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INDEPENDENT EFFECTS OF POSITIVE AND NEGATIVE AFFECT ON HEALTH RISK BEHAVIORS AMONG LATINO ADULTS.

Background: Negative affect is more widely emphasized in behavior modification interventions compared to positive affect. However, positive affect is associated with smoking cessation, physical activity and healthy dietary habits among the general population and may be an important treatment target. Furthermore, few studies have examined the relationship between positive affect and health behaviors among Latinos, who disproportionately experience certain modifiable health risk behaviors. The purpose of this study is to examine the independent associations of positive affect and negative affect on modifiable health behaviors among Latino adults.

Methods: Data were used from 432 Latino adults. Primary outcomes were at-risk drinking, failure to meet recommended physical activity levels, failure to meet recommended fruit/vegetable consumption, and current smoking status. Predictors were positive and negative affect as measured by the Positive & Negative Affect Schedule. Multiple logistic regression analyses were conducted to measure associations between positive and negative affect and each health risk behavior. Among current smokers (N=353), positive and negative affect were additionally examined for associations with engagement in multiple health risk behaviors. Analyses controlled for gender, age, nativity, education, and employment status.

Results: Positive affect was associated with lower odds of failing to meet physical activity (adjusted odds ratio [AOR] = .51, 95% confidence interval [CI] = .39-.67) and fruit/vegetable recommendations (AOR = .58, 95% CI = .43-.79). Negative affect was associated with higher odds of at-risk drinking (AOR = 2.19, 95% CI = 1.66-2.88) and current smoking (AOR = 2.11, 95% CI = 1.42-3.13). Among current smokers, positive affect was associated with lower odds of engaging in one or more (AOR = 0.35, 95% CI = 0.12-0.96) and two or more health risk behaviors (AOR = 0.53, 95% CI = 0.38-0.75).

Conclusions: Positive affect may facilitate engagement in positive health behaviors, while negative affect may encourage engagement in negative health behaviors. Emphasis on positive affect as an intervention target may be warranted to reduce engagement in multiple health risk behaviors among Latino smokers. Additionally, intervention development efforts may consider prioritizing positive affect for physical activity and dietary interventions, and negative affect for at-risk drinking and smoking cessation interventions.