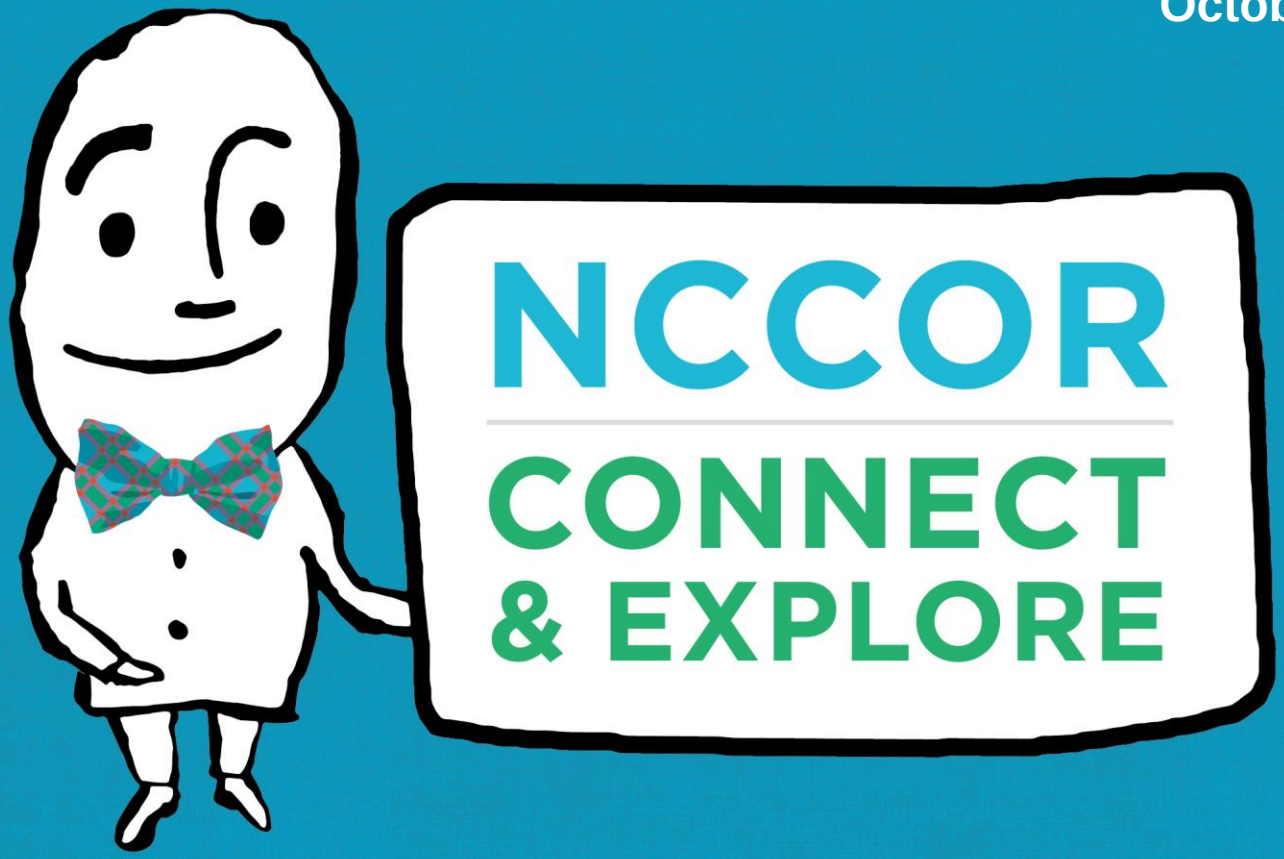
October 11, 2017



Connecting you with experts. Exploring the latest childhood obesity news and research.

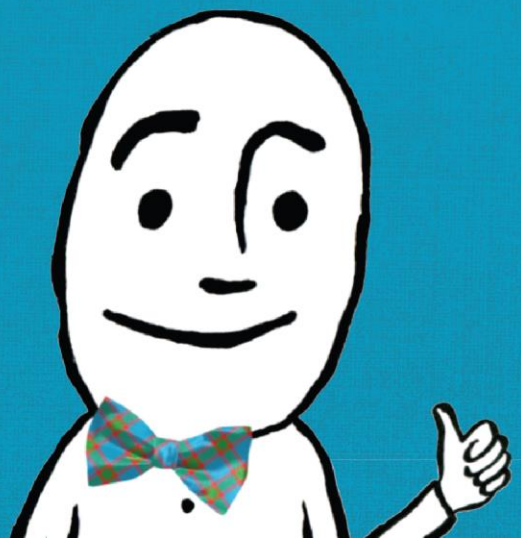
We will begin at 3:05 to allow participants time to join the webinar.

NCCOR
National Collaborative on Childhood Obesity Research

NATIONAL COLLABORATIVE ON CHILDHOOD OBESITY RESEARCH

1. Spotlight
   - Evidence-based Recommendations from the Community Preventive Services Task Force: Team and Task Force Perspective
   - Creating Activity-Friendly Communities: A New Recommendation from the Community Preventive Services Task Force
   - Disseminating Evidence for Action
2. One on One
3. NCCOR Announcements

TODAY'S PROGRAM



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Need technical assistance? Have a question for our speakers?

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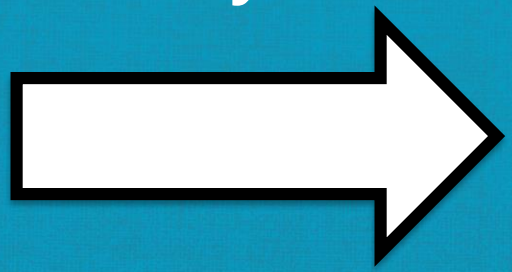

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Today's Speakers

Elaine Arkin
National Collaborative on Childhood Obesity Research

Christopher Kochtitzky
Senior Advisor
Physical Activity and Health Branch
Division of Nutrition, Physical Activity and Obesity
Centers for Disease Control and Prevention

Jamie Chriqui
Professor of Health Policy and Administration
Co-Director
Health Policy Center
Institute for Health Research and Policy
University of Illinois at Chicago School of Public Health

Ross Brownson
Bernard Becker Professor of Public Health
Co-Director,
Prevention Research Center
Washington University in St. Louis

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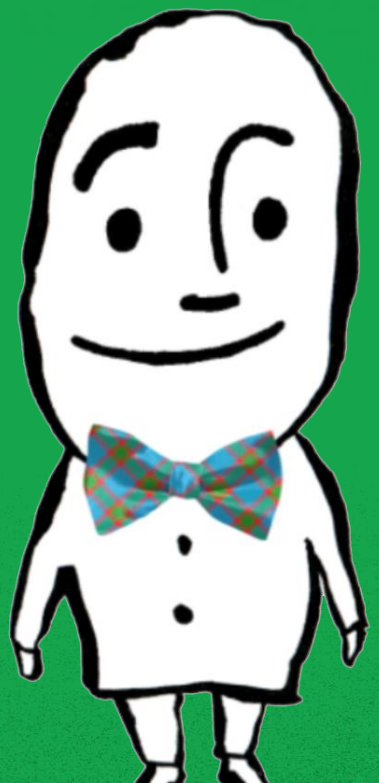
INTERACTIVE POLL



