African Americans (AAs) continue to suffer disproportionately from CVD morbidity and mortality. CVD risk factors of obesity, hypertension (HTN), insulin resistance, and hyperlipidemia, components of Metabolic syndrome (METS) affect AAs at higher rates when compared to Caucasians. Lifestyle, psychosocial status and adherence to treatment are factors relating to worse CVD outcomes.

A culturally sensitive lifestyle intervention (LSI) focusing on health behaviors was evaluated for effects on psychosocial factors and medication adherence.

**Sample** (N=120)
AA Participants recruited from an urban primary care center with METS and HTN in the metro Atlanta area.

**Culturally sensitive self-management Lifestyle Intervention**
LSI group evaluated for improved health behaviors and psychosocial factors over those randomized to the UC group.
LSI groups included four focus group sessions occurring over a 2-month time frame.
Focus areas were physical activity, diet, medication adherence, and 10-weekly phone counseling sessions.

**Variables and Measures:**
- Clinical and demographic data
- Medication Adherence (Hill Bone Survey [HB])
- Depression (Beck Depression Inventory-II [BDI-II])
- Autonomy Support (Autonomy support tool [AST])

**Statistical Analysis:**
Correlation matrix, Paired t-test, ANCOVA

**Devising culturally tailored interventions targeting SM behaviors while addressing psychosocial factors improved autonomy support.**

**Improvement of psychosocial factors such as depressive symptoms may be important in managing their chronic illness.**

**Participants self-rated their medication taking as adherent reducing the ability of the LSI to create a direct effect.**

**Supported in part by National Heart, Lung, and Blood Institute, (NIH; 1 U01 HL079156-01; Dr. Quyyumi, PI); and PHS Grant UL1 RR025008 from the Clinical and Translational Science Award program, NIH, NCRR; and Grant 5P20RR11104 from the NIH, National Center for Research Resources (NCRR) for the Morehouse Clinical Research Center. Effort for T. Spikes, was funded in part by the National Institutes of Health National Institute of Nursing Research grant number T32NR012715 PI (S. Dunbar) “The content is solely the responsibility of the authors and does not necessarily represent the official views of the NIH.”