

**FOSTERING PARTNERSHIPS**  
to Promote Health in Central  
Massachusetts and Beyond



# 2018 Annual Report to Stakeholders





# UMass Worcester Prevention Research Center (PRC) 2018 Annual Report

Welcome to the 2018 UMass Worcester PRC's Annual Report!

We are pleased to show you highlights of our collaborative applied public health research, student mentorships, and involvement in our home city of Worcester, Massachusetts.

A highlight of the year was to be invited by the American Academy of Medical College (AAMC) to create a video of our research project called Healthy Kids & Families for their 2018 Health Equity Snapshot. You can also read about our research with the Physical Activity Policy Research Network (PAPRN+), including our guidance for how local health departments can actively participate in local decisions that encourage opportunities for people to walk and bike in their communities. In this report, find out about various collaborative projects with the Worcester Division of Public Health, including the Greater Worcester Community Health Improvement Plan and Greater Worcester Regional Youth Health Survey.

It is a delight to mentor students, and to see their careers flourish. We congratulate Christina Griecci (Haughton) for earning her PhD at UMass Medical School. She was instrumental in launching and supporting our applied research project Healthy Kids & Families.

We truly value the partnerships formed through this work! We would particularly like to thank members of the Community Advisory Board for their ongoing support and guidance.

Enjoy!

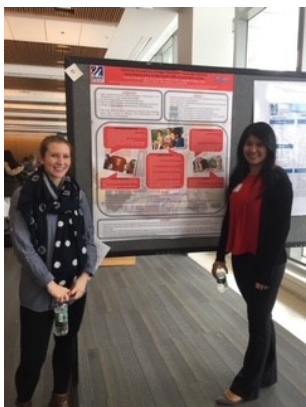
Stephenie C. Lemon, PhD & Milagros C. Rosal, PhD  
Co-Directors



Stephenie C. Lemon, PhD



Milagros C. Rosal, PhD



Christina Haughton and Meera Sreedhara disseminating research results at conferences.  
Marline Ruiz sharing messages about prevention at the Massachusetts State House.

# Our Vision and Mission

We accomplish our Vision and Mission by being:

1. A leader in community health research at UMass Medical School,
2. An integral part of Greater Worcester’s collaborative public health system,
3. A research partner that addresses real-world challenges across Massachusetts,
4. A national model for research that connects academia, public health, community and health care systems.

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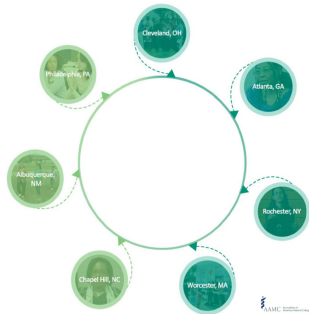
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**OUR VISION** - Optimal health of communities, families and individuals.

**OUR MISSION** - To promote health and prevent disease and disability through: real-world community engaged research, evidence-based practice, and education.



# Healthy Kids & Families Featured in Video! 2018 Health Equity Snapshot



Healthy Kids & Families, UMass Worcester PRC's applied research project, was featured in a video as part of the the Association of American Medical Colleges (AAMC) 2018 Health Equity Research Snapshot!

The 2018 Health Equity Research Snapshot showcased videos of seven PRC's from medical schools with a Preventive Medicine residency program. The videos featured innovative community-partnered research and explored how people and their communities are preventing or addressing chronic illnesses.

Watch our video to see how Healthy Kids & Families was designed to prevent childhood obesity, a health priority identified in the Greater Worcester Community Health Improvement Plan. Learn about the program from the voices of a community partner, Co-Director Milagros C. Rosal, study coach Marline Ruiz and a family.

To see the video, click here:  
[www.aamc.org/healthequitysnapshot](http://www.aamc.org/healthequitysnapshot)  
Ours is labeled Worcester, MA!



Cooking with families, as shown in the video!



“We hope that by intervening early in childhood...we will be able to make a difference for these kids and their families.”

Milagros C. Rosal, PhD  
Co-Director of Healthy Kids & Families

## Snapshots of the video!



Family



Marline Ruiz, Coach



Milagros C. Rosal, PhD

# Promoting Public Health in Local Active Transportation Decisions

About 80% of adults do not meet physical activity recommendations. How can we encourage people to be more active? One way is through "active transportation" so that people can safely walk and bike to work, school and other activities. The UMass Worcester PRC is part of a CDC-funded network called the Physical Activity Policy Research Network Plus (PAPRN+). The goal of PAPRN+ is to increase the number of people who are physically active through policy research and its application. Since 2014, UMass Worcester PRC's Dr. Stephenie C. Lemon and Karin Valentine Goins have led a PAPRN+ research team. The goal of this research team has been to identify skills, responsibilities, and training that can help local health departments and public health stakeholders improve physical activity opportunity by contributing to local decisions about transportation and land use.