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SPOTLIGHT

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Evidence-based Recommendations from the Community Preventive Services Task Force:

Team and Task Force Perspective

Jamie Chriqui, Ph.D. M.H.S
Professor of Health Policy and Administration
Co-Director, Health Policy Center
Institute for Health Research and Policy
University of Illinois at Chicago
School of Public Health

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Community Preventive Services Task Force (CPSTF)

- **Independent, nonfederal, unpaid panel of public health and prevention experts**
  - 15-members; 5 year terms
- **Prioritizes topics** for consideration
- **Oversees all systematic review projects**, including participating on Coordination teams for specific reviews
- **Produces recommendations and identifies evidence gaps to help inform decision making** by various government and non-government entities

Community Preventive Services Task Force Members (2016)

Jonathan C. Fielding, MD, MPH, MBA	UCLA School of Public Health
Robert L. Johnson, MD	UMD-New Jersey Medical School
Bruce N. Calonge, MD, MPH	Colorado Trust
Douglas Campos-Outcalt, MD, MPA	Mercy Care Plan
Marshall Chin, MD, MPH, FACP	University of Chicago
Jamie F. Chriqui, PhD	University of Illinois at Chicago
John M. Clymer	US Healthiest Alliance
Karen Glanz, PhD, MPH	University of Pennsylvania
Ron Goetzel, PhD	Emory University
Shiriki Kumanyika, PhD, MPH	University of Pennsylvania
Gilbert Omenn, MD, PHD	University of Michigan
C. Tracy Orleans, PhD	Robert Wood Johnson Foundation
Nico P. Pronk, PhD	HealthPartners
Patrick Remington, MD, MPH	University of Wisconsin
Susan M. Swider, PhD, APHN-BC	Rush University

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Steps in a Community Guide Systematic Review

- **Task Force** prioritizes topic area for review work.
- A multi-disciplinary **Coordination team** is recruited.
- **Coordination team** defines the intervention, and establishes the criteria for the review (such as included study designs and comparisons).
- Community Guide staff conduct the search for evidence, identify intervention studies meeting criteria, and abstract and evaluate each study.
- **Coordination team** evaluates the evidence, and provides input on the completed review presentation and potential findings.
- **Task Force** receives the completed review, identifies any issues requiring additional work, and translates the evidence into conclusions on effectiveness and a recommendation regarding use.
- **Task Force** findings statement is posted to the Community Guide website
- Papers are prepared and submitted for publication

Built Environment Project Coordination Team

CPSTF Members

- Shiriki Kumanyika (UPenn)
- Tracy Orleans (RWJF)
- Jamie Chriqui (UIC)

External Partners

- Ross Brownson (Washington Univ.)
- Carlos Crespo (Portland State)
- Greg Heath (UT at Chattanooga)
- Ken Powell (Retired)
- Jim Sallis (UC San Diego)
- Anna Ricklin (APA)

NIH Partner

- Rachel Ballard (NIH)

CDC Partners

- David Brown (DNPAO)
- Jackie Epping (DNPAO)
- Tom Schmid (DNPAO)
- Chris Kochtitzky (CDC-NCEH)

Community Guide Staff Team

- David Hopkins
- Jeffrey Reynolds
- Renée Skeete Alston
- Timothy Levengood
- Ismaila Ramon

Task Force Review Decisions: Start to Finish

- **Narrowed systematic review focus** to the subset of studies evaluating interventions in combination
- Considered a **broad range of study designs** as evidence
- Included a **range of study comparisons** within this review
- **Weighted longitudinal evidence over cross-sectional** information, but **considered both**.
- **Considered, first**, the overall **evidence on effectiveness**. Once this was determined, Task Force identified the most common **combinations of interventions** across the body of evidence in order to **support more specific guidance**.

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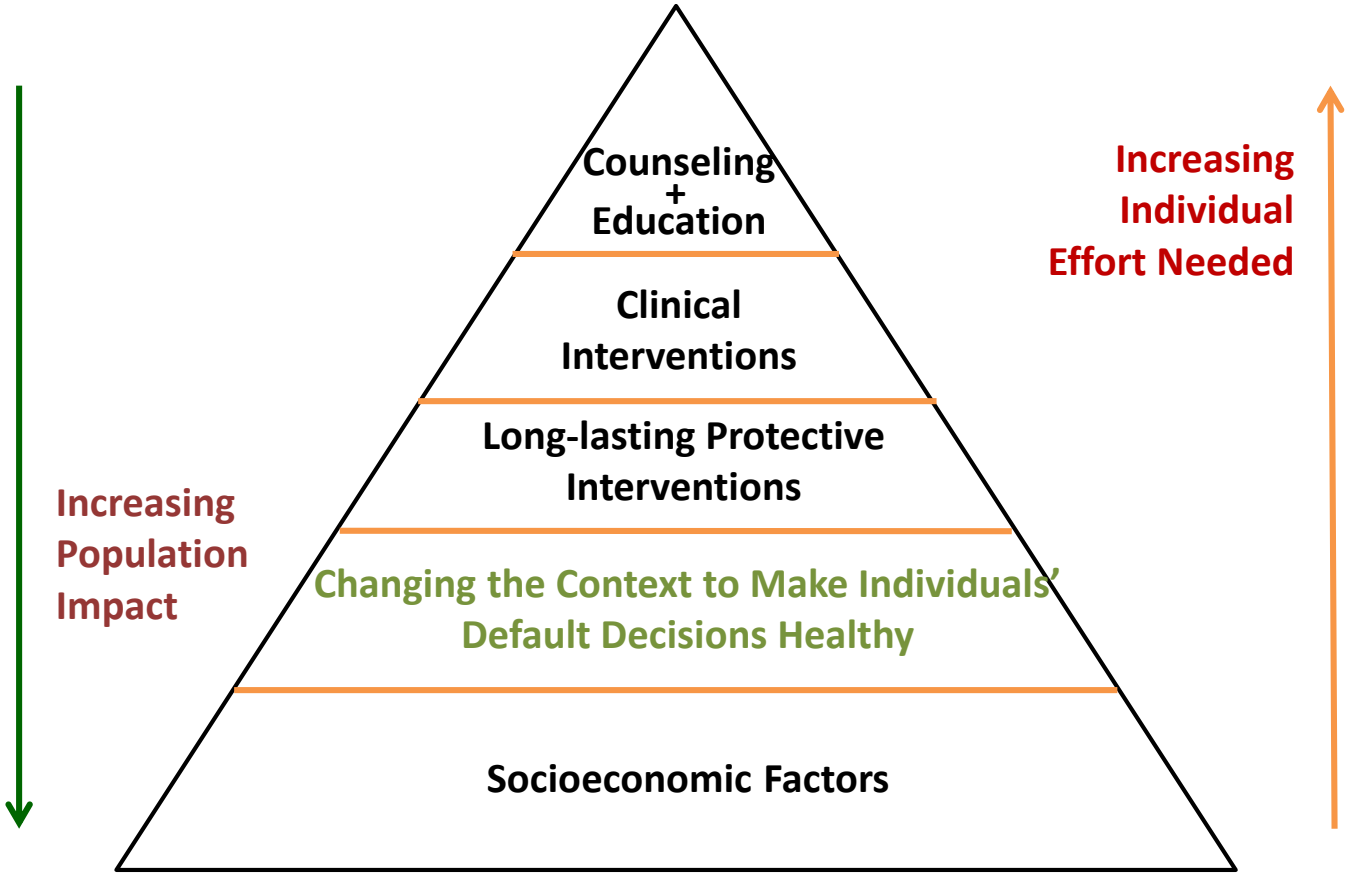
Health Impact Pyramid: Importance of Population-based Approaches



Frieden TR. A Framework for Public Health Action: The Health Impact Pyramid. Am J Public Health. 2010; 100(4): 590-595.

