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2012-04-03

## Evidence-Based Public Health: Identifying and Using Information Resources

E. Hatheway Simpson

*University of Massachusetts Medical School*

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# Evidence-Based Public Health: Identifying and Using Information Resources

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New England Region, National Network of Libraries of Medicine  
University of Massachusetts Medical School

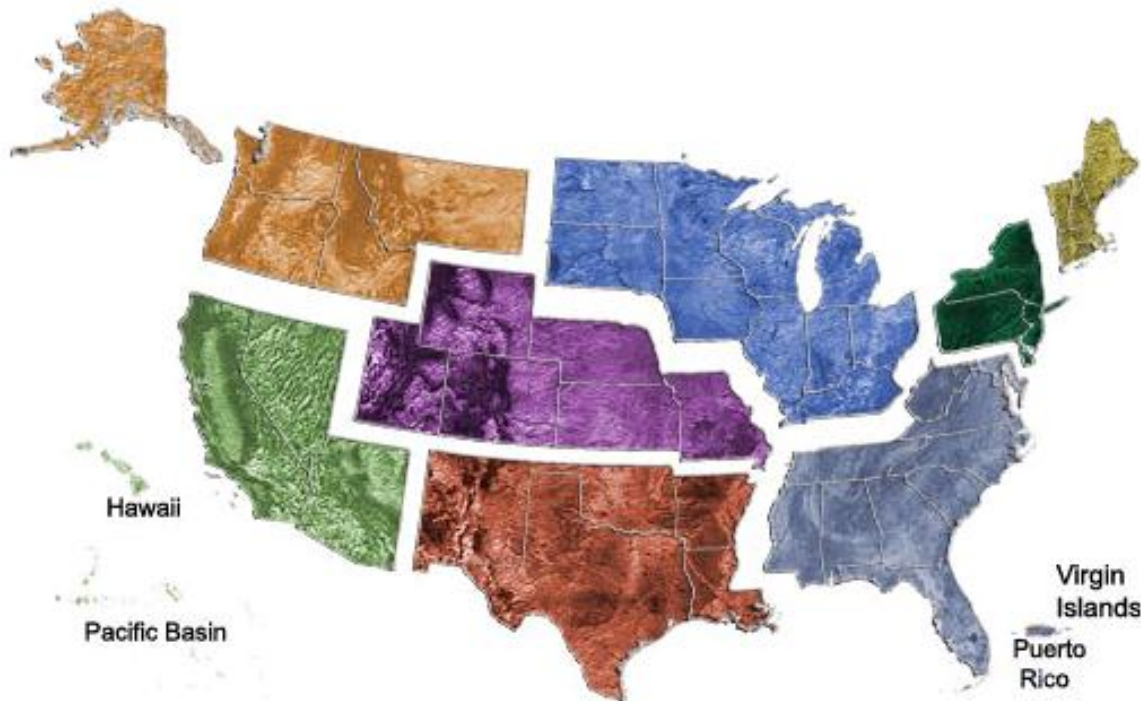
April 3, 2012

CT-RI Public Health Training Center Webinar



# National Network of Libraries of Medicine (NN/LM)

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## Mission of NN/LM

To advance the progress of medicine and improve the public health by providing all U.S. professionals with equal access to biomedical information and improving the public's access to information to enable them to make informed decisions about their health.

# Objectives

- Explain the characteristics of evidence-based public health (EBPH)
- Describe at least three different types of evidence that can be used to support public health practice questions
- Identify at least three online public health resources available for free

Evidence-Based

+

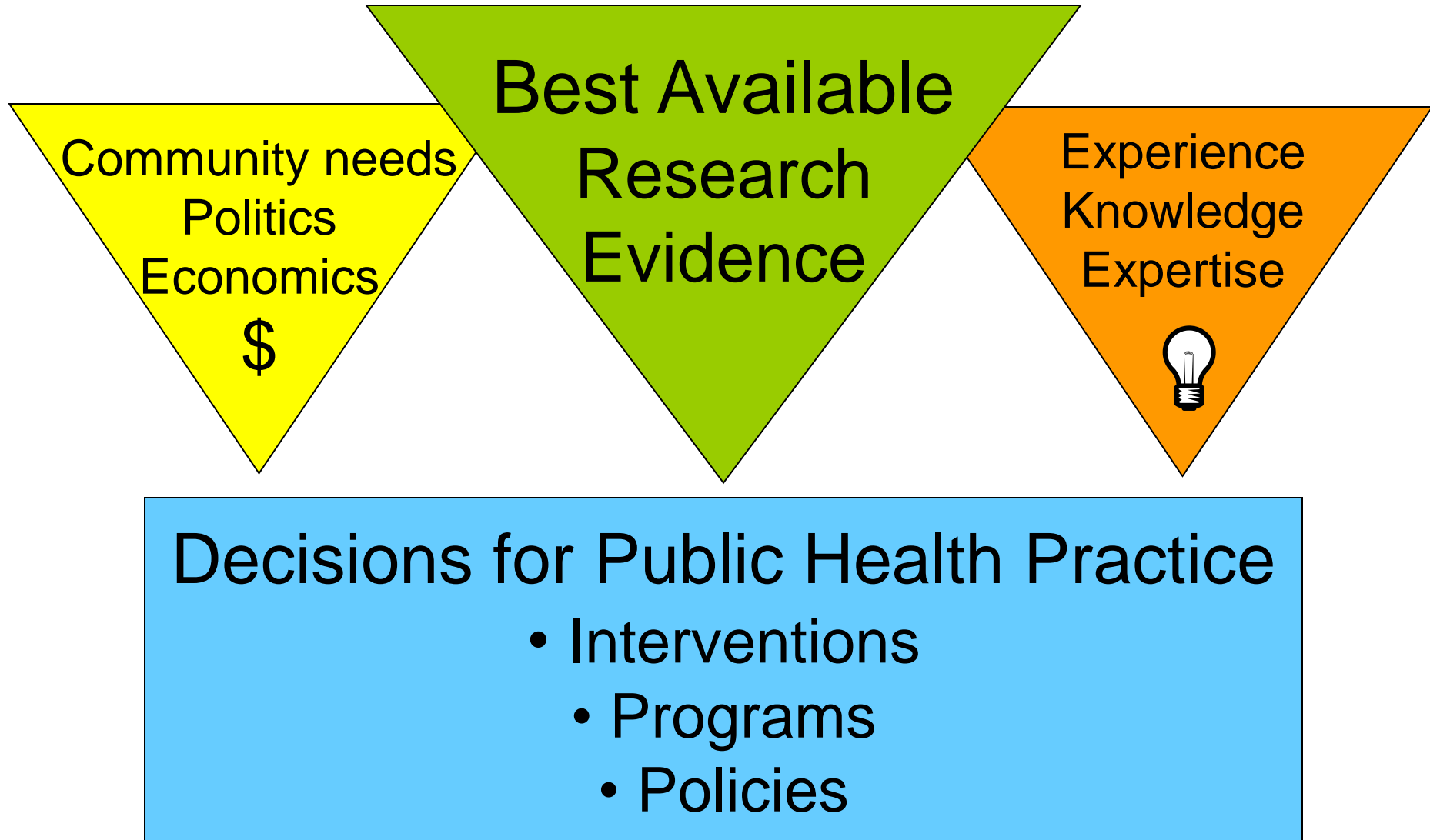
Public Health

- “the conscientious, explicit, and judicious use of current best evidence in making decisions about
- the care of communities and populations in the domain of health protection, disease prevention, health maintenance and improvement.”

