

28 December 2014 – 9 January 2015

HBEP FORTNIGHTLY LITERATURE REVIEW

REFERENCE	DESCRIPTION	ALERT SOURCE	KEYWORDS
GENERAL POLICY AND RESEARCH			
Lemon, S. C., Goins, K. V., Schneider, K. L., Brownson, R. C., Valko, C. A., Evenson, K. R. et al. In press. 'Municipal officials' participation in built environment policy development in the United States.' <i>American Journal of Health Promotion.</i> http://www.ajhpcontents.com/doi/abs/10.4278/ajhp.131021-QUAN-536	This article examines governmental officials' involvement in built environment policies focused on land use design, transportation and parks. A group of 453 governmental officials (i.e. public health, planning, transportation, public works, community development, parks and recreation, city management) in 83 US urban areas (populations >50000) completed an online survey about their perceptions of importance, barriers and beliefs about physical activity and the built environment. Analysis of the data reveals that public health officials reported the lowest participation in built environment policies related to increasing physical activity. An awareness of the relationship between physical activity and the built environment was associated with land use design and transportation policy participation. Perceived lack of collaboration was a reported barrier to policy participation. These results indicate a need to collaborate with the public health sector to help promote the relationship between health and the built environment.	GPAN	Physical activity; built environment; transportation; parks; government officials; policy
Rabiee, F., Robbins, A. & Khan, M. 2014. 'Gym for free: The short-term impact of an innovative public health policy on the health and wellbeing of residents in a deprived constituency in Birmingham, UK.' <i>Health Education Journal Online.</i> http://hej.sagepub.com/content/early/201	This article evaluates the impact of providing free access to leisure facilities for adults in an economically deprived area of Birmingham. A group of 257 adults completed a questionnaire about their participation in the free access to their local recreational facility program as well as perceived changes in their health and wellbeing. Three focus groups were conducted to	GPAN	Physical activity; recreational facilities; social opportunities; socio-economic status; policy

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4/10/31/0017896914553957.abstract *	provide further insight about experiences and ideas for improvements. Analysis of the data reveals a significant increase in the proportion of participants who used the facilities daily prior to and after the initiation of the free access program ($p < .05$). Reasons for participating in the scheme were related to improving health (e.g. increased energy levels, stress relief, loss of body fat, eating healthier foods), economic incentive and social opportunities. Offering free access to local gyms may provide physical, mental and social benefits while increasing gym participation among community members.		
GETTING PEOPLE ACTIVE			
Duncan, G.E., Cash, S.W., Horn, E.E. & Turkheimer, E 2015. 'Quasi-causal associations of physical activity and neighborhood walkability with body mass index: A twin study.' <i>Preventive Medicine</i> 70 (January 2015): 90-95. http://www.ncbi.nlm.nih.gov/pubmed/25482422	This article assesses physical activity, neighbourhood walkability and body mass index among twins. Data taken from the University of Washington Twin Registry reported frequency of physical activity. Neighbourhood walkability for each of the 6376 participants' residences was measured using WalkScore as well as a walkability index (land use mix, intersection density and residential density). Statistical analysis of the data reveals that neighbourhood walkability had minimal effect on moderate to vigorous physical activity levels. However, neighbourhood walkability was found to be associated with neighbourhood walking. These findings suggest that design of the neighbourhood may accentuate incidental bouts of physical activity through leisurely neighbourhood walks.	SS	Physical activity; neighbourhood walkability
Christiansen, L.B., Madsen, T., Schipperijn, J., Ersbøll, A.K. & Troelsen, J. 2014. 'Variations in active transport behavior among different neighborhoods and across	This article examines neighbourhood walkability, residential self-selection and active transport. A walkability index consisting of four variables (residential density, land use mix, intersection density		Active transport; neighbourhood walkability; residential self-