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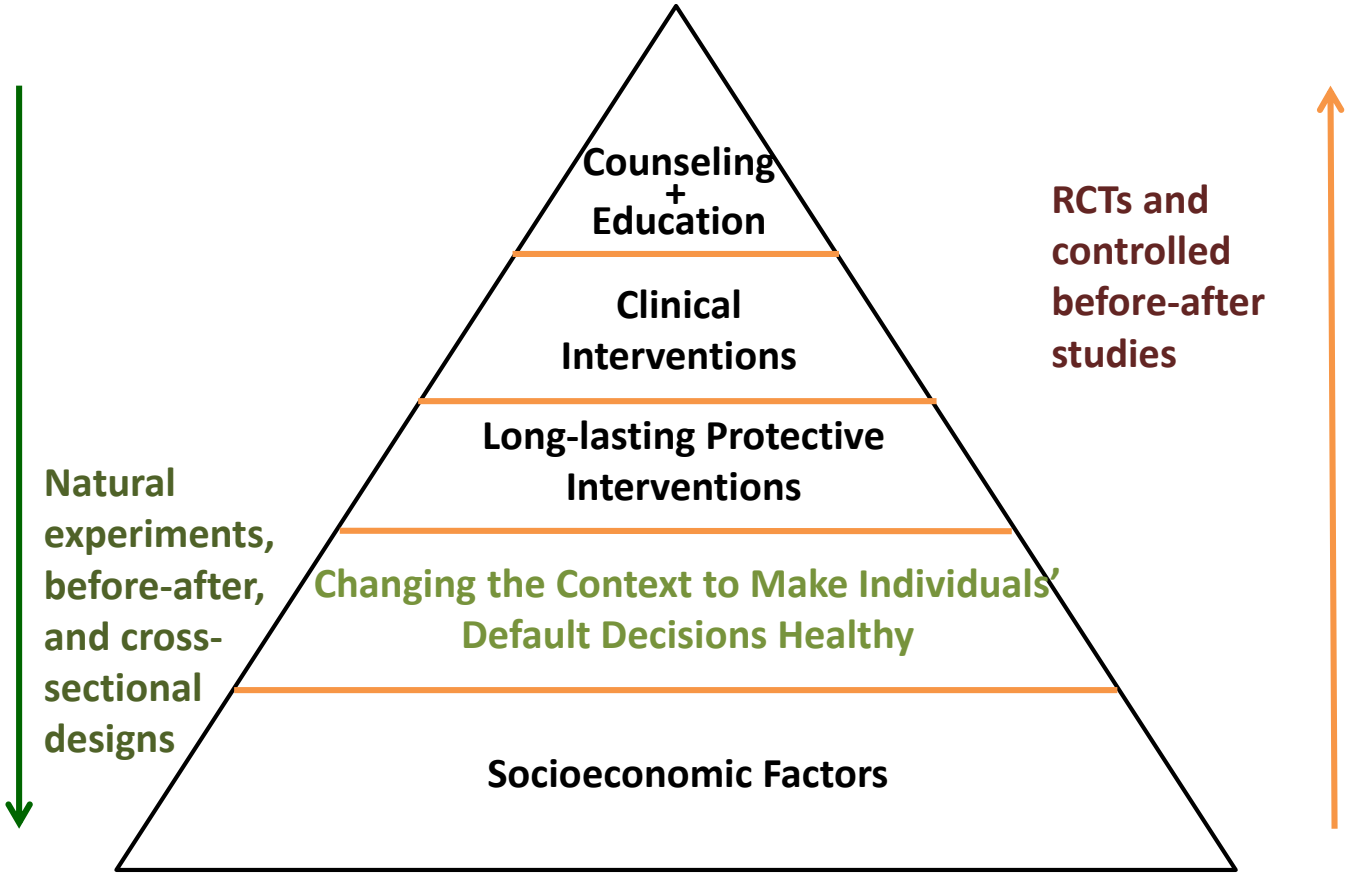
Evidence Base for Population-based Interventions to Improve Health



Frieden TR. A Framework for Public Health Action: The Health Impact Pyramid. Am J Public Health. 2010; 100(4): 590-595.

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Requirements for Task Force Conclusions on Intervention Effectiveness

Based on a Standardized, Explicit, Transparent Systematic Process for Identifying, Evaluating, and Documenting the following:

A Body of Evidence
(Health or Health-Linked Outcomes)

+

A Demonstration of Effectiveness

Consistent Impact

+

Meaningful Magnitude of Effect

Final CPSTF assessment considers additional evidence or information from the review which may adjust their conclusion and recommendation

CPSTF Finding Options

- **Recommend**
  - Strong Evidence
  - Sufficient Evidence
- **Recommend against**
  - Strong Evidence
  - Sufficient Evidence
- **Insufficient evidence**
  - Unable to determine effectiveness

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Project Scope: Narrowed to Focus on Combined Approaches

- **Background work** for this project **identified mixed findings** from systematic reviews when looking at **any one specific built environment characteristic or improvement**

- **Task Force requested** that this review project **focus on the intervention(s) most likely to influence physical activity**

- **Coordination team proposed looking at evidence for activity-friendly improvements in the built environment when implemented in combination**
  - Conceptually, combined approaches more likely to influence PA
    - Coordinated or sequential improvements
    - Multiple influences to change physical activity behaviors

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Considered: A Range of Study Comparisons

Body of Considered Evidence on Effectiveness: 90 studies

Intervention Type or Study Comparison	Longitudinal Assessment of Impact	Cross-sectional Comparisons
Construction Projects (infrastructure improvements)	11 studies	-
Policies restricting sprawl	1 study	5 studies
Comparisons of existing Neighborhood types	0 studies	7 studies
Summary score assessments of the existing built environment	4 studies	62 studies

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Task Force Deliberations on the Evidence

- Cross-sectional studies: evidence or information
- “Meaningful” magnitude of effect
- Self-reported physical activity
- Selection / replacement biases

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Initial Task Force Focus: Longitudinal Evidence (16 of the 90 included studies)

