Editorial

The Active Living Research 2014 Conference: “Niche to norm”

Comments on the 2014 Active Living Research Conference theme (written by Keshia Pollack)

When I think of the word niche, phrases such as a “specialized place” or a “distinct segment” come to mind. When it was time to identify the theme for the 2014 Active Living Research (ALR) Conference, we thought about how some people consider the field of active living a niche area. Because of this, it is not entirely surprisingly that around the world, communities still lack sidewalks, pedestrians and bicyclists are injured or killed by speeding traffic, and physical inactivity remains a global pandemic (Kohl et al., 2012). In selecting the theme “niche to norm,” we aimed to recognize the importance of advancing active living from an emerging research field with limited impact to well-accepted findings that guide every day decision-making across various sectors to create more active communities. We wanted to encourage dialogue around how to take evidence-based interventions that promote physical activity mainstream, and we did just that.

The Conference included workshops, oral and poster presentations, and keynote addresses documenting how environmental and policy changes that increase physical activity are increasingly more common. We heard presenters discuss complete street ordinances, which have been adopted in hundreds of communities. We learned how thousands of schools are implementing evidence-based policies and programs to increase youth activity and combat the childhood obesity epidemic. Tools such as Walk Score were described as a way to help millions of home buyers and renters find walkable neighborhoods. My own work to develop and disseminate Promoting Safety is helping ensure that efforts to create environments that facilitate opportunities for physical activity consider the fact that transportation-related injuries are one of the leading causes of death for Americans (U.S. Centers for Disease Control and Prevention, 2014). By partnering with architects, planners, transportation engineers, and colleagues from parks and recreation, we showed how injury prevention and public health professionals can help ensure that new and renovated spaces maximize both active living and safety (Pollack et al., 2014–in this issue). These examples are just a few that illustrate how working across silos and engaging various stakeholders can help move active living from niche to norm.

To build on the momentum from the 2014 ALR Annual Conference, there are many other exciting initiatives that those of us in the field of active living can leverage to continue to take physical activity interventions mainstream. For instance, physical activity environments and related policies are controlled by non-health sectors, including urban planning, transportation, parks and recreation, education, architecture, and corporations, among others, so active living and public health experts need to have input into decision-making that affects our environments (Sallis et al., 1998, 2006). There is emerging evidence regarding the benefits of using tools such as Health Impact Assessments (HIA) to integrate health considerations and evidence into non-health sectors (Dannenberg et al., 2013). Across the United States, HIAs have optimized health outcomes and minimized adverse impacts, and identified, for example, ways to promote opportunities for physical activity when updating comprehensive plans or zoning policies (Health Impact Project, 2014). HIAs provide opportunities to deepen relationships with non-health sectors responsible for making decisions about environments and policies that affect physical activity, and evidence is emerging as to their roles in supporting health-promoting decisions and changing the way communities are designed (Health Impact Project, 2014).

We can successfully take active living from the periphery to the core, from niche to norm, by continuing to strengthen and foster interdisciplinary collaborations, and by reaching out to individuals in sectors where active living is not their central focus. There is a need to establish long-term and collaborative approaches to translate what works and to disseminate it widely. Many of us in the field have begun to do this, and as we showed at the 2014 ALR Conference, we have a great foundation upon which to build and implement policies and environments that promote population-wide increases in physical activity.

The 2014 Active Living Research Conference (written by James F. Sallis)

Each ALR Conference attempts to perceptibly advance research and its translation to practice and policy. Our goal is to use research to make meaningful contributions to improving environments and policies that support active living, healthy weights, and a culture of health. In 2014 there was clear movement in taking active living from “niche to norm” in public health and advocacy organizations, among government officials, and to a global stage.

Research was the major focus of the Conference, with 98 research presentations and posters. ALR attracts significant and innovative research, and some of the best studies are published in this supplement to Preventive Medicine. The 2014 Conference was the second in which practice and policy submissions were invited, and 44 such presentations were intermixed with research presentations. The goal of the dual focus is to facilitate communication of research to those who can use it and to inform researchers about needs of practitioners and policymakers to stimulate future research.

