafe behavior is widespread in the Hispanic community, but the pattern may be even stronger among migrant workers.

Focus group participants agreed with agency and organization representatives that young males contribute inordinately to safety problems. Much of the discussion on drinking and driving and speeding in the focus groups centered on the observation that it is predominately men, particularly young men, who engage in these behaviors. However, even though males received the most attention, focus group participants indicated that increasing numbers of young Hispanic women are driving and that many of them also speed, drink and drive, and engage in other unsafe driving behaviors. Study participants agreed that safety problems associated with young drivers are caused by the following:

*"Sixteen to 26-year-old males have the highest rates of speeding, DUI, no seat belts, and hazardous moving violations."  
(Agency/Organization Representative, Texas)*

- **The minimum age for getting a drivers license is too low.** Parents in the District of Columbia and Miami and even a few adolescents in Miami called for an increase in the minimum driving age to eighteen years of age. Parents in Miami were particularly alarmed that a major and fatal motor vehicle crash had involved the 15-year-old driver of a Corvette.
- **Driver education programs are inadequate.** Parents in the District of Columbia called for more driver education programs in the schools. Parents in Denver suggested that defensive driving classes should be required for young people for three years or until age 21 and that these should be mandatory classes for graduation from high school. An effort should be made, they said, to get young people to focus on the consequences of their behavior behind the wheel. In addition, even preschool youngsters should have safety classes, according to these parents.
- **The tests required to receive a drivers license are too easy.** Parents participating in focus groups in Denver and Miami complained about the testing required to get a license. According to Denver parents, the driving tests are too easy and overall driver

testing is not done well. Miami parents disapproved of the absence of a road test. The behind-the-wheel component of the driving test is done on an indoor track rather than on city streets.

## **Recent Immigrants**

Recent immigrants were second only to young males in the frequency with which their vehicular and pedestrian safety problems were mentioned by study participants. Often these two segments of the population were mentioned together. Participants mentioned the lack of information and education targeted to these two groups. Some agency and organization representatives stated that recent immigrants could actually be the segment of the community with the greatest need since they are not accustomed to the new living conditions, language, customs, and laws. Recent immigrants were most frequently mentioned in those areas that have experienced or expect to experience a large number of new arrivals, particularly Texas and California.

Representatives of highway safety organizations reported that one of the biggest problems for immigrants who come from rural areas is the disorientation they may feel as they try to become familiar with life in a large city. The sheer volume of traffic, the signs, and the configuration of the roadways are all unfamiliar and confusing even to those who have substantial driving experience.

Representatives of highway safety organizations in States near the Mexican border indicated that there is a particular need for safety promotion programs targeting Hispanics who are recently arrived and from rural areas. Focus group participants in the District of Columbia stressed the need for increased training of law enforcement officers so that they can more appropriately understand and meet the needs of recent immigrants who may not comprehend

*"Recent immigrants frequently don't have drivers licenses. Citations for driving without a license represent 3 to 5 percent of infractions. All someone has to do to get a license in Mexico is show a photo and pay the money. Another problem is that kids coming from Mexico are used to driving without a license and driving at a much earlier age. Recent immigrants also don't have insurance and hold their kids in their laps. They either don't know the laws, can't afford to comply with them, or feel the laws don't apply to them."*

*(Agency/Organization Representative,  
Texas)*

or know the laws and regulations that govern drivers, passengers, and pedestrians in the United States.

Participants attributed many of the unsafe roadway behaviors to habits that new arrivals bring from their countries of origin. A respondent in Florida indicated that some of the unsafe behaviors are due to the fact that driving may be viewed as more of a social event than a means of transportation. Both telephone respondents and focus group participants provided vivid descriptions of differences between driving in the United States and in source countries of origin. One telephone respondent referred to driving in Mexico as "survival of the fittest." He stated that many Mexican drivers ignore traffic lights, right of way, and other signs and signals and that these habits are carried into the United States by recent immigrants. However, this same respondent indicated that once recent immigrants understand the problems caused by maintaining their old habits and have a greater comprehension of U.S. traffic laws, they become responsible drivers.

*"In my country (El Salvador), we do not have street crossing areas for pedestrians. Pedestrians cross the street anywhere."*

*(Parents, District of Columbia)*

*"In Puerto Rico, I don't see anyone wearing a seat belt. People cut them out of their cars."*

*(Adult Males, Staten Island, NY)*

*"No one wears seat belts in El Salvador. Traffic laws are not enforced and at times they are nonexistent. At stop signs, traffic lights, and other traffic signals, people do not want to stop because they are afraid of getting killed by rebels fighting in the war. The gasoline is very expensive and for this reason a lot of drivers do not want to make many stops and drive at high speeds to get to their destination sooner and save gasoline. Many years ago, one could buy a drivers license without having to take any kind of tests. Even today, many in El Salvador who attend driver education programs pay the police to get a license."*

*(Parents, District of Columbia)*

## Rural Residents

The factors most often cited by agency and organization representatives with respect to rural residents were:

- **The distance of many rural residents from health care facilities.** In the event of motor vehicle crashes it takes longer to get care for injuries, thus increasing the chances of a fatality.
- **A primary means of transportation in rural areas is the pickup truck.** It is not uncommon for children and other family members to ride in the back of the truck with no safety restraints. According to a Texas agency representative, if a pickup is going over 35 mph, it is illegal to have children riding unrestrained in the back of the truck. According to the representative, this law was very difficult to get passed, because it was viewed as focusing negatively on Hispanics.
- **Limited recreational activities exist for young people.** Focus group participants in rural sites mentioned the dearth of organized recreational activities for teenagers and young adults and the lack of community-based organizations to address the needs of rural residents. The major activity in some rural communities according to focus group participants is drinking.
- **Poor road conditions are hazardous to drivers and pedestrians.** Focus group participants in Colonia Linda Vista, Texas, a rural subdivision on the Mexican border, emphasized the poor condition of the roads in their neighborhoods. "The streets in our neighborhoods are in bad condition. The top layer of road gets washed out with the rain. The Department of Transportation is fixing the streets and has left large ditches. These ditches have been a problem for months. Children and cars can fall into the ditches."

*"There are no organized activities for young people, no recreation centers that might keep us out of trouble. People drink because there is nothing else to do. Sometimes after a family reunion, people drive back to their towns even after they have been drinking because there are no motels in small towns. People also drink to be cool and build a reputation."*  
(Adolescent Males, Alamosa, CO)

## **Elderly Drivers and Pedestrians**

Both telephone and focus group participants commented on the safety problems of older drivers. The diminished skills of drivers between the ages of 65 and 70 years puts them at particular risk according to a representative of a highway safety organization in Florida. In Texas, an agency representative stated that many Mexican elderly are driving who should not be. However, the respondent also commented that the only person who can talk to an elderly Mexican driver is a priest or someone in their age range.

Representatives of organizations that work with Hispanic elderly reported that one of the principal concerns of elderly persons is the lack of reliable, safe and low cost public transportation.

Focus group participants expressed a great degree of concern about the hazards caused by older drivers. According to parents in a focus group in Denver, the most dangerous drivers are people under 18 and people over 80. This focus group called for more frequent testing of older drivers and the provision of a physical examination before licenses are granted. Focus groups in Colorado called for an age limit for drivers licenses that ranged from sixty to seventy years of age. A focus group of women in rural Alamosa, Colorado, concluded that older drivers are the biggest problem in that community. Participants in Miami, Florida agreed that the biggest safety problems are young drivers and elderly drivers and called for frequent retesting of the elderly, with people over 55 being required to take the behind-the-wheel test. Focus group participants in New York City also recommended frequent physical and mental testing for drivers over the age of sixty. New York City focus group participants complained that elderly drivers drive too slowly and gave examples of older relatives who had received tickets for impeding traffic by moving too slowly. Focus group participants in the Rio Grande Valley also complained about the slow speed of older drivers, the Valley being a favorite winter home of many elderly persons because of its mild climate.

## **Unlicensed and Uninsured Drivers**

Law enforcement officers who participated in telephone discussions indicated that the lack of licenses and automobile insurance are major problems in the Hispanic community. One law enforcement officer stated that many Hispanics cannot afford insurance, but can afford a car and choose to take the risk of not having insurance. The problem of unlicensed drivers became apparent during the focus group discussions. A large number of focus group participants in both Texas and the District of Columbia did not have drivers licenses. In one adolescent group in the District of Columbia, all nine participants were frequent drivers and all were driving without a license. The same was true for an adolescent group in El Paso, Texas. In a focus group of adult women in Texas, only one of the nine drivers in the group had a license. In parent groups in Texas, fifty percent of the male participants in both groups were frequent drivers, but did not have licenses. The lack of licenses extended across all categories of focus groups, but was most common in groups of Central American and Mexican ancestry. Unlicensed and uninsured drivers were a cause for concern for many study participants. The reasons given for the status of these drivers were varied.

A representative of a highway safety organization in Texas stated that many Hispanics are driving without a license because they cannot read the Spanish on the forms when they apply for a license because Castilian Spanish is used. According to this respondent, the reading level on the forms should be brought down. This sentiment was echoed by parents in a focus group in the District of Columbia as they contrasted the procedures for getting drivers licenses in Virginia and Maryland. In Virginia, one participant stated, the booklet used to study for the exam contains drawings that make it easier to learn the laws and regulations. In Maryland, according to another participant, the translation of the booklet for the exam was unclear and inaccurate. The participant asked, "Who made these translations?" In addition, focus group participants, particularly in urban areas, tended to agree with adolescent and parent focus group participants in Denver who stated that insurance rates are entirely too expensive, particularly for individuals with a low income.

In a McAllen, Texas, focus group of parents, only one of four male participants had a drivers license, although all drove. Reasons given for driving without a license were a lack of proper identification and the long lines at the Department of Motor Vehicles. According to one participant, "One takes a chance to drive without a license. Most of the time it doesn't

matter to ride around without a license; it's a matter of luck. I know people who do not get caught even if they do not use a seat belt or a safety seat in addition to not having a license." In a group of women in Brownsville, Texas, one out of nine participants had a drivers license, although all drove. Reasons for not having a license included the lack of a vehicle in which to take the driving test and lack of proper identification. In addition, the consensus among participants was that the driver's manual from the Department of Transportation is impossible to understand. Focus group participants in the District of Columbia also indicated that unlicensed driving is prevalent among Central Americans who do not have legal residence in the United States.

Adult males who participated in a focus group in Staten Island, New York, discussed issues related to drivers licenses, car registration, and insurance. In New York City, they stated, one can buy an automobile, register it, and get insurance with just a learner's permit rather than a drivers license. These men felt that licenses should be required for these transactions. They stated that driving without a license is not uncommon in Staten Island. According to the participants the test required for a permit is conducted in several languages, whereas the test for a drivers license is given in English only. In addition, participants stated that the cost of a drivers license and insurance is prohibitive for many drivers. The cost of a license has increased from \$10 to \$50 and car registration is \$185. Participants reported that there is a thriving underground industry for fake drivers licenses, license plates, and insurance.

## Impact of Socioeconomic Status

Focus group participants and agency representatives agreed that socioeconomic status can affect access to and use of seat belts and child safety seats. As previously noted, focus group participants mentioned the costs of child safety seats and automobile insurance as prohibitive for some Hispanic families. On the other hand, there was the focus group experience in Florida, where a group of adolescent males drove to the site of the discussion in expensive and high performance cars that were gifts from their parents. These adolescents talked quite freely about their practice of driving at very high speeds.

*"Those who can afford to do so use child safety seats. Very poor people have cars that are in such bad shape that they may not have working seat belts. Poor people don't know how to work the system, how to get these things if they are provided by an agency. It's a matter of education. We need continuous work toward awareness; and to get the word out any possible way." (Agency/Organization Representative, Florida)*

An agency representative in the District of Columbia described the connection between socioeconomic status and the use of alcohol and other drugs by Hispanics in the Washington, DC area. The representative stated that although drug problems in the community are mild, drinking patterns are severe and very common among recent immigrants. "Latinos in this city face many stressors such as unemployment, acculturation, lack of access to mainstream society for services and education, and others. Many of these socioeconomic problems contribute to the excessive patterns of alcohol consumption in the community. Accidents involving pedestrians and bicyclists occur frequently as a result of alcohol consumption."

Socioeconomic status can also affect access to information and educational programs. One highway safety organization participant discussed how socioeconomic status has influenced participation in Project Celebration, a popular event designed to promote alcohol and drug free graduation festivities for high school students. Project Celebration events are mostly on the north side of the city which has a more upper and middle class and educated population. On the west side there are economic barriers and much less participation by the parents. Another agency representative stated that few people are working with the lower

socioeconomic segments and that health and safety promotion programs tend to be geared toward the more middle class groups.

Another study participant emphasized the importance of attention to the different economic levels within the Hispanic community. This agency representative stressed that there are many subsets within the Hispanic community. Throughout the Southwest, there are Hispanic families whose roots in the United States are very deep (many generations) and who are very prominent. That community cannot be approached in the same way as more recent immigrants who may be at a lower socioeconomic level. According to this agency representative, some Hispanics who have been in the Southwest for many generations may have low opinions of recent immigrants, and Mexicans of Indian tribal descent are at the bottom of the pecking order.

### **Issues on the United States/Mexico Border**

According to study participants from border areas, the population on the border is disproportionately young and includes many young single parents. Although many border residents are bilingual, the older population generally speaks only Spanish. Many border residents have been educated in the United States but have close ties to their sister city in Mexico.

*"People born and raised along the border are different from other Mexicans. Many are bilingual and have a unique social structure. The whole border culture is a blend of the cultures of Mexico and the Southwestern United States."*  
*(Agency/Organization Representative, Texas)*

An organizational representative from a major health organization operating along the Mexico/United States border identified motor vehicle crashes as one of the biggest problems in border areas. According to data compiled by his organization, these crashes are the fourth largest cause of death along the border. The respondent went on to describe how communities along the border are beginning to mobilize to combat the growing number of injuries and deaths due to motor vehicle crashes.

A special problem mentioned by respondents on the Mexican border in California and Texas is the attempt by Mexicans to run across controlled access roadways as a way of entering the United States. They are often injured or killed by high speed traffic. People may not realize that the driver is not expecting pedestrians and presume that the car will try to miss them. In some border areas, special signs have been erected, warning drivers that pedestrians may be on the roadway.

The different driving styles on each side of the border can be a problem as well. Focus group participants described how they unbuckle their seat belts as soon as they cross the border into Mexico. According to one law enforcement officer, Hispanics comply with seat belt laws if they live on the American side of the border. Those living on the Mexican side don't use seat belts.

According to highway safety organization representatives in Texas, the North American Free Trade Agreement (NAFTA) is expected to have an impact on traffic and safety in border areas. "NAFTA is expected to increase traffic and cause more lead in the air (gas is still leaded in Mexico). The streets are not built to take large trucks so the streets will get into even worse condition. The run-off from trucks will go into the Rio Grande. Mexican truck drivers will have to be educated regarding U.S. traffic laws and street signs. The condition of Mexican trucks (especially tires and brakes) is substandard."

### **Knowledge and Systems Integration Issues**

Representatives from highway safety organizations, law enforcement agencies, health-related organizations, schools, and other education-related organizations discussed those topic areas related to traffic safety where members of the Hispanic community appear to have knowledge gaps. The two most commonly identified deficits were knowledge of alcohol and other drug effects and knowledge of the benefits of seat belts. Several of the agency and organization representatives stated that pedestrians have a basic lack of understanding about traffic laws and regulations and that bicyclists need more information about the benefits of helmets.

Agency and organization representatives agreed that with recent immigrants, the majority of the difficulties arise from their lack of understanding of the English language, and the need to adjust to a new society with different norms and regulations. In their countries of origin,

many Hispanics have encountered far less enforcement of traffic laws. These kinds of violations are generally handled socially rather than legally. Law enforcement officers participating in the study identified those laws and regulations that are most problematic for Hispanics in their jurisdictions. Their comments are summarized below:

### **California**

*The most difficult laws are those related to seat belts, speeding, signs and traffic signals, driving with a revoked license, and the use of crosswalks. Difficulties occur mainly among recent immigrants and undocumented residents because most of the laws and regulations in their countries of origin are different. The degree of difference is dependent on the country of origin and whether the immigrants come from rural or urban areas, or from more or less developed countries.*

### **Colorado**

*Insurance laws and alcohol and drug-related laws are the most problematic. These laws are not as readily enforced in other countries. Some Hispanics drive defective vehicles without insurance because insurance is too expensive. There is an overall lack of safety education, especially with regard to defensive driving.*

### **Texas**

*In Mexico, driving is governed by reglamiertos which are like city ordinances. They are posted on the back of their drivers license. There is no traffic code book. All Mexican citizens know what the Mexican traffic safety laws are because they are on their drivers license.*

*Enforcement of traffic safety laws differs in the United States and Mexico. In Mexico, for example, law enforcement officers only enforce seat belt laws on the federal highways, not in the municipalities.*

*Drivers often do not know or do not understand laws related to drinking and driving. People don't know when they are too drunk to drive. In a survey people were asked when they were too drunk to drive and the men answered, "after a case of beer". People know a law exists for seat belts, but have the perception that belts don't work so why bother with them. There is a different sense of risk perception which comes into play with some Hispanics when they*

*are driving. They may also have different perceptions of the law—what it is and what it is for.*

### **District of Columbia**

*The majority of the difficulties arise with the lack of understanding of the English language and the need to adjust to a different society with different norms and regulations.*

### **Florida**

*The greatest difficulties are with understanding the insurance laws and licensure, that is, what is required in order to drive. Recent arrivals need to understand the process. Those less familiar with American culture tend to see driving as more of a social event than transportation. They pull over to talk to someone, for example, and block traffic.*

### **New York City/New Jersey**

*Many Hispanics get into difficulties because they listen to the wrong people when it comes to traffic laws. They listen to their peers. Recent immigrants are less informed. There is a certain "anarchy" in New York City, that is, there is very little compliance with highway safety rules and regulations. Therefore, recent immigrants cannot observe the behavior of others in order to learn what is appropriate.*

#### **IV. CONNECTEDNESS OF HISPANIC COMMUNITIES TO HIGHWAY SAFETY ORGANIZATIONS AND OTHER SOCIETAL INSTITUTIONS**

##### **Hispanic Community Members' Interaction with Agencies and Organizations**

Focus group participants were asked three central questions about community institutions. They were asked to describe the institutions they access most often and the institutions that are most difficult to work with. In addition, participants were asked which agencies should be concerned about and responsible for traffic safety issues.

Among Hispanic community members, the element of trust in the agencies is the most important criterion for seeking services and choosing where to go for them. For focus group participants in California, youth centers, schools, churches, the Department of Motor Vehicles, and community-based Hispanic organizations such as the Mexican American Community Services Agency, were mentioned as those organizations that are easiest to work with. In the District of Columbia, nonprofit, community-based organizations that provide medical and social services to the Hispanic population were mentioned. Health centers and clinics, day care centers, schools, churches, and community agencies were called the most accessible. Focus group participants described these organizations as providing services to families with low to moderate household incomes at very little or no cost. According to participants, staff in these agencies speak Spanish and are culturally sensitive. Examples of specific agencies and organizations mentioned by District of Columbia focus group members are the Latin American Youth Center, the Wilson Center, Centro Catolico, Ayuda, Clinica del Pueblo, and the Central American Refugee Center.

Focus group participants in New York City listed social clubs, recreation centers, Bronx University, churches, the Latino Civic Association, colleges, local government, and hospitals as trusted community institutions.