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<p>adult life stages.' <i>Journal of Transport and Health</i> 1 (4): 316-325. http://www.sciencedirect.com/science/article/pii/S2214140514000863</p>	<p>and retail floor-area ratio) was calculated for 16 districts in Denmark. Socioeconomic characteristics were also retrieved for each district. A group of 642 respondents completed questions relating to transport frequency and reasons for moving to the area. Respondents were separated into three groups: young adults without children, midlife adults without children and parents with children. Logistic regressions reveal that the most important reason for moving involved feeling safe, cycling friendliness, walking friendliness and accessibility to green areas. Distance to recreation areas and access to highways were significantly important for parents. Significant relationships were also found for access to green areas for young adults and distance to place or education for midlife adults. Associations between neighbourhood walkability and active transport were moderated by life stages. Parents living in a high walkable area had higher odds of cycling. These findings suggest that in light of the Danish cycling culture, effects of built environment attributes on active transport vary across the life stages. Particular amenities suited to life stage interests may contribute to more opportunities for active transport.</p>		selection; life stages
<p>Seguin, R., Connor, L., Nelson, M., Lacroix, A. & Eldridge, G. 2014. 'Understanding barriers and facilitators to healthy eating and active living in rural communities.' <i>Journal of Nutrition and Metabolism</i> 2014: art. no. 146502 http://www.hindawi.com/journals/jnme/2014/146502/*</p>	<p>This article investigates the barriers and facilitators to physical activity and healthy eating in rural communities. Focus groups were conducted among women (30-84 years) in seven US states. Reviews of the transcripts reveal that accessibility to recreational facilities, limited time and social norms were reported as the main barriers to physical activity. Dog walking, social support and access to recreational facilities were found to promote physical activity. Barriers to healthy</p>	SS	Physical activity; healthy eating; perceptions; built environment; rural areas

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	eating included expense, larger portion sizes and frequency at which food is eaten outside of the home. Facilitators to healthy eating included local food gathering and food preserving (e.g. canning and smoking). Creating areas for physical activity in rural areas may increase the opportunities for residents to do so. In relation to healthy eating, cultural traditions and access to healthier retail outlets can help maintain healthier eating patterns.		
CONNECTING AND STRENGTHENING COMMUNITIES			
Chaufan, C., Yeh, J., Ross, L. & Fox, P. 2015. 'You can't walk or bike yourself out of the health effects of poverty: Active school transport, child obesity, and blind spots in the public health literature.' <i>Critical Public Health</i> 25 (1): 32-34. http://www.tandfonline.com/doi/abs/10.1080/09581596.2014.920078#.VN_J8bCsVI_E	This article reviews the relationships among active school transport, obesity and poverty. School transport data was taken from 168 schools participating in the California Safe Routes to Schools program where environmental and community interventions are used to increase the numbers of children walking to school. Obesity levels of the children were retrieved from the 2010-2011 Physical Fitness test and school level data provided approximations of child poverty levels. Statistical analyses reveal that schools where children engaged in more active modes of school travel had higher rates of childhood obesity. Schools with higher active transport rates generally have higher percentages of children in poverty. These findings support the evidence of environmental and community changes improving health. However, it highlights the necessity to address child poverty if we are to effectively improve the health of all children.	SS	Active transport to school; obesity; socio-economic status; health inequity
Rabiee, F., Robbins, A. & Khan, M. 2014. 'Gym for free: The short-term impact of an innovative public health policy on the health and wellbeing of residents in a	This article evaluates the impact of providing free access to leisure facilities for adults in an economically deprived area of Birmingham. A group of 257 adults completed a questionnaire about their participation in	GPAN	Physical activity; recreational facilities; social opportunities;