The public health presence at ALR2014 was strong, with keynote presentation from Jonathan Fielding, Director and Health Officer for the Los Angeles County Department of Public Health, and an overview of the Institute of Medicine’s report, “Evaluating Obesity Prevention Efforts,” from Lawrence Green of the University of California, San

http://dx.doi.org/10.1016/j.ypmed.2014.10.025
0031-7455/© 2014 Elsevier Inc. All rights reserved.
Francisco. Both are appropriately described as public health “legends” who gave us their perspectives on how the field of active living research can help solve leading public health problems.

An invited panel provided concrete examples of how active living practices and policies are becoming the norm in many places. Geoff Anderson from Smart Growth American described how leaders across the country understand the economic as well as the health effects of active living policies. Scores of cities and states have adopted “complete street” policies that prioritize the needs of pedestrians and bicyclists. On the panel, Jean Armbruster reported on the PLACE Program (Policies from Livable, Active Communities and Environments) in Los Angeles County that is integrating active living principles into policies and planning documents in that very large jurisdiction. Near the other end of the size scale, Mayor Chip Johnson of Hernando, Mississippi enthralled attendees with his story of making health a central theme of his administration. This has proven to be not only popular among his constituents, but it also is paying off economically as companies are relocating to his city in Northern Mississippi.

ALR2014 had an expanded focus on international active living, which was made possible by additional support from the Robert Wood Johnson Foundation’s (RWJF) global health program. Mike Pratt, from the Centers for Disease Control and Prevention, along with Tracy Orleans from RWJF and Carmen Cutter from ALR, played leading roles in planning a pre-conference symposium that focused on lessons from Latin America that could be applied to solving health challenges in the United States. At the symposium, a panel presented examples of programs and policy initiatives in Brazil, Colombia, and Mexico, followed by a research-focused panel that presented active living studies in Latin America and a study of Mexican Americans. Several of the talks are summarized in the commentary paper by Pratt et al. (2014—in this issue).

An emotional moment at ALR2014 was the tribute to our colleague, Dr. Toni Yancey of UCLA, who died of cancer in 2013. Toni’s partner, Darlene Edgely, joined several ALR leaders and grantees in celebrating the contributions Toni made to physical activity, health equity, and ALR. ALR was an early adopter of Toni’s innovative Instant Recess activity breaks. At the end of ALR2013, Toni’s team filmed a new Instant Recess break developed at an ALR workshop. At the 2014 tribute we enjoyed the premier of the video that got everyone up and active, which helped relieve the sadness of remembering Toni’s passing. We encourage everyone to access the ALR Instant Recess (Active Living Research, 2013) and other routines on YouTube and use them in your meetings.

ALR’s pioneering practices to make conferences more active are slowly being taken on by other groups, especially “active applause” (standing ovations for everyone). Activity breaks like Instant Recess during plenary sessions and mid-day physical activity opportunities are much less common, so please become an advocate for active conferences in other organizations. The 2014 evening dance event was organized by Dr. Kate Murray at UCSD who is studying physical activity promotion among African refugees. A memorable moment was when a group of women in beautiful Somali attire led a singing and dancing procession through the poster session and back to the dance venue. We would like these kinds of activity sessions to become the norm, at least at physical activity meetings.

The papers and commentaries included in this supplement were selected from presentations at the 2014 ALR Conference and highlight the movement from niche to norm of active living in various sectors. The following two sections comment on some of these research and practice papers, focusing on schools and built environments.

From Niche to Norm in Schools Written by: Erin R. Hager

Schools are considered an ideal pediatric obesity prevention/health promotion site because the vast majority of children in the United States attend school, spend a great deal of time in school (second to home), and consume up to half of their daily calories in school (Story et al., 2009). In an effort to promote healthy eating and physical activity in schools, the federal government passed legislation in 2004 (Nutrition et al., 2004) and 2010 (Healthy Hunger-Free Kids Act of, 2010, 2010), mandating written local wellness policies (LWPs) in schools and enhancing regulations around all food sold in school. Regulations surrounding physical activity and physical education (PA/PE) in schools may be included as part of written LWPs, but the decisions about implementation are left to the school districts. Probably because of the weak policy, few states have strong PA/PE regulations, as Monnat et al. (2014—in this issue) demonstrate in their evaluation of state-level PE policies for elementary schools in this supplement. Thus, further work to strengthen school PA/PE policies should be prioritized.