Focus group participants in Texas mentioned schools, churches, health clinics and community-based organizations like Avance as the easiest to work with. Parents also

mentioned the WIC program which, they said, provides a lot of assistance, including physical examinations for children. Schools, they explained, provide food for the children and have

PTA meetings where school personnel and invited speakers explain future activities to the parents and review various educational topics. Schools also give classes for parents on how to help their children make the transition from preschool to elementary school. Adolescents in El Paso focus groups indicated that they have the most confidence in churches and schools. They view the schools as a good place to get information from teachers and counselors.

Although most focus group participants gave positive assessments of the schools, there were some dissenting opinions. In a Denver, Colorado, focus group, several participants complained that the schools don't care about Hispanic children and that Hispanic culture is not taught. Participants stressed the need for more minority teachers who could be role models for young people. Women in a Staten Island focus group also stated that it is difficult to get anything accomplished through the schools. In Texas, parents in one focus group were concerned about instructions they claimed were given to young children by elementary school teachers. Children were supposedly instructed to inform their teachers if they were hit by their parents.

Law enforcement and government agencies were considered the most difficult agencies to work with by focus group participants, although participants in the Bronx had favorable things to say about the Bronx Borough President's Office and focus group members in the District of Columbia made positive comments about the Mayor's Office on Latino Affairs. Representatives of

agencies and organizations accurately predicted that law enforcement and government agencies would provoke the most negative response from community members. Several telephone respondents cautioned that any educational or public awareness campaign directed toward Hispanics that is too closely associated with governmental entities is bound to fail.

*"The Department of Motor Vehicles should do more in terms of traffic safety. They should give refresher driving classes, check the eyesight of older drivers more frequently, and give older drivers more frequent tests. Puerto Ricans are more susceptible to diabetes so eyesight should be tested more often. DMV does not really tell you the rules; there is no communication about the laws. The police and DMV should work together. The Federal government should also do more concerning traffic safety."  
(Adult Females, Staten Island, NY)*

Generally, focus group participants seemed daunted by the paperwork that often accompanies any transaction with a governmental entity. They also were dismayed by the often difficult task of locating just the right office and person who can be of most assistance. In many cases that person is not bilingual. In fact, the lack of bilingual staff was often cited as the greatest impediment to working with government agencies. Recent and undocumented residents often associate law enforcement agencies and other governmental entities with the Immigration and Naturalization Service and thus avoid these agencies altogether.

When asked which community agencies and organizations should be involved in promoting traffic safety, focus group participants listed the following: Mothers Against Drunk Driving (MADD), schools, churches, the Department of Motor Vehicles, police departments, and community-based organizations. In addition, California participants mentioned the California Highway Patrol; District of Columbia participants mentioned the Mayor's Office on Latino Affairs and the need to involve sports teams like soccer leagues; and New York City participants mentioned the Boys and Girls Clubs and the YMCA as possibilities for information dissemination. It must be noted that even though most focus group participants described governmental and law enforcement agencies as difficult to work with, they nevertheless acknowledged the key role of motor vehicles departments, police departments, and the highway patrol in promoting traffic safety.

### **Highway Safety Organizations**

The degree of connection between Hispanics and highway safety organizations, such as State Departments of Transportation and Governors' Highway Safety Offices, varies according to study sites and the programmatic activity within those sites. In some sites, highway safety representatives have an established presence within the Hispanic community and programs sponsored by Departments of Transportation and other entities are viewed as successful. The quality of the relationship between highway safety organizations and Hispanic community members appears to be directly proportional to the efforts of those organizations to engage in outreach to the community and develop programs and materials that address the needs of targeted segments of the community. In those areas where highway safety organizations have collaborated with Hispanic community-based organizations, there seems to be the best connection and impact.

Representatives of highway safety organizations who participated in telephone discussions described their relationship with the Hispanic community in terms of the extent of their interaction with community members, challenges in integrating members of the Hispanic community into the highway system, and collaborative efforts with other agencies and organizations.

### **Interaction with Hispanic Community Members**

Interaction of highway safety organizations with the Hispanic community takes several forms, including the use of advisory groups with Hispanic representation, the development of community-based safety promotion programs, the development of multifaceted educational programs, and special events with a safety theme.

**Utilization of Advisory Groups.** Advisory groups are frequently used as a way to involve Hispanic community in planning and implementing targeted programs. Representatives of highway safety organizations described two types of advisory groups—continuing advisory bodies that meet regularly to advise highway safety officials and advisory groups that are formed to develop specific programs. In addition, staff members in some locations serve as advisors to Hispanic community-based organizations.

**Community-Based Programs.** Several highway safety organizations have developed programs to enhance the awareness of the Hispanic community about specific safety issues. Agency and organization representatives provided descriptions of these programs and sample materials during the course of the study. These programs are representative of efforts within the study sites to involve community members in program design and implementation.

- **The *Latino Impaired Driving Project***, funded by the Colorado Department of Transportation, began in 1993. The project, implemented through the Prevention Center in Boulder, Colorado, is significant in that community members were involved in the planning of the project from the beginning. Working with a community advisory board and getting input from focus group discussions, the project staff developed posters and brochures in English and Spanish geared to prevent drinking and driving among Hispanic youth. Translations were carefully done. The project's core principles are the

importance of spirituality, the centrality of the family, and the use of appropriate local language.

- ***Project Safe Child*** is sponsored by the Transportation Safety Branch, Government of the District of Columbia. The program's specific emphasis is on education and training in effective use of child safety seats. The department coordinates this project with the assistance of a Hispanic community-based organization to ensure community participation. The project consists of a loaner site where Hispanic parents can get information and rent car seats at minimal cost. The project staff has translated educational materials on child safety seats and seat belts into Spanish.
- The Governor's Highway Safety Office in New Jersey coordinates several community programs for the Hispanic community, including the ***Teen Institute of Garden State (TIGS)***, a two-week summer camp for Hispanic youth which promotes positive peer leadership. In addition, there is a statewide youth advisory task force with Hispanic members. In Essex County a bilingual counselor provides community education on safety issues.
- The Florida Department of Highway Safety maintains bilingual public relations offices in Miami and south Florida. In Miami, the Public Information Officer contacts Spanish media with current information on safety programs and goes into the Cuban community to make presentations.

**Special Events.** Highway safety organizations recognize the importance of using a variety of occasions to inform the Hispanic community. Health fairs, fiestas, and other community activities provide a venue for traffic safety education. In addition, highway safety organizations have sponsored a number of significant events, including the following:

- ***Project Celebration*** is designed for high school students to promote drug and alcohol free junior and senior proms and graduations. The Texas Department of Transportation provides mini-grants (\$300 to \$500) to high schools. About 400 mini-grants are provided annually. Project Celebration is now held in all high schools in El Paso County. This took seven years to accomplish.

Project Celebration events are also held in the Rio Grande Valley. Ninety to one hundred Project Celebration events are funded by the Governor's Highway Safety Office in New Jersey, as well.

- The *Spring Break Program*, sponsored by the Texas Department of Transportation, provides safety booths at rest areas on the two main highways going across the Rio Grande Valley.
- The *Border Safety Conference* represents a major attempt to address the safety problems along the United States/Mexico border. The conference was held on November 14-17, 1993, in El Paso, Texas, and included participants from Arizona, New Mexico, California, and Texas, as well as approximately 70 participants from Mexico. The conference was organized by the New Mexico Department of Transportation. Over 80 percent of the Mexican participants were physicians, while many of the participants from the United States were law enforcement officers.

**Multifaceted Educational Programs.** Highway safety organizations have developed and implemented several comprehensive educational efforts. Several of these efforts are targeted specifically toward members of the Hispanic community; others have been carefully designed so that the information included can be adapted to suit the safety education needs of Hispanic community members.

- *Si Toma, No Maneje (If You Drink, Don't Drive)* was developed through funding from the California Department of Transportation in response to data indicating an overrepresentation of Hispanics among DUI arrests in California. Data showed that of the 327,186 people arrested in 1988 for driving under the influence of alcohol, 35 percent were Hispanic. In 1989, that proportion increased to 38 percent of a DUI population that totaled 338,056. This finding demonstrated the need for a focused educational and outreach effort targeted at the Hispanic community. The goal was to design and implement a culturally sensitive campaign in which specific aspects of Hispanic culture such as language and values were integrated into the development and implementation of all communications activities in an effort to change the behavior of those

who drink and drive. Historically there had been no statewide campaign developed to take into consideration cultural and language differences unique to the Hispanic population.

An advisory board was selected to lend credibility and expertise to the campaign and assist in forging relationships with key organizations and individuals to carry the program messages to target audiences. A media kit, public service announcements, a 28-minute video, and a bilingual *fotonovela* were developed. In the *fotonovela* format, information is presented as part of a story that is illustrated with either photographs or realistic drawings. Funding from the California Office of Traffic Safety ended in June 1991. The Century Council assumed the project and its funding and has retained all the original program elements and expanded the campaign. Underage drinking is now a secondary focus of the program

- ***Proyecto AASUL (Assistance with Alcohol and Sobriety Uniting Latinas/Ayuda con Alcohol y Sobriedad Uniendo Latinas)***, also funded by the California Department of Transportation, was developed to educate Hispanic women in Southern California about alcohol abuse and related problems and offer a network of support services. The project developed public service announcements for television. Other information and referral services included the production of a brochure listing alcohol-related service providers with Spanish speaking staff and a *fotonovela* focusing on the problems of alcoholism in a family setting. In addition, a conference on alcohol and drug abuse was held for Hispanic women.
- The ***KidSafe Children's Automobile Safety Project***, based at the University of Texas Health Science Center at San Antonio, has developed a videotape, slide show and pamphlets on child safety seats targeted to the Hispanic community. They developed these materials because so many Mexicans came to presentations in rural areas and border towns. Materials were produced in consultation with experts who advised that materials should be developed in *novella* form. The experts emphasized the importance of gender sensitivity. For example, the husband should always be represented in a more powerful

position. If a scene takes place in a hospital after the birth of an infant, the husband should be sitting on the bed rather than on a chair so as not to be shown occupying a lower position than his wife. The content of the videotape was developed in a manner least likely to offend folkways and beliefs. The videotape has been distributed throughout Texas and is shown in hospitals, in doctor's waiting rooms, and on cable television.

- The Bexar County DWI Task Force in San Antonio, Texas has launched the *U Booze, U Cruise, U Lose* DWI prevention program. The program includes bumper stickers, educational symposia for high school and college students and a videotape that has been sent to substance abuse counselors in the 14 school districts in San Antonio and was shown on a satellite television network to school government classes.
- The Texas Department of Transportation's District Office in the Rio Grande Valley uses *Traffic Safety Village*, a 4000 pound model of a small town, at schools and churches to educate children about traffic safety issues. Print materials and the presentation are in English and Spanish.
- The Pedestrian and Bicycle Safety component of the Florida Governor's Highway Safety Office works with 50 full-time pedestrian and bicycle specialists throughout the State. Four of the specialists are Hispanic. The office coordinates a program through the University of Florida to train individuals who will in turn train crossing guards. This program was developed in response to the death of a Hispanic child three years ago.
- As a result of the 1989 Florida Traffic and Substance Abuse Education Law (89-134), all first time drivers license applicants must complete the *Drug, Alcohol, Traffic Education (DATE)* course. Florida residents who have had licenses in other States or countries are not required to take the course. DATE is taught by instructors who have been certified by the Florida Department of Highway Safety and Motor Vehicles. The course lasts four hours and covers alcohol and traffic safety, other drugs and their effects, the traffic laws, and defensive driving. At the end of the course, a final exam is given; students

must score 70 or higher to receive a completion certificate. Cuban immigrants know they have to take this course before they arrive in Florida because of communication from family members.

- The New York City Department of Transportation approaches highway traffic safety as a health issue. Department staff use Spanish materials, role playing, and theater groups to promote safety. *Safety City*, a simulated intersection, is used to teach safety to children. The department's educational programs also emphasize the importance of assertion for women and children regarding getting into a car with a driver who has been drinking.
- The *Safe Driver Campaign*, supported by a Federal grant administered by the New York Governor's Traffic Safety Committee, is coordinated through the Bronx Borough President's Office. The campaign includes a seat belt/pedestrian safety program, the distribution of educational literature, a six-hour defensive driving course for taxi cab drivers which is conducted in English and Spanish, presentations for senior citizens, and the provision of 144 infant car seats to needy families through community-based health care providers.
- While conducting focus groups in El Paso, Texas, study staff visited the *Direccion General de Seguridad Publica y Vialidad Municipal*, the government-run Department of Transportation safety division in Ciudad Juarez, Mexico. Each Mexican State has its own department of transportation and its own safety laws. In 1954, the National Association of Transportation was formed to integrate traffic safety laws and patterns across states. This association has helped create some safety laws that are uniform throughout the country (such as, all trucks and buses must stop at least 20 feet from an intersection to let off passengers). The *Direccion General de Seguridad Publica y Vialidad Municipal* is divided into many departments, each with a different function such as keeping crash statistics, drivers license testing, emissions control, and traffic safety education. Study staff met with the commander who is in charge of the safety education provided to school-age children. Elementary school education in traffic safety began in 1970 and has

evolved to emphasize education through entertainment activities. Traffic safety officers visit each elementary school once a month to make presentations and deliver educational games. A package of educational games and materials has been developed. Each game is geared to a specific grade level and integrates safety information. The traffic safety officers teach the children how to use the games, do a scripted slide presentation, and help the children write and perform a play about traffic safety at the end of the school year.

In addition, the traffic safety department has developed a traffic safety school for elementary school age children. During the school year, children participate in traffic classes for four consecutive Saturdays. There is a six-day traffic safety program during the summer. The traffic safety department has created two figures, an owl and a chicken, that are used to transmit safety messages. Their images appear on a variety of educational materials, such as educational games, posters, and flyers. Adults dressed as these characters appear at fairs, school events, and in public areas and conduct public education about traffic safety.

### **Challenges Faced by Highway Safety Organizations**

Representatives of highway safety organizations enumerated the following challenges encountered during their work with members of the Hispanic community.

**Language.** In some locations, the development of print materials is hampered not only by some Hispanic community members' inability to read English but by the low literacy level in Spanish as well. For example, the Texas Department of Transportation has found that many residents statewide who speak Spanish can't read or write it. Inadequate translations of English educational materials. To counteract the literacy and translation problems, the Texas Department of Transportation has produced Spanish materials at a low reading level with many illustrations. These materials have been more successful than previous materials that were difficult for the target audience to read. In addition, the lack of Hispanic and bilingual staff hinder highway safety organizations' outreach and educational efforts to some segments of the Hispanic community.

The description of language preferences among Hispanic residents in San Antonio, Texas, reinforces the importance of knowing one's audience and targeting materials and programs carefully. According to a telephone respondent in San Antonio, Hispanics in that city who are over 40 years of age and young adults ages 18 to 24 are mainly Spanish speaking. The respondent indicated that recent immigrants and undocumented residents are more likely to be young adults. The remainder of the Hispanic population in the San Antonio area tends to be bilingual. According to the respondent, bilingual Hispanic residents have complained that some safety programs are marketed to them as though they are recent immigrants. The respondent emphasized that program planners must be careful in the design and implementation of materials since most Hispanics are born in the United States and straddle both cultures.

Possible difficulties in translating English materials to Spanish are illustrated by the dilemma faced by the Texas Department of Transportation and the Texas Department of Health when they worked together to produce a bookmark in Spanish with precautionary information for older drivers. A draft was sent to reviewers in three Texas cities. Each set of reviewers produced a different Spanish version of the text, even though they were all Mexican Americans. Several meetings were held in order to reach consensus on appropriate wording.

**Cultural differences.** Colorado representatives emphasized the importance of developing and maintaining cultural sensitivity to work with the diverse groups within the Mexican American community. Highway safety organization representatives in Texas and the District of Columbia stressed the need for more Hispanic staff who can relate to Hispanic community members and teach community members about safety issues. Study participants in New York City emphasized the need for highway safety organizations to break into the cultural loop and bring people into the highway system by using radio, churches, schools, Hispanic leaders, law enforcement, and health care providers. Other challenges mentioned include family cultural issues such as parents or grandparents holding babies and young children in their lap rather than using child safety seats, and the safety problems caused by overcrowded cars.

**Socioeconomic Issues.** According to a highway safety representative from Florida, many Hispanics don't want to be thought of as pedestrians or bicyclists. This is seen as a status issue, especially for poor people. In their home countries, walking and bicycle riding were lower class means of transportation and not recreational activities. Other study participants

emphasized that high risk behavior has a lot to do with poverty and socioeconomic status. According to these participants, many poor Hispanics have an orientation to the present with low future expectations. They act and think pretty much in the present, so programs have to reach them in the now. For example, they may not accept the message that the drinking they are doing now will affect them when they try to drive later in the evening.

**Patterns of alcohol consumption** among the Hispanic population were also acknowledged as a challenge. According to one Texas representative, Hispanic individuals over the age of 30 are still confused about DWI laws and think they are being deprived of their rights when they are punished for driving while intoxicated. According to this representative, a message needs to be sent to this segment of the Hispanic population emphasizing that driving is a privilege and not a right.

**Fear.** Undocumented immigrants tend to avoid contact with service providers, such as schools, the Department of Motor Vehicles, medical facilities, and the immigration office. These immigrants are concerned that any contact may lead to deportation.

**Immigration patterns.** Large numbers of recent immigrants of driving age who arrive within a short period of time can strain the resources of highway safety organizations. The situation in Florida at the start of Cuban immigration was described by a study participant and provides an example. When Cubans arrived in mass numbers it was hard to absorb everyone at once in terms of licensing and automobile insurance. Twenty years ago, traffic problems with Cubans were particularly bad. People couldn't read the signs, didn't respect the laws, and couldn't speak English so they couldn't take the license exam. Spanish street signs were erected. The Cuban community is now more established and the language barrier isn't as much of a problem.

**Driving instruction.** Many Hispanic immigrants come from countries where they were never exposed to highways and lots of traffic. In their countries, they may travel at lower speeds. The United States has a more complex driving system which requires more sophisticated decision making. According to highway safety organization representatives from Florida, there should be a transition period for new arrivals. Driver education programs should be supported as a reward, not punishment. People should get a bonus for taking driving classes, such as getting a minor reduction in insurance rates. Several years

ago, Florida's court systems were overloaded with traffic violations awaiting adjudication. To reduce the bloat, judges developed a system where alternatives to court were found. Traffic violators agreed (*nolo contendere*) to attend traffic school in order to avoid points on their licenses. This system exposed tens of thousands of people to formalized traffic safety education. The program has since been reduced as Florida opted for the additional revenue from fines (versus the unprofitable traffic school). According to agency representatives, the traffic school program was particularly beneficial for Cubans who often have no formalized driver education programs in their home country.

**Limited financial resources.** According to highway safety organization representatives in the District of Columbia and Texas, obtaining funds for special programs is the biggest challenge. For example, when the Texas Department of Transportation provides seed money for safety programs, local governments will join in. But when the seed money is exhausted, local governments often cannot continue the funding and the safety programs end. In the District of Columbia, funding for traffic safety programs and bilingual staff has not kept pace with the rapid influx of Central American immigrants.

**Data collection.** Based on the reports of highway safety officials participating in this study, it appears that a uniform way of collecting data on motor vehicle crashes and other safety violations does not exist. Study staff were repeatedly told that data are not collected by ethnic group. Data that exist on Hispanics has been compiled through counts of Hispanic surnames on accident and arrest reports, special studies done through universities or other research groups, and anecdotal information.