Source:

Jenicek M. Epidemiology, evidenced-based medicine, and evidence-based public health. J Epidemiol. Dec 1997;7(4):187-197.

# Evidence-Based Public Health



# Why Evidence-Based Practice?

- Make informed decisions to plan, modify and evaluate public health programs
- Implement effective interventions to improve community health
- Discontinue or modify ineffective interventions
- Optimize the use of limited resources
- Justify proposed public health programs to funders and stakeholders

# EBPH & Public Health Accreditation

## Domain 10: Contribute to and Apply the Evidence Base of Public Health

- Standard 10.1: Identify and Use the Best Available Evidence for Making Informed Public Health Practice Decisions
- Standard 10.2: Promote Understanding and Use of Research Results, Evaluations, and Evidence-based Practices with Appropriate Audiences



# Evidence-Based Public Health Process

- ➔ 1. Define the problem
  - ➔ 2. Identify the evidence
  3. Assess the evidence
  4. Prioritize and select interventions
  5. Implement interventions
  6. Evaluate the results
- Disseminate your findings

# Define the Problem

- The health issue of concern
- Population characteristics:
  - Age, gender, race/ethnicity, income, education, occupation, health behaviors, geographical region, environmental factors
- Size and scope of the problem
  - Morbidity, mortality, disability, quality of life measures
- Outcomes - measurable objectives
- Potential interventions

# Example – Defining the Problem

Problem	Population	Size & Scope	Outcomes	Interventions
Unintended pregnancy	Adolescent females, 15 to 17 years	40.2 pregnancies per 1,000 females (U.S.) <sup>1</sup>	Avoidance of unintended pregnancy	School-based sex education
			Consistent contraceptive use	Education in family planning clinic
			Delayed initiation of sexual intercourse	Education in school-based health clinics
			All of the above outcomes	Community-based programs
				Abstinence education

<sup>1</sup> Health Indicators Warehouse, U.S. Department of Health and Humans Services

Table adapted from Indira Gujral and Ashley Juhl, Epidemiology, Planning & Evaluation Branch, Prevention Services Division, Colorado Department of Public Health and Environment

# Identify the Evidence

- So much information, too little time!



- Evidence-Based Resources for Public Health Practice:

- Evidence-Based Practice for Public Health  
<http://library.umassmed.edu/ebpph>
- PHPartners.org  
<http://PHPartners.org>

# Evidence-Based Practice for Public Health

<http://library.umassmed.edu/ebpph>

Helping you find and use the best evidence

## Evidence-Based Practice for Public Health

Google™ Custom Search

Go

### The Pathway to Evidence-Based Resources

#### Evidence-Based Guidelines

Evidence-based public health guidelines based on systematic reviews of the research literature.

#### Systematic Reviews

Systematic reviews and meta-analyses of the public health literature.

#### Pre-Formulated and Filtered Searches of Published Studies

Specialized searches of PubMed/MEDLINE on specific health topics or type of research study.

#### Best Practices

Public health programs, interventions, and policies used by others that have been evaluated and shown to be successful.

### Other Resources

#### Public Health Journals

#### Public Health Databases

#### Knowledge Domains of Public Health

### About Evidence-Based Practice for Public Health

Evidence-based practice for public health involves using the best available evidence to make informed public health practice decisions. This website provides free online access to evidence-based public health (EBPH) resources, [knowledge domains of public health](#), and public health [journals](#) and [databases](#). The resources are arranged along a pathway of evidence to allow public health practitioners to easily find and use the best evidence to develop and implement effective interventions, programs, and policies.

[Learn more...](#)



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# Pathway to Evidence-Based Resources

Helping you find and use the best evidence

## *Evidence-Based Practice for Public Health*

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Evidence-Based Resources

Public Health Journals

Public Health Databases

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### The Pathway to Evidence-Based Resources



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Evidence-based guidelines based on a systematic review of the research literature. The guidelines provide summaries of evidence and recommendations for practice from government agencies, professional organizations, and convening expert panels.

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Systematic reviews and meta-analyses of the literature that use specific methods and criteria to locate, appraise, and synthesize the evidence from research studies. The reviews uncover the strengths and weaknesses of the evidence and identify gaps in current research.

#### Pre-Formulated and Filtered Searches of Published Studies

Specialized searches of PubMed/MEDLINE on specific public health topics or limited to studies that correspond to a specific research category.

#### Best Practices

Public health programs, interventions, and policies that through experience have been evaluated, shown to be successful, and have the potential to be adapted and transformed by others working in the same field.





### Interested in Adolescent Health?

See newly published Task Force findings on:

- [Helping caregivers reduce their teen's health risk behaviors](#)
- [Abstinence education & comprehensive risk reduction for teens](#)

1 2 3 4

### Task Force Meetings

#### 2012

[February 22–23](#)

June 20–21

October 10–11

#### 2013

February 20–21

June 19–20

October 23–24

Text Size: [S](#) [M](#) [L](#) [XL](#)

#### Get Email Updates

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[Social Environment](#)

[Tobacco Use](#)

[Vaccines](#)

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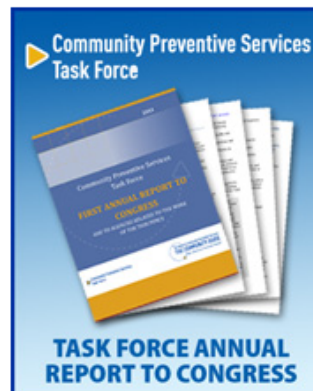
[Worksite](#)

## What is The Community Guide?

The Guide to Community Preventive Services is a free resource to help you choose programs and policies to improve health and prevent disease in your community. Systematic reviews are used to answer these questions:

- Which program and policy interventions have been proven effective?
- Are there effective interventions that are right for my community?
- What might effective interventions cost; what is the likely return on investment?

Learn more [about The Community Guide](#), [collaborators](#) involved in its development and dissemination, and [methods](#) used to conduct the systematic reviews.



## Obesity

- + [Provider-Oriented](#)
- + [Interventions in Community Settings](#)

## Obesity Prevention and Control



- Overweight and obesity have been shown to increase the likelihood of certain diseases and other health problems, and are important concerns for adults, children, and adolescents in the United States.
- An estimated 26.7 percent of adults in the United States reported being obese in 2009, up 1.1 percentage points since 2007 ([Behavioral Risk Factor Surveillance System](#)).
- Approximately 300,000 deaths per year may be attributable to obesity ([Office of the Surgeon General](#)).
- In 2008, the annual healthcare cost of obesity in the US was estimated to be as high as 147 billion dollars a year (Finkelstein 2009).