Researchers in the ALR network have long promoted and studied physical activity in schools, through classroom activity breaks, quality PE, active recess, etc. In recent years, physical activity promotion in schools has begun to move from niche to norm, as shown in the papers in this supplement. Carson et al. (2014—in this issue) evaluated the implementation and impact of the Center for Disease Control and Prevention (CDC) Comprehensive School Physical Activity Programs (CSPAP), finding that CSPAP teacher training has the potential to improve the physical activity of students. CSPAP is a five component approach: 1—quality PE, 2—physical activity during school (recess, classroom activity breaks, and physical activity integrated into classroom learning), 3—physical activity before and after school, 4—staff involvement, and 5—family and community engagement. The goal is for schools to enable their students to achieve the recommended 60 min of MVPA each day, while also developing the skills, knowledge, and confidence to be active into adulthood (Centers for Disease Control and Prevention, 2013). CSPAP is being disseminated nationally through CDC initiatives, and has the potential to increase physical activity among school-aged children.

Schools are introducing innovative strategies to enhance physical activity. Through a randomized controlled trial, Wells et al. (in this issue) explored the use of school gardens to promote physical activity among elementary school students and Beyler et al. (2014—in this issue) evaluated the physical activity impact of structured/active recess. Alhassan and Whittt-Glover (in this issue) took an approach used previously in elementary schools and examined its fidelity in preschools, led by teachers. Each of these studies demonstrates the challenges of increasing physical activity in schools and highlights the barriers that we need to overcome before physical activity in schools becomes the norm.

There are several areas of physical activity promotion in schools that need further research attention. For example, there is a growing body of evidence supporting the link between physical activity and academic success (Fedewa and Ahn, 2011; Singh et al., 2012). As researchers, we need to continue to examine how physical activity promotion programs and policies impact academic achievement, to convince policy makers of physical activity’s value for meeting academic goals. The sustainability of programs, such as CSPAP, without external funding, needs to be examined. Recent federal legislation (United States Department of Agriculture, 2014) calls for schools to evaluate the implementation of LWPs and report on school-level health promotion efforts. This will require the development of evaluation tools that schools and school systems can use to measure compliance with policies and impact of programs. Researchers should be encouraged to partner with state departments of education and school systems to assist in this evaluation process.

The Institute of Medicine recently recommended that schools become the “Heart of Health”, providing opportunities for healthy eating and physical activity for all students (Institute of Medicine, 2012). Though the papers in this supplement mainly document persistent challenges to improving PA/PE in schools, they also point to the need for additional research that can help schools overcome barriers. A continued focus is needed on schools as a pediatric obesity prevention/health promotion site, where physical activity promotion should be the norm.
Niche to norm for built environments
(written by Erualdo R. González)

The built environment is often referred to as buildings, parks, walking trails, sidewalks, streets, and the arrangement and design of built elements. A key question is: how do land use policies and built environment quality and availability facilitate, mediate, or constrain opportunities for engaging in physical activity? This Special Issue is an example of ALR’s on-going commitment to built environment research and its translation to policy and practice. For example, Zhu et al. (in this issue) quasi experimental study in Austin, Texas examined resident physical activity after moving to a community that provided the opportunity to be active in quality built environments, with compact land uses, grid-like street networks, and rich green/open spaces. The study’s retrospective pre/post design improves on the literature on walkable communities that is largely cross sectional. The evaluation of Dill et al. (2014–in this issue) of bicycle boulevards shows the promise of this relatively low-cost approach to providing bicyclists with the safer riding conditions they crave. The multiple-method evaluation of Engelberg et al. (2014–in this issue) assessed an open streets event in Southern California designed to temporarily repurpose the built environment of public streets to provide people an option to cycle, roll, walk, and run on car-free streets. The evaluation methods were comprehensive, including city-wide surveys, surveys of attendees and local businesses, and other process measures. Alfonzo et al. (2014–in this issue) examined the connections among the design of the built environment, walking, and obesity in six neighborhoods with different built environment qualities in China. The study offers a methodological advancement in that it examines features of the built environment that are uncommon in the United States, such as obstruction of sidewalks by vendors and overhead pedestrian bridges. Collectively, these studies illustrate advances in built environment research by moving beyond cross-sectional designs and expanding the range of attributes being studied.