### **Collaborative Efforts**

The following collaborative efforts were described in the course of telephone discussions with representatives of highway safety organizations:

- In California the Governor's Highway Safety Office has collaborated with the Century Council and with individual community leaders in planning and implementing programs for the Hispanic community.

- **The Colorado Department of Transportation has worked with Hispanic community leaders and educators.**
- **The Community Alliance for Traffic Safety (CATS), a self-sustaining community traffic safety program in San Antonio, Texas developed safety education packages for the schools in hopes of changing behavior of the children and thus influencing their parents. The Texas PTA has distributed the packages to schools. CATS members have presented plays and skits on child safety seats, safety belts, and pedestrian projects. In addition, CATS members have convinced priests to conduct masses that emphasize the importance of using safety belts and driving safely.**
- **The Bexar County DWI Task Force in San Antonio, Texas, collaborates with Spanish radio and television and the Mexican American Unity Council.**
- **The KidSafe Children's Automobile Safety Project uses the agricultural extension service in rural areas to get contacts and reach its target population. WIC parent classes and migrant parent groups are also important in rural areas. The staff carefully times going to schools when migrant workers are in the area.**
- **The Texas Department of Transportation's Traffic Safety Office serving Hidalgo and Cameron Counties worked with Walmart to obtain donated seats for child safety seat week in February 1994. The seats were raffled and the proceeds were used to purchase more seats to give away. The Texas Safety Association, the American Automobile Association, the Texas Department of Transportation, and the community traffic safety program gave free T-shirts to newborns in hospitals and safety seats to parents who could not afford them.**
- **In the District of Columbia, the Traffic Safety Office collaborates with a community-based organization to provide education and training on car seats and seat belts. The Maryland Department of Transportation has worked closely with local Hispanic radio stations.**

- In Florida, the Department of Highway Safety and Motor Vehicles collaborates with the Florida Highway Patrol, local police departments, and civic groups. The Pedestrian and Bicycle Safety component of the Florida Governor's Highway Safety Office collaborates with churches and community-based organizations.

### **Law Enforcement Agencies**

Since many of the safety problems they discussed were related to enforcement of traffic laws and regulations, focus group participants were asked to give their views on law enforcement activities in their community. Participants were of two minds—there was discussion about the unfair treatment given to Hispanics by police officers, even by Hispanic officers. On the other hand, participants expressed a need for more law enforcement officers and stricter enforcement of traffic laws. Several participants indicated that law enforcement officers have higher priorities than traffic safety, such as violent crime. Participants in the parent focus groups were more likely to express the view that enforcement is inconsistent and arbitrary while adult male participants were more likely to view law enforcement officers as biased against Hispanics and other minorities. At the same time, adult male participants were inclined to believe that police officers were too lenient about enforcing traffic laws. Adult female participants were more likely to state the need for more police officers and were less likely to make negative statements about the police or their actions in the Hispanic community.

### **Positive Community Perceptions of Law Enforcement Officers**

Some of the adolescent participants in Los Angeles, California, focus groups had a positive attitude and opinion about how traffic safety laws are enforced by the police. They supported the overall purpose of the police in maintaining highway safety. In San Jose, California, focus group participants generally supported law enforcement campaigns undertaken by the police as long as they are sensitive toward the Hispanic community. Participants spoke highly of the *El Guardian* program, a traffic safety program coordinated by the San Jose Police Department, and favored expansion of such programs to involve more law enforcement officers and reach more community members.

Adolescents in focus groups in Alamosa, Colorado, indicated that relationships with the police are good because the police get to know people better in small towns. Young men in their twenties in Alamosa had a slightly different observation, however. They felt that the local police officers do not have a positive image among young people and appear to be on a "power trip". These young men felt that State Highway Patrol officers are professional and courteous and could teach local enforcement officers how to deal with the public.

Adolescents in Staten Island, New York, had positive comments about the Hispanic policemen with whom they have had contact. One participant mentioned a policeman who works at his school and who is respected by everyone. The adolescents expressed a wish for some sort of mechanism to screen police officers before they are selected to work in the Hispanic community. Young women in Miami focus groups also praised the police officers who work in the schools. "Just about every school has an officer and they're really good," participants said, "you get to know them."

### **Negative Community Perceptions of Law Enforcement Officers**

**Enforcement is inconsistent, arbitrary and selective.** Some Los Angeles adolescent focus group members felt that law enforcement is selective, and that enforcement depends on the individual criteria of each police

officer. With regard to police interaction with the Hispanic community, most participants felt that the police are not doing their job properly because they tend to abuse their power, especially when dealing with Hispanics. Cuban adolescents in Miami spoke of being stopped by police merely because of the type of car they drive. They felt that the police target young people and give young people

*"Enforcement at times is selective based on the ethnic background of those violating the law. Many officers do not respect people and lack good manners. There are offensive officers who use bad language. Many officers do not speak Spanish and have problems communicating with Latinos. Most of the officers do not care about you not understanding what is happening."  
(Adult Males, District of Columbia)*

tickets while older drivers get warnings. This was echoed by Puerto Rican participants in the Bronx who stated, "Police don't like Puerto Ricans. If you have a nice car they want to stop you. Sometimes Hispanic police are worse than the American police." Central American

adolescents in the District of Columbia made the following comments, "Police at times judge young people by their clothes and looks. Police harass and do not respect Latinos. The bad thing is that police must be respected but they think they do not have to respect us."

Both young women and adolescent males in Miami, Florida, declared that police officers often flirt with women who are stopped for traffic violations and that women get off easier because of this. One female participant stated that she had been stopped by police officers four times and never given a ticket. Other female participants indicated that the police take too long to reach the scene of an accident and that police officers need additional training to develop their human relations skills.

One group of adolescents in the District of Columbia focused on the way Hispanics misunderstand the actions of police officers. They stated that the police try to make sure that all laws are obeyed, but "many times people do not want to listen and are not willing to follow the law even when the police are willing to explain and educate the community. When some people are told about the law, they make it sound as though they have been discriminated against just because they are Latino. Many community members are too quick to think that the police are singling them out for harsh treatment. For example police stop Hispanics for having tinted windows in their automobiles, although in El Salvador police do not stop anyone for that reason."

*"The role of the police is to arrest and batter; they should enforce the law and not harass people. The police think all Mexicans are alike; when one Mexican messes up, police think the next one will too. When they see a Hispanic in a nice care, they stop him. The police don't like or care about Hispanics. They are not good role models.*

*(Adolescent Males, Denver, CO)*

*Policemen stereotype everyone. They are not trusted, and are not a good source of information. They do not respect your rights. Sometimes they break the law."*

*(Adolescent Males, El Paso, TX)*

**Law enforcement officers discriminate against Hispanics and other minorities and abuse their power.** Young adult men in Los Angeles focus groups stated that the police selectively target Hispanic drinkers. Two participants provided an example of how the police tend to

wait outside bars in order to catch drinkers. These participants felt that instead the police should be patrolling the streets for criminals. While young adult women in San Jose, California, supported the checkpoints set up by police to look for drunk drivers, they objected to the selectivity toward Hispanics. They felt that the police stereotype Hispanics. For example, according to participants if there are three or more Hispanics together in a car, the police automatically stop them because they think they are gang members.

Parents participating in District of Columbia focus groups made the following comments, "There is a lot of friction between the police and the community. The community does not feel the police is doing anything to improve their relationship with the community. The community does not trust the police because of the injustices and their lack of sensitivity toward Latinos in general. In this city, punishment for breaking the law is dependent upon who are the individuals involved. If the violator comes from an affluent family, then the punishment is not as severe as if the violator comes from a poor family. We have a big problem with diplomatic drivers who are immune from punishment and violate the law. Police officers violate the traffic laws they enforce. There is a lot of racism against Latinos. Oftentimes, Latinos are treated differently because of language and ethnic differences. There is a lack of trust in the police department. The Mt. Pleasant disturbances were due to the lack of sensitivity from the police department and the lack of preparation of police officers in dealing with people from different ethnic backgrounds."

**Police are too lenient.** Focus group participants in Los Angeles felt that the police enforce traffic laws in some neighborhoods, but not in others. Some participants felt that police are overwhelmed with other kinds of violations and paperwork, and have become lenient about enforcing traffic laws. Participants cited first-hand accounts of warnings being issued rather than tickets for some violations. Parents and adolescents participating in focus groups in the Bronx, New York, agreed and stated that police do not enforce traffic laws in the city because they are too busy fighting crime. The priority, they said, is crime and drugs, not traffic safety. However, these participants noted, there are more police patrols in non-minority communities.

**Police officers continually break traffic laws.** Focus group participants at all sites gave examples of occasions when they had observed police officers violating traffic laws, for

example, speeding, making U turns, and failing to use signals. These observations led some participants to remark that the police are bad examples when it comes to traffic safety.

### **Suggestions for Improving the Relationship Between Community Members and Law Enforcement Officers**

**Greater police presence in the community would promote safety.** Although focus group participants objected to some of the tactics used by police and generally felt that enforcement is inconsistent and biased, participants in every target area called for a greater police presence in their community. It was the consensus that more police officers will be required in order to decrease the pervasive practice of drinking and driving. In addition, participants in the District of Columbia complained that there is little enforcement to secure the safety of pedestrians in a city with extremely heavy traffic.

*“Police enforce the traffic laws, but there is a need for more enforcement and police presence in the Hispanic community. There are not enough check points for cars. Most people respect the police and will be more willing to listen to them than any other agency. Police involvement in educating the community is very necessary. The police should organize community meetings to teach about safety and violence.”*  
*(Adult Females, District of Columbia)*

**More enforcement of existing traffic laws is needed.** Focus group participants at all sites emphasized the need for increased enforcement of existing traffic laws, especially in regard to drinking and driving and speeding. Participants called for higher fines and more severe penalties for persons who drink and drive. According to young men in a Bronx focus group, “A person can get caught drunk driving and be out on the street right away. You just get a fine. Police should be more strict. Licenses should be revoked. There should be more checkpoints on weekends and higher fines.” Parents of young children in the District of Columbia called for stiffer penalties for drivers who break the law and drive recklessly near schools and day care centers.

**Police officers need additional training to work with minority communities.** According to male focus group members in the District of Columbia, the police need to work with community organizations to educate members of the community and to improve relations

between the police and the community. In addition, the police department should provide training to officers on public relations, cultural sensitivity, conflict mediation, and other areas that are needed. Spanish speaking police officers should be trained to promote safety in the community, and police should collaborate with schools like Carlos Rosario (a focus group host) to promote knowledge and understanding about traffic safety.

### **Perspectives of Law Enforcement Officers**

In telephone discussions, law enforcement officers in the study's target sites discussed their relationship with the Hispanic community and provided their perception of how the community views them. Responses from the law enforcement officers who participated in the study revealed their awareness of the negative perceptions of community members and an understanding of some of the reasons for these perceptions.

**Mistrust and fear.** Law enforcement officers who participated in the study are fully aware of the mistrust and fear towards them that exist in some segments of the Hispanic community. Law enforcement officers in California attribute the lack of trust to a lack of knowledge on the part of some community members about U.S. law and the role of law enforcement officers. Another factor may be the fact that there are insufficient resources within the police department to respond to their needs. Another factor may be the lack of communication and outreach between the Hispanic community and law enforcement officers.

Socioeconomic factors also come into play with mistrust and dislike for law enforcement officers being greater among low income Hispanics, migrant workers, and undocumented residents.

*"I don't think that it is only the Hispanic community but, in general, law enforcement is perceived negatively because we enforce certain laws like traffic check points. Any driver that has violated the law will be apprehensive about the law enforcement community because of the consequences. With the Hispanic community, an added element is the undocumented community, which fears deportation. They are always running away from us. I do not think that they trust us. Until they understand the difference between INS officials and law enforcement, the perception will remain as such."*  
*(Agency/Organization Representative, California)*

According to one California officer, "There is fear especially among recent immigrants as well as the undocumented. Because they are not as aware of our laws yet, they fear us. They associate us with the Immigration and Naturalization Service and are fearful about being deported. This makes them run away from accidents, not get a license, or avoid getting their vehicles properly inspected." In New York City as well, the increase in undocumented residents has had an effect. A law enforcement officer in New York City said, "The Hispanic community does not trust the police anymore. There are a lot more illegal immigrants and they are more violent. Older people have more respect for the police than young people. Gang warfare is a factor." Although law enforcement officers in Florida indicated that the general tendency among Cubans is to be respectful of law enforcement officers, "There is some resentment from Puerto Rican or recent Cuban arrivals where law enforcement is not perceived as trustworthy."

Mistrust of the police is also a barrier in the District of Columbia. According to police officers in the District, "There are not enough Spanish speaking officers to work with the Latino community; there is little community support for law enforcement education and outreach." In addition, for many Central American immigrants who came to the United States to escape civil war in their countries, the police may be a reminder of the repressive and violent conditions that they left behind. Until they become more familiar with U.S. law and the role of law enforcement personnel, fear and mistrust remain.

**Lack of understanding of U.S. laws.** In some cases cultural practices and traditions may conflict with U.S. laws, causing difficulties for both community members and law enforcement officers. As one Texas law enforcement officer described, "For example, police officers go into a house because of a disturbance, a husband is beating his wife and kids. Under Texas law, the police must arrest the guy, but when they handcuff him the family objects. They don't understand the law so [the family feels] the police are being bad guys. In the Mexican culture, the man in the family is considered the 'main guy' in the house and what he says goes."

**Impact of language and country of origin.** According to law enforcement officers in the District of Columbia, many Hispanics who reside in the District have come from rural areas where education is limited. They do not speak English, and cannot write or read in their native language. They fear they will be mistreated by police officers who do not speak

Spanish and are not sensitive to their culture. Overall, these law enforcement officers feel that community and police relations have improved in the last few years. The community has learned that police officers are here in the neighborhood to provide security and to keep law and order. Most Hispanics, they said, respect the police and feel comfortable around officers who speak Spanish. The majority of the problems arise when there is lack of communication with the police due to language barriers.

### **Law Enforcement Outreach Activities**

- ***El Protector*** is a traffic safety program developed for Hispanic communities. The program was developed by the California Highway Patrol and funded by the California Office of Traffic Safety and NHTSA in 1987. The program was developed in response to the overrepresentation of persons with Hispanic surnames in fatal motor vehicle crashes and DUI arrests. The program has been expanded throughout California. *El Protector* coordinators are Hispanic law enforcement officers who serve as role models for the Hispanic community and act as traffic safety educators in a nontraditional fashion. The coordinators disseminate traffic safety information through the Spanish media and make presentations at schools, migrant camps, churches, and other organizations. The *El Protector* program addresses basic traffic laws, prevention concepts, driving under the influence of alcohol and other drugs, seat belt use, and the proper use of child safety seats. The program develops and distributes bilingual highway safety educational materials to the targeted communities.

The San Jose, California, Police Department sponsors the *El Guardian* Program (formerly called *El Protector*). The Hispanic community in San Jose was not responsive to the name, *El Protector*. Consequently, the police department changed the name to *El Guardian* and the community has been much more receptive. Through the program, police officers reach the Hispanic community through parades, schools, churches, community groups, and home visits. Radio and television are also used. The program, funded by the California Office of Traffic Safety, distributes T-shirts, key chains, decals, and other items. The most successful strategy has been radio. Family presentations (home visits) to reach a specific family have also been effective. Focus group participants in San Jose were quite familiar with and complimentary of the program.

The *El Protector* program has also been implemented in Del Rio, Texas. Del Rio's population is about 40,000 with 32,000 Hispanics (80 percent of the population). Del Rio is 114 miles east of San Antonio. The Del Rio Police Department has developed local radio spots in Spanish and is using television spots developed in Arizona where the *El Protector* program is one and a half years old. The radio spots are about traffic safety issues such as putting people in the back of pick up trucks, care in the loading and unloading of school buses, drinking and driving, and pedestrian safety. The police officer who serves as *El Protector* has coordinated outreach activities at schools on pedestrian and bicycle safety, and appears on radio in both Del Rio and Ciudad de Cuña in Mexico. During these broadcasts he often focuses on safety equipment because Mexican cars are often substandard. In addition, he has appeared on the Spanish television stations Univision (San Antonio) and Telemunda (San Antonio, Eagle Pass, and Del Rio) to discuss the *El Protector* program and to discuss seat belt use on both sides of the border. He has included railroad traffic safety messages in his presentations because Texas has one of the highest train and automobile collision rates in the United States.

In New Jersey an *El Protector* program has begun that targets migrant farmworkers.

- The Los Angeles Police Department has four traffic divisions. Officers from these divisions make presentations at elementary schools about pedestrian and passenger safety issues. They also try to reach the community at large by appearing at the county fair, boat shows, and parades. The department works with coalitions, committees, and advisory groups. They provide statistical information and promote issues like bicyclist helmet use, seat belt use, and the prevention of driving under the influence. They also have a traffic safety unit that goes to schools to talk to PTAs, students, teachers, crossing guards, and parents. They promote the *Sober Graduation Program* in June for students. The police department uses Spanish radio as a vehicle for safety promotion to the Hispanic community.
- The Justice Information Center in Denver, Colorado works through referrals from other agencies. The center provides translation services for clients in the court system and referrals to appropriate agencies to meet specific needs.

- The District of Columbia Police Department has opened the *Hispanic Police Community Center* in the heart of the Hispanic community. The goal of the center is to bring the police department into the community by providing culturally sensitive services and information (Spanish brochures, for example) and to build trust and rapport with community leaders. Hispanic officers staff the center on a daily basis. The center's activities have been limited to information dissemination and police enforcement activities due to the lack of resources to expand the scope of outreach. In addition to operating the community center, the police department assigns police officers to school districts to coordinate outreach, education and to maintain security. The school officers work with teachers to provide support and education on street violence prevention, drugs and alcohol education, and other topics.
- The Metro-Dade County Police Department in Miami, Florida, coordinates the *Teen Alcohol Prevention Program*. The goals of the program are to reduce alcohol-related traffic crashes, injuries, and fatalities by initiating a proactive educational program in district high schools which targets holidays and prom nights. Students are informed about the consequences of underage drinking, why they should not drink and drive, why they should not ride as passengers with drinking drivers, and the importance of seat belt usage. The program aims to get students to convey the prevention message to peers by involving the students in curriculum development, in the creation of a public awareness campaign, poster contests, and in other activities designed to deter teenage drinking and driving. Eighteen schools participated in the program during the 1993-94 school year. Nine of the participating schools had a Hispanic enrollment of 50 percent or more.

## **Health Organizations**

A variety of health-related organizations participated in the study, including hospitals and community-based clinics, research and technical assistance-oriented health organizations, and State health departments. Representatives of all participating organizations discussed the nature and extent of their interaction with the Hispanic community, outreach activities, and challenges related to the delivery of health care services.

## **Interaction with Hispanic Community Members**

- The Pan American Health Organization (PAHO) has 12 binational health boards that are linked with the sister city program which pairs United States and Mexican border cities. These boards meet four times a year and have technical subcommittees to deal with specific subjects. For example, subcommittees exist for disease control, the environment, HIV/AIDS, drug dependency, and other issues. These subcommittees develop binational projects between the sister cities, exchange information, and work to support each other. The binational health boards have a membership of private citizens and representatives of government agencies, Area Health Education Centers (AHECs), and other organizations.

PAHO and the United States/Mexico Border Health Association have helped create and maintain a network of the universities along the border with the goal of exchanging information and working together on studies. Organizations in Arizona and the Mexican State of Sonora are forming a committee on traffic accident prevention. The committee will first identify who is working in the area of traffic accident prevention in order to develop networks and to find out what needs to be done. They hope to find out what happens in crashes and to provide a backup system for treatment of crash victims. They also hope to change behavior on the highways, especially alcohol-related problems. California and the Mexican State of Baja are working jointly with rescue squads to provide them with courses that will help them deal with dangerous substances trucking across the border. Highway and traffic safety concerns are growing because the numbers of crashes are increasing (especially compared to other causes of death). Communities and authorities on the border are

mounting a campaign to increase seat belt use, decrease speeding and reduce alcohol sales to minors.

