DELIVERING E-MAIL OBESITY MESSAGES TO WOMEN

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Community health advocates who volunteer with the University of South Alabama of Excellence recently noted that women often pay more attention to their family's health and forget about their own health. Women/mothers are putting their health at risk for diabetes, hypertension, sleep apnea, many cancers, stroke, cardiovascular disease and overall mortality. In recent years, obesity has become an increasingly serious issue around the world, especially in women.¹ According to research, more than one third of US adults were obese in 2005-2006, with 33.3% of men and 35.3% of women being obese.² Obesity occurs at an alarming rate in the women in our south Alabama community and is affecting mothers and families in our community.

The CDC reports that more than 72 million in the United States were obese in 2005-2006. Further racial and ethnic disparities exist in women's obesity, "African American and Mexican American women are more likely to be obese than non-Hispanic White women."2 To help women in our community be informed about their health, I distributed an e-mail message with tips on how to stay healthy by: eating right, exercising, getting routine exams and screenings. The message provided informational support to help women promote healthy eating and physical activity in their families.

I chose to deliver the healthy message by e-mail because it was a quick and easy way to grab the attention of the younger women. According to research, e-mail communication is an effective way to catch the attention of youth and older people.³

My project had several hypotheses. First, I predicted that the women who receive the message would find it very helpful and influential in changing their habits in eating, exercising, and getting routine checkups; second, that women would find the information helpful and would send it to at least two of their friends or family; third, the message would catch the attention of the older women more than the younger women.

One health message was sent out to 20 women aged >19 years. From there each woman forwarded the message to at least 2 or more women and so on. The message was directed primarily to women and was designed to provide advice to women about obesity and other health issues. The women were asked to respond to the sender to evaluate the usefulness of the message. The data collected included: how many people got the message and how many women responded to the evaluator.

Of the 20 initial recipients of the message, only 9 responded with their comments about the usefulness of the information. Of the 9 who replied, only 4 forwarded the message. An additional 16 women who were either friends or family of the first group of women acknowledged receipt of the message. As predicted, the youth did not respond and most likely did not forward the message. The older women/ mothers who received the message found it to be

helpful and appreciated the information.

The focus of this study was to inform women about a health risk, to capture responses of women to the obesity health message that they received, and to learn how they felt about women's obesity and their health. We need to find an effective way to engage youth and keep them informed about their health. In contrast, the older women seemed to be more concerned about their health and wanting to change their health lifestyle, to be around longer for their children or grandchildren. The older women who are community health advocates are concerned about their own health and about informing their communities about health risks and resources.

References

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