Physical Activity (PA) Outcome	Consistent across the body of evidence?	Magnitude of effect meaningful?	Direction
Transportation-related walking/ biking	Yes	Yes	Favorable
Recreation-related walking/ biking	Yes	Yes	Mixed
Total physical activity	Not enough information	Not enough information	Not enough information
Total walking	Not enough information	Not enough information	Not enough information
Other Moderate-Vigorous Physical Activity (MVPA)	Yes	Yes	Favorable (2 studies)
Recommended levels of MVPA	Not enough information	Not enough information	Not enough information

Overall Task Force Conclusions Across the Categories of Evidence (n=90 studies)

Physical Activity Outcomes Evaluated in Included Studies

Type of Comparison	Transport walk/bike	Recreation walk/bike	Total Walking	Total Physical Activity	Change in MVPA	MVPA Meeting Recommended Levels
Projects (11 longitudinal studies)	Favorable	MIXED	Not enough information	Not enough information	[Not enough information]	Not enough information
Sprawl Studies (6 studies)	Favorable	Not enough information	Not enough information	Not enough information	Not enough information	Not enough information
Neighborhood Comparisons (7 studies)	Favorable	Favorable	Not enough information	Not enough information	Not enough information	Not enough information
Summary Score Comparisons (66 studies)	Favorable	Favorable	Favorable	MIXED	Favorable	Favorable

Favorable: Number of studies were adequate and overall study findings indicated a favorable change or difference in PA
Mixed: Number of studies were adequate, but overall study findings were inconsistent
Not enough information: Number of studies was not adequate to draw a determination on direction of change in PA

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Task Force Guidance

- This review was **initially open to the consideration evidence on any combination of built environment interventions** designed to support opportunities for physical activity.

- **Almost all of the included studies included in the review evaluated variations on combinations across two broader approaches**
  - **Transportation infrastructure** improvements
  - **Land use and environmental design** interventions

- The **Task Force recommendation emphasizes these combinations**
  - Definition adjusted to provide implementation guidance

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Some Limits on the CPSTF Recommendation

- The **available evidence provided sufficient evidence to support a CPSTF recommendation**, but there remain **important gaps in our understanding** of the impact of activity-friendly changes in the built environment

  - The available studies did **not provide enough comparative evidence to be more specific** (for example, identifying specific intervention pairings as more/less effective).

  - **Additional evidence on effectiveness of coordinated approaches probably won't replace the importance for local assessment of needs and resources**, and the value of selecting interventions to fit the community and create complementary or coordinated activity-friendly improvements

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Important Evidence Gaps

- **Additional longitudinal studies** including designs **with concurrent comparisons**.
- Additional studies **with longer follow-up**, especially to examine
  - Projects and policies with slow or incremental improvements
  - Lifespan effects (such as retention of PA habits into adulthood)
- Studies using **objective measures of physical activity**
- Studies **reporting physical activity changes in absolute or user-friendly metrics** (such as time spent being physically active).

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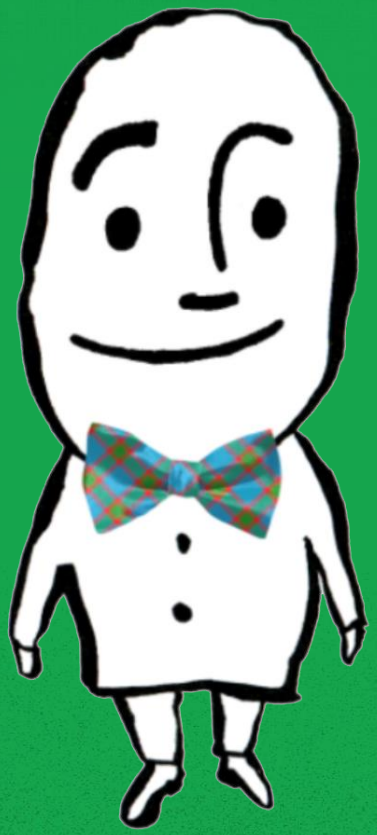
QUESTIONS?

Please type your question(s) in the chat box located on the right.



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Creating Activity-Friendly Communities: A New Recommendation from the Community Preventive Services Task Force

Chris Kochtitzky, MSP
Senior Advisor
Physical Activity and Health Branch
Division of Nutrition, Physical Activity, and Obesity
Centers for Disease Control and Prevention

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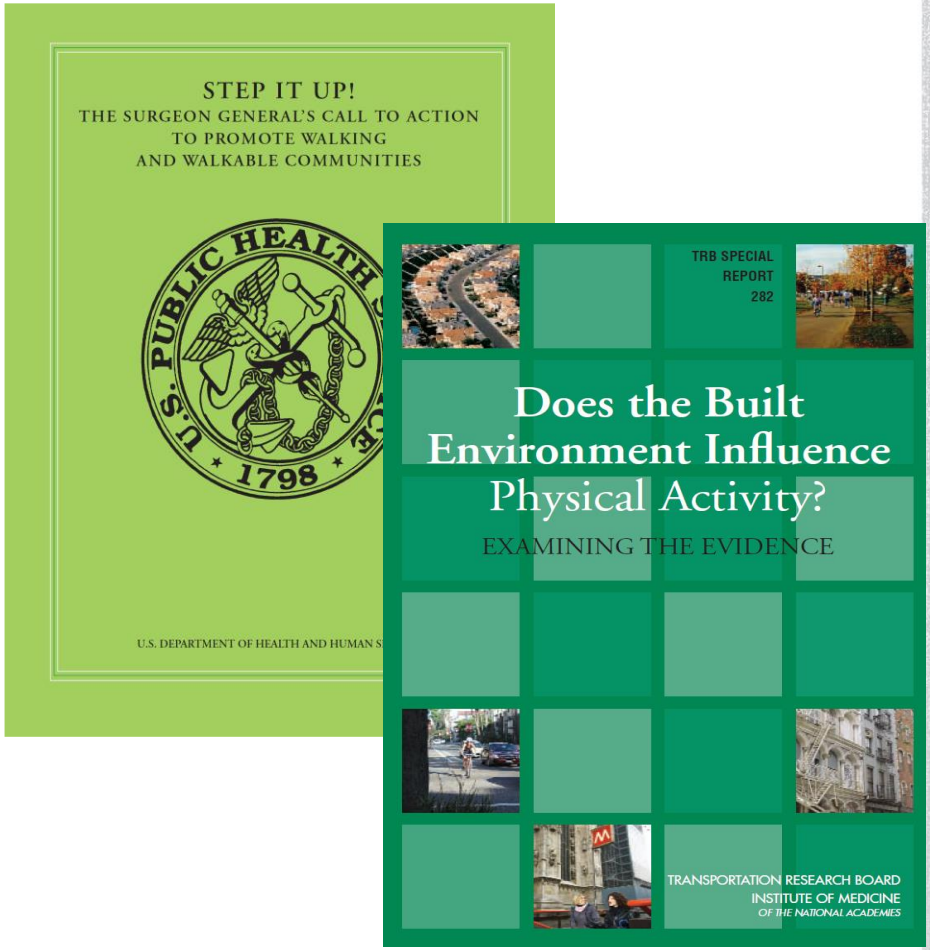
Calls for Research into Environmental Contributions to Physical Inactivity

"Research is needed to identify and advance the most effective approaches to increase walking and to understand how effectiveness varies on the basis of community characteristics."

