

# Overview of the Protocol Manuscripts for the Healthy Communities Study



Russell R. Pate, PhD

Leading public health organizations, including CDC and IOM, have encouraged communities to implement programs and policies designed to increase physical activity, promote healthy eating, and reduce overweight and obesity in children.<sup>1-4</sup> Many communities have taken on this challenge and have developed programs and policies designed to prevent or reduce obesity in young people. However, the long-term effects of these efforts remain unknown. The Healthy Communities Study (HCS) is a landmark investigation of community influences on overweight and obesity in children. It is examining the associations between characteristics of community programs and policies and obesity-related outcomes. HCS is using an innovative study design in a large-scale observational study of approximately 5000 children and their families in 130 communities across the country.

The National Heart, Lung, and Blood Institute leads the HCS, in collaboration with the Eunice Kennedy Shriver National Institute of Child Health and Human Development, National Institute of Diabetes and Digestive and Kidney Diseases, National Cancer Institute, and NIH Office of Behavioral and Social Sciences Research. Key administrative and scientific partners include Battelle Memorial Institute, University of California at Berkeley, University of South Carolina, and University of Kansas. In addition, CDC and the Robert Wood Johnson Foundation collaborated with NIH to design, develop, and implement the study.

The purpose of this series of articles is to describe the HCS study protocol. The articles by Arteaga et al.<sup>5</sup> and John and colleagues<sup>6</sup> provide an overview of the study and describe its rationale, organization, and implementation. The article by Sroka et al.<sup>7</sup> describes how BMI, the primary dependent variable in the study design, was measured. The article by Fawcett and colleagues<sup>8</sup> describes the measures and procedures used to describe community programs and policies that are aimed at obesity prevention in youth. The next two articles, by Pate et al.<sup>9</sup> and Ritchie and colleagues,<sup>10</sup>

describe how physical activity and diet, which are key targets of community policies and programs designed to address childhood obesity, were measured. The final article, by Strauss et al.,<sup>11</sup> describes the statistical analysis strategy and plans. The developed methods and forthcoming findings are expected to contribute to our understanding of what communities are doing to prevent child obesity and what is working. These findings are intended to enable communities across the country to effectively prioritize public health plans and activities.

---

Additional information on the participating organizations and a glossary of terms used in the HCS can be found at <http://www.nhlbi.nih.gov/research/resources/hcs/index.shtml>.

No financial disclosures were reported by the authors of this paper.

---

## References

1. IOM. *Early Childhood Obesity Prevention Policies*. Washington, DC: National Academies Press; 2011.
2. CDC. *Strategies to Prevent Obesity and Other Chronic Diseases: The CDC Guide to Strategies to Increase Physical Activity in the Community*. Atlanta, GA: USDHHS; 2011.
3. CDC. *Strategies to Prevent Obesity and Other Chronic Diseases: The CDC Guide to Strategies to Increase the Consumption of Fruits and Vegetables*. Atlanta, GA: USDHHS; 2011.
4. IOM. *Accelerating Progress in Obesity Prevention: Solving the Weight of the Nation*. Washington, DC: National Academies Press; 2012.
5. Arteaga SS, Loria CM, Crawford PB, et al. The Healthy Communities Study: its rationale, aims, and approach. *Am J Prev Med*. 2015;49(4): 615–623.
6. John LV, Gregoriou M, Pate RR, et al. Operational implementation of the Healthy Communities Study: how communities shape children's health. *Am J Prev Med*. 2015;49(4):631–635.
7. Sroka CJ, McIver KL, Sagatov RDF, Arteaga SS, Frongillo EA. Weight status measures collected in the Healthy Communities Study: protocols and analyses. *Am J Prev Med*. 2015;49(4):642–646.
8. Fawcett SB, Collie-Akers VL, Schultz JA, Kelley M. Measuring community programs and policies in the Healthy Communities Study. *Am J Prev Med*. 2015;49(4):636–641.
9. Pate RR, McIver KL, Colabianchi N, et al. Physical activity measures in the Healthy Communities Study. *Am J Prev Med*. 2015;49(4): 653–659.
10. Ritchie LD, Wakimoto P, Woodward-Lopez G, et al. The Healthy Communities Study nutrition assessments: child diet and the school nutrition environment. *Am J Prev Med*. 2015;49(4): 647–652.
11. Strauss WJ, Sroka CJ, Frongillo EA, et al. Statistical design features of the Healthy Communities Study. *Am J Prev Med*. 2015;49(4): 624–630.

---

From the Department of Exercise Science, University of South Carolina, Columbia, South Carolina

Address correspondence to: Russell R. Pate, PhD, Department of Exercise Science, University of South Carolina, 921 Assembly St., Columbia SC 29208. E-mail: [rpate@mailbox.sc.edu](mailto:rpate@mailbox.sc.edu)

0749-3797/\$36.00

<http://dx.doi.org/10.1016/j.amepre.2015.06.017>