

Eating at buffets plus not exercising equals obesity in rural America

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In small towns in the Midwestern United States, people who eat out often at buffets and cafeterias and who perceive their community to be unpleasant for physical activity are more likely to be obese.

"It's not that people don't want to get physical activity or eat healthy foods, but we've made it difficult in many communities," says Ross Brownson, Ph.D., senior author of the study and a professor at the George Warren Brown School of Social Work at Washington University in St. Louis. "People in small towns spend a great deal of time in cars, and they also may not have easy access to fresh fruits and vegetables in their markets."

The findings are published in the December issue of *Preventive Medicine*.

Thirty percent of U.S. adults are obese, which increases their risk for health conditions such as hypertension, type 2 diabetes, heart disease and stroke. Rural adults have higher levels of obesity and are less active in their leisure time than urban and suburban U.S. adults, says Brownson, a faculty scholar of Washington University's Institute for Public Health and a professor at the School of Medicine.

From July to September 2005, 1,258 randomly selected adults in 12 rural communities in Missouri, Arkansas and Tennessee completed telephone surveys about their food choices and physical activity. Eligible households were within two miles of a community walking trail.

Researchers asked about their access to produce and low-fat foods, frequency and location of food shopping and frequency and location of restaurant dining. They also were asked how they perceived their community for physical activity.

The findings revealed that respondents who ate out often, especially at buffets, cafeterias and fast food restaurants, were more likely to be obese. Those with a high school education or less reported limited access to fruits and vegetables and were more likely to shop at convenience stores.

Additionally, obese participants tended to have less education and lower annual incomes than normal weight respondents. They also were more likely to view their community as unpleasant for physical activity, such as lacking sidewalks for walking or biking or to have few places to be active.

"Although obesity rates are higher in rural areas, this is one of the first studies to look at food choices and exercise in this population," says Alicia Casey, first author of the paper and now a doctoral student in health communications at Penn State University. "Determining how much these factors increase the risk of obesity in rural areas can help us determine methods to help this group."

Brownson points out that a lot of travel planning focuses on how to increase the numbers of automobiles on our roadways, not on how to make travel friendly by foot or bicycle.

Possible interventions to enhance safety for people who want to walk or bicycle along rural roads include widening the shoulders, using signage to identify pedestrian and cycle areas and reducing speed limits. Options to increase availability and affordability of healthy foods could involve working with food outlet owners and changes in state or federal taxation

and agricultural policies to reduce the relative price of healthy foods compared to unhealthy foods.

Society, Brownson stresses, will be better off finding ways to prevent obesity instead of trying to treat the condition. "We need to take these issues into account when we're making transportation and city planning decisions," he says. "Everyone will benefit if we make the healthy choice the easy choice."

This study was the third part of a larger intervention research program that promotes walking among overweight rural adults. Called Walk the Ozarks to Wellness, this research program partnered with local health agencies and health professionals to implement promotions that focused on physical activity and prevention of Type 2 diabetes. Some of these promotions included fun walks, walking clubs and charity walks. More than 1,000 residents also were recruited to receive a health newsletter. Findings from other aspects of the program are forthcoming.

Source: Washington University School of Medicine

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