- The Texas Department of Health has a special educational program for older drivers, the *Senior Occupant Protection Program*. This program includes a newsletter, brochures, and presentations in retirement villages, senior citizens centers and other places where the elderly may congregate. The program's outreach extends to the Hispanic community and according to the director of the program, members of the Hispanic community have been receptive to the program. In addition to providing older drivers with the assistance and information that they may need to continue to drive, the program addresses the needs of elderly pedestrians.
- The *Safe Riders Program*, located within the Department of Epidemiology of the Texas Department of Health, distributes child safety seats and bicycle helmets. Program staff conduct outreach activities in over 400 hospitals. Expectant parents and parents enrolled in parenting classes receive information about and access to child safety seats and bicycle safety helmets. Presentations are made in English and Spanish. The program distributed 50,000 seats in 1993, but received requests for 120,000.
- Services are provided to Hispanic communities through American Red Cross local chapters throughout the United States. Local chapters have bilingual staff to ensure that language is not a barrier to providing adequate services. Staff services are provided in the following program areas: Health and Safety (which includes first aid and CPR information and training in Spanish), HIV/AIDS Education, and Youth Safety. Local chapters develop networking relationships with their local Hispanic communities. Educational materials developed at the national level are distributed to the Hispanic communities through local chapters.
- Mary's Center for Maternal and Child Care, in the District of Columbia, is a prenatal and pediatric health center dedicated to increasing access to comprehensive care to low income, uninsured, pregnant women and their children. The Mary's Center team of culturally diverse professionals provides holistic health care to women and children with limited resources. Mary's Center offers prenatal care, home visits, extensive

social services, 24-hour midwifery care, family planning and primary care from birth up to age six. Mary's Center also has a program specially designed for the care of pregnant teenagers. These programs are administered by a team of bilingual certified midwives, nurses, social workers, pediatric staff, and volunteer obstetricians from Columbia Hospital for Women. The center charges fees on a sliding scale according to the financial needs of the client without denying care to those who cannot afford to pay. Mary's Center makes referrals to the WIC program and other social services; distributes car seats provided by Project Safe Child (a program coordinated by the District of Columbia Department of Transportation); conducts health education programs; provides access to Family Place (a drop-in center in the community); and provides physical exams to toddlers in the Head Start Program and immunization follow-up care.

- La Clinica del Pueblo is a primary care medical clinic in the District of Columbia which provides free health care to Hispanics, primarily Salvadorans. While three persons on the staff are paid employees, all others, including doctors, nurses, laboratory technicians and lay persons, are volunteers. Approximately 100 volunteers come to the clinic on a regular basis; countless others provide their services within the community.
- The Florida Health Promotion and Wellness Program has an injury prevention grant from the Centers for Disease Control and Prevention. Health Promotion and Wellness coordinates programs in Duval, Hillsborough, and Dade Counties. Cubans are concentrated in Hillsborough and Dade Counties. The program operates a child safety seat distribution program and a drowning prevention program (aimed to prevent drowning of children 0-4 years of age). There is a coalition in Miami that focuses on traffic safety, law enforcement, fire rescue, and hospitals. Program staff have gone into Hialeah (a Cuban community) and delivered the child safety program with the police department. There are five injury prevention coordinators in the field. The program works with the Florida Department of Highway Safety and with Students Against Drunk Driving (SADD) chapters.

- Of the 27 facilities in the public health system in New York City, Lincoln Hospital is the most bilingual and bicultural with regard to personnel. There is an extensive interpreters program for over 150 languages. The hospital provides speakers to schools for health fairs and career days. There is also a mobile health unit which has become a symbol to the community that the hospital cares about them. According to hospital personnel, the Puerto Rican community is a very loyal consumer and has tremendous respect for health care providers.

### **Challenges Related to the Delivery of Health Care Services**

**Living conditions in border areas.** The U.S./Mexico Border Association is focusing on the *colonias*, large rural settlements of recent immigrants on the Texas/Mexico border. Fifty percent of the residents in the *colonias* are migrant and seasonal farm workers. The *colonias* generally do not have paved roads, sewage facilities, or indoor plumbing, but are occupied by hundreds of recent immigrants. Better housing and sanitation are needed in the *colonias* and in migrant camps. The association is trying to get service providers to work in the evenings, so that they are more accessible to *colonia* residents who work during the day. The association is working to address problems by providing services where the community can access them, using providers who are sensitive to the Hispanic culture, and trying to develop a community-based understanding of prevention.

**Limited resources.** Limited resources to provide services to everyone in need is the greatest challenge for most community-based health organizations serving the Hispanic community, particularly in areas with many recent immigrants.

**Language.** Bilingual and culturally competent staff are crucial in the delivery of health care services. Whether the emphasis of a particular organization is information and education or the actual provision of medical care, the lack of staff who speak and understand the language and can be sensitive to cultural norms is a formidable barrier.

**Special needs of recent immigrants.** Immigrants from rural areas may not have had access to preventive health measures such as immunizations. For example, according to health care providers in the District of Columbia, many immigrants in the Central American community have never been vaccinated. They come to the United States with conditions common to

third world countries such as anemia and gastrointestinal disorders. Due to war conditions in their countries of origin and the undocumented status of many, mental health problems such as post-traumatic stress disorders are common among these immigrants. More than 100,000 Central American residents live in the Washington Metropolitan area. Because some of them are denied refugee status and legal residence in this country, they live in constant fear of being detected and deported. This fear, coupled with language and cultural barriers, lack of financial resources, and lack of understanding of the health care system, keeps them from preventing them from seeking appropriate health care.

**Lack of emphasis on prevention.**

According to health care providers in the District of Columbia, the health maintenance concept of recent Central American immigrants often does not include preventive care to avoid illnesses. In addition, compliance with the medical regimen necessary to cure an illness and followup requirements for children may be

*“Machismo among Latino men serves as a protective mechanism, but it can also interfere with the adequate delivery of health care services; notions of health care and well being are limited and do not include preventive care.”*

*(Agency/Organization Representative,  
District of Columbia)*

misunderstood. Compliance issues are sometimes resolved as recent immigrants develop greater confidence in the health care system. Health care providers stated that their efforts to prevent illness may be negated by the belief among some Hispanics that one's fate is predetermined and that efforts to prevent illness and injury are futile. Prevention activities can be encouraged if they are presented as beneficial to the family and to the community as a whole. Messages about prevention have to be reinforced through as many respected community organizations and institutions as possible.

## **Emergency Medical Services (EMS)**

EMS personnel in the target areas covered by the study discussed their efforts to ensure that all Hispanic community members have full access to emergency services.

### **Challenges Faced by EMS Personnel**

- **Language.** All EMS personnel participating in the study referred to language as a principal challenge in effectively working with Hispanic community members. EMS staff in Los Angeles reported that their system is equipped to receive calls in 86 languages, although Spanish is the most frequent language used by 911 callers who are non-English speaking. Bilingual dispatchers and staff and translation services ensure effective communication in the field. In San Diego, EMS staff reported that personnel have attended cultural sensitivity training in order to better deliver services to the Hispanic community. Bilingual staff serve as dispatchers and field paramedics. In Dade County, most dispatch personnel are bilingual and Hispanic. Once outside the Dade County area, however, the situation changes.
- **Cultural differences.** According to a representative from a California-based EMS, there is somewhat of a barrier related to EMS personnel's understanding of how some Hispanics react during an emergency. EMS staff have expressed a need for training on techniques for calming Hispanic family members during an emergency. In addition, EMS study participants indicated that many recent immigrants bring medicines, remedies, and methods from Mexico to the United States. If someone has ingested an overdose of a home remedy, EMS personnel may not be able to respond as quickly to the reaction because family members may be unsure of or unable to describe the ingredients in the remedy. EMS personnel may be unclear about how to counteract the negative effects of an overdose without causing additional harm.
- **Special problems of recent immigrants.** Inadequate knowledge of how to access services, and language barriers, are the major barriers for the District of Columbia Fire Department. Many Hispanics are not accustomed to using the telephone to access emergency medical services. There are no programs available to train Hispanics on how to access and utilize emergency medical services. If undocumented, they

infrequently access medical services for fear of being identified and deported. Many in the community confuse the different roles of the fire, EMS, and police departments.

Florida EMS providers have found that Cuban immigrants lack familiarity with prehospital service since this does not exist in Cuba. Family and friends provide information. Often Cuban community members use 911 as their primary medical service.

### **EMS Outreach Activities**

Efforts to increase access to Emergency Medical Services include:

- Distribution of brochures and other print materials.
- Bilingual staff and the use of interpreters and translators.
- Public service announcements on Spanish radio and television.
- Participation in community events such as health fairs.
- Presentations in Spanish to elementary school students. These presentations are provide instructions on how to handle an emergency situation, including the appropriate use of the 911 telephone number. These students act as intermediaries; it is expected that they will carry this information to their parents.
- El Paso EMS has developed a DWI and seat belt awareness program targeted toward 16 to 26 year old males. Most of the presentations are to high school and college students and to 18 to 24-year-olds on military bases. El Paso EMS developed an audiovisual presentation with slides of crashes in El Paso County. The program is for the entire community, but reaches Hispanics. The county experienced a significant decrease in the number of DWI arrests (about 20 to 25 percent) about two years ago, but there has been no formal evaluation to show a correlation between the decrease and the program, which had been

running for about two to three years. The agency representative who described the program believes that the program has been a factor in this reduction, along with better roadways and better vehicles.

## **Educational Institutions**

Representatives of school systems in the study's target areas discussed the approaches used by school personnel to meet the needs of Hispanic students, particularly children of recent immigrants.

### **Challenges Faced by the Schools**

**Language.** All the school systems participating in the study have implemented programs to enhance communication among school personnel and Spanish speaking students and parents. The staff of the Los Angeles Unified School District Office of Communications communicates with parents in eight different languages, including Spanish. The schools have bilingual staff and toll-free telephone numbers that parents can call to get information in languages other than English. Language is a special challenge in areas along the U.S./Mexico border. For example, 60 percent of the students in the Brownsville, Texas Independent School District are from Mexico and speak limited English.

*"Challenges faced by schools include language needs, cultural sensitivity, newly arrived Hispanics (Mexicans, Dominicans, and many undocumented immigrants) versus Puerto Ricans. A school curriculum is needed on pedestrian safety with text in the appropriate language. All forms of highway traffic safety are missing from the schools. There is no systematic campaign."  
(Agency/Organization Representative New York City/New Jersey).*

**High School Dropouts.** The open campus policy in some high schools promotes truancy. Parent involvement diminishes in high school. In the New York City schools, school attendance programs have been established in an attempt to prevent dropouts. When a student has twenty absences, the student is referred to an attendance program. According to study participants, dropout rates among Hispanic students may reflect a lack of

encouragement from parents, the economic needs of the family, or the failure of the schools to provide a culturally sensitive educational program for Hispanic students.

**Parental Involvement.** Parental involvement is increasing in the Los Angeles schools. According to study participants, Hispanic parents still believe in the school system. Massive outreach is the main strategy to get parents involved. The Brownsville, Texas School District also has a very active parent program. One thousand parents recently attended parent conferences and parent volunteers assist teachers in the classrooms. In the District of Columbia, Hispanic parental involvement is minimal. At the present time schools provide translators for PTA meetings and parent education courses. These strategies have shown some success. In Dade County, Cuban parental involvement is very high, especially compared to other Hispanic groups. Newsletters are sent home regarding PTA meetings and back to school nights. In New York City, the participation of parents is excellent in the elementary grades. For the first through the sixth grades, 40 to 70 percent of parents participate. In middle school and high school, participation is very poor.

### **Outreach Activities and Special Programs**

**Bilingual education.** Since 1989 the District of Columbia has operated the Bell Multicultural High School, which has been commended as a model program for language-minority students. The Bell Multicultural High School began as a community-based organization (the Multicultural Career Intern Program) formed by a group of volunteers who secured a 3-year grant from the Department of Labor. The grant enabled the volunteers to develop a full-fledged high school.

**Home visits.** Home visits and telephone communication are used by New York City schools to reach parents. These visits have been considered very successful and are viewed as a personal investment on the part of school staff. In El Paso, Texas, the Communities in Schools Program places an outreach staff person in the schools to make home visits and work with parents.

**Use of the media.** The superintendent of the Brownsville, Texas Independent School District has a weekly bilingual radio program which has been considered an effective outreach

strategy. The program has assisted the superintendent in establishing a good relationship with community members and keeping the community informed about school activities.

**Driver and safety education.** In California, the schools offer special seminars, courses, workshops, films, videos and special guest speakers who give safety presentations. There is no difference in the driver education program for Hispanic and non-Hispanic students. The program was developed by the State Highway Safety Office. Topics covered in the course include signs, drinking and driving, laws and regulations, and defensive driving.

In Brownsville and El Paso, Texas, teachers and coaches provide safety information in the classroom as part of health lessons. In Brownsville, Drug Abuse Resistance Education (DARE) police officers provide instruction in the elementary schools. Although their focus is substance abuse prevention, they also provide safety information. The school district has various programs related to safety, injury prevention, drug abuse prevention, and other topics.

The State of Texas has implemented the "90 Percent Rule." Students must attend school 90 percent of the time or they cannot apply for a drivers license. School principals must sign a form attesting that the student was in school 90 percent of the time. In Brownsville, driver education is provided by private companies. In El Paso, driver education is coordinated by an Education Service Center within the school system.

In the District of Columbia, all safety education is provided by the police department outreach educational program working in conjunction with the individual schools to meet children's safety education needs. There is a driver education program within the school system in which all high school students are eligible to participate. This program is not offered in Spanish. Latino students who do not speak or understand English have difficulties with this program in part due to a lack of access to qualified bilingual teachers.

In Florida, the schools have a curriculum in elementary school regarding bicyclist and pedestrian safety. In Dade County, there is a traffic safety and driver education program in the high schools. The course is one semester and students must be at least age 16 to get a restricted license. There are 27 high schools in the county, each with two driving instructors.

Police officers and insurance agents speak to the students about safety issues and there is always a presentation from a person who was seriously injured in a crash.

In New York City, according to the school system representative, a school safety curriculum is needed with text in the appropriate language. There is a focus on safety education in suburban areas, but not in the city.

### **Collaborative Efforts**

In each of the school systems participating in the study, their primary collaborative efforts on safety education are with local police departments. The police departments provide DARE officers as well as officers who provide education on issues related to public safety, violence, drug abuse prevention and other safety-related topics. In addition to collaborative efforts with police departments, the Los Angeles School District collaborates very closely with organizations implementing campaigns against drinking and driving, especially campaigns targeted to young Hispanic males. The Dade County driver education program collaborates with Jackson Memorial Hospital, the Traffic Safety Council, AMTRAK, and State Farm Insurance.

## V. EFFECTIVE STRATEGIES FOR HEALTH AND SAFETY PROMOTION

One of the goals of this study was to learn what health and safety promotion strategies have been effective in Hispanic communities. To that end, agency and organization representatives and focus group participants discussed programmatic activity that has been successful in their communities for communicating health and safety information and perhaps changing behavior. Study participants were also asked about strategies that have not worked and possible reasons why not.

Particular attention was paid to the symbols and institutions that can best be used to communicate an effective message. Focus group participants described in detail the public service announcements that they have viewed on television or listened to on the radio. Attempts were made to discern any differences in the manner with which the different Hispanic groups prefer to receive information. Figure 3 lists those strategies mentioned most often by agency and organization representatives and focus group participants.

*"The most successful strategies are those that provide bilingual access to the community, provide real solutions to problems, commitment to ascertain and serve the needs of the community, listen to what is important to that community and provide a holistic approach to meeting their needs."*

*(Agency/Organization Representative,  
District of Columbia)*

### **Realistic Messages About Health and Safety Promotion**

Although agency and organization representatives mentioned personal contact and personal relationships most often as important strategies, focus group participants seemed to be more concerned about the message than the messenger. The focus group participants also described the mechanisms through which health and safety messages should be delivered. They were quite emphatic about the need to develop central themes that have some relationship to their lives. They called for graphic and explicit depictions of motor vehicle

**Figure 3. Effective Strategies Identified by Study Participants**

<b>Strategies Identified Most Often by Agency and Organization Representatives</b>	<b>Strategies Identified Most Often by Focus Group Participants</b>
<ol style="list-style-type: none"> <li>1. Person-to-person contact</li> <li>2. Presentations</li> <li>3. Distribution of health and safety information in Spanish</li> <li>4. Spanish radio</li> <li>5. Public service announcements</li> <li>6. Spanish television</li> <li>7. Training and technical assistance</li> </ol>	<ol style="list-style-type: none"> <li>1. Realistic messages</li> <li>2. Public service announcements</li> <li>3. Person-to-person contact</li> <li>4. Spanish television</li> <li>5. Distribution of health and safety information in Spanish</li> <li>6. Presentations</li> <li>7. Spanish radio</li> </ol>

crashes and the impact on families. According to one focus group participant in San Jose, California, "Situations must be portrayed in a way that frightens people into changing their behavior."

Focus group participants in the District of Columbia stressed that spokespersons who reflect the community's Central American origins and who can communicate issues that are of relevance to them are preferable. They emphasized that any attempt at health and safety promotion must illustrate important community concerns. For these Central American immigrants, messages in Spanish were preferred because community residents would better understand and relate to the information. According to these participants, public awareness campaigns should feature persons who have been incarcerated because of an accident caused

by drinking and driving or driving under the influence of other drugs. In addition, victims of drunk driving should share their experiences. Female participants emphasized that there should be a special campaign targeted toward husbands and that education and information about traffic safety should be available in places where men go to drink.

Women participating in a Miami focus group agreed that the most memorable presentations use real people and not actors. If young people or children are involved, this captures people's attention. Examples cited were a poster of a little girl with the caption, "She has the eyes of her father and the AIDS of her mother." Effective messages should feature young people and be reality-based, almost like a home video. Also mentioned by the women was a

poster about drinking and driving that shows a young man sitting in a wheelchair in an empty room. The caption reads, "The Party's Over." Focus group participants also commented on the effectiveness of billboards that have pictures of children who have been killed by drunk drivers. The caption on these billboards is, "Look at what drunk driving costs."

Puerto Rican parents in Staten Island emphasized that health and safety promotion messages have to be real and show the way families live. "Cartoons are only good for children," they said, "but it's good to start with children so that safety becomes a lifelong process." Other participants in Staten Island commented on the impact of the police department's strategy of placing automobiles that have been damaged in serious crashes on the side of busy roads with the sign, "This could be you."

*"It is important to take the time to talk and not to rush using personal approaches to ensure building trust and confidence."  
(Agency/Organization Representative,  
District of Columbia)*

*"It is critical to learn about individuals and groups with which you are working and to check assumptions and appreciate the diversity among Latinos. Close involvement with the community and a personal approach to service delivery are important."  
(Agency/Organization Representative,  
District of Columbia)*

## **Importance of Personal Contact and Relationships**

Agency and organization representatives emphasized the importance of personal relationships in the Hispanic community. One approach that has been used in Texas and California for disseminating information is the use of lay educators, *promotores* and *promotoras*, who are known and respected in the community. Focus groups were asked whether this strategy might be appropriate. Participants in New York City and Miami were not familiar with the strategy. Some participants in California viewed the strategy as intrusive, but participants in the District of Columbia, Texas, and some in California felt this strategy would work if the educators are well known in the community and are willing to make the necessary contacts to ensure the participation of community members.