Surgeon General's Call to Action

"The committee urges a continuing and well-supported research effort in this area…priorities for this research include interdisciplinary approaches and international collaboration bringing together the expertise of the public health, physical activity, urban planning, and transportation research communities"

Transportation Research Board



U.S. Dept of Health and Human Services. Step It Up! The Surgeon General's Call to Action to Promote Walking and Walkable Communities. Washington, DC:, DHHS, Office of the Surgeon General; 2015. https://www.surgeongeneral.gov/stepitup

National Research Council (US). Committee on Physical Activity, Land Use, & Institute of Medicine (US). (2005). *Does the Built Environment Influence Physical Activity?: Examining the Evidence*. Transportation Research Board. http://onlinepubs.trb.org/onlinepubs/sr/sr282.pdf

The Guide to Community Preventive Services (The Community Guide)

- Credible source of systematic reviews and evidence-based findings of the independent Community Preventive Services Task Force
- Focuses on population-based interventions
  - Communities
  - Health care systems
- Recommendations consider applicability of the evidence to U.S. settings and populations
  - Resource to help U.S. decision-makers select interventions to match their resources, settings, and populations

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Latest Review of Evidence for Built Environment Interventions to Increase Physical Activity

- The current *systematic review* updates earlier work (2005)
  - Street-scale interventions to increase physical activity
  - Community-scale interventions to increase physical activity

- Policy, design, and program changes in a community to make physical activity easier or more accessible including:
  - **Transportation** (walking/cycling for shopping, dining, commuting)
  - **Recreation** (leisure, exercise)

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INTERVENTIONS TO INCREASE PHYSICAL ACTIVITY:

Built Environment Approaches Combining Transportation System Interventions With Land Use And Environmental Design

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CPSTF Intervention Definition

- Built environment interventions to increase physical activity create or modify environmental characteristics in a community to make physical activity easier or more accessible.

- Coordinated approaches must combine new or enhanced elements of **pedestrian or cycling transportation systems with the creation or enhancement of land use and environmental design features.** Intervention approaches must be designed to enhance opportunities for active transportation, leisure-time physical activity, or both.

https://www.thecommunityguide.org/sites/default/files/assets/PA-Built-Environments.pdf

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Examples of Intervention Components

Pedestrian and Bicycle Transportation System Interventions	
Intervention Component	Selected Examples
Street pattern design and connectivity	Designs increasing street connections and creating multiple route options, shorter block lengths
Pedestrian infrastructure	Sidewalks, trails, traffic calming, intersection design, street lighting, and landscaping
Bicycle infrastructure	Protected bicycle systems, bicycle lanes, trails, traffic calming, intersection design, street lighting, and landscaping
Public transit infrastructure & access	Expanded transit services, times, locations, and connections

https://www.thecommunityguide.org/sites/default/files/assets/PA-Built-Environments.pdf

Examples of Intervention Components

Land Use and Environmental Design Interventions	
Intervention Component	Selected Examples
Mixed land use	Residential, commercial, cultural, institutional, or industrial uses of land whose functions are physically and functionally integrated, providing a balanced mix
Policies increasing residential density	Smart growth communities and new urbanist designs, relaxed planning restrictions in appropriate locations to reduce sprawl, sustainable compact cities and communities with affordable housing
Proximity to community or neighborhood destinations	Community destinations such as stores, health facilities, banks, and social clubs that are accessible and close to each other
Parks and recreational facility access	Public parks, public recreational facilities, private fitness facilities

https://www.thecommunityguide.org/sites/default/files/assets/PA-Built-Environments.pdf

Systematic Search and Assessment of the Evidence

- Over 61,000 papers were identified worldwide.
- The final Task Force recommendation is based on evidence from 90 included intervention studies.
- These studies used diverse designs, assessed, and compared different combinations of interventions or existing built environment characteristics, and evaluated longitudinal changes or cross-sectional differences for a wide range of physical activity outcomes.

CPSTF Recommendation Statement (December 2016)

- The Community Preventive Services Task Force recommends built environment strategies that combine **one or more interventions to improve pedestrian, bicycle, or transit transportation systems** with **one or more land use and environmental design interventions** based on sufficient evidence of effectiveness in increasing physical activity.

- This is based on findings from **longitudinal studies** of people exposed to coordinated interventions modifying the built environment (**16 studies),** as well as evidence from additional cross-sectional comparisons showing that combinations of activity-supportive built environment characteristics are associated with higher levels of transportation-related physical activity, recreational physical activity, and total walking among exposed people (**74 studies**).

https://www.thecommunityguide.org/sites/default/files/assets/PA-Built-Environments.pdf

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Dissemination Activities at CDC

- The CPSTF recommendation supports a number of current CDC initiatives including:
  - Active People, Healthy Nation
  - State and local grant programs designed to use policy, systems, and environmental (PSE) interventions to make the healthier choice of an active lifestyle the safer & easier choice

QUESTIONS?

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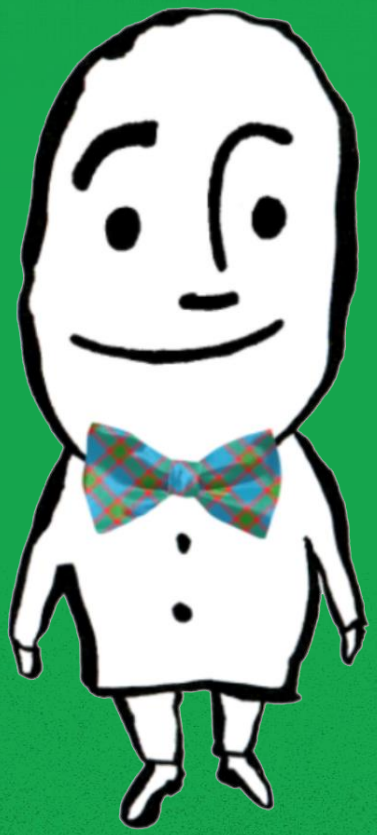

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Disseminating Evidence for Action

Ross Brownson, Ph.D.
Bernard Becker Professor of Public Health
Co-Director,
Prevention Research Center Washington University in St. Louis

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Is This A Field of Dreams?

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If a speaker spoke in the forest
And no one did anything different –

Did they really speak at all?

--Apologies to George Berkeley

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What We Know About Dissemination And Implementation

1. Passive approaches to dissemination are largely ineffective.
2. Single-source prevention messages are generally less effective than comprehensive, multilevel approaches.
3. Stakeholder involvement in the research or evaluation process is likely to enhance dissemination.
4. The process of dissemination needs to be tailored to various audiences.

