
The Susquehanna County Obesity Reduction Effort: 1-Year Pilot Results

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BACKGROUND: Obesity prevalence continues to rise across the United States, contributing to the risk of cardiovascular disease and diabetes. Effective population-based strategies to combat this emerging epidemic are urgently required.

OBJECTIVES: To assess the feasibility of a county-wide obesity reduction intervention in rural Pennsylvania, a region with a particularly high prevalence of obesity.

METHODS: A combined approach of social marketing and facilitation of healthy behaviors was used. Social marketing techniques included the distribution of a quarterly newsletter to all households in the county, use of the local radio and newspapers, a website, lectures in the community and visibility at local fairs and community events. Facilitation of healthy behaviors included cooking demonstrations at local grocery stores, a weekly “Walk with a Doc” program, and a month-long team walking competition, gym membership discounts and free classified listings for used exercise equipment. A baseline assessment of knowledge, motivation, behaviors, and biometrics in the intervention county (n=200) and in a control county (n=200) was obtained before beginning the program and was repeated one year later using a telephone survey derived from the Behavioral Risk Factor Surveillance System (BRFSS).

RESULTS: On a county-wide basis, there was no improvement in knowledge, motivation or behaviors after one year in the intervention group. However, only 28.5% (n=57) of the intervention county interviewees were aware of the program. Those aware of the program had a favorable impression (mean 8.0, standard deviation 2.6, on a 10-point Likert scale) and there was a non-significant difference in knowledge (correct answers 56% vs. 51%, p=0.72), motivation to lose weight (33% vs. 22%, p=0.096), and body mass index (27.6 vs. 28.3, p=0.59) compared to those unaware of the program.

CONCLUSIONS: Among those individuals aware of the program, there was a non-significant difference in knowledge, motivation, and body mass index. Although statistical power was necessarily limited by small sample size, these results suggest that the county-wide intervention might have beneficial effects and efforts to enhance visibility and impact of obesity control programs in rural areas are needed.