Adolescent male focus group participants emphasized the importance of peer groups in presenting information. Several focus group participants stated that they valued the opportunity to meet and discuss issues and that a setting comparable to a focus group would provide a good learning environment because friends could share their experiences. Adult focus group members in Texas and the District of Columbia also expressed the belief that community members could be more involved in safety promotion activities. Perhaps because of their experience with *promotoras*, women in the Rio Grande Valley stated that safety education could also be taught in people's homes by inviting neighbors and having a speaker come in, and that community members could be trained to be the educators.

An agency representative from Texas stated that Hispanics are very loyal, not only to individuals, but to products and brands. This comment was often repeated by other agency and organization representatives. This becomes important when designing a program because study participants indicated that once a message has been delivered to the Hispanic community and they have bought into it, they will stand by it. Because Hispanics are very humble people, according to one Texas agency representative, "They won't tell you what they think unless directly asked. A relationship must be established and trust must be built in order to receive feedback."

## **Using Traditional and Nontraditional Channels**

A study participant from the U.S./Mexico Border Health Association provided a list of possible means to address safety problems in the Hispanic community, drawing on the experience of the organization. This list is notable for its mix of strategies and calls attention to what many representatives indicated—that a variety of strategies will be needed to present and, most importantly sustain, a clear message about safe behaviors to the Hispanic community. Included on the list of strategies are the following:

- Go to day care centers and Head Start programs to talk with parents in order to educate them as to why it is important to use child safety seats, and to demonstrate the correct way to use them.
- Form community groups led by a trained lay educator (a *promotore* or *promotora*) to enable adults to discuss safety issues and learn from each other.
- Direct programs to children because this is a good way to reach parents. The U.S./Mexico Border Health Association used this technique to advantage during a first aid course for children. After participating in the classes, children taught their parents how to do cardiopulmonary resuscitation and informed them about other safety practices.
- Reach children before middle school and high school because by high school their opinions are too well formed.
- Use role playing techniques. Preaching from community leaders doesn't work as well. There should be live action skits and role playing opportunities. This works well as a teaching device in the Hispanic community.
- Have appropriate people in the community review materials to ensure the language and images are appropriate before they are distributed to the community at large. Reviewers might include bilingual health care providers, teachers and school administrators, and representatives from community-based organizations. In border

communities, particularly, literacy levels may be low. Residents of these communities may require materials that are heavily illustrated.

Another Texas participant summarized the variety of techniques that might be used to draw community members into a campaign designed to change behaviors. The most important aspect of educational materials according to this participant is that the materials respond to questions and provide solutions to safety problems. "For example, the materials should address such issues as how to make seat belts more comfortable, why it is important to keep the kid in the safety seat even if he fusses, and how to deal with a pickup truck if you have a large family."

The second point made by this study participant was that public awareness campaigns targeted toward Hispanics must "be designed in such a way that it creates involvement and pressure from the community in order to follow the campaign's messages. In a safety campaign, employers could be brought in to discourage workers from having a beer in the parking lot after work. The community could also be involved by supporting career and education days in schools where the kids could bring the parents in to be educated about certain messages. Maybe a day could be devoted to safety issues. Such school-based programs are very successful because they take place in the neighborhood and in an environment that is familiar to the parent."

### **The Role of Community-Based Organizations**

Conducting focus groups in Los Angeles and San Jose, California, provided an opportunity to observe and note how community-based organizations are functioning in that State. Hispanics of Mexican ancestry in California seem to respond well to the variety of direct outreach strategies, more so if the delivery agents are trusted individuals or community-based organizations. For example, measured by the opinion of telephone and focus group participants, it was clear that outreach activities sponsored by community-based organizations are successful. Nonetheless, the receptiveness and response of the Hispanic population to direct outreach efforts was closely related to the strategies selected. For instance, there was some opposition to flyers and pamphlets, but support for direct mail efforts. By far the most

important direct outreach strategy identified was the one-on-one counseling/advising provided by trusted organizations.

Community-based organizations in California have begun to engage in traffic safety promotion and are beginning to cover the basic themes and issues of traffic safety. For example, the Mexican American Community Services Agency in San Jose has a child safety seat loaner program for community members. Similarly the Barrio Action Group in Los Angeles has summer camps where Hispanic youth get information and presentations on safety issues.

In Los Angeles, the Century Council has made an effort to organize traffic safety campaigns around traditional and popular Hispanic festivities, such as *Cinco de Mayo* and Holy Week. The direct outreach strategies included setting up booths with prizes and traffic safety information as well as distributing pledge cards that individuals sign promising not to drink and drive. In San Jose, the police-sponsored *El Guardian* program and its community outreach efforts were mentioned frequently by focus group participants as ideal strategies to promote traffic safety. Telephone and focus group participants also mentioned workshops, seminars and presentations as effective strategies to promote traffic safety.

In addition to the experience in California, community-based organizations in the other target sites appeared to be important sources of services and support for community members. For example, Avance-Rio Grande Valley, provides parenting education to families living along the Mexican border in the Rio Grande Valley of Texas. They draw families from larger towns like Brownsville, as well as from the *colonias*. The parenting education curriculum used by Avance has a safety module which is used to instruct parents in the use of child safety seats. Avance also has a child safety seat loaner program. Avance served as a host organization for the study focus groups in the Rio Grande Valley. Of the 24 drivers participating in focus groups hosted by Avance, only six had drivers licenses. Since that experience, Avance-Rio Grande Valley has incorporated preparation for getting a drivers license into its parenting education curriculum.

## Symbols, Institutions, and Delivery Systems

Figure 4 lists those symbols, institutions, and delivery systems toward which Hispanics were thought to be the most responsive.

<b>Figure 4. Positive Symbols, Institutions, and Delivery Systems Identified by Study Participants</b>	
<b>Symbols, Institutions, and Delivery Systems Identified Most Often by Agency and Organization Representatives</b>	<b>Symbols, Institutions, and Delivery Systems Identified Most Often by Focus Group Participants</b>
<ol style="list-style-type: none"> <li>1. Church/religion</li> <li>2. Family</li> <li>3. Spanish radio</li> <li>4. Spanish television</li> <li>5. Schools</li> <li>6. Hispanic community-based organizations</li> </ol>	<ol style="list-style-type: none"> <li>1. Schools</li> <li>2. Church/religion</li> <li>3. Family</li> <li>4. Spanish television</li> <li>5. Hispanic community-based organizations</li> <li>6. Spanish radio</li> </ol>

## **The Schools**

Although the schools were by no means seen as a perfect medium, focus group participants overwhelmingly viewed the schools as one of the most effective channels to reach community members. A number of organizational representatives likewise noted the potential effectiveness of reaching both children and parents through the schools.

According to most focus group participants in California, school programs are effective methods to promote traffic safety because of the respect that both parents and children have for teachers and the educational system in general, and because the promotion of traffic safety could be entwined with pedagogical methods.

Focus group participants in Colorado suggested that drinking and driving prevention programs be integrated with the sex education programs being conducted in schools. They emphasized that safety promotion programs should be initiated with young children. Parents in McAllen, Texas, indicated that school teachers already do traffic safety education by taking the children to see the court system and the jails, and that teachers are assisted in this effort by the police department. In addition, policemen make presentations in Head Start classes. Focus group participants stated that the police department should work closely with the schools to develop additional safety education programs.

Women in focus groups in the Rio Grande Valley of Texas stated that community schools would also be good for educating adults in traffic safety. The only place driving classes are currently held is special driving schools but, according to participants, there is a \$200 cost. All participants agreed that \$200 is beyond their means, but they would be willing to pay a lower amount for classes. Most members of this focus group drive without a license and they expressed an interest in taking driving lessons in order to improve their skills in specific areas, and to learn the laws. Such a class would give the participants a forum through which they could share experiences behind the wheel and learn from each other.

Focus group participants in the District of Columbia stated that school-based health promotion programs where children could learn at an early age are needed. These children would be helpful in communicating health-related messages to their parents. A participant offered an example of how such a program has affected him. He said, "My child told me that he

learned in school that it is bad to drink and drive and he keeps reminding me about it. I do not drink and drive and now I am more conscientious about it as a result of my child's advice." Other participants stated that the schools should educate parents and children about drinking and driving and that community leaders should be involved in the planning and promotion of traffic safety.

Driver education programs should be available at schools and throughout the community according to adolescent males participating in focus groups in the District of Columbia. They believed that professional people who know about traffic safety and other safety-related issues should be recruited to teach young people and the community in general. Schools could offer courses to everyone in the community who is interested in learning about safety. Courses could be offered during the summer. In addition, Puerto Rican adolescents in Staten Island stated that people who have had accidents should do presentations in classrooms. They added that there should be discussions in school where people can talk to each other about learning to drive, accidents, and other safety issues.

### **The Church**

Hispanics in California were receptive to church programs, because the institution is trusted and is accessible. Focus group participants expressed comfort with the institution, and while there were not many church-sponsored safety programs, participants were very receptive to the idea. One particular church program was the *Si Toma no Maneje* Pledge Campaign sponsored by the Century Council and implemented through the church. Highway safety organizations in Florida and Texas have also engaged in partnerships with the church. The Community Alliance for Training and Safety in San Antonio, Texas, has enlisted priests to include a safety theme in masses. In each of the target areas, but particularly in Texas, California, and the District of Columbia, church-related organizations are one of the principal providers of services for recent immigrants.

Churches were mentioned as trusted, reliable, and accessible institutions by focus group participants in all sites, regardless of age. One agency representative cautioned that although many Hispanics are very close to the church and religion, this does not always mean Catholicism. For instance the *Crusillo* movement, which is frequently represented by a multicolored rainbow and called *des Colores*, has a very strong following.

## **The Family**

Study participants all agreed that the family is one of the most powerful symbols in the Hispanic community. Positive statements about the importance of family members were made by all focus group participants, reinforcing what agency and organization representatives had stated about the central role of the family for all Hispanic groups.

A female participant in a Denver, Colorado, focus group stated that the problem of drinking and driving among the Hispanic community is “an indication of a family breakdown, and not holding onto the ‘family first’ culture.” All study participants emphasized that any public awareness campaign for the Hispanic community must feature the family.

According to one Texas participant, anything that is viewed as dangerous for the family reaches the entire community, so the safety of the family can be a key message.

Grandmothers have been used in child safety seat messages by some organizations, such as the Kidsafe Project. This project has used older women in its educational

materials because they are often the true family educators. The extended family plays an important role. Respect dictates appropriate deferential behavior toward others on the basis of sex, age, social position, economic status, and position of authority. According to several study participants, it is important to design presentations to the Hispanic community to show awareness of important cultural symbols, such as the family. For example, data can be presented with an emphasis on its implications for the family unit instead of just presenting statistics.

One Miami adolescent participant emphasized the importance of family and other social group influences when he stated, “I’m involved in a ROTC group and a DUI would look bad on my record. I adore my grandmother, she’s my biggest role model. I’d feel really

*“We should design a program that appeals to the family unit since Hispanics are very family-oriented. Humorous ads have been popular overall. In Australia, they’ve used more emotional blood and guts images. These may be more effective. We should probably move in this direction with Hispanics and target families.”  
(Agency/Organization Representative, New York City/New Jersey)*

embarrassed if I got a DUI. And younger kids look up to you if you're in ROTC.” Adult men in District of Columbia focus groups stated that the best messages communicate love and care for the family and the community.

### **The Role of the Media**

Within each of this study's target sites, there is a variety of print and electronic media that target the Hispanic community. Residents of urban and rural areas generally have access to Spanish radio, television, and newspapers. Media representatives were included in this study and when possible, study staff visited media outlets to observe the interaction between these outlets and community members. Study participants agreed that the creative use of both the Spanish and English media is essential to any effort to promote traffic safety to Hispanics.

According to a Texas media representative, Spanish radio and television are the most effective media for reaching Hispanic audiences. Spanish television reaches most of the younger generation, since according to this participant, they do not read newspapers. However, the older generation can be reached through television, radio, and print. Hispanics who are 30 to 40 years of age are best reached through the

*“Spanish TV has done a good job with a campaign against drunk driving. The most important prevention programs should come from the schools where children could be taught at an early age about drunk driving and other safety issues. Radio Borinquen has a program, ‘Cuiando su Salud’ (‘Protecting Your Health’) which has been very successful because it provides great information in a simple way. One of the programs, ‘Si maneja no tome y abrochece su cinturón’ (‘If you drive do not drink, and wear your seat belt’) was well received by the community.”*  
*(Parents, District of Columbia)*

English media. This participant mentioned studies that have shown that although many Hispanics in Texas speak Spanish, only a small percentage of long-term residents read it. Hispanics elsewhere have been more successful at maintaining Spanish literacy. In addition, translations are often so badly done, the participant indicated, that given a choice of reading a newspaper in English or reading the Spanish translation, approximately 8 out of 10 Hispanics would choose to read the English version. According to this participant, the affinity for

reading English is particularly strong in second generation Hispanics because they were penalized as children if they spoke Spanish in Texas schools.

Focus group participants also provided their insights on current and future uses of the media in safety promotion campaigns. Spanish radio, television, and newspapers are key to any dissemination strategy, but participants also noted that there is a major role for English media as well.

### Television

Study participants, particularly in urban areas, viewed television as the medium with the most potential for disseminating traffic safety information to the Hispanic population. There was general agreement that the power of television, particularly Spanish television, has yet to be completely tapped. In addition, focus group participants cited many existing reality-based shows, such as *Rescue 911* and *COPS* that might be used to target the Hispanic audience. In Los Angeles, California, study staff observed how television is being used to promote traffic safety. The Century Council, for example, has used television extensively in its safety campaigns. Channel 32, the Los Angeles Spanish Network, also sponsors safety promotions. At least once every three months there is a traffic safety segment on the morning talk show, *Buenos Dias LA*. During the period when focus groups were conducted, a segment on infant safety seats was aired which involved the South Gate Police Department. The segment demonstrated the consequences of not having children in safety seats while driving, demonstrated proper ways to buckle children in safety seats, and offered information on how to obtain child safety seats, including programs offering seats at no cost.

*"We are developing new tactics that are more dramatic for our target audience [television audience for Buenos Dias LA] in terms of impact, El Compadre Program (designated driver), for example. Other issues include driving without a license. We have addressed the seat belt issue many times, but have not been successful because the community does not like to be told what to do."  
(Agency/Organization Representative, California)*

Although Hispanics of Mexican origin residing in California are a heterogeneous group in terms of age, education level, and degree of acculturation, most safety messages observed during site visits in California were generic

in design, content, and intent. No traffic safety messages targeted to the growing undocumented Mexican population in California were observed, even though many undocumented residents drive. Similarly, few media opportunities were used to transmit safety messages to children. For example, there are two popular Spanish television shows in California targeting children ages 5 to 14. Many focus group participants noted that not a single segment of these shows had been dedicated to safety issues. There were also very few observed efforts to target females in safety campaigns.

Puerto Rican adolescents in the Staten Island and the Bronx were strongly in favor of using television to reach young Hispanics. Several participants in all focus groups in New York mentioned programs like *Rescue 911* and other reality-based shows as ideal teaching mechanisms when they focus on the Hispanic community.

### **Radio**

In San Jose, California, the *El Guardian* program uses radio on a weekly basis to discuss an array of traffic safety issues. There is also a weekly community program on radio station KAZA AM that occasionally offers segments dedicated to traffic safety. Agency and organization representatives in Texas indicated that radio is listened to by about 30 to 40 percent of Hispanics and that the older population is more inclined to listen to radio than watch television. In the San Antonio area alone, there are three Spanish language television stations, two newspapers in Spanish, and eleven radio stations broadcasting in Spanish. According to one study participant, Spanish stations “bend over backwards” to put public service announcements on in the early evening versus the very early morning as English stations generally do.

In rural Alamosa, Colorado, focus group participants stated that radio is a more important source of information for Hispanic residents than television. The Radio Borinquen program, *Cuando su Salud*, was praised by District of Columbia focus group participants as “a very good program because it teaches the community about health-related subjects using very simple language.” One of the successful campaigns launched by Dr. Huertas, the host of the program, was the promotion of seat belt use in the Hispanic community.

## **Print**

The editor/owner of the Spanish newspaper, *El Observador*, in San Jose publishes a monthly supplement providing not only information on traffic safety issues, but health and other community issues as well. Adult males in the Bronx indicated that the government should place safety announcements and stories in newspapers every day. These features should be in English and Spanish. *La Prensa*, the *New York Daily News*, and the *New York Post* were the newspapers most often read by these focus group members.

Puerto Rican focus group participants also suggested putting safety information on the New York subway as is currently being done as part of the AIDS public awareness campaign. A female focus group participant criticized the current ads on the subway as being too negative, although a great way to get people's attention. She added, "There is just so much negativity about Hispanic people. When you say Puerto Rican, people think switchblade, alcoholics, or welfare. *Fotonovelas* should be more positive. Puerto Ricans are not the only people who get AIDS or use drugs."

## **A Comprehensive Multimedia Campaign**

The representative of the Pan American Health Organization (PAHO) detailed how his organization has used the media in an extensive immunization campaign targeted to low income individuals, such as residents of the *colonias*. The project design was jointly established with colleagues from Mexico who have studied how to promote immunizations within Mexico. They assisted PAHO staff in analyzing the immunization situation along the Texas/Mexico border and conducted a survey of community attitudes and services. As part of the campaign, PAHO used posters in public areas, television, and radio to reach the target population. They did not use newspapers because newspaper advertisements were too expensive and program planners felt that newspapers were not an effective medium for their target audience. The planners concluded that radio was the most effective medium for reaching their target audience because it had the most penetration. In the *colonias*, people who do not own a television and do not purchase newspapers are likely to have a radio. The campaign developers created a jingle as the focus for the campaign. Colorful public service announcements featuring the jingle and children were developed for television. PAHO is currently evaluating the project to determine whether the rate of vaccination increased. If

the PAHO representative could have changed the project, he would have obtained more data prior to the study about the knowledge base of people in the *colonias* regarding immunizations. The campaign only told people that vaccines were available, but did not provide information on what vaccines do. In retrospect, he would have added an educational component.

### Public Service Announcements

When asked to give examples of public service announcements (PSAs) or other safety messages that they thought were effective, many focus group participants cited AIDS-related messages. Focus group participants indicated that they understand and can relate to the message in AIDS PSAs. Most importantly, the messages are not demeaning or condescending. As noted previously, focus group participants emphasized the importance of showing real people in real-life situations. For the most part, focus group participants took a negative view of using celebrities as spokespersons for health promotion and injury prevention programs.

Adolescents emphasized the importance of music and peer groups in presenting information. Several focus group participants stated that they valued the opportunity to meet

and discuss issues and that a setting comparable to a focus group would provide a good learning environment. Television public service announcements and programs on traffic safety issues were very common in California. Almost all telephone and focus group participants mentioned or reported seeing television public service announcements and programs on traffic safety, in both Spanish and English. Considering the low degree of concern and awareness about highway and traffic safety among the Hispanic population as

*“Highway safety PSAs currently on TV are not effective because they generalize situations and treat Latinos as losers. For PSAs to be effective, they need to be more specific and more diverse. Newspapers should also be involved. We do not need celebrities, but mentors and role models that live in the community. There should be real stories with Latinos. Also the police should get more involved like the El Guardian program. More police officers need to be involved in community programs so that Latinos are not so afraid of them. A good campaign should organize and link people in the community.”*  
(Adult Females, San Jose, California)

reported in the telephone discussions, a large number of focus group participants remembered seeing public service announcements on traffic safety. Similarly when asked about the most effective and appealing way to get a safety message across, most participants cited television as the medium with the most potential for reaching large numbers of Hispanics.