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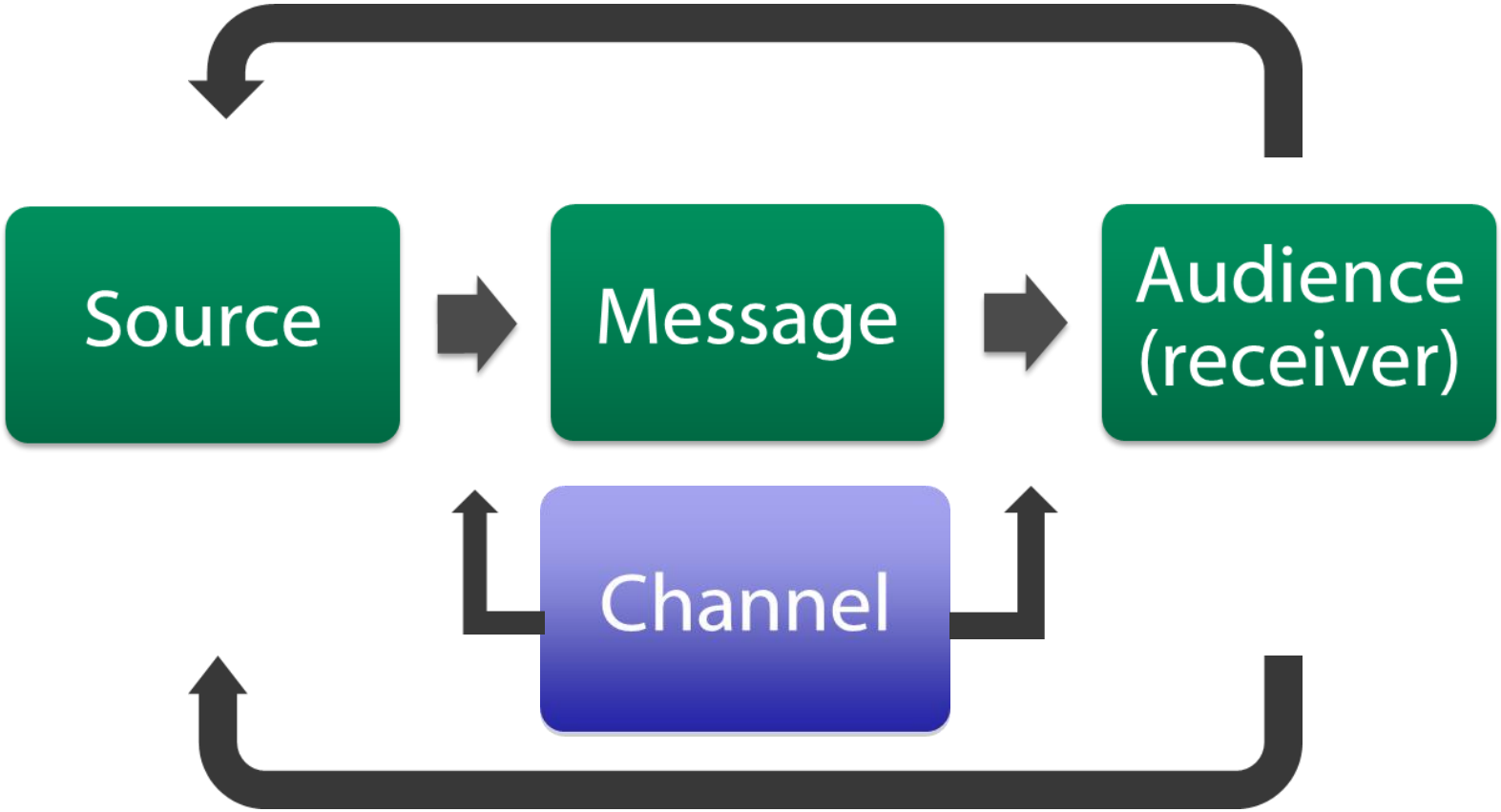
Basic Dissemination Model



Brownson RC, et al. Getting the Word Out: New Approaches for Disseminating Public Health Science. *J Public Health Manag Pract.* Sep 06 2017.

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Identify/Connect With Your Audience

- Understand your audience/ their current position.
- What do they care about?
- What are their information needs?
- Where, when, and how do they seek information?
- What is the “ask”?

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What Influences Decision Making?

Differences in Decision-Making Among Public Health Practitioners and Policy Makers[a]

Characteristic	Executive Branch, Public Health Practitioner	Legislative Branch, Elected Official
Time in position	Longer	Shorter
Accountability	Governor, board of health, agency head	Constituents by whom they are elected, political party
Personal connection to constituents	Moderate	High
Knowledge span	Deeper knowledge on health issues (often more specialized in larger agencies)	Less depth, wider breadth
Decision-making based on external factors[b] (aside from research)	Low to moderate	High
Time spent on a particular issue	Longer	Shortest
Type of evidence relied upon	Science, evidence reviews, experience from the field, personal experience	"Real world" stories, constituents, gatekeepers, party priorities, media, science

Primary Audiences and Uses of Community Guide Recommendations

- The Task Force has identified its primary target audience broadly: **any persons** involved in **planning, funding, and implementing population-based services and policies to improve health** at the state and local levels.

- The scope of users fitting this description includes urban planners, transportation engineers, and policy makers.

- Users weigh the Guide's recommendations, which are based on completed research, against other factors such as (1) the match between a community's needs and resources; (2) prior experience; (3) local preferences; and (4) political will.

The Message

The Community Guide

Increasing Physical Activity: Built Environment Approaches

Summary of Community Preventive Services Task Force Recommendation

The Community Preventive Services Task Force (CPSTF) recommends built environment strategies combining one or more intervention approaches to improve pedestrian or bicycle transportation systems with one or more land use and environmental design interventions based on sufficient evidence of effectiveness in increasing physical activity. Their recommendation is based on a systematic review of all available evidence.

Major Findings

Built Environment Approaches in Combination by Intervention Type

Pedestrian and Bicycle Transportation System Intervention Component	Land Use and Environment Design Intervention Component
o Street pattern design and connectivity	o Mixed land use
o Pedestrian infrastructure	o Increasing residential density
o Bicycle infrastructure	o Proximity to community or neighborhood destinations
o Public transit infrastructure and access	o Parks and recreational facility access

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Channels for Dissemination and Implementation

- Web-based communication through the Task Force website
- Communication Efforts of Task Force Liaisons (such as the American Planning Association)
- Presentation at National Professional Associations such as the American Public Health Association and the American Planning Association
- Publications in Peer Reviewed Journals
- CDC and Partner (such as U.S. DOT) program communications and technical support

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Many Types of Initiatives Potentially Influenced by the Recommendation

- Master Planning
- Zoning & Land Use Law (Form-based, Context Sensitive, etc.)
- Complete Streets Policy
- Safe Routes to School Policy
- School Siting Policy
- Active Street and Building Design Guides
- Economic Development Incentives

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Examples of Uses of Task Force Recommendations