### Community Guide Systematic Reviews

The Community Guide conducted systematic reviews of interventions in the following areas:

[Provider-oriented interventions \(e.g., education, reminders\)](#)

[Interventions in community settings \(e.g., reducing screen time, technology-based interventions, specific settings\)](#)



### Referenced Documents

Finkelstein EA, Trogon JG, Cohen JW, Dietz W. Annual medical spending attributable to obesity: payer- and service-specific estimates. *Health Aff (Millwood)*. 2009 Sep-Oct;28(5):w822-31.

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### The Guide to Clinical Preventive Services

Together, the Community Guide and the Clinical Guide provide evidence-based recommendations across the prevention spectrum.

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## Obesity

### Provider-Oriented

### Interventions in Community Settings

#### Summary of Findings

[Behavioral Interventions to Reduce Screen Time](#)

[Mass Media Interventions to Reduce Screen Time](#)

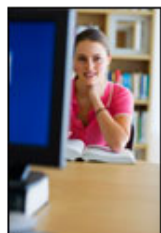
[Technology-Supported Interventions](#)

[Worksite Programs](#)

[School-Based Programs](#)

[Supporting Materials](#)

# Obesity Prevention and Control: Interventions in Community Settings



Reviewed interventions include programs designed to reduce screen time, technology-based strategies, and interventions specific to worksite and school settings.

## Summary of Task Force Recommendations & Findings

This table lists interventions reviewed by the Community Guide, with Task Force findings for each ([definitions of findings](#)). Click on an underlined intervention title for a summary of the review.

<b>Interventions to reduce screen time (e.g., time in front of a TV, computer monitor)</b>	
<a href="#">Behavioral interventions to reduce screen time</a>	Recommended
<a href="#">Mass media interventions to reduce screen time</a>	Insufficient Evidence
<b>Technology-supported interventions (e.g., computer or web applications)</b>	
<a href="#">Multicomponent coaching or counseling interventions:</a>	
To reduce weight	Recommended
To maintain weight loss	Recommended
<b>Interventions in specific settings</b>	
<a href="#">Worksite programs</a>	Recommended
<a href="#">School-based programs</a>	Insufficient Evidence

### For More On This Topic

[CDC, Overweight and Obesity](#)

[Healthy People 2020](#)

[Healthy Weight](#)

[Recommended Community Strategies and Measurements to Prevent Obesity in the United States](#)

### Related Topics

[Adolescent Health](#)

[Cancer Prevention and Control](#)

[Promoting Good Nutrition](#)

[Promoting Physical Activity](#)

[Worksite Health Promotion](#)

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# The Effectiveness of Worksite Nutrition and Physical Activity Interventions for Controlling Employee Overweight and Obesity

## A Systematic Review

Laurie M. Anderson, PhD, MPH, Toby A. Quinn, MPA, Karen Glanz, PhD, MPH, Gilbert Ramirez, DrPH, Leila C. Kahwati, MD, MPH, Donna B. Johnson, PhD, Leigh Ramsey Buchanan, PhD, W. Roodly Archer, PhD, Sajal Chattopadhyay, PhD, Geetika P. Kalra, MPA, David L. Katz, MD, Task Force on Community Preventive Services

### Abstract:

This report presents the results of a systematic review of the effectiveness of worksite nutrition and physical activity programs to promote healthy weight among employees. These results form the basis for the recommendation by the Task Force on Community Preventive Services on the use of these interventions. Weight-related outcomes, including weight in pounds or kilograms, BMI, and percentage body fat were used to assess effectiveness of these programs.

This review found that worksite nutrition and physical activity programs achieve modest improvements in employee weight status at the 6–12-month follow-up. A pooled effect estimate of  $-2.8$  pounds (95% CI =  $-4.6, -1.0$ ) was found based on nine RCTs, and a decrease in BMI of  $-0.5$  (95% CI =  $-0.8, -0.2$ ) was found based on six RCTs. The findings appear to be applicable to both male and female employees, across a range of worksite settings.

Most of the studies combined informational and behavioral strategies to influence diet and physical activity; fewer studies modified the work environment (e.g., cafeteria, exercise facilities) to promote healthy choices. Information about other effects, barriers to implementation, cost and cost effectiveness of interventions, and research gaps are also presented in this article. The findings of this systematic review can help inform decisions of employers, planners, researchers, and other public health decision makers.

(Am J Prev Med 2009;37(4):340–357) Published by Elsevier Inc. on behalf of American Journal of Preventive Medicine

# CDC's LEAN Works! - A Workplace Obesity Prevention Program



In 2008, the annual healthcare cost of obesity in the US was estimated to be as high as 147 billion dollars a year.<sup>1</sup> The annual medical burden of obesity increased to 9.1 percent in 2006 compared to 6.5 percent in 1998.<sup>1</sup> Medical expenses for obese employees are estimated to be 42 percent higher than for a person with a healthy weight.<sup>1</sup> Workplace obesity prevention programs can be an effective way for employers to reduce obesity and lower their health care costs, lower absenteeism and increase employee productivity.

## What is the cost of obesity to your organization?

"CDC's **LEAN Works! Leading Employees to Activity and Nutrition**" is a **FREE** web-based resource that offers interactive tools and evidence-based resources to design effective worksite obesity prevention and control programs, including an obesity cost calculator to estimate how much obesity is costing your company and how much savings your company could reap with different workplace interventions.

Be the first to benefit! **Get started with CDC's LEAN Works! today by choosing one of the stages below.**

<u><a href="#">Why</a></u>	<u><a href="#">Plan</a></u>	<u><a href="#">Build</a></u>	<u><a href="#">Promote</a></u>	<u><a href="#">Assess</a></u>
				
Why should I create a program?	Where should I begin?	What program components and activities should I include?	How do I maintain interest and motivation?	Is my program working?

Step By Step	
► Introduction	About CDC's LEAN Works!
	Why
	Plan
	Build
	Promote
	Assess
Additional Resources	
	Obesity Cost Calculator
	Recommendations and Promising Practices
	Tools Index
	State Toolkits and Resources
	Glossary
	Site Map
	References
	Web Site Contributors

Related Links
<a href="#">Healthy Weight</a>
<a href="#">Overweight and Obesity</a>
<a href="#">Division of Nutrition, Physical Activity and Obesity</a>

CG Topic	Intervention	Outcome
<b>Physical Activity</b>	<u><b>City of Mount Prospect, IL</b></u> Improved urban design – <ul style="list-style-type: none"> <li>• Sidewalks</li> <li>• Save street crossings</li> </ul>	Number of students walking to school doubled
<b>Vaccines</b>	<u><b>Duval County Health Department, FL</b></u> <ul style="list-style-type: none"> <li>• Client reminders to increase immunization rates</li> <li>• Training of additional staff to administer vaccines</li> <li>• Education of parents and caregivers</li> </ul>	Vaccination coverage increased by 15%
<b>Cancer</b>	<u><b>Family Health Center, McClellanville, NC</b></u> <ul style="list-style-type: none"> <li>• Client reminders for breast and cervical cancer screening</li> <li>• Group education</li> <li>• Reduce structural barriers</li> <li>• Reduce out-of-pocket costs</li> </ul>	Increased screening for breast and cervical cancer by 10%
<b>Tobacco</b>	<u><b>New York City, NY</b></u> <ul style="list-style-type: none"> <li>• Increase cigarette taxes</li> <li>• Smoking bans in workplaces, bars and restaurants</li> <li>• Mass media campaign</li> </ul>	Smoking prevalence among adults decreased by 27%



# National Guideline Clearinghouse

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**Contact Us** with questions or comments about specific guidelines or about the NGC Web site. You can find useful tips on the **FAQ** and **Help** pages.