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<p>deprived constituency in Birmingham, UK.' <i>Health Education Journal Online.</i> http://hej.sagepub.com/content/early/2014/10/31/0017896914553957.abstract *</p>	<p>the free access to their local recreational facility program as well as perceived changes in their health and wellbeing. Three focus groups were conducted to provide further insight about experiences and ideas for improvements. Analysis of the data reveal a significant increase in the proportion of participants who used the facilities daily prior to and after the initiation of the free access program ($p < .05$). Reasons for participating in the scheme were related to improving health (e.g. increased energy levels, stress relief, loss of body fat, eating healthier foods), economic incentive and social opportunities. Offering free access to local gyms may provide physical, mental and social benefits while increasing gym participation among community members.</p>		socio-economic status; policy
<p>Kamel, A.A., Ford, P.B. & Kaczynski, A.T. 2014. 'Disparities in park availability, features, and characteristics by social determinants of health within a U.S.-Mexico border urban area.' <i>Preventive Medicine</i> 69S (December 2014): S111-S113. http://www.ncbi.nlm.nih.gov/pubmed/25451326</p>	<p>This article examines the disparities in neighbourhood quality, park availability and safety within an ethnic community. Data was taken for 112 census tracts in Texas where 80% of the residents are Hispanic or Latino. Each census tract was categorised as low, medium and high income. Park locations were geocoded. The Community Park Audit Tool provided assessments of aesthetic features, park quality/safety (e.g. threatening behaviour) and neighbourhood quality/safety (e.g. graffiti, inadequate lighting) for all parks in the study area. Statistical analysis of the data reveals that medium income areas significantly had more park facilities than the low or high-income areas. The low and medium income areas had significantly more park quality/safety concerns than the high-income areas. These findings suggest an unequal distribution of safe recreational facilities across neighbourhoods. An</p>	SS	Park availability; neighbourhood quality; health equality

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	understanding of such disparities can help governmental officials and other policy makers advocate improved access and quality of parklands for all.		
PROVIDING HEALTHY FOOD OPTIONS			
Gichunge, C. & Kidwaro, F. 2014.'Utamu waAfrika (the sweet taste of Africa): The vegetable garden as part of resettled African refugees' food environment.' <i>Nutrition and Dietetics</i> 71 (4): 270-275. http://onlinelibrary.wiley.com/doi/10.1111/1747-0080.12143/abstract	This article describes the role of gardens among resettled African refugees living in Queensland. Interviews were conducted with 13 community or home gardeners. Analysis of the interview revealed three themes: food access and affordability; enhanced mental and physical wellbeing; and barriers to gardening (limited knowledge, size of garden and expense of manure). The results of this study show that through gardening, culturally familiar and healthy foods can be made available at lower costs. Growing fresh foods may not only assist households in maintaining healthy diets but may be an important component in helping populations attain food security.	SS	Food security; community garden; healthy eating
Gordon-Larsen, P. 2014. 'Food availability/convenience and obesity.' <i>Advances in Nutrition</i> 5 (6): 809-817. http://www.ncbi.nlm.nih.gov/pubmed/25398746	This article identifies the issues among the literature regarding neighbourhood access to healthy foods. A review of the literature suggests that mixed results in regard to neighbourhood access to food and obesity levels are related to research methodology. Most studies involve cross-sectional observational studies. A consistently defined area of study is needed (e.g. comprehensively assessing supermarkets, grocery and convenience stores). Future research should include prospective and intervention studies as well as broadening the location of studies (e.g. travel corridors from home to work).	SS	Neighbourhood food environments; access; research issues; recommendations
Seguin, R., Connor, L., Nelson, M., Lacroix, A. & Eldridge, G. 2014. 'Understanding barriers and facilitators to healthy eating'	This article investigates the barriers and facilitators to physical activity and healthy eating in rural communities. Focus groups were conducted among	SS	Physical activity; healthy eating; perceptions; built

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<p>and active living in rural communities.'</p> <p><i>Journal of Nutrition and Metabolism</i> 2014:</p> <p>art. no. 146502</p> <p>http://www.hindawi.com/journals/jnme/2014/146502/ *</p>	<p>women (30-84 years) in seven US states. Reviews of the transcripts reveal that accessibility to recreational facilities, limited time and social norms were reported as the main barriers to physical activity. Dog walking, social support and access to recreational facilities were found to promote physical activity. Barriers to healthy eating included expense, larger portion sizes and frequency at which food is eaten outside of the home. Facilitators to healthy eating included local food gathering and food preserving (e.g. canning and smoking). Creating areas for physical activity in rural areas may increase the opportunities for residents to do so. In relation to healthy eating, cultural traditions and access to healthier retail outlets can help maintain healthier eating patterns.</p>		<p>environment; rural areas</p>

* denotes an item which has been placed in a number of different categories