- National Priority Setting – Healthy People 2020 (broad audience)
  - Many of the physical activity and injury prevention recommendations in Healthy People 2020 are based on the Community Guide
- Grantmaking (practitioners)
  - CDC often requires grantees to submit proposals based on only interventions recommended in the Community Guide
  - Foundations also direct their grantmaking using the Community Guide
- Best Practice Identification and Promotion (policy makers)
  - Nationwide efforts such as the STAR Community Rating System, regional efforts such as the San Francisco Health Improvement Partnership, and local efforts like Granville County, North Carolina's Walkable Communities Initiative

https://www.healthypeople.gov/2020/topics-objectives/topic/physical-activity/ebrs
https://apply07.grants.gov/apply/opportunities/instructions/oppCDC-RFA-DP14-1422PPHF14-cfda93.757-cidNCCDPHP-NR-instructions.pdf
http://www.sfhip.org/index.php?module=promisepractice&controller=index&action=view&pid=4047
https://www.thecommunityguide.org/stories/creating-walkable-communities-rural-north-carolina

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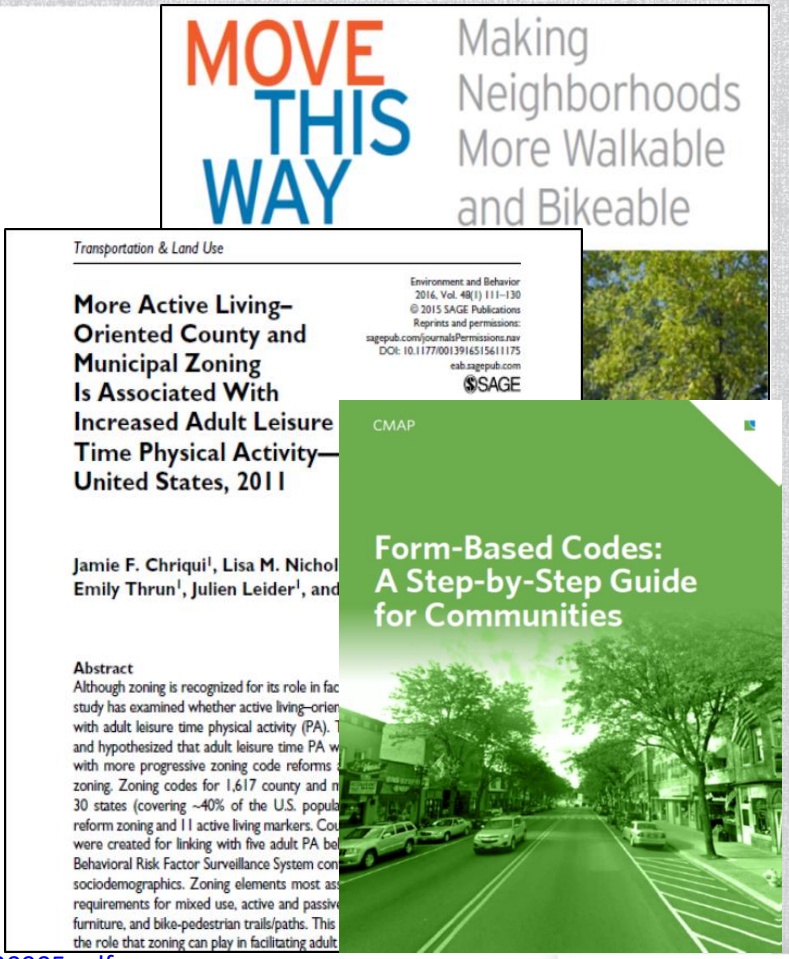
Land Use Law & Zoning

- Research has documented that zoning can promote adult physical activity through requirements for mixed land uses, active and passive recreation, bike parking, and bicycle-pedestrian trails/paths.

- Land use/zoning code can include:
  - Zoning Codes setting standards for the widths of streets and sidewalks, the location and frequency of crosswalks, and the presence of pedestrian medians and bike lanes.
  - Subdivision Codes determining the creation of combined residential and commercial development.



http://www.changelabsolutions.org/sites/default/files/MoveThisWay_FINAL-20130905.pdf

http://journals.sagepub.com/doi/abs/10.1177/0013916515611175

http://www.cmap.illinois.gov/documents/10180/10715/CMAP+Form+Based+Codes+Guide.pdf/4ff3758c-13dd-4c54-a647-d17c0129186d

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Complete Streets Policy

- A Complete Streets policy directs officials, including transportation planners, engineers, and public works staff to **design, operate, construct, and maintain** streets that are safe for every user.

- Complete Streets policies can help to provide a **framework for shifting the status quo** of street design from car-centric to being designed such that streets are safe, designed, and built for all modes of travel.

- These policies can ensure **equitable allocation** of monetary resources, as well as specifying a certain percentage of funding be allocated to projects in **areas with vulnerable populations.**

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Economic Development Incentives

- There is an entire industry—**community development**—with annual resources in the tens of billions of dollars that **is in the "ZIP-code-improving" business.**

- Public health data **can demonstrate the health impact** of proposed development projects and help redevelopment agencies **prioritize those projects** that have the greatest potential to improve health.

- Redevelopment agencies are sometimes constrained by limitations and the communities in which they work don't always support their endeavors—partnering with public health can **provide more credibility**.

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QUESTIONS?

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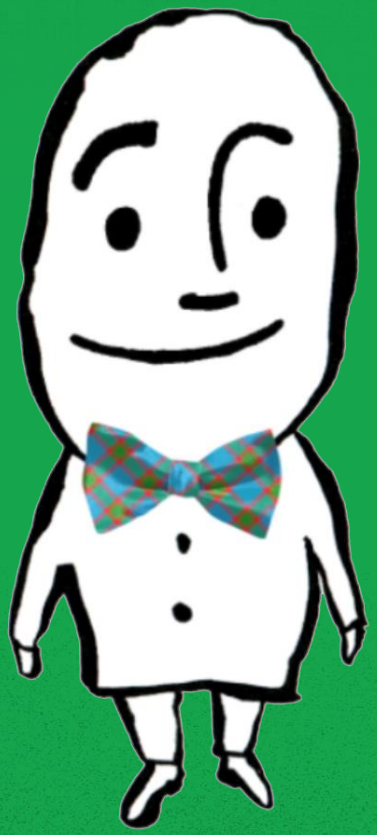