Hispanics in California indicated their preference for messages that are clear and direct, both in terms of subject matter and target population. They seemed to be more responsive to messages that are specific in their subject matter. For example, if the subject matter is seat belts, the message should emphasize seat belt use instead of presenting unrelated issues. Also, according to most participants, they would be most receptive to messages that somehow specify and feature the target population. For example, if the target population for a given message is Hispanic females ages 20 to 25, the message should somehow convey clearly the target audience by allowing the participation of Hispanic females ages 20 to 25, as well as clearly directing the message to the target audience. Some of the participants complained that in many public service announcements, the actors and content are different from the target audience.

Hispanics in California were also receptive to messages that demonstrate cultural sensitivity. Many of the participants complained that many messages tend to stereotype minority populations, even though the particular problem being addressed may be widespread across all racial and ethnic groups. According to participants, messages have to be delivered with respect, without being too ethnocentric. Some of these participants mentioned specific examples of messages that tend to ignore diversity and heterogeneity. For example, in a drug message the dealer and consumer are always minorities. Hispanics also were supportive of the idea of having more public service announcements in Spanish to show the diversity of the culture. According to participants, these should not be shown only on Spanish television stations, but on English stations as well.

An adult female group in San Jose, California, stated that most public service announcements on safety are not effective because they portray Hispanics as losers. The opinion of this group was that for public service announcements to be more effective, they have to be more specific in terms of their message and targeted to specific segments of the Hispanic population. According to the participants, newspapers also should get involved in safety campaigns.

Most participants felt that the PSAs were too generic, and too limited in their target audience, as well as in the way the problem was projected. For most of the participants, it is very difficult to relate to public service announcements that do not have a personal appeal. Participants in San Jose, California, indicated that PSAs should be more straightforward and direct, but that they are not a substitute for classes and print materials.

Participants favored PSAs for information dissemination if they are in good taste and target a specific audience. They emphasized, however, that it is very difficult to change habits and behaviors with public service announcements, especially as people get older.

California focus group participants were, for the most part, opposed to the use of celebrities in public awareness campaigns. The main complaint about celebrities from these participants was that celebrities' participation in public service announcements can often be paradoxical. For example, celebrities who urge the public not to drink and drive, may have their activities supported by the alcohol industry, or may even be arrested for possession of drugs.

*"The best health and safety messages communicate with real people. Actors are not effective as role models. There are currently no programs to educate pedestrians or to help the community learn about other traffic laws and regulations. The most important prevention programs should come from the schools where children can be taught at an early age about drunk driving and other safety issues. In addition, there should be posters around the neighborhood. Videotapes should communicate a true family story about accidents caused by drunk driving and television messages should make people think, 'This could happen to me.' Safety promotion messages should be presented during and after soap operas (telenovelas). Radio programs that are well known in the Latino community are also a good mechanism."  
(Parents, District of Columbia)*

Puerto Rican focus group participants were more amenable to the use of celebrities in public awareness campaigns. They emphasized that Spanish music such as salsa and merenque should be used and that all print materials should have bright colors. The music of Tito Puente and Willie Colon were suggested. Female participants suggested that Peter Jennings would be an effective spokesperson because of the programs he has done with children on safety issues and that an attractive woman like Paula Abdul or Gloria Estefan should appear

in any message directed toward men. Messages for men should focus on machismo. One female participant stated, "We have to change our customs; not so much in the house, but on the road." Adolescent focus group participants in Staten Island were opposed to the use of celebrities, however, particularly actors who portray young people on television programs like *Beverly Hills 90210*. They called for the use of "normal kids" in public awareness campaigns. Adolescent males in Miami felt that celebrities are only good if they are talking from experience, otherwise they are just getting paid for participating in a campaign. They agreed that Gloria Estefan would be a good spokesperson because she was seriously injured in a motor vehicle crash, has children, and came to the United States from Cuba.

Parents in a McAllen, Texas, focus group focused on the best strategies for young children. They were in agreement that safety education should begin at very young ages and that it is the shared responsibility of parents and the schools. Parents recommended games, songs, stories and the use of characters like *Barney*. These parents stressed that parent education programs, such as the program coordinated by Avance, are important for providing strategies to parents for instructing their children in healthy and safe behaviors. Another participant stressed that graphic representations are what people remember and are the most effective way to change behavior. She recalled seeing a PSA on television about a woman holding her child in her lap while driving and having the child go through the windshield in a crash. This PSA made her think about the need to use a safety seat more regularly.

Several focus group participants in the Rio Grande Valley remembered a PSA about a 17-year-old boy who borrowed his mother's car. He got impatient behind a slow driver and started to pass the car, but had a fatal crash. The boy sees himself being buried by his very sad family. The boy begs God not to let him die at such an early age and promises to change his behavior if allowed to live longer. Another participant mentioned a PSA about the younger brother who idolizes his older brother, but the younger brother catches the older brother doing drugs and begs him to stop. These PSAs were shown on Mexican television and have the short story motif that participants indicated they favor. These participants cautioned that any PSA targeted to adults must be short and direct, because adults' time is limited. They stressed that reality-based television programs like *Rescue 911* "really make you think." According to female participants, to reach men, safety promotion messages have to be aired during football games or during the evening news.

Adolescent males in El Paso were impressed by PSAs sponsored by Mothers Against Drunk Driving (MADD) and the Partnership for a Drug Free America. They also mentioned the slogan, " Friends don't let friends drive drunk. " Adult men in El Paso remembered PSAs relating to drinking and driving and suggested that many different types of PSAs are needed to reach different audiences. They emphasized the need for diverse strategies and mentioned that flyers need to be distributed and that the government, entertainment figures, and sports celebrities all can have a role in promoting traffic safety. Adolescent focus group members in Los Angeles also recommended a variety of strategies, including developing books with safety themes, and using both the short PSA format and full-length television shows to depict the consequences of unsafe driving, and using "big stars" to promote safety.

Adolescents in the District of Columbia echoed the theme that any public awareness campaign should represent the real world and make the observer think about himself and his family. According to these teenagers, the most effective campaigns would use a myriad of strategies, including music, incorporating prevention messages into television shows, peer educators, and speakers who could come to the schools to talk about their personal experiences with alcohol and other topics. They vetoed celebrities as safety spokespersons and also stated that *fotonovelas* might be a good strategy for women, but not for men.

Adult women in the District of Columbia appreciated sentimental and powerful messages that evoke thoughts about the family. They mentioned a poster of a pregnant woman smoking crack cocaine while her unborn baby wept. The poster asked the mother to stop this harmful behavior. The women also remembered PSAs about the dangers of smoking and how children are affected by irresponsible parents.

A group of adult men in the District of Columbia indicated that public service announcements are a waste of money. They felt that program developers should use the money to teach people and hold classes. These men could not recall seeing a PSA that featured Hispanics. One participant stated, "As a Latin person, I would pay attention to a Latin spokesperson." Another participant said, "One of my favorite PSAs is of a highway patrolman saying he's never taken a body out of a car that was wearing a seat belt. But it's an Anglo cop." Men in the group stressed the need to identify more with the people in public service announcements. Other suggestions from this group included sponsoring a competition in the community to develop a slogan or campaign, using community events as a way to disseminate

information, and following the example of the AIDS public awareness campaign by showing the consequences of unsafe behavior. They stressed that any public awareness campaign should be bilingual and designed to reach males (“break the macho barrier”). These men indicated that they have not seen any public awareness campaigns that focus on Hispanics and alcohol.

Parent focus group members in the Bronx remembered AIDS public service announcements as being very clear and direct. Parents in Staten Island focus groups expressed a wish for more PSAs about the importance of bicycle helmets for children.

Women in one Staten Island focus group recalled an AIDS public service announcement that showed a number of young people. The viewer had to pick the individual who had AIDS. According to one participant, the PSA caused immediate identification with the young people in the announcement. Memorable visual images discussed included a PSA about drinking and driving that ends up with the driver as a skeleton, and a PSA showing two eggs—one with a seat belt and one without (the egg without the seat belt gets cracked). Adolescents in one group remembered a PSA against drinking and driving that ended with two glasses crashing. They felt that this presentation was too corny. These adolescents were opposed to the use of celebrities, stating that celebrities don't make them feel differently about anything.

Parents in Denver, Colorado, stated that they never see any public service announcements on child safety seats. Other Colorado participants stated that PSAs are too general and usually don't make an impression on the viewer.

## Reactions to the *Vince and Larry* Campaign

Focus group participants were asked their reactions to NHTSA's major public awareness campaign employing the crash dummies, *Vince and Larry*. Focus group members commented on their own awareness of the campaign and their assessment of the effectiveness of *Vince and Larry* in reaching the Hispanic community and changing behavior in regard to seat belt use.

### Positive Comments About *Vince and Larry*

Focus group participants residing on the Mexican border were very familiar with *Vince and Larry*. *Vince and Larry* appear regularly on Mexican television as *Los Monigotes*. Parents in a McAllen, Texas, focus group indicated that they relate to *Vince and Larry* because they clearly portray humans, although it is clear that *Vince and Larry* can exchange their parts for new ones after a crash while humans cannot. Adult women indicated that they understood *Vince and Larry*'s message that they could get hurt if they did not wear seat belts. Both adolescent and adult males in El Paso focus groups said that the phrase, "You can learn a lot from a dummy" is memorable and the *Vince and Larry* PSAs are fun. The adults emphasized that *Vince and Larry* make viewers think that injuries can happen to them if they do not wear seat belts.

Several Puerto Rican focus group members stated that *Vince and Larry* were effective for all age groups and catch the attention of viewers. The fact that *Vince and Larry* are funny makes their message more memorable according to these participants. One Puerto Rican participant stated that whoever did the research before launching the *Vince and Larry* campaign had done an excellent job. Although these focus group participants stated that they like the seat belt PSAs and print ads featuring *Vince and Larry*, they indicated that other PSAs should include people who have actually experienced crashes. According to one focus group member, even *Vince and Larry* could be made a bit more dramatic by using fake blood and including a baby or child crash test dummy.

## **Negative Comments About *Vince and Larry***

**Vince and Larry are not realistic enough.** Female focus group participants in Alamosa, Colorado, indicated that *Vince and Larry* have no positive impact and that the dummies are being made fun of by young children and adults. According to these women, children see the dummies crashing and being put back together and believe the same thing can happen to them. Adult male participants agreed that the crash dummies have become a joke.

According to adolescent males in El Paso, the dummies make you laugh and think about the situation as a joke, while more serious PSAs make you think. Women in Miami focus groups agreed that *Vince and Larry* are funny, but out of style, and that the PSAs and print ads do not leave an impression because they are not graphic enough. One participant said, "It's sad when we spend so much money for public service announcements and people think they're funny."

Very few of the Central American participants in the District of Columbia remembered seeing *Vince and Larry*. Of the few who had seen them, most remarked that it was difficult to understand how the dummies could impact community members because they are not real people. According to one male participant, "Most people in the community have a hard time relating to these characters because they do not look like any Latinos we know." One group of young women had only seen *Vince and Larry* on English television, and felt that if they were introduced into the Hispanic market in Spanish, they could be useful.

**The entire campaign has become commercialized.** Of the focus group participants who were familiar with *Vince and Larry*, several complained that there are now cartoons and toys featuring the dummies. According to these participants, this commercialization detracts from the seriousness of the message they are presenting. A California focus group member stated that the Mexican American community related to, and welcomed, the concept at first. But since it has become commercialized, opinions have changed.

**Vince and Larry are only effective for young children.** Because of the cartoons and toys, several focus group participants stated that *Vince and Larry* are only effective for young children. According to these participants, adolescents and adults need a new campaign that features real people and events.

## **SOCIOCULTURAL FACTORS**

Programmatic development and implementation within Hispanic communities should be influenced by an awareness of and understanding of the beliefs and attitudes of those communities and the traditions and rituals that govern individual behavior and interactions with others. These beliefs, attitudes, and traditions are part of the cultural fabric of the different Hispanic communities and may be influenced by length of time in the United States, and socioeconomic status. Of particular importance in shaping the behavior of recent immigrants are the adjustments immigrants must make as they adapt to a new environment.

### **Differences Among the Hispanic Communities**

Agency and organization representatives shared their insights on key differences among the Hispanic communities. Following are some of the comments made by these study participants:

*The misperception among other Hispanics is that all Cubans are rich; others think Cubans are too proud. Cubans here are successful; politically empowered and trying to unite the community. (Florida)*

*Compared to other cities, Hispanics are more represented in higher economic levels. To be Hispanic in Miami is not to be poor and underprivileged. (Florida)*

*Due to conditions in their homeland, many Latinos fear government agencies. Latinos are family-oriented. Latinos in this city come from many countries bringing with them different social and political ideologies, values and concerns. The majority of Latinos work part-time jobs and usually more than one. They lack access to health care benefits and insurance in general. Levels of literacy are low in the Salvadoran community. (District of Columbia)*

*Many recent Latino immigrants suffer from post-traumatic stress syndrome owing to their flight from a war torn region and experiences of prolonged incarceration, violence, and torture. Moreover, language barriers create frustration, and social isolation contributes to mental stress. (District of Columbia)*

*Many Latinos come from rural areas and may have difficulty adapting to urban life. Central Americans have war-related trauma and suffer grief about family and friends left behind. Latinos in the United States are multicultural and should not be treated as one community. (District of Columbia)*

*Latinos in DC have limited access to support systems and are not as well organized as Cuban Americans, Mexican Americans, and Puerto Ricans. (District of Columbia)*

*El Paso has four kinds of Hispanics: (1) wealthy visitors or residents who were born in Mexico and have a close affinity to Mexico; (2) poor recent immigrants trying to carve out a new life; (3) people born in Texas who are part of the border culture; (4) wealthy Hispanics who were born and reared in Texas but whose affinities lie with Mexico. (Texas)*

*Puerto Ricans are the most acculturated of all the Hispanic groups. (New York City)*

### **The Impact of Machismo**

Highway safety, education, and law enforcement organizations explored the cultural factors that most influence driver and passenger safety. Machismo, "the cultural expectation that men will be strong, in control, and providers for their families," (Marín 1991) was described as a principal factor affecting driver safety.

This corresponds to what focus group participants and organization representatives stated with regard to male behavior and driving, that is, the willingness to drink and drive and the failure to wear safety belts. It would be simplistic to ascribe this risky behavior totally to a concept of how a man should behave in order to be respected, but machismo probably has some bearing on the driver-related safety problems enumerated by study participants.

*"Latinos have a constant problem with machismo. Machismo does not allow for open communication and sensitivity to the needs of others. Confrontational approaches should be avoided and a more person-centered approach used."  
(Agency/Organization Representative,  
District of Columbia)*

Machismo was also mentioned as a factor in passenger safety—again there is probably some relationship between this cultural factor and the lack of safety belt use. In addition, the reluctance to prevent an inebriated male friend from driving may be related to the desire to maintain a sense of respect in interpersonal relations and not to compromise the other person's sense of power.

Agency and organization representatives emphasized that machismo cannot be ignored when designing public awareness campaigns for the Hispanic community. According to a Texas highway safety organization representative, traffic safety messages have to stress that safe behaviors are the more macho option. Another agency representative mentioned the need to target the attitude, "I'm a man and I'm going to prove myself in my car," by promoting the message that "the macho perspective is to protect yourself, your family and your friends by being a safe driver." Another highway safety organization representative described the kind of PSA that might work with Hispanic males. The PSA would use an Hispanic actor with a large following. The actor would say, "Don't drink and drive and don't do drugs and drive." The actor's next message would be, "It is not a disgrace to have your girlfriend drive if you have been drinking or doing drugs." Based on views expressed by male focus group participants in Texas, a more realistic public service announcement with non-celebrities might be more effective.

According to a representative of a border health association, the Mexican American community is still a male-dominated society, although there are strong female leaders, too. Programs need to attract males and be accessible to them (for example, programmatic activities should not occur during working hours). "The forces behind the Latino families are the women," according to this representative, "they are the movers, but any program has to be linked to the men." For example, a project in Pharr, Texas, focusing on nutrition for diabetes control stagnated at an enrollment of 40 women. The project staff couldn't increase the number of participants. Project staff decided to target men with a variety of incentives in an effort to increase the number of male and female participants. Project staff apologized to the men in the community for not having included them in the class in the first place, staff scheduled classes on mid-day Saturday, and paid the men five dollars to attend. This combination of incentives resulted in markedly increased enrollment.

## **Attitudes Toward Alcohol**

Parents in a McAllen, Texas, focus group were pessimistic about the ability of public awareness campaigns to change Hispanic attitudes toward drinking, especially the attitudes of Hispanic males. "A lot of people drink and drive," they said, "some people are careful and think of the family, and some go out drinking and they don't care. They think like children. There is enough propaganda about drinking and driving, but people do not respond."

According to Cuban male focus group participants, a strong and direct campaign focusing on alcohol use is imperative. The campaign must emphasize the consequences of drinking and driving. Because of successful government-funded campaigns, like the anti-smoking campaign, these participants felt that the government should assist in designing and implementing a targeted campaign to prevent drinking and driving. Although there have been local efforts, these participants felt that Cubans in Miami have become desensitized and only a strong national campaign will increase awareness and hold people accountable.

Participants in a District of Columbia focus group also spoke about the lack of understanding of consequences of drinking and driving and mentioned that many are just continuing practices that are common in their home countries. "There are people who carry beer in the trunk and drink them when they stop to visit a friend. Many in our community drink and drive. This is very common in our home countries. Alcohol consumption is very high and many people do not understand the consequences of drinking and driving. Current punishments for those drinking and driving are not harsh enough."

An agency representative in the Rio Grande Valley indicated that it is customary for Hispanic males to go to bars or nightclubs and drink beer, and that there needs to be a targeted enforcement program that puts police officers near the clubs, even though club owners would have to be educated to counter their objections. Other interventions would include seminars on responsible serving, designated driver promotions (for example, the designated driver gets free soft drinks), and involvement of community groups in providing free rides home. Focus group participants in California suggested similar strategies. There is also no MADD chapter in the Rio Grande Valley and this study participant felt that having a chapter would be helpful.

## **Women As Intervenors**

A familiar theme in the telephone discussions was the fact that Hispanic women generally fail to intervene to prevent a male who has been drinking from driving a vehicle. Focus group participants were asked whether they can discuss safe driving practices with their male relatives and friends. Central American women in the District of Columbia stated that the macho attitude of men generally does not allow them to accept advice from women and that men think all women are bad drivers. "Men think it's alright to talk to women about driving," they said, "but not the other way around." Puerto Rican women, while acknowledging the impact of machismo on male behavior, indicated that the only way to get men to listen to them about safe driving practices is to mention the impact of their behavior on the well-being of the family. This provides a reason for them to change their behavior.

In parent focus groups, women were a bit more outspoken. Women in the District of Columbia stated, "Women should drive when husbands are drunk ( even though this will be very hard because of the Latino macho mentality and the fact that men do not listen when they are drunk)." Women in the Rio Grande Valley said that, "It is important to tell your husband that if he is going to drink, he should not drive. Men are the ones who drink, although there are women who drink and drive. There are no programs for drinkers. Educational programs should target men, at present they only target women."

## STRATEGIES TO AVOID

As important as the factors to consider and include in programmatic design are those approaches that should be avoided. Based on their experience in developing and implementing programs, agency and organization representatives were able to provide an extensive list of approaches that will not work in Hispanic communities. Focus group participants corroborated many of the items mentioned during the telephone discussions.