Built environment research is particularly relevant for disinvested, racial and ethnic populations, and working-class neighborhoods. There is growing evidence of adverse health outcomes, such as obesity, among disadvantaged groups that are attributed to by a lack of quality neighborhood built environment infrastructure, such as quality open spaces (Lopez and Hynes, 2009). In a synthesis of research on the environment and physical activity of children and adolescents, Taylor and Lou (2011) reviewed 22 studies and found communities with predominantly racial and ethnic minority and lower-income residents lacked features that support walking and had limited access to well maintained or safe parks. This synthesis aligns well with research on Latinos and physical activity environments. For example, disproportionate numbers of Latinos live in low-income neighborhoods with environments that make it difficult for them to make healthy choices (Woodward-Lopez and Flores, 2006). These areas tend have few well-equipped, safe parks or other public spaces in which children can be active.

Papers in this Special Issue exemplify how issues of disparities are becoming embedded in the field of active living research. Several school interventions explicitly targeted schools serving disadvantaged youth (Alhassan and Whitt-Glover, in this issue; Beyler et al., 2014–in this issue; Wells et al., in this issue). Two papers addressed joint use agreements (Kanters et al., 2014–in this issue; Slater et al., in this issue), which are viewed as a promising strategy to provide safe and convenient recreation space in low-income neighborhoods, particularly those neighborhoods that lack these spaces. The open streets evaluation documented a need to expand outreach to low-income and racial-ethnic minority residents (Engelberg et al., 2014–in this issue). Two studies of parks evaluated disparities (Han et al., 2014–in this issue; Kamel et al., 2014–in this issue). These papers and others in the broader literature are developing an evidence base that can be used to inform actions to reduce disparities in built environments, programs, and physical activity.

The 2014 ALR Annual Conference was a celebration of the substantial and growing evidence base and many successes in translating that evidence to policy and practice in the US and other countries. Though the field has produced substantial research, the theme, niche to norm, reminds scholars and practitioners that there is much work to be done. The Conference presentations highlighted the long distance we have to travel before environments designed for active living are the norm and policies are in place to ensure equal access to safe places and effective programs to support active living. The obesity epidemic and persistent disparities in built environments in the US remind us of the need to improve the translation of evidence to actions that improve health equity and health justice (González and Mouttapa, 2014), and to get policymakers to integrate research findings into their decisions on built environments, policy, and active living resource allocation. We hope the research papers, practice reports and commentaries in this Special Issue of Preventive Medicine provide useful information and inspiration to make even better progress in moving active living from niche to norm.

Conflict of interest

The authors declare that there are no conflicts of interests.

Acknowledgments

Active Living Research (ALR) receives funding from the Robert Wood Johnson Foundation to help support the ALR Annual Conference.

References

Active Living Research, 2013. Active Living Research Instant Recess Break. [video online] Available at: https://www.youtube.com/watch?v=6BHlAiPAr6&feature=youtu. be&list=UUox-kXnYNB0qKXhOGJneVAg (Accessed 8 October 2014).

Available at: https://www.youtube.com/watch?v=e6iHAiPsAeQ&feature=youtu. be&list=UUox-kXnYNB0qKXhOGJneVAg (Accessed 8 October 2014).


Keshia M. Pollack
Department of Health Policy and Management, Johns Hopkins Center for Injury Research and Policy, Johns Hopkins Bloomberg School of Public Health, Baltimore, MD 21205, USA
Corresponding author.
E-mail address: kpollac1@jhu.edu.

Erualdo R. González
Department of Chicana and Chicano Studies, California State University, Fullerton, 800 N. State College Blvd., Fullerton, CA 92832, USA
E-mail address: egonzalez@Exchange.fullerton.edu.

Erin R. Hager
University of Maryland School of Medicine, Departments of Pediatrics and Epidemiology and Public Health, 737 West Lombard Street, Room 163, Baltimore, MD 21201, USA
E-mail address: ehager@peeds.umdaryland.edu.

James F. Sallis
University of California, San Diego, Mail Code 0824, 3900 Fifth Avenue, Suite 310, San Diego, CA 92103, USA
E-mail address: jsallis@ucsd.edu.