## New This Week

March 05, 2012

### Updated Guideline Synthesis

- Management of Genital Herpes in Men and Nonpregnant Women

### New/Updated Guideline Summaries

- AAN, AAPerio, AASLD, Am Dental Assoc, ASNM, NASS, PEBC, SOGC, TES, TTDWCG, SIGN

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## Announcements

### U.S. Food and Drug Administration (FDA) Advisories

- March 1, 2012: [Statins and HIV or Hepatitis C Drugs](#)
- February 28, 2012: [Statin Drugs](#)

### Conference News

The **Guidelines International Network (G-I-N) Conference 2012**, will be held **August 22-25**,

## Screening for Breast Cancer in Women at Average Risk

### Guidelines Being Compared:

1. **American College of Obstetricians and Gynecologists (ACOG).** *Breast cancer screening.* American College of Obstetricians and Gynecologists (ACOG); 2011 Aug. 11 p. (ACOG practice bulletin; no. 122). [54 references]
2. **American College of Physicians (ACP).** *Screening mammography for women 40 to 49 years of age: a clinical practice guideline from the American College of Physicians.* Ann Intern Med 2007 Apr 3;146(7):511-5. [31 references]
3. **U.S. Preventive Services Task Force (USPSTF).** 1) *Screening for breast cancer: U.S. Preventive Services Task Force recommendation statement.* 2) *December 2009 addendum.* Ann Intern Med 2009 Nov 17;151(10):716-726. [32 references]

Areas of Agreement and Difference

Comparison of Recommendations

Strength of Evidence and Recommendation Grading Schemes

Methodology

Source(s) of Funding

Benefits and Harms

Abbreviations

Status

A direct comparison of the recommendations presented in the above guidelines for screening for breast cancer in asymptomatic women at average risk is provided in the tables below. Recommendations for women at increased risk of breast cancer are beyond the scope of this synthesis.

### Areas of Agreement

#### *Digital Mammography and Magnetic Resonance Imaging (MRI)*

USPSTF concluded that the current evidence is insufficient to assess the additional benefits and harms of using either digital mammography or MRI instead of film mammography as a screening modality for breast cancer. According to ACOG, breast MRI is not recommended for screening women at average risk of developing breast cancer. ACOG does not provide recommendations on digital mammography, but states that a recent meta-analysis of data from eight large randomized studies found that, overall, digital mammography demonstrated a slightly higher detection rate than film mammography, particularly for women aged 60 years or younger. ACP does not address digital mammography or MRI.

### Areas of Difference

#### *Mammographic Screening*

The USPSTF recommends biennial screening mammography for women aged 50 to 74 years, noting that the decision to start regular, biennial screening mammography before the age of 50 years should be an individual one and take patient context into account, including the patient's values regarding specific benefits and harms.

# Pathway to Evidence-Based Resources

Helping you find and use the best evidence

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# Systematic Reviews

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Welcome!

## New in Evidence-Informed Decision Making...

### This week's featured review

March 05, 2012

[Vitamin D supplementation for prevention of mortality in adults](#)

### NCCPH Knowledge Translation Graduate Student Awards

February 27, 2012

The National Collaborating Centres for Public Health (NCCPH) is awarding up to three graduate students to recognize their work regarding knowledge translation in public health in Canada. Awards will be given at the [CPHA 2012 Annual Conference](#) and will cover travel, accommodation and registration fees up to a maximum of \$1,500. Application deadline: March 30, 2012.






health-evidence.ca aims to support evidence-informed decision making (EIDM) in public health organizations across Canada by providing:

- easy access to current review-level research evidence through a searchable online registry
- organizational assessments of readiness for using research to guide decision making
- customized knowledge broker consultation and support for individuals,






# Health-Evidence.ca Search Options











## Focus of Review

-  [Addiction/Substance Use](#)
-  [Adolescent Health](#)
-  [Adult Health](#)
-  [Child Health](#)
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-  [Senior Health](#)
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-  [Sexually Transmitted Infections \(STIs\)](#)
-  [Social Determinants of Health](#)









## Review Type

-  [meta-analysis](#)
-  [narrative](#)
-  [systematic](#)





## Intervention Location

-  [Camp](#)
-  [City/regional/provincial/state/national](#)
-  [Clinic](#)
-  [Commercial site](#)
-  [Community](#)
-  [Community health centre](#)
-  [Community/recreation centre](#)
-  [Correctional institution](#)
-  [Day care centre](#)
-  [Dentist](#)
-  [Family centre](#)
-  [Farm](#)
-  [Health bus](#)
-  [Health departments](#)

## Population Characteristics

-  [Age Groups](#)
-  [Cultural Group](#)
-  [Family](#)
-  [First Nations and Inuit](#)
-  [Gender](#)
-  [General Public/All age groups](#)
-  [High Risk Group](#)
-  [Low socioeconomic status](#)

## Intervention Strategies

-  [Advocacy](#)
-  [Behaviour modification](#)
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-  [Emergency preparedness](#)
-  [Immunization](#)
-  [Public health inspection & Environmental health](#)
-  [Screening](#)
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## Health-Evidence.ca Search Results

### School-based interventions to reduce and prevent obesity in children

<u>Article</u>	<u>Authors</u>	<u>Date</u>	<u>Rating</u>	
<a href="#">Interventions for treating obesity in children</a>	Oude Luttikhuis,H. et al.	2009	10 (strong)	
<a href="#">Interventions to prevent obesity in 0-5 year olds: An updated systematic review of the literature</a>	Hesketh,K.D. et al.	2010	10 (strong)	
<a href="#">School-based physical activity programs for promoting physical activity and fitness in children and adolescents aged 6-18</a>	Dobbins,M. et al.	2009	10 (strong)	
<a href="#">School-based obesity prevention programs: An evidence-based review</a>	Kropski, J.A. et al.	2008	10 (strong)	
<a href="#">Reducing obesity and related chronic disease risk in children and youth: A synthesis of evidence with 'best practice' recommendations</a>	Flynn, M.A. et al.	2006	10 (strong)	
<a href="#">School-based interventions on childhood obesity: A meta-analysis</a>	Gonzalez-Suarez,C. et al.	2009	10 (strong)	
<a href="#">A meta-analytic review of obesity prevention programs for children and adolescents: The skinny on interventions that work</a>	Stice, E. et al.	2006	9 (strong)	
<a href="#">Effect of school-based physical activity interventions on body mass index in children: A meta-analysis</a>	Harris,K.C. et al.	2009	9 (strong)	
<a href="#">Systematic review of the effectiveness and cost-effectiveness of weight management schemes for the under fives: A short report</a>	Bond,M. et al.	2009	9 (strong)	

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## Behavior and Psychology

*Obesity* (2008) **16** 5, 1009–1018. doi:10.1038/oby.2008.29

### School-based Obesity Prevention Programs: An Evidence-based Review

Jonathan A. Kropski<sup>1</sup>, Paul H. Keckley<sup>1</sup> and Gordon L. Jensen<sup>2</sup>

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Correspondence: Gordon L. Jensen ([GLJ1@psu.edu](mailto:GLJ1@psu.edu))

Received 15 January 2007; Accepted 7 August 2007; Published online 28 February 2008.