### **Assuming that all Hispanics are alike.**

Study participants were quick to point out differences among and between the different Hispanic groups as well as differences caused by the length of time in the United States and the acculturation process. A common mistake according to some agency representatives is the assumption that all Hispanics want to speak Spanish.

According to one participant, this is patronizing and can be a turnoff. An example given by an agency representative from Texas concerned a collaborative effort between the El Paso District Attorney's Office and high school students to produce a

brochure about drinking and driving. The original plan had been to produce the brochure in Spanish, but after focus groups were conducted, it was determined that the Hispanic high school students would prefer a glitzy brochure in English.

*"The least successful strategies have been traditional classroom lectures, court mandated programs, and all those strategies that do not include youth participation and input in their development and delivery. There is not enough public education on car safety seats, seat belts, and other highway and traffic safety concerns available in this area to improve knowledge and awareness. Latinos rely heavily on TV and radio to know what is happening and/or to decide what to do about a certain issue."*

*(Agency/Organization Representative,  
District of Columbia)*

**Disrespectful and condescending behavior.** Study participants emphasized that presentations to Hispanic audiences should be simple and direct and appropriate for the educational level of the audience. Machismo should not be attacked or insulted. Elders and women should be shown respect. As one Florida participant stated, "Don't put people down, don't embarrass people in front of their family, especially men, and don't appear familiar with daughters and wives."

**Impersonal approach.** Agency and organization representatives also stressed that if an intervention is seen as coming from the community and for the community (like the *El Protector* program), the intervention is more acceptable. If it is perceived as coming from some distant governmental body that has decided what is good for the community, the message will not be received well. The approach needs to be familiar to be easily related to. According to a Colorado participant, presenters to Hispanic audiences need to be more humanistic and less technical about their subject matter; presenters need to speak from the heart. Study participants also advised that interactions with community members should not be rushed, extended family members should not be excluded, and that messages should be clear, short, and relevant to the audience.

**Exclusion of key members of the community.** According to study participants, any approach that does not take into consideration and include the leadership of the community will fail. It is important to establish communication and gain trust in the community. This is the only way any positive results can be accomplished. Hispanics, like many other cultures, like to be respected and consulted when important decisions are made that will affect their community. Peer pressure is also a major factor in decision making. Religious and medical authority figures are often useful spokespersons. The most useful way to eliminate any potential resistance is to work closely with community leaders to build credibility in the community, and to provide information and service to build trust and gain cooperation from them.

**Aggressive or enforcement-oriented behavior.** According to study participants, any approach that Hispanics would view as threatening to their lifestyle should be avoided, for example, "If you don't do it this way, I'm going to arrest you or fine you." Programs should have the approach, "Consider this for your own longevity and that of your friends and family." The law enforcement approach should not be used in educational messages. An emphasis on family responsibility and love of one's children is more important and a more effective approach. The problems caused by a lack of knowledge of details of the law is not solved by raising the level of awareness about the existence of laws and penalties governing certain behaviors. Study participants stressed the need to direct messages to value-based approaches.

**Service providers who are not bilingual.** Service providers should avoid communicating in English when Spanish is more appropriate and needed.

**Print materials that are in English only and those that are poor translations.** Anything that might be interpreted as perpetuating a stereotype or mocking a cultural tradition should be avoided according to study participants.

In different communities, certain Spanish words may be used frequently to mean something different than they do in other communities. For example, Cubans in Miami may use certain words completely differently than Puerto Ricans in New York City. For example, direct translations from English frequently are incorrect and inappropriate. A respondent from Texas gave the example of the slogan, "Let yourself go with Coors" which was literally translated in Spanish to *Sueltate con Coors*. This literal translation is "get diarrhea with Coors". Another example was the Nova car which in Spanish reads *No va*, meaning "doesn't go/doesn't run". The respondent also cited the American Airlines theme "Fly in Furs" which was translated to *Vuele en Cueros*, "fly naked". Whether materials are translated from English to Spanish or developed in Spanish, program planners must employ someone for the materials development or translation process who knows and understands the nuances of the Spanish language and is familiar with local usage.

*"There are many dialects of Spanish. Have to be careful to use the right one. People won't identify with different Spanish. They think, 'That's for "them" not us'."*

*(Agency/Organization Representative, New York City/New Jersey)*

*"There is not enough Spanish literature available in language that is appropriate. Many materials are just translated. Safety information needs to be personalized and visual. Information must be accessible - this is a high speed/high pressure community."*

*(Agency/Organization Representative, New York City/New Jersey)*

## **VI. DISCUSSION**

This study found awareness and concern about traffic safety issues across participating Hispanic communities. Agency and organization representatives and community residents agreed that alcohol posed the most serious highway safety problem for Hispanics; affecting driver, passenger and pedestrian safety. Key issues surrounding alcohol consumption mentioned by study participants include:

- Consumption of alcohol as proof of manhood;
- Lack of knowledge of the effects of alcohol on driving ability;
- Willingness of passengers to ride with a driver who has been drinking;
- The young age at which many boys begin to drink; and
- Drinking as a principal recreational activity for young people in rural and border communities.

Study participants believed that additional educational efforts are needed to address this problem. Participants were in agreement that educational efforts should focus on the impact of drinking and driving on the community, rather than on the impact on the individual. In addition, it was repeatedly stated that educational programs that have an enforcement approach and emphasize consequences for breaking safety laws will not be effective in raising awareness of the dangers of drinking and driving or changing unsafe behaviors.

In the Cuban community, another major problem is speeding and drag racing among young people. According to study participants, it is a common practice for Cuban parents to give their children high performance cars as gifts. There have been several serious crashes involving these automobiles. It appears that a targeted campaign is needed to address this specific problem. In none of the other Hispanic communities was speeding among young people mentioned as much.

Passenger-related safety problems do not appear to be based on a lack of knowledge. Focus group participants were knowledgeable about the safety belt and safety seat laws. For some participants this knowledge was sufficient to cause them to wear their safety belts or use safety seats. Other participants described the discomfort caused by wearing safety belts and/or the difficulty in getting recalcitrant children to use safety seats. In addition, participants indicated that the combination of small cars, older cars, pickup trucks, and large families make it difficult to take appropriate safety measures.

Participants described the tension that exists between their communities and the police. Although they stressed the need for greater enforcement of the laws, enforcement activity was often described as harassment and disrespect. However, focus group participants in San Jose, California, praised the *El Guardian (El Protector)* program and indicated that such programs should be expanded. Participants indicated that the police can play a major role in promoting safety through collaboration with the schools.

Although some agency and organization representatives felt that celebrity spokespersons might be effectively used in public service announcements targeted to Hispanics, most focus group participants favored reality-based health and safety messages featuring “real” people. When asked to discuss health and safety messages that they thought were effective, most participants described depictions of actual events to which the viewer could relate. In some cases, focus group participants mentioned specific celebrities that they felt had special qualifications to serve as spokespersons. In Miami, participants mentioned Gloria Estefan because she survived a serious motor vehicle crash, is a Cuban immigrant, and has children. In New York City, female entertainers like Paula Abdul were noted as ways to get male attention; Peter Jennings was discussed because of his television specials with children. Those participants who endorsed the use of celebrities most often had a particular person in mind that they felt was above reproach. The greatest danger in using celebrities, most participants stated, is the fact that their personal behavior may not match the message they are conveying.

Participants in all target sites were familiar with the crash dummies, *Vince and Larry*. However, *Vince and Larry* were judged effective primarily for small children. In addition, participants stated that *Vince and Larry* have become too commercialized and that humor should not be used to convey serious messages.

Schools, Spanish radio, and Spanish television were cited as the most effective channels for disseminating information on highway traffic safety. Many of the participating organizations collaborate with the schools, and most focus group participants agreed that the schools were a good place to impart safety lessons to young children, as well as spread those messages to the larger community. Comments about the schools were not uniformly positive, however. Focus group participants in Colorado, Texas, and New York City expressed displeasure with their local schools. In Colorado, the comments related to the schools' inability to appreciate Hispanic culture. In Texas, parents were concerned about instructions they claimed were given to young children. Children were supposedly instructed to inform their teachers if they were hit by their parents. In New York, there were complaints about the length of time it takes to get anything accomplished through the school system. These local anecdotes highlight the importance of using multiple institutions in a dissemination strategy. Most of the parents in the study focus groups had children six years of age and younger and were very much involved with the schools. School administrators informed us that as children become older the level of involvement between schools and parents decreases. Schools may be an effective way to reach parents and children in the lower grades but different institutions may be more effective as children get older.

The insufficient quantity of materials in Spanish is a problem, but agency and organization representatives more frequently mentioned insufficient quality. Many programs have made an effort to translate materials. In other programs, print materials are not important since clientele is illiterate in both English and Spanish. In these instances it becomes important to have a visual representation, an instructor, or an audiotape of a particular presentation. The production of bilingual materials does not ensure effective message delivery. Study participants emphasized that before limited resources are spent on translations, program developers should determine (1) the target audience; (2) the message; (3) the most appropriate mechanism for delivery of the message.

Effective health promotion programs expend a great deal of effort to gain community trust. Interaction between program staff and community members must be sustained over time. Community-based organizations are a valuable channel for information dissemination to Hispanic community members. Based on study site visits, effective programs appear to have the following elements:

- Collaboration with respected community-based organizations and institutions;
- Materials developed for the target populations and preferably developed in Spanish when appropriate, rather than translated; and
- A multifaceted approach to disseminating information, including Spanish radio and television.

One of the strengths of the Hispanic community is the vital network of community-based organizations that have provided needed services and served as advocates. During this study these organizations demonstrated their willingness to be involved in program development and implementation.

Study participants acknowledged the tremendous negative impact of alcohol and other drugs on the Hispanic community. Community members who participated in the study were very candid about the problem. There may be an increasing willingness to accept a targeted program that focuses on this issue and that emphasizes the impact of drinking and driving on the family.

## **Conclusions**

This study found more similarities than differences among Hispanics of Central American, Cuban, Mexican and Puerto Rican ancestry when it comes to the safety problems that most affect their communities. Essential to program development, however, is a knowledge of respective cultural histories and traditions, and the differences brought about by degree of acculturation and the length of residence in the United States, as well as differences in urban and rural locations. But for all these populations the following guidelines for program development seem to apply.

- Community residents, particularly community leaders, should be involved in needs assessment and planning activities.
- Programs that focus on the good of the family or the community as a whole are generally more effective than those that focus on the individual.

- The use of community members as lay educators and the use of real people in public service announcements and posters or other print material are preferred.
- Community-based organizations and key community institutions serving Hispanics are a valuable resource and can be used in program planning and implementation.
- Language issues are local issues. National programs must be developed carefully to accommodate local usage and should be field tested with different Hispanic groups to make appropriate corrections. Bilingual materials are generally preferred, but English only may sometimes be appropriate. To account for differences in literacy levels and to make materials more attractive and interesting the use of photographs and illustrations are recommended.
- The Spanish print and electronic media can be used to advantage to transmit messages related to health and safety and to inform community members about new programs. The most effective medium may differ based on location. In this study, focus group participants in rural Texas and Colorado relied more on the radio, but District of Columbia participants also spoke highly of radio programs. In Los Angeles, television was the medium of choice whereas in San Jose, California, Spanish radio and the local Spanish language newspaper are important in disseminating information to the Hispanic community. In New York City, print materials were mentioned most often, especially Spanish language newspapers and the opportunity to place print materials in designated areas on subway cars.
- Although Hispanic residents of the target sites criticized law enforcement and government agencies, they also expressed a respect for the role of these agencies in promoting public safety. Focus group participants merely asked that in accomplishing their mission, these agencies might strive to learn more about Hispanic culture and treat community members with more respect. The *El Protector* program (called *El Guardian* in San Jose, California) has had a positive effect in communities where it has been established.

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**APPENDIX A**  
**PARTICIPATING AGENCIES AND ORGANIZATIONS**

## PARTICIPANTS IN TELEPHONE DISCUSSIONS

### CALIFORNIA

Target Counties: Los Angeles, San Diego, Santa Clara, Fresno

Annenberg School of Communication  
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Public Safety Department  
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Rhonda Aizenberg, Manager  
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Barrio Action Group  
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California Hispanic Commission on Alcohol and Drug Abuse  
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Century Council  
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San Diego, CA 92102  
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Fresno, CA 93721  
Mike Nabors, EMS Director  
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Fresno Police Department  
Special Units and Projects  
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Fresno, CA 93706  
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Gardena, CA 90247  
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Field Services Bureau Commander  
310/323-7911

Governor's Highway Traffic Safety Office  
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Sacramento, CA 95823  
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Roy Branca, Assistant Coordinator  
916/445-0527

Hispanic Media Coalition  
5400 East Olympic Boulevard, Suite 250  
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213/726-7690

Hispanic Ministry of the Catholic Archdiocese of Los Angeles  
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JADE  
8650 California Avenue  
South Gate, CA 90280  
Marcos Vega  
213/563-5414

KCET-TV  
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Los Angeles, CA 90027  
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Community and Government Relations  
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La Raza Unida Party  
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Mexican American Community Services Agency  
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Esther Medina, Executive Director  
408/928-1169

Mexican American Legal Defense and Educational Fund  
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Los Angeles, CA 90014  
Antonia Hernandez, President  
213/625-7557

National Association for Hispanic Elderly - Los Angeles Branch  
3325 Wilshire Boulevard, Suite 800  
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Los Angeles, CA 90010  
213/487-1922

National Association of Latino Elected and Appointed Officials  
710 N. College Avenue  
Claremont, CA 91711  
Dr. Harry Pachon, Executive Director  
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San Diego Emergency Medical Services  
6255 Mission Drive  
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Charley Cruz, Operations Manager  
619/527-3900

San Diego State University  
Por La Vida  
Suite 101  
6505 Alvarardo Road  
San Diego, CA 92120  
Lori McNicholas, M.A., R.D.  
Project Manager, Adjunct Faculty  
619/594-2437

San Jose Police Department  
201 West Mission Street  
San Jose, CA 95123  
Officer Mario Hernandez  
El Guardian Program  
408/994-9618

#### **COLORADO**

Target Counties: Denver, Adams, Alamosa

Colorado Department of Transportation  
Office of Transportation Safety  
4201 East Arkansas Avenue  
Denver, CO 80222  
George Atencio, Sr., Highway Specialist  
Marc Stevenson, Highway Safety Specialist  
303/757-9381

Colorado Safety Association  
4730 Oakland Street , Suite 500  
Denver, CO 80239  
Melodye Turek, Executive Director  
303/373-1937

Justice Information Center  
1129 Cherokee Street  
Denver, CO 80204  
Abelurdo Delgado  
Chief Service Specialist  
303/623-5750

Mulroy Neighborhood Center  
3550 West 13th Avenue  
Denver, CO 80204  
Manuelito Gonzalez, Jr., Coordinator Youth Program  
303/893-1540

West Side Drug Free Youth  
Denver Inner City Parish  
910 Galapago  
Denver, CO 80204  
Pat Vigil, Project Director  
303/629-8036

#### DISTRICT OF COLUMBIA

Adams Morgan Clinic  
Children's National Medical Center  
Community Pediatric Health Center  
2250 Champlain Street, N.W.  
Washington, DC 20009  
María M. O-Balbuena, Case Manager  
202/745-5584

Adams Morgan Clinic  
Children's National Medical Center  
Comprehensive Health Center  
2220 11th Street, N.W.  
Washington, DC 20001  
Sandra Coles-Bell, Program Director  
Luis Galarza, Case Manager  
202/745-5500

Adelante Advocacy Center  
3220 17th Street, NW  
Washington, DC 20010  
Ana Cuilan, President  
202/667-7700

Alice Hamilton Occupational Health Center  
"Trabajo Seguro" Project  
408 Seventh Street, SE  
Washington, DC 20003  
Hugo Carballo, Project Assistant  
202/543-0005

American Red Cross  
National Headquarters  
Program Development - Health and Safety  
431 18th Street, NW  
Washington, DC 20006  
Elizabeth White, M.A.Ed., ATC, Senior Associate  
Jose V. Salazar, M.P.H., NREMT, Associate  
202/639-3550  
202/639-3102

Aspira Association  
1112 16th Street, NW, Suite 340  
Washington, DC 20036  
Hilda Crespo, Education Director  
202/835-3600

Ayuda, Inc.  
1736 Columbia Road, NW  
Washington, DC 20009  
202/387-4848  
Yvonne Vega, Director

Central American Refugee Center  
3112 Mt. Pleasant Street, NW  
Washington DC 20010  
Saúl Solorzano, Executive Director  
202/328-9799

Commission on Latino Community Development  
2000 14th Street, N.W.  
Washington, DC 20009  
Alberto Gómez, Chairperson  
202/939-8765

Council of Latino Agencies  
2835 16th Street, NW  
Washington, DC 20009  
Arnoldo Ramos, Executive Director  
202/328-9451

District of Columbia Department of Public Works  
Transportation Safety Branch  
Frank D. Reeves Center, Seventh Floor  
2000 14th Street, NW  
Washington, DC 20009  
Carol A. Lewis, Chief  
202/939-8018

District of Columbia Fire Department, Emergency Medical Services  
1018 13th Street, NW  
Washington, DC 20006  
Antonio Baerga, EMS Paramedic Supervisor  
202/673-3360

*El Pregonero* Newspaper  
Box 4464  
Washington, DC 20017  
Oscar Reyes, Editor  
301/853-4504

The Family Place  
3309 16th Street, NW  
Washington, DC 20010  
Christie McKay, Education Coordinator  
202/232-4508

Government of the District of Columbia  
Department of Human Services  
Commission on Mental Health Services  
Multicultural Services Division  
1536 U Sreet, NW  
Washington, DC 20009  
Marco Esparza, Clinical Social Worker  
202/673-2064

Hispanic Police Community Center  
1801 Columbia Road, NW  
Washington, DC 20009  
Officer Miguel Miranda  
Officer Eugene Olmedo  
Officer Moisés Arísti  
Officer José Magaña  
202/673-6826

La Clinica Del Pueblo  
1470 Irving Street, NW  
Washington, DC 20010  
Isabel Van Isschot, Coordinator  
Juan Romagoza, Manager  
202/462-4788

Latin American Youth Center/Latino Youth Action Project  
3045 15th Street, NW  
Washington, DC 20009  
Lori Kaplan, Director  
202/332-1053

Latino Civil Rights Task Force  
1815 Adams Mill Road, NW, Second Floor  
Washington, DC 20009  
Pedro Aviles, Executive Director  
202/332-1053

Mary's Center for Maternal and Child Care, Inc.  
1844 Columbia Road, NW  
Washington, DC 20009  
Ellen Farris, Health Educator  
Lydia Mendoza, Health Educator  
Martha Claros, Social Worker  
202/483-8196

National Council of La Raza  
810 First Street, NE, Third Floor  
Alvin Cruz, Affiliate Service Director  
Washington, DC 20002  
202/289-1380

Neighborhood Legal Services  
3616 14th Street, NW  
Washington, DC 20010  
April Lane, Staff Attorney  
202/726-1400

Maryland Office of Traffic Safety  
Traffic Safety Division  
7491 Connelly Drive  
Hanover, MD 21076  
Dr. Elizabeth Baker, Chief  
410/787-4014

Spanish Catholic Center  
1618 Monroe Street, NW  
Washington, DC 20010  
Mark Poletunow, O.F.M., CAP, Executive Director  
202/726-1400

