COLLEGE OF PUBLIC HEALTH AND HUMAN SCIENCES

Examining Rural Resources and Readiness to Change the Context for Obesity Prevention

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The community-based participatory research team, which includes community residents as mappers and discussants, collects and analyzes qualitative information in rural communities using community photomapping and reflective dialogue. Residents participate in community conversations and discuss photos that represent available resources. Data sources (i.e. photographs, maps, narratives) are coded as barriers and supports for healthy eating and activity, and analyzed to provide an overall readiness score based on the six dimension community readiness model.

For this project, NVivo10, a software program that researchers use to organize, analyze, and interpret qualitative data, was employed. The software allows researchers to code data and run queries about common words and themes that emerge from the data. Researchers are also able to code data into certain topic areas within the project model, which helps to organize many sources of data including quotes, posts, photographs, narrative content, and websites.

Background Information

The obesity rates in the U.S. and in developed countries worldwide have continued to rise and are especially high in under-resourced geographical areas. Rural areas are set apart from urban places because of different social, economic, and cultural aspects, which may lead to differing resources and attitudes in regards to childhood obesity prevention. Researching the differences in resources and readiness to address environmental barriers to healthy lifestyles is vital to understanding how communities must move forward and invoke healthy eating and activity, and thus improve the body mass index among rural elementary school age children.

Objectives: Two Aims
1. Explore and explain the rural obesogenic environment.
2. Plan, implement, and evaluate a multi-level intervention targeting rural home, school, and community behavioral settings to promote healthful eating and increase physical activity, and thus improve the overall health of the community members.

Methods

I specifically worked on data from communities in Washington: Connell, Makah, Fairfield, and completed a community report for Fairfield. Fairfield is a rural city located about 30 miles southeast of the City of Spokane in Spokane County, Washington. It is on the Palouse Scenic Byway, and is part of the 201 miles of rolling hills and farmland that are known as the “Palouse.” There are no schools in Fairfield. They were torn down several years ago; students are bussed 25 miles to the school in Spokane. The nearest grocery store is 25 miles away in Spokane – Valley, as the Fairfield Thriftway shut its doors in 2011. Local recreational opportunities include 2 small park areas, a county baseball park and a small wellness center with a pool. 10 miles south in Tacoma, the nearest neighboring community, Fairfield’s main community event is a 4th of July celebration that has been well attended for over 100 years.

Overall Score

Fairfield scored between a three and a four which signifies that the community readiness is between vague awareness of the issue of childhood obesity and preparing stages for change towards increasing environmental resources for healthy eating and physical activity resources in their community. Vague awareness implies that most feel concern about the given situation but there is also no immediate motivation for action. The preplanning stage shows that there is clear recognition that something needs to be done to address the issue of childhood obesity but the efforts that are put in place are not focused or detailed.

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