#### Abstract

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**Objective:** This review seeks to examine the effectiveness of school-based programs for reducing childhood overweight or obesity.

**Methods and Procedures:** A systematic review of the research literature published since 1990 was conducted to identify experimental or quasi-experimental school-based curricular or environmental preventive interventions, with evaluation  $\geq 6$  months after baseline, which reported outcomes in terms of a measure of overweight.

**Results:** Fourteen studies were identified, including one involving a nutrition-only program, two physical activity promotion interventions and eleven studies combining nutrition and physical activity components. Most studies ( $n = 10$ ) offered weak (grade 2) quality evidence. One study offered strong (grade 4) evidence reducing the odds ratio for overweight in girls only, while four grade 2 studies reported significant improvements in BMI or at-risk-for overweight or overweight prevalence in boys, girls, or

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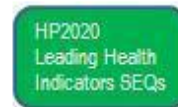
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PA-1 Reduce the proportion of adults who engage in no leisure-time physical activity ([Objective PA-1](#))



PA-2 Increase the proportion of adults who meet current Federal physical activity guidelines for aerobic physical activity and for muscle-strengthening activity ([Objective PA-2](#))



PA-3 Increase the proportion of adolescents who meet current Federal physical activity guidelines for aerobic physical activity and for muscle-strengthening activity ([Objective PA-3](#))



PA-4 Increase the proportion of the Nation's public and private schools that require daily physical education for all students ([Objective PA-4](#))



PA-5 Increase the proportion of adolescents who participate in daily school physical education ([Objective PA-5](#))



PA-6 Increase regularly scheduled elementary school recess in the United States ([Objective PA-6](#))



PA-7 Increase the proportion of school districts that require or recommend elementary school recess for an appropriate period of time ([Objective PA-7](#))



PA-8 Increase the proportion of children and adolescents who do not exceed recommended limits for screen time ([Objective PA-8](#))



PA-9 Increase the number of States with licensing regulations for physical activity provided in child care ([Objective PA-9](#))



PA-10 Increase the proportion of the Nation's public and private schools that provide access to their physical activity spaces and facilities for all persons outside of normal school hours (that is, before and after the school day, on weekends, and during summer and other vacations) ([Objective PA-10](#))

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PA-4.3 Senior high schools

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#### PA-5 Increase the proportion of adolescents who participate in daily school physical education

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Baseline:	33.3 percent of adolescents participated in daily school physical education in 2009
Target:	36.6 percent
Target-Setting Method:	10 percent improvement
Data Source:	Youth Risk Behavior Surveillance System (YRBSS), CDC, NCCDPHP
More Information:	<div style="display: flex; align-items: flex-start;"> <div style="margin-right: 20px;">  <p><a href="#">Data from the HHS Health Indicators Warehouse</a></p> </div> <div style="margin-right: 20px;">  <p>The HP2010 objective with the same definition was 22-09. <a href="#">View on DATA2010</a></p> </div> <div>  <p><a href="#">Search PubMed for Literature Relating to this Objective</a></p> </div> </div>

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PA-6 Increase regularly scheduled elementary school recess in the United States

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# PubMed Search Results

PubMed/MEDLINE Database  
<http://pubmed.gov>

PubMed

"physical education and training"[MeSH Major Topic] AND "schools"[MeSH Terms]

Search



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Display Settings:  Summary, 20 per page, Sorted by

Results: 1 to 20 of 77

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[Development of new criterion-referenced fitness](#)

1. [conceptual overview.](#)

Welk GJ, Going SB, Morrow JR Jr, Meredith MD

Am J Prev Med. 2011 Oct;41(4 Suppl 2):S63-7. No abstract available.

PMID: 21961614 [PubMed - indexed for MEDLINE]

[Related citations](#)

[Adolescent physical education and physical activity in California.](#)

2. Diamant AL, Babey SH, Wolstein J.

Policy Brief UCLA Cent Health Policy Res. 2011 May;(PB2011-5):1-8.

PMID: 21688693 [PubMed - indexed for MEDLINE]

[Related citations](#)

[Program puts 'physical' back in education.](#)

3. Tehan J, Greene J.

Health Prog. 2011 May-Jun;92(3):34-8. No abstract available.

PMID: 21648263 [PubMed - indexed for MEDLINE]

[Related citations](#)

[Culturally relevant physical education in urban schools: reflect](#)

4. Flory SB, McCaughtry N.

Res Q Exerc Sport. 2011 Mar;82(1):49-60.

PMID: 21462685 [PubMed - indexed for MEDLINE]

[Related citations](#)

[Compliance with national guidelines for physical activity in U.S. preschoolers: measurement and](#)

5. [interpretation.](#)

Beets MW, Bornstein D, Dowda M, Pate RR.

Pediatrics. 2011 Apr;127(4):658-64. Epub 2011 Mar 21.

PMID: 21422092 [PubMed - indexed for MEDLINE]

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## Model Practice Database

**NACCHO Model Practice Database**  
<http://naccho.org/topics/modelpractices/database/>

To find a model or promising practice by category, [click here](#).

Search By State:  ▼

Search by Type:  ▼

Search by Year:  ▼

Search by Keyword:

Year ▲	Program Name	Organization	State	Type	Category
2011	Breast Health Outreach and Counseling Project	Philadelphia Department of Public Health	PA	Model	Chronic Disease
2011	Git-R-Done: To Be Safe - An Introduction to Quality Improvement Based on the PHAB SAT	Franklin County Health Department	KY	Model	Quality Improvement
2011	Colorado Circle of Protection Tdap Program	Tri-County Health Department	CO	Model	Immunization
2011	I ♥ All My Animals--Promoting Rabies Vaccination For Domestic Animals Through A Collaborative Multi-media Campaign	Tri-County Health Department	CO	Promising	Immunization
2011	2009 H1N1 Influenza Surveillance Systems	Miami-Dade County Health Department	FL	Model	Infectious Disease
2011	Prison to Community Transition Project	Jackson County Health Department	IL	Model	Infectious Disease
2011	Primary Access To Health	Brevard County Health Department	FL	Promising	Chronic Disease
2011	Color-Coded Consent Forms for Performance Excellence during Mass Prophylaxis Event	St. Johns County Public Health Department	FL	Promising	Emergency Preparedness

Search By State:

Search by Type:

Search by Year:

Search by Keyword:

