

SPECIAL TOPICS

ORIGINAL RESEARCH: FEATURED ABSTRACT FROM THE
19TH NATIONAL CONFERENCE ON CHRONIC DISEASE PREVENTION AND CONTROL

Moving People to Move: Midpoint Results of the Walk the Ozarks to Wellness Project

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Track: Communications and Technology

The Walk the Ozarks to Wellness Project is a four-year longitudinal study of walking currently underway in six rural underserved communities in southeast Missouri. The project's objective is to increase time spent walking among low-income, overweight, rural Missourians who have diabetes or who are at risk for developing the disease.

Participants initially enrolled in this study at community health events sponsored by a local steering committee. Throughout the first year of the intervention, beginning in November 2003, participants received a monthly newsletter. In the second year, participants receive a bimonthly newsletter. Newsletter messages were written based on participant surveys completed at baseline and at month nine. Topics addressed in the first nine newsletters included motivation, health history, discussions with doctors, self-efficacy, and barriers. Additional newsletters included topics about social support and physical activity level.

To date, 1065 participants have enrolled in the project in nine groups. We have received midpoint (T2) surveys from 153 participants in the first group. Paired *t*-test analyses show significant improvement at T2 in those who reported no walking and no moderate activities at baseline, in both

days per week and minutes per week ($P < .001$). Of those who marked having no place to exercise as a barrier at baseline, 81% no longer had this barrier at T2. McNemar tests show significant improvement at T2 in those who had not talked to their doctors about healthy eating ($P < .001$), exercise ($P = .029$), and losing weight ($P < .001$) at baseline. Stages of Change analyses show advancement in those who were in the precontemplation and contemplation stages, where overall, 69% in precontemplation and 67% in contemplation moved forward.

These results show the preliminary impact of a tailored intervention in a high-risk population. This tailored intervention was effective in 1) moving participants forward in the initial stages of change; 2) increasing awareness about the importance of talking with one's doctor about leading a healthy lifestyle; and 3) decreasing perceived barriers.

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