

SSA Attachment 1 HEALTHY COMMUNITIES STUDY

	Healthy Communities Study - Glossary of Terms
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Activity	Activities are actions or inputs that are facilitated by or occur within the
Activity	community or system and related to its goals and objectives
	The National Cancer Institute (NCI) Automated Self-Administered 24 hour Recall (ASA24) is a software tool that enables automated and self-
	administered 24-hour dietary recalls. The format and design of ASA24 are
	based on a modified version of the interviewer-administered Automated
	Multiple Pass Method (AMPM) 24-hour recall developed by the U.S.
ASA24	Department of Agriculture (USDA). The ASA24 must be accessed via high-
	speed internet . For the HCS the EMSI field interviewer will administer the
	dietary recall because experience to date suggests that higher response
	and completion rates are obtained with children if the instrument is
	interviewer-administered.
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	A time series of BMI measurements collected on the same child based on
BMI trajectory	combining direct assessments from within home data collection with
	information abstracted from the medical record
	С
	The strategies and measures from the Common Community Measures for
	Obesity Prevention project supported by the Centers for Disease Control
	and Prevention, the Robert Wood Johnson Foundation, the Kellogg
COCOMO	Foundation, Kaiser Permanente, and the CDC Foundation. Also referred to
	as the "Measures Project." A complete listing of these strategies and
	measures are available at:
	http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5807a1.htm.
Community	Any group sharing a common place, experience, or interest. Operationally
Community	defined for the HCS as a public high school catchment area.
	Individual who lives in the RIPA community (ideally one of the key
Community Documenter	informants) and is hired by Battelle to prospectively track the progression
	of obesity programs and policies in their community.
	Battelle employee who travels from community to community to conduct
Community Liaison	outreach and interview key informants, train EMSI staff to conduct home
,	visits, perform quality control by observing home visits, and perform
	environmental observations within the communities.
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	More detailed measures collected of children (e.g., dietary recall) and
Enhanced Protocal	More detailed measures collected of children (e.g., dietary recall) and
Enhanced Protocol	communities. A randomly selected subsample of 1 in 6 (approximately
Ethnicity	17%) children will receive the Enhanced Protocol.
Ethnicity	A group of people whose members identify with each other, through a
	common heritage, often consisting of a common language, a common
	culture (often including a shared religion) and an ideology that stresses



SSA Attachment 1

HEALTHY COMMUNITIES STUDY

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	common ancestry
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	The main independent predictor variables within the HCS that capture the intensity of program or policy implementation within a community by
Intensity Score	summarizing information collected via the key informant interviews, review of documents, and/or data compiled by the local community documenter.
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MAPPS Strategies	Refers to a set of intervention strategies identified by the Centers for Disease Control and Prevention to promote engagement in physical activity and healthy eating. MAPPS is an acronym for the actual strategies: Media, Access, Point of Decision Information, Price, and Social Support & Services. • Use Media to promote healthy foods/drinks and increase activity; restrict advertising and employ counter-advertising for tobacco and unhealthy foods/drinks. • Increase Access to healthy food/drink choices and safe locations to be active and improve the built environment; reduce the availability of tobacco and unhealthy food/drinks. • Use of Point of decision labeling/signage/placement to discourage consumption of tobacco, increase consumption of healthy foods/drinks, and prompt physical activity. • Use Price to discourage consumption of tobacco and to benefit consumption of healthy foods/drinks. • Use Social support/services to promote tobacco cessation, breastfeeding, and increased activity. A complete listing of MAPPS strategies is available at: http://www.cdc.gov/chronicdisease/recovery/PDF/N and PA MAPPS strategies.pdf http://www.cdc.gov/CommunitiesPuttingPreventiontoWork/strategies/index.htm



SSA Attachment 1 HEALTHY COMMUNITIES STUDY

	These are the recommended strategies for the "Communities Putting Prevention to Work" program.
Mediator	A mediating variable is one that explains the mechanism by which an independent variable affects a dependent variable. Mediating variables, or mediators, are in the causal pathway between an independent and dependent variable. Examples in HCS include availability and access to healthful foods, parent support for healthy eating and physical activity; physical activity resources at home, parent rules about physical activity.
Moderator	A moderating variable is one that affects the relationship between an independent variable and a dependent variable such that the relationship varies depending on the moderator. Moderators are also referred to as interactions. Examples in HCS include community obesity coalitions, sociodemographics, community contextual factors, school environments.
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NCCOR	The National Collaborative on Childhood Obesity Research (NCCOR) brings together four of the nation's leading research funders – the Centers for Disease Control and Prevention, (CDC), the National Institutes of Health (NIH), the Robert Wood Johnson Foundation (RWJF) and the United States Department of Agriculture (USDA) – to address the problem of childhood obesity in America. NCCOR focuses on efforts that have the potential to benefit children, teens and their families, and the communities in which they live.
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Obesity	Defined for children: BMI percentile >95th percentile for age and sex; for adults: BMI > 30 kg/m ²
Overweight	Defined for children: BMI percentile >85th but <95th percentile for age
	and sex; for adults: BMI ≥ 25 and <30 kg/m ²
PARA Instrument	and sex; for adults: BMI ≥ 25 and <30 kg/m²
PARA Instrument Policies	and sex; for adults: BMI ≥ 25 and <30 kg/m² Physical Activity Resource Assessment (PARA) Instrument is a brief, one-page instrument to systematically document and describe the type, features, amenities, quality and incivilities of a variety of physical activity



SSA Attachment 1

HEALTHY COMMUNITIES STUDY

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Stakeholder	Refers to people or organizations who have an interest in the issue or effort.
Standard Protocol	Less detailed measures collected of all children and communities.
Specific attributes of community programs and policies	Examples: duration, funding, targets
Snowball sample	A sampling methodology in which new respondents are identified by current respondents via referrals
RIPA Community	Repeat in-person assessment (RIPA) communities are the first 40 communities visited in Wave 2 of the study that will undergo both a remote follow-up two years after baseline, and will have a second inperson assessment three years after baseline. These communities will also include the use of a local community documenter hired to prospectively assess program and policy changes on a quarterly basis between the baseline assessment and the 3-year follow-up assessment.
Race	R White, Black/African American, American Indian, Alaskan Native, Native Hawaiian, Guamanian, Samoan, Other Pacific Islander (Specify), Asian Indian, Chinese, Filipino, Japanese, Korean, Vietnamese, Other Asian (Specify), Some other race (Specify)
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Promising program/ policy	A promising program or policy is defined as a known program or policy that is either evidence-based or is strong enough to reasonably expect to see an impact if studied.
	with multiple targets (e.g., child, family, environment) or processes (e.g., classes, media, counseling), and can combine multiple approaches. Programs relevant to this announcement include those that target energy balance in youth through diet and physical activity. Generally a program is named. Examples of programs include NIH's <i>We Can!</i> (Ways to Enhance Children's Activity and Nutrition)® program, the RWJF's Healthy Kids, Healthy Communities program, and the CDC Steps/REACH and State Nutrition, Physical Activity and Obesity (NPAO) programs. Programs also can be defined in terms of local and/or external resources provided to enable communities to engage in a set of activities or assessments, such as expert consultation, technical assistance, specific intervention tools or materials, and/or funding.



SSA Attachment 1

HEALTHY COMMUNITIES STUDY

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Wave 1	4 communities visited in the first year of data collection that will not have any follow-up assessments.
Wave 2	275 communities that will be visited during the study that will have an in-
	person assessment. The first 200 Wave 2 communities (including the 40
	RIPA communities) will also undergo a remote follow-up assessment one to two years after the baseline visit.
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