## Practices from Local Health Departments in Connecticut

Year ▲	Program Name	Organization	State	Type	Category
2011	Climate Change Adaptation Planning at the Local Level	Milford Health Department	CT	Promising	Environmental Health
2009	Engaging Staff & Stakeholders in the Community Health Assessment Process	Milford Health Department	CT	Model	Quality Improvement Workforce
2008	Residential Rodent Control Intervention Project	West Hartford-Bloomfield Health District	CT	Promising	Community Involvement Environmental Health
2006	REACH - Real Estate Awareness of the Connecticut Health Code	Ledge Light Health District	CT	Promising	Environmental Health
2006	Protecting Fairgoers through Education, Awareness and Standardized Food Inspection	Northeast District Department of Health	CT	Promising	Community Involvement Environmental Health Food Safety Organizational Practices
2006	Nail Salon Sanitation for Operators and Consumers	Stratford Health Department	CT	Promising	Cultural Competence Infectious Disease
2004	Food Smart Program	Stratford Health Department	CT	Promising	Cultural Competence Food Safety
2003	Breath of Fresh Air	Stamford City Health Department	CT	Model	Chronic Disease Environmental Health Maternal and Child Health

## Search Model Practices by Category

[Back to main page.](#)

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- [+ Communication/Public Relations](#)
- [+ Community Assessment](#)
- [+ Community Involvement](#)
- [+ Cultural Competence](#)
- [+ Emergency Preparedness](#)
- [+ Environmental Health](#)
- [+ Environmental Health](#)
- [+ Environmental Health \(CEHA\)](#)
- [+ Environmental Health \(Climate Change\)](#)
- [+ Environmental Health \(Food Safety\)](#)
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- [+ Immunization](#)
- [+ Immunization](#)
- [+ Infectious Disease](#)
- [+ Infectious Disease Control and Prevention](#)
- [+ Informatics](#)
- [+ Injury Prevention](#)
- [+ Injury Prevention](#)
- [+ Marketing and Promotion](#)
- [+ Maternal and Child Health](#)
- [+ Maternal and Child Health](#)
- [+ MCH](#)
- [+ Mental Health](#)
- [+ MHC](#)
- [+ Organizational Practices](#)
- [+ Other Infrastructure and Systems](#)
- [+ Pandemic Influenza](#)
- [+ Pandemic Influenza &/or Immunization](#)
- [+ PHIS Committee](#)
- [+ PHIS Committee\(could be Pan Flu\)](#)
- [+ PHIS ESC\(QI or Informatics\)](#)
- [+ PHIS ESC\(QI\)](#)
- [+ PPHR](#)
- [+ Preparedness \(Medical Reserve Corp\)](#)
- [+ Preparedness \(Metrics\)](#)
- [+ Preparedness \(PPHR\)](#)
- [+ Preparedness \(Strategic National Stockpile\)](#)
- [+ Preparedness or Access and Integrated Services](#)
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### Best Practices (Experience-Based)

Public health programs, interventions, and policies that have been evaluated, shown to be successful, and have the potential to be adapted and transformed by others working in the same field.

#### United States

- [Center of Excellence for Training and Research Translation](#) (University of North Carolina at Chapel Hill) – Interventions and strategies on preventing and controlling obesity, heart disease and stroke, and other chronic diseases through nutrition and physical activity.
- [Model Practice Database](#) (National Association of County and City Health Officials) – Collection of projects from around the United States highlighting successful public health projects.
- [National Registry of Evidence-Based Programs and Practices \(NREPP\)](#) (Substance Abuse and Mental Health Services Administration) – Searchable online registry of interventions supporting mental health promotion, substance abuse prevention, and mental health and substance abuse treatment.
- [Promising Practices Network](#) (RAND Corporation) – Collection of summaries of successful projects, programs and practices addressing the needs of children and youth.
- [Research-tested Intervention Programs \(RTIPs\)](#) (National Cancer Institute) – Searchable database of cancer control interventions and program materials that have been shown to be effective, published in a peer-reviewed journal, and reviewed by a panel of experts in the field.

#### International

- [Canadian Best Practices Portal](#) (Public Health Agency of Canada) – Compendium of community interventions related to chronic disease prevention and health promotion that have been evaluated, shown to be successful, and have the potential to be adapted and replicated by other health practitioners working in similar fields.

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#### Systematic Reviews

Systematic reviews and meta-analyses of the public health literature.

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Specialized searches of PubMed/MEDLINE on specific health topics or type of research study.

#### Best Practices

Public health programs, interventions, and policies used by others that have been evaluated and shown to be successful.

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Evidence-based practice for public health involves using the best available evidence to make informed public health practice decisions. This website provides free online access to evidence-based public health (EBPH) resources, [knowledge domains of public health](#), and public health [journals](#) and [databases](#). The resources are arranged along a pathway of evidence to allow public health practitioners to easily find and use the best evidence to develop and implement effective interventions, programs, and policies.

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### Current Public Health News

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# Information Resources on PHPartners.org for Evidence-Based Practice

- ▶ [Bioterrorism](#)
- ▶ [Dental Public Health](#)
- ▶ [Environmental Health](#)
- ▶ [HIV/AIDS](#)
- ▶ [How to Access Journal Articles](#)
- ▶ [Nutrition](#)
- ▶ [Obesity](#)
- ▶ [Public Health Genomics](#)
- ▶ [Veterinary Public Health](#)
- ▶ [Workforce Development](#)

[Surgeon General Releases New Report on Youth Smoking](#) - 08-MAR-2012

[New CDC Campaign Aims to Stem HIV Crisis Among Black Women](#) - 08-MAR-2012

[One in Three Persons Experience Financial Burden of Medical Care](#) - 08-MAR-2012

[Surgeon General's Video Contest: Tobacco - I'm Not Buying It - Deadline April 20](#) - 08-MAR-2012

[Institute of Medicine and Avon Foundation for Women Issue Challenge for Apps to Prevent Domestic Violence - Registration Due May 31](#) - 08-MAR-2012

▶▶▶ [more news](#)

Practice Informed by Research



Structured Evidence Queries

[VISIT SITE](#)



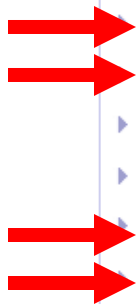
Public Health Information and Data: Tutorial

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**Resource Guide**

## Main Topic Pages

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Literature and Guidelines:

Health Data Tools and Statistics:

Legislation and Policy:

Conferences and Meetings:

➤ Conference proceedings and abstracts

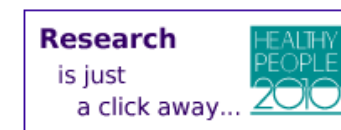


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## Literature and Guidelines

Resources to help you access the public health literature as well as links to titles from members of the Partners project.

See [How to Access Journal Articles](#) for strategies to access and obtain full text journal articles.



# PHPartners: Literature and Guidelines

<http://phpartners.org/guide.html>

[Journal Article Databases](#) | [Individual Journal Titles](#) | [Selected Articles](#) | [Newsletters](#) | [Reports and Other Publications](#) | [Guidelines](#) | [Public Health Libraries](#)

## Journal Article Databases

### Canadian Institutes of Health Research

- [health-evidence.ca](#) - Searchable online resource

### Centers for Disease Control and Prevention (CDC)

- [HuGE Literature Finder](#) - Search engine for selected articles can be redirected to PubMed

### Evidence for Policy and Practice Information

- [Database of Promoting Health Effectiveness Reviews \(DoPHER\)](#) - Focused coverage of systematic and non-systematic reviews of effectiveness in health promotion and public health worldwide. This register currently contains details of over 2,500 reviews of health promotion and public health effectiveness.