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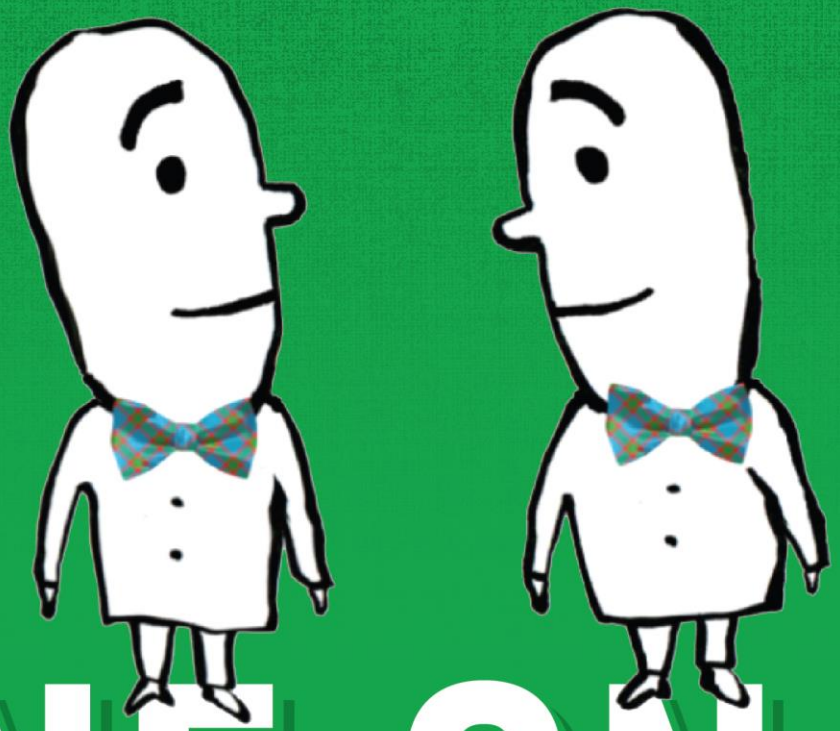

ONE ON ONE

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TOOLS YOU CAN USE

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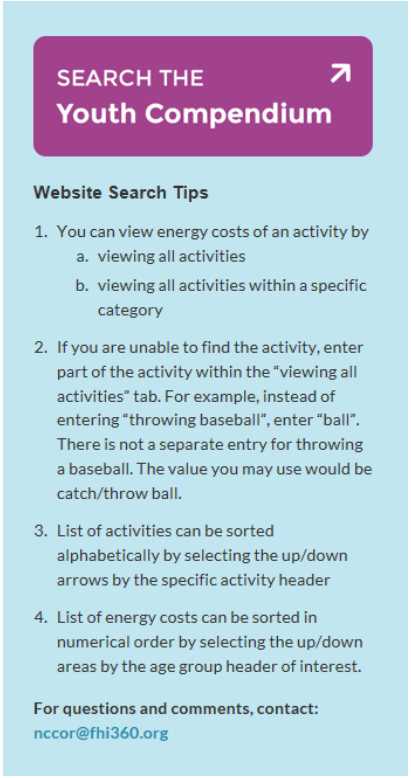
Youth Compendium of Physical Activity

- 196 common activities in which youth participate and the estimated energy cost associated with each activity
- The Youth Compendium provides energy cost values for:
  - Sedentary activities, such as lying down or watching TV
  - Standing, doing household chores, and playing active video games
  - Playing and participating in games and sports activities
  - Walking and running
- Launching next week!



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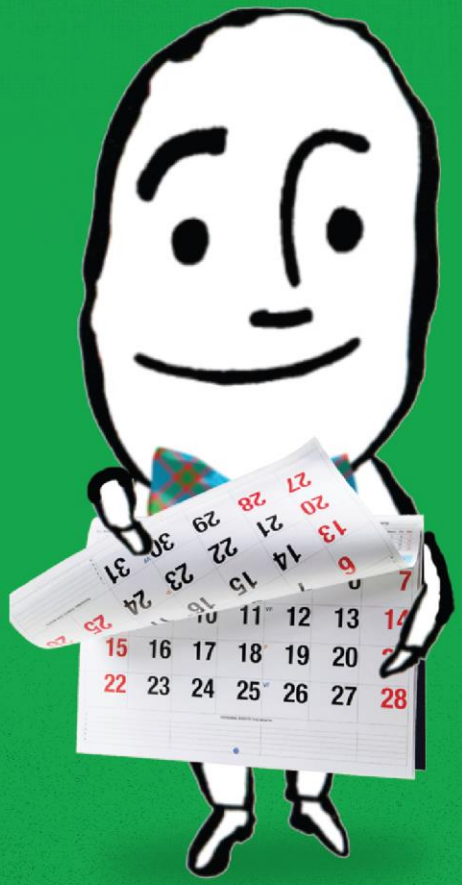
UPCOMING EVENTS



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Meet NCCOR at ObesityWeek!

- The Obesity Society Annual Meeting Exhibit Hall
  - Tuesday, October 31 to Thursday, November 2
  - National Harbor, MD
  - Exhibit Booth 224
- Session: Youth Compendium of Energy Costs of Physical Activity
  - October 31, 2017; 10:30-10:45 a.m.

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Meet NCCOR at APHA!

- APHA Annual Meeting & Expo
  - Sunday, November 4 to Wednesday, November 8
  - Atlanta, GA
  - Exhibit Booth 627

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FURTHER QUESTIONS?

Other questions about NCCOR or upcoming activities?

Email the NCCOR Coordinating Center
nccor@fhi360.org

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NCCOR is now on Facebook!

Follow and like the page

@NCCOR.org

Follow @NCCOR

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WHAT'S HAPPENING IN
NCCOR NEWS

NCCOR, The JPB Foundation strengthen alliance to support Measures Registry

NCCOR hosts National Childhood Obesity Awareness Month social media activities

NCCOR helps communities evaluate their progress in reducing childhood obesity

Healthy Communities Study findings on relationship between community policies and programs and childhood obesity

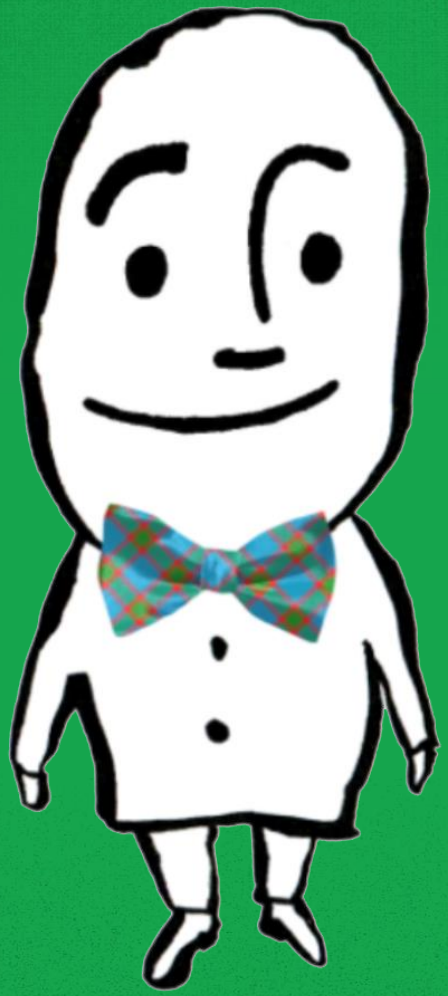
U.S. Preventive Services Task Force update on obesity screening recommendation

Connect & Explore

Upcoming Webinars

Mark your calendar for these upcoming Connect & Explore webinars!

OCT 11 Built Environment Interventions to Increase Physical Activity: Community Preventive Services Task Force Recommendations



THANK YOU!

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