State Agency for Bilingual/Multi-Cultural Education  
Browne Administrative Unit, Suite 224  
26th and Benning Road, NE  
Washington, DC 20002  
Roberto Girón, Assistant of Administration  
202/673-2064

The Wilson Center  
2401 15th Street, NW  
Washington, DC 20009  
Elaine Grant, Executive Director  
202/667-0417

**FLORIDA**

**Target Counties: Dade, Broward, Hillsborough**

**Braddock Senior High School  
Traffic Safety and Driver Education  
13201 S.W. 21st Street  
Miami, FL 33174  
Leo Madrogal, Instructor  
305/223-0102**

**Catholic Community Services  
9401 Biscayne Boulevard  
Miami Shores, FL 33138  
Msgr. Bryan O. Walsh, President/Chief Executive Officer  
305/754-2444**

**Dade County Citizens Safety Council  
P.O. Box 55749  
Miami, FL 33155-5749  
Betty Jane Evans, Executive Director  
305/592-3232**

**Dade County Licensure  
1315 S. West 107th Avenue  
Miami, FL 33174  
Martha Rolden, Chief Administrator  
305/222-4184**

**Dade County Office of Latin Affairs  
111 NW First Street, Sixth Floor  
Miami, FL 33128  
Siomara Casado, Director  
305/375-5270**

**Florida Department of Health and Rehabilitative Services  
Emergency Medical Technician Program  
2002 Old St. Augustine Road, Building D  
Tallahassee, FL 32301  
Mike Williams, State EMS Director  
904/487-1911**

Florida Department of Highway Safety and Motor Vehicles  
Neil Kirkman Building  
2900 Apalachee Parkway  
Tallahassee, FL 32399  
Glen Blocker  
904/488-3207

Florida Department of Highway Safety and Motor Vehicles  
Neil Kirkman Building  
2900 Apalachee Parkway  
Tallahassee, FL 32399  
Ken Howes, Public Information Officer  
904/488-5370

Florida Highway Patrol  
14190 West State Road 84  
Davie, FL 33325  
Lt. Donaldson, Public Information Officer for Broward County  
305/845-6000

Governor's Highway Safety Office  
Department of Community Affairs  
2740 Center View Drive  
Tallahassee, FL 32399  
John Ward, State Highway Safety  
904/488-5455

Governor's Highway Safety Office  
Department of Community Affairs  
2740 Center View Drive  
Tallahassee, FL 32399  
Dan Burden, Pedestrian and Bicycle Safety  
904/488-5455

Health Promotion and Wellness  
1317 Winewood Boulevard, Building A-HSH  
Tallahassee, FL 32399-0700  
Dave Jacobson, Program Administrator  
904/487-3220

Hillsborough County Emergency Medical Services  
P.O. Box 310398  
Tampa, FL 33680  
Bob Goldhammer  
813/272-6600

Metro-Dade Fire and Rescue  
6000 S.W. 87th Avenue  
Miami, FL 31373  
R. D. Paulison, Director  
305/596-8593

Metro-Dade Fire Department  
6000 S. W. 87th Avenue  
Miami, Florida 33173  
W. J. Alvarez, Jr., Assistant Fire Chief  
305/596-8595

Metro-Dade Police Department  
Doral Station  
9104 N.W. 25th Street  
Miami, Florida  
Lt. Jim DiBernardo  
305/595-8482

The Miami Coalition for a Drug-Free Community  
400 S.E. Second Avenue  
Miami, FL 33131  
Kim Greene, L.C.S.W., Project Director  
305/375-8032

National Association for Hispanic Elderly—Tampa Branch  
730 South Sterling Avenue, Suite 105  
Tampa, FL 33609  
Carolyn Deese  
813/870-3172

Tampa Police Department Tactical Division  
2203 North Lois Avenue, Suite 200  
Tampa, FL 33607  
Lieutenant Rick Duran  
813/348-2027

**NEW YORK CITY/NEW JERSEY**

**Target Counties: The Bronx, Richmond, Passaic**

**Bergen County Office of Highway Safety  
Bergen Pines Complex  
E. Ridgewood Avenue  
Paramus, NJ 07652  
John Pescador, Deputy Director  
201/967-4268**

**Board of Education  
The City of New York  
919 East 117th Street  
New York, NY 10035  
Wilfredo Laboy, Director Student Development  
and Pupil Personnel Services  
212/860-5902**

**Governor's Highway Safety Office  
Empire State Plaza  
Swan Street Building  
Albany, NY 12228  
Ken Carpenter, Deputy Executive Director  
518/474-511**

**Governor's Highway Traffic Safety Office  
225 East State Street, CN/048  
Trenton, NJ 08625  
James Arena, Director  
609/633-9300**

**Governor's Traffic Safety Committee  
415 South Broadway  
Hicksville, NY 11801  
Alan Fields, Regional Representative  
516/942-0125**

**Hispanic Policy Development Project (HPDP)  
36 East 22nd Street, Ninth Floor  
New York, NY 10010  
Siobhan Oppenheimer-Nicolau, President  
212/529-9323**

Institute for Puerto Rican/Hispanic Elderly  
105 East 22nd Street, Sixth Floor  
New York, NY 10010  
Sonia Aguila  
212/677-4181

Lincoln Hospital  
East 149th Street  
Bronx, NY 10451  
Julia Rivera, Associate Executive Director for  
Community and Public Affairs  
718/579-5660

National Puerto Rican Forum  
31 East 32nd Street, Fourth Floor  
New York, NY 10016  
Hector Velazquez, President  
212/685-2311

New York City Department of Transportation  
Safety Education Unit  
51 Chambers Street, Room 1404  
New York, NY 10007  
Dr. Ilona Lubman, Chief  
212/788-8107

New York City Department of Transportation  
2 Richmore Terrace  
Staten Island, New York 10301  
Joe Albano, Borough Engineer  
718/816-2395

New York City Police Department  
40th Precinct  
257 Alexander Avenue  
Bronx, NY 10457  
Officer Robert Auleppa  
718/402-2270

New York Coalition for Transportation Safety  
98 Cutter Mill Road  
Great Neck, NY 11021  
Robin Markowitz, Executive Director  
516/829-0099

Office of the Bronx Borough President  
851 Grand Concourse, Room 207  
Bronx, NY 10451  
Brian Thomas, Traffic Safety Coordinator  
718/590-3878

Office of the Staten Island Borough President  
Borough Hall, Room 12  
Staten Island, NY 10301  
Tom Jost, Director of Transportation  
718/816-2004

#### TEXAS

Target Counties: Bexar, Cameron, El Paso, Harris, Hidalgo

Avance, Rio Grande Valley Area Chapter  
808 South Main Street  
McAllen, TX 78501  
Raquel Oliva, Executive Director  
210/618-1642

Bexar County DWI Task Force  
Justice Center  
3000 Dolorosa  
San Antonio, TX 78205  
Albert C. Ramirez, Chairman  
210/220-2328

Border Association for Refugees from Central America  
P.O. Box 715  
Edinburg, TX 78540  
Bryan Szittai  
210/631-7447

Brownsville Emergency Medical Services  
1325 East Ringle  
Brownsville, TX 78521  
Antonio Puente, Interim Director  
210/541-9491

Brownsville Independent School District  
1900 Price Road  
Brownsville, TX 78521  
Dr. Esperanza Vendejas, Superintendent  
210/548-8011

Centro Tejano Para Immigrantes  
3520 Montrose Blvd.  
Houston, TX 77006  
Susan Maxwell, Executive Director  
713/228-5200

Community Alliance for Traffic Safety  
4203 Woodcock Drive, Suite 260  
San Antonio, TX 78284  
Dean DeSoto, Executive Director  
210/735-2287

Del Rio Police Department  
*El Protector Program*  
110 East Broadway  
Del Rio, TX 78840  
Patrolman Freddie Martinez  
210/774-8580

El Paso Hispanic Chamber of Commerce  
P.O. Box 26832  
El Paso, TX 79926  
Milton Durand, President  
915/594-2890

El Paso Department of Emergency Medical Services  
100 North Ochoa  
El Paso, TX 79936  
Bill Brown, Chief  
915/545-5284

El Paso Independent School District  
Education Center  
6531 Boeing Drive  
El Paso, TX 79925  
Ken George, Associate Superintendent  
915/779-4293

Hearst Newspapers  
P.O. Box 161  
San Antonio, TX 78295  
Maria Elena Torralva, Director of Diversity  
210/225-7411

KidSafe Children's Automobile Safety Project  
The University of Texas Health Science Center at San Antonio  
7703 Floyd Curl Drive  
San Antonio, TX 78284-7788  
Marilyn M. Faber, M.H.A. Director  
210/615-6993

League of United Latin American Citizens  
District Supreme Council 4  
P.O. Box 1469  
El Paso, TX 79948  
Robert Perez, Director  
915/532-3415

National Association for Hispanic Elderly—San Antonio Branch  
109 Lexington Avenue, Suite 217  
San Antonio, TX 78205  
Eva Trevino, Regional Coordinator  
210/226-3806

New Mexico Department of Health  
Border Health Office  
P.O. Box 30001 - Dept. AHC  
New Mexico State University  
Las Cruces, NM 88003-0001  
Dan Reyna, M.P.A.  
505/646-7966

Pan American Health Organization  
6006 North Mesa, Suite 600  
El Paso, TX 79912  
Dr. Hugo Vilchis-Licon, Epidemiologist  
915/581-6645

Planned Parenthood Association of Hidalgo County  
*Entre Nosotros*  
1017 Pecan Boulevard  
McAllen, TX 78501  
Alicia Gonzales, Promotora Coordinator  
210/686-0585

Safe 2000 Community Partnership Program  
5959 Gateway West, Suite 670  
Selina Pesqueira, Project Director  
El Paso, TX 79925

San Antonio Hispanic Chamber of Commerce  
110 Broadway, No. 50  
San Antonio, TX 78205  
Arthur Emerson, Chairman  
210/340-8860

San Antonio Housing Authority  
300 Gante Walk  
San Antonio, TX 78207  
Lourdes Stephens  
210/227/9706

TEAM-Up Houston  
2111 Nantucket  
Houston, TX 77057  
Jeanne Augey, Project Manager  
713/789-3541

Texas Department of Health  
Senior Citizens Occupant Protection Program  
1100 West 49th Street  
Austin, TX 78756  
Carla Baker, Statewide Coordinator  
512/458-7266

Texas Department of Health  
Safe Riders Program  
1100 West 49th Street  
Austin, TX 78756  
Steve Anderson, Director  
512/458-7266

Texas Department of Health  
Office of Border Environmental and Consumer Health  
1100 West 49th Street  
Austin, TX 78756  
Hector F. Gonzalez, M.D., M.P.H., Director  
512/458-7675

Texas Department of Health  
Office of Border Environmental and Consumer Health  
1100 West 49th Street  
Austin, TX 78756  
Sal Hernandez, Chief Sanitarian  
512/458-7675

Texas Department of Transportation  
Traffic Safety Section/Governor's Highway Safety Office  
11th and Brazos Streets  
Austin, TX 78701-2483  
Susan Bryant, Chief  
512/416-3176

Texas Department of Transportation  
P.O. Box 10278  
El Paso, TX 79994-0278  
Charles Veale, District Safety Specialist  
915/774-4310

Texas Department of Transportation  
P.O. Box 1386  
Houston, TX 77251-1386  
Sharon Johnson, P.R. Assistant Safety Specialist  
731/802-5177

Texas Department of Transportation  
P.O. Box Drawer EE  
Pharr, TX 78577-1231  
Gilbert Trevino, District Traffic Specialist  
210/787-2771

Texas Department of Transportation  
P.O. Box 29928  
San Antonio, TX 78284  
Linda Tomasini, Traffic Safety Specialist  
210/615-6321

University of Texas Health Science Center at San Antonio  
Health Education Training Center Alliance of Texas  
7703 Floyd Curl Drive  
Faustina Ramirez Knoll, M.S.W., South Central Regional Coordinator  
San Antonio, TX 78284-7786  
210/614-2540

University of Texas Pan American at Edinburg  
Texas-Mexico Border Health Coordination Office  
1201 West University Drive  
Edinburg, TX 78539-2999  
Rumaldo Juarez, Ph.D., Director  
210/381-3687

## HOST ORGANIZATIONS FOR FOCUS GROUP DISCUSSIONS

### CALIFORNIA

Barrio Action Group  
4927 Huntington Drive, North  
Los Angeles, CA 90032  
Tammy Membreno, Director  
213/221-0779

Mexican American Community Services Agency  
130 North Jackson Avenue  
San Jose, CA 95116  
Esther Medina, Executive Director  
Michelle Mendoza, Deputy Director  
408/928-1169

### COLORADO

Denver Social Services Department  
2800 West Alameda Avenue  
Denver, CO 80223  
Randy Martinez, Associate Manager  
303/727-2906

Adams County Department of Social Services  
7190 Colorado Boulevard  
Commerce City, CO 80022  
Linda Johnson, Bureau Director of Services  
303/289-6556

Adolescent Health Program  
Valley-Wide Health Services  
201 Cole Avenue  
Alamosa, CO 81101  
Antonio Gurule, Coordinator  
(719) 589-5111

#### DISTRICT OF COLUMBIA

Carlos Manuel Rosario Adult Education Center  
35th and T Streets, NW  
Washington, DC 20007  
Rosemary Inserni, Community Coordinator  
202/282-0140

Bell Multicultural Senior High School  
Hiatt Place between Irving Street and Park Road, NW  
Washington, DC 20010  
Victor Carcagno, Counselor  
Lina Ramos, Fine Arts Coordinator  
202/673-7531

Barbara Chambers Children's Center  
1470 Irving Street, NW  
Washington, DC 20010  
Maribel Ventura Torres, Director  
202/387-6755

Wilson Center  
2401 15th Street., NW  
Washington, DC 20009  
Elaine Grant, Executive Director  
202/667-0417

La Clinica Del Pueblo  
1470 Irving Street, NW  
Washington, DC 20010  
Isabel Van Isschot, Coordinator  
202/462-4788

## FLORIDA

Vecinos en Acción  
435 S.W. Second Street  
Miami, FL 33130  
Raisa Fernandez, President  
305/545-8321

Val River & Son, Inc.  
5030 S.W. 154th Place  
Miami, FL 33185  
Leo Mesa, Director  
305/235-4120

## NEW YORK CITY

Bronx Community College  
University Avenue and West 181st Street  
Bronx, NY 10453  
Janet Ortiz-Torres, Dean's Office

Our Lady of Good Counsel  
10 Austin Place  
Staten Island, NY 10304  
Pastor Joseph Mostardi  
718/447-1503

Paul Roldan, President  
Latino Civic Association  
P.O. Box 140133  
Staten Island, New York 10314  
212/306-3554

## TEXAS

El Paso YWCA  
Project AIDS 101  
1918 Texas Avenue  
El Paso, TX 79901  
Deborah Benedict, Director  
915/533-2311

Avance, Rio Grande Valley Area Chapter  
808 South Main Street  
McAllen, TX 78501  
Raquel Oliva, Executive Director  
210/618-1642

## SITE VISITS

### CALIFORNIA

Safety Belt Safe, U.S.A.  
123 West Manchester Blvd.  
Inglewood, CA 90301  
Stephanie Tombrello, Executive Director

Office of County Supervisor Gloria Molina  
500 West Temple, Room 856  
Los Angeles, CA 90012  
Deborah Taylor, Special Assistant

The Century Council  
550 South Hope Street, Suite 950  
Los Angeles, CA 90071-2604  
Rose Ann Rasic, Director - Public Relations  
Carolyn Williams, Manager - Public Relations  
The Honorable Cruz Reynoso  
Estelle Romero  
Roxana Lissa

Los Angeles Police Department  
Traffic Coordination Section  
419 South Spring Street, Seventh Floor  
Los Angeles, CA 90013  
Officer Ed Funes  
Lt. Charles F. Kunz

KMEX-TV  
6701 Center Drive West, 15th Floor  
Los Angeles, CA 90045  
María L. Gutierrez, Operations/Production Manager

Community Partnership of Santa Clara County  
960 West Hedding, Suite 164  
San Jose, CA 95126-1215  
Andrea Schneider, M.A., President and CEO  
Azalia Rodriguez, Program Manager

*El Observador*  
777 North First Street  
San Jose, CA 95112  
Gilbert Morales, Editor/Owner

Mexican American Community Services Agency  
Car Seat Program  
130 North Jackson Avenue  
San Jose, CA 95116  
Javier Perez, Coordinator

## COLORADO

Prevention Center  
4760 Walnut Street  
Suite 105  
Boulder, Colorado 80301

## **FLORIDA**

**Miami Mental Health Center  
2141 S. West First Street  
Miami, Florida 33135  
Marta R. Pizarro**

**Metro-Dade Police Department  
Doral Station  
9104 N.W. 25th Street  
Miami, Florida  
Lt. Jim DiBernardo**

**Metro-Dade Fire Department  
6000 S. W. 87th Avenue  
Miami, Florida 33173  
W. J. Alvarez, Jr., Assistant Fire Chief**

## **NEW YORK CITY**

**Latino Civic Association  
P.O. Box 140133  
Staten Island, New York 10314  
Paul Roldan, President**

**Office of the Staten Island Borough President  
Borough Hall, Room 12  
Staten Island, NY 10301  
Tom Jost, Director of Transportation**

## **TEXAS**

**Community Partnerships  
Institute for Border Community Health Education  
4824 Alberta Avenue, Suite 209  
Leticia Paez, Director  
El Paso, TX 79905**

Department of Pediatrics  
W.K. Kellogg Binational Project for Primary Care  
Texas Tech University Health Sciences Center  
4800 Alberta Avenue  
Marie A. Leiner, Research Projects Administrator  
El Paso, TX 79905

Planned Parenthood Association of Hidalgo County  
1017 Pecan Boulevard  
McAllen, TX 78501  
Robert M. Garcia, Assistant Coordinator  
Alicia Gonzales, Promotora Coordinator, *Entre Nosotros*

Avance, Rio Grande Valley Area Chapter  
808 South Main  
McAllen, TX 78501  
Raquel Oliva, Executive Director

Comandante Jose Lazaro Padilla Hernandez  
Direccion General de Seguridad Publica y Vialidad Municipal  
Acequia del Charco #7327, Dracc. Acequias, Cd. Juarez  
Chihuahua, Mexico

**APPENDIX B**  
**FOCUS GROUP PARTICIPANTS**

**Figure B1: Number of Focus Group Participants in Each Target Site**

	<b>Adolescent Males</b>	<b>Adult Males</b>	<b>Adult Females</b>	<b>Parents</b>
<b>California</b>				
Los Angeles	7	14	9	18
Santa Clara		9	9	18
<b>Colorado</b>				
Denver/ Adams	9		6	18
Alamosa	8	6	7	8
<b>District of Columbia</b>				
	12	15	16	17
<b>Florida</b>				
Dade	14	14	16	13
<b>New York City</b>				
Bronx	6	6	9	9
Richmond	7	6	5	6
<b>Texas</b>				
El Paso	16	13		
Hidalgo/ Cameron			16	18
<b>Totals</b>	<b>79</b>	<b>83</b>	<b>93</b>	<b>107</b>

Figure B2: Number of Focus Group Participants Per Hispanic Target Group					
	Adolescent Males	Adult Males	Adult Females	Parents	Totals
Central American	12	15	16	17	60 (16.57%)
Cuban	14	14	16	13	57 (15.74%)
Mexican	40	42	47	62	191 (52.76%)
Puerto Rican	13	12	14	15	54 (14.91%)
<b>Totals</b>	<b>79</b>	<b>83</b>	<b>93</b>	<b>107</b>	<b>362</b>