### Institute of Education Sciences, U.S. Department of Education (IES)

- [ERIC \(Education Resources Information Center\)](#) - Online digital library of education research and information.

### Johns Hopkins School of Public Health (JHSPH)

- [Agriculture & Public Health Gateway](#) - Gateway that allows users to search several key health and agriculture databases at one time.

### National Collaborating Centre for Methods and Tools (NCCMT)

- [Public Health +](#) - Searchable database of articles from over 140 medical and allied health academic journals that have been critically appraised to identify those that are methodologically sound. Articles that pass this process are rated by clinicians for relevance and newsworthiness.

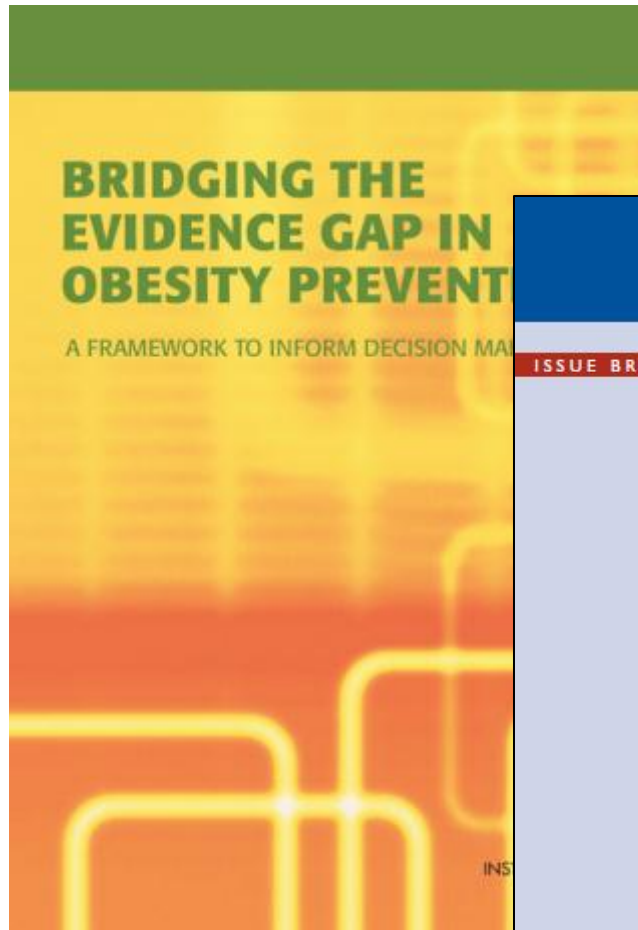
### National Library of Medicine (NLM) U.S.

- [MEDLINE/PubMed Search and Health Disparities & Minority Health Information Resources](#) - A collection of links to tools and resources on health disparities including a pre-formulated PubMed search on health disparities.
- [PubMed](#) - PubMed comprises more than 20 million citations for biomedical literature from MEDLINE, life science journals, and online books.

- Government reports & documents
- Research & technical reports
- Fact sheets & research briefs

# Examples - Reports and Publications

<http://phpartners.org/guide.html#Reports%20and%20Other%20Publications>



Health, United States, 2010  
With Special Feature on Death and Dying

[Click here to go to Table of Contents](#)



**Trust for America's Health**  
WWW.HEALTHYAMERICANS.ORG

**ISSUE BRIEF**

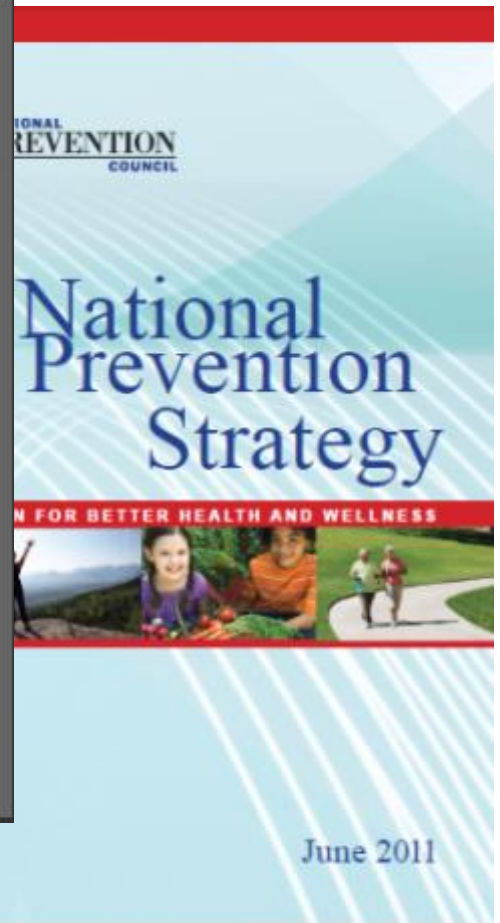
## Bending the Obesity Cost Curve:

REDUCING OBESITY RATES BY FIVE PERCENT COULD LEAD TO MORE THAN \$29 BILLION IN HEALTH CARE SAVINGS IN FIVE YEARS

**K**eeping people healthier is one of the most common sense and effective ways to reduce health care costs.

Obesity is one of the biggest drivers of preventable chronic diseases and health care costs in the country. Two-thirds of Americans are either obese or overweight, and obesity is related to more than 50 illnesses, including type 2 diabetes, heart disease and some forms of cancer.

The Trust for America's Health (TFAH) and Micro Health Simulations conducted an analysis to examine how much the United States could save in health care costs if obesity rates were reduced by five percent. The analysis found that the country could save \$29.8 billion in five years, \$158.1 billion in 10 years and \$611.7 billion in 20 years.



JANUARY 2012  
PREVENTING EPIDEMICS.  
PROTECTING PEOPLE.



Office of Surveillance, Epidemiology, and Laboratory Services

Behavioral Risk Factor Surveillance System

[BRFSS Home](#) | [Contact Us](#)

Behavioral Risk Factor Surveillance System

<http://www.cdc.gov/brfss/index.htm>



The Behavioral Risk Factor Surveillance System is a telephone health survey system, tracking health behaviors in 48 States yearly since 1984. Currently, data are available for 48 States, Puerto Rico, the U.S. Virgin Islands, and the District of Columbia. [Learn More »](#)



The [2012 BRFSS Meeting website](#) is now online. The meeting will be held at the Crowne Plaza Atlanta Perimeter at Ravinia, Atlanta, Georgia.



Interactive Databases

- [Prevalence and Trends Database](#)
- [SMART: City and County Database](#)
- [BRFSS Interactive Maps \(GIS\)](#)
- [Web Enabled Analysis Tool \(WEAT\)](#)
- [Chronic Disease Indicators \(CDI\)](#)

programs.

State Health Data

- [America's Health Rankings](#) - National health issues, statistics and comparisons
- [Behavioral Risk Factor Surveillance System](#) - State-based system of health surveys that collects information on health risk

County Health Rankings  
Mobilizing Action Toward Community Health

OUR APPROACH RANKING METHODS ACTION STEPS YOUR STORIES

Find Health Rankings: Enter a County or State

2011 | CONNECTICUT

Overall Rankings Health Outcomes Map Health Factors Map Health Outcomes Rankings Health Factors Rankings Downloads, Links, & Data Guide

Health Outcomes are the primary ranking used to rank the overall health of counties. The county ranked number 1 is considered the healthiest county in the state.

To see your county Snapshot, click on your county on the map or the list below.

Legend: Rank 1-2, Rank 3-4, Rank 5-6, Rank 7-8

Fairfield (FA) - 3 Litchfield (LI) - 4 New Haven (NH) - 8 Tolland (TO) - 1  
Hartford (HA) - 6 Middlesex (MI) - 2 New London (NL) - 5 Windham (WI) - 7

County Health Rankings

<http://www.countyhealthrankings.org/>

## Legislation and Policy

Resources to support legislation and policy at the state and federal levels

[National Legislation and Policy](#) | [State Legislation and Policy](#)

**PHPartners: Legislation and Policy**

<http://phpartners.org/legis.html>



NATIONAL CONFERENCE of STATE LEGISLATURES

**National Conference of State Legislatures: Health**

<http://www.ncsl.org/programs/health/health.htm>

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[Issues & Research](#) » [Health](#) » **Reversing the Trend in Childhood Obesity**

Go 22267



### Reversing the Trend in Childhood Obesity: Policies to Promote Healthy Kids and Communities

#### Reversing the Trend in Childhood Obesity Policies to Promote Healthy Kids and Communities



#### Introduction

The National Conference of State Legislatures (NCSL) has witnessed increasing interest among state legislatures in policies designed to reduce and prevent childhood obesity as demonstrated through enactment of legislation. In an earlier report, *Promoting Healthy Communities and Preventing Childhood Obesity: Trends in Recent Legislation*,<sup>1</sup> NCSL found similar trends when studying enacted legislation in 16 topic areas during the 2009 legislative sessions. This report focuses on enacted legislation in 2010.

#### Report Organization

The report summarizes enacted state legislation in two broad policy categories—healthy eating and physical activity, and healthy community design and access to healthy food. These are further divided into 17 topic areas.

The first broad category focuses on nutrition and physical activity/physical education issues, primarily in schools. It is divided into nine topics:

- ▶ School Nutrition
- ▶ Nutrition Education
- ▶ Body Mass Index Measurement for Students
- ▶ Diabetes Screening at School
- ▶ Insurance Coverage for Obesity Prevention
- ▶ School Wellness
- ▶ Physical Activity or Physical Education in School

#### NCSL Resources

- ▶ Order publication
- ▶ Public Health and Prevention Resources
- ▶ Healthy Communities Resources
- ▶ NCSL Bookstore

**Member Reminder:**  
first to get your free copy

# Conferences and Meetings

## PHPartners: Conferences and Meetings

[http://phpartners.org/conf\\_dates.html](http://phpartners.org/conf_dates.html)

## APHA Past Years Abstracts

<http://www.apha.org/meetings/pastfuture/pastannualmeetings.htm>

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### APHA Meetings

APHA Home » APHA Meetings » Past & Future Annual Meetings » Past Years Abstracts and Locations

#### In This Section

- Overview
- Annual Meeting Home
- Annual Meeting Highlights
- Schedule and Online Program
- Presenter Information
- Continuing Education at the APHA Annual Meeting
- Public Health Exposition
- Past & Future Annual Meetings
- Accessibility
- Contact Information
- Social Media at Annual Meeting

#### Past Years Abstracts and Locations

**2011 October 29 - November 2, Washington, DC (139th Meeting)**

*Healthy Communities Promote Healthy Minds and Bodies*

[2011 Program & Abstracts](#)

[2011 Virtual Expo](#)

[2011 Annual Meeting Photographs](#) - Now Available

[2011 E-ssentialLearning](#) - Available for purchase

**2010 November 6-10, Denver, CO (138th Meeting)**

*Social Justice: A Public Health Imperative*

[2010 Program & Abstracts](#)

[2010 Virtual Expo](#)

[2010 E-ssentialLearning](#)- Available for purchase

**2009 November 7-11, Philadelphia, PA (137th Meeting)**

*Water and Public Health: the 21st Century Challenge*

[2009 Program & Abstracts](#) - E-ssentialLearning is available for Free

[2009 Virtual Expo](#)

**2008 October 25-29, San Diego, CA (136th Meeting)**

*Public Health Without Borders*



Health Story - How to Affect Policy, Engage Elected Officials, and Inspire Citizens," with speaker Andy Goodman, Cofounder and Director of The Goodman Center

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### Our Mission

Helping the public health workforce find and use information effectively to improve and protect the public's health

### Public Health Topic Pages

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### Current Public Health News

[National Public Health Week Focuses on Disease Prevention and Wellness](#) - 02-APR-2012

[MMWR Report on the Epidemiology Workforce in State and Local Health Departments](#) - 02-APR-2012

[HHS and Education Launch New Stop Bullying Website](#) - 02-APR-2012

[CDC Report Finds U.S. Population Has Good Levels of Some Essential Vitamins and Nutrients](#) - 02-APR-2012

[HHS Announces Winners of the HHSinnovates Program](#) - 02-APR-2012

▶▶▶ [more news](#)

### In the Spotlight

[Gateway to Health Communication & Social Marketing Practice](#)


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**Resource Guide**  
for Disaster Medicine and Public Health

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Making a Difference in Global Health

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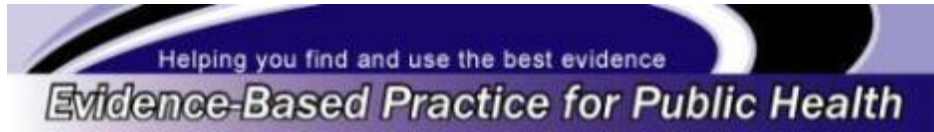


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A Healthier America

# Summary of EBPH Information Resources



<http://library.umassmed.edu/ebpph>

- 
1. Evidence-based guidelines
  2. Systematic reviews
  3. Formulated searches of the literature
  4. Peer-reviewed research
  5. Best and promising practices



<http://PHPartners.org>

- Government and research reports
- Data and statistics
- Policy statements and issue briefs
- Conference proceedings and abstracts

# Conclusion - Evidence-Based Public Health

Find and use the best available evidence to:

- ❖ Make informed public health practice decisions
- ❖ Ensure the effectiveness of programs and interventions
- ❖ Assure that resources are used in the most effective manner
- ❖ Strengthen funding proposals and gain support from stakeholders

# Thank you!

**Hathy Simpson, MPH**

**Public Health Information Specialist**

[Hathy.Simpson@umassmed.edu](mailto:Hathy.Simpson@umassmed.edu)

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