## Step 1 – Identifying capabilities

In 2015, the team asked over 50 professionals in transportation, land use planning, public health and advocacy how public health agencies could help improve opportunities for walking and bicycling. The team then grouped responses into 10 capabilities (standards), organized by what actions might be reasonable for public health agencies with varied resources. The group created a document called *Capabilities for Public Health Agency Involvement in Land Use and Transportation Decision Making to Increase Active Transportation Opportunity*. Agencies can use this document for strategic planning.

## Step 2 - Identifying current responsibilities and interest in training/technical assistance

Next, the research team wanted to learn what public health agencies were prioritizing for both action and training/technical assistance in these areas. The team surveyed small and mid-size public health agencies about their work in the 10 capabilities previously identified. The survey found:

- Nearly half of public health agencies were **not** working in these areas.
- If they were working in these areas, they were more likely to be promoting walking and biking and less likely to be focusing on safety, injury prevention, and improving infrastructure.
- Few were responsible for fostering relationships and policy education with government officials, developing or reviewing transportation or land use policies and plans. Even fewer reported being engaged in active transportation or built environment work.
- More agencies were interested in training or technical assistance in community education or mobilizing the community than in policy or plan development.

## Spreading the Word!

Research partners have been actively sharing this information via manuscripts, conferences, social media, and a blog series in partnership with NACCHO (National Association of County & City Health Officials).



## Collaborators

- UMass Worcester PRC: Stephenie C. Lemon, PhD, Karin Valentine Goins, MPH, Meera Sreedhara, MPH, UMass Medical School
- Mariana Arcaya, ScD, Massachusetts Institute of Technology
- Semra Aytur, PhD, University of New Hampshire
- Katie M. Heinrich, PhD, Kansas State University
- Bridget Kerner, MS, National Association of County and City Health Officials (NACCHO)
- Rodney Lyn, PhD, Georgia State University
- Jay Maddock, PhD, Texas A&M University
- Robin Riessman, MPH, University of Massachusetts Amherst
- Thomas L. Schmid, PhD, Centers for Disease Control and Prevention:

## Funding

This work is funded by cooperative agreement number U48DP005031 from the Centers for Disease Control and Prevention.



# Greater Worcester Regional Youth Health Survey (RYHS)

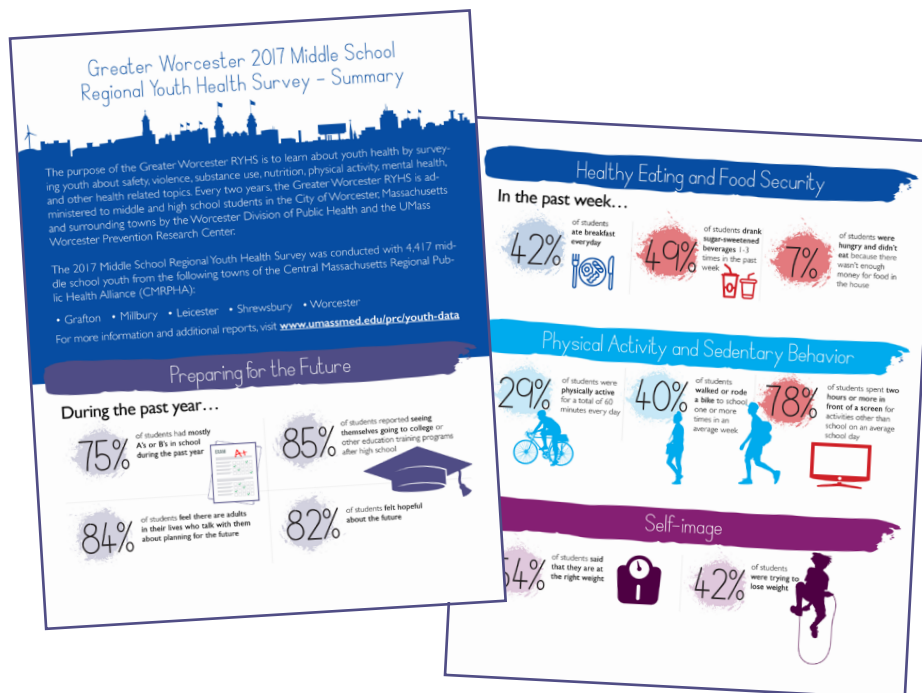
Did you know...84% of middle school students in the Greater Worcester area felt that there are adults in their lives that they can talk to about their future? How about that 24% of high school students reported eating 2 or more servings of fruit per day?

Since 2013, the Worcester Division of Public Health and UMass Worcester PRC have partnered to develop, implement and analyze the Greater Worcester RYHS. We surveyed youth behavior in relationship to safety, violence, substance use, nutrition, physical activity, mental health and other related topics.

In 2013, 2015 and 2017, the surveys were administered to students in the following cities and towns: Grafton, Millbury, Leicester, Shrewsbury and Worcester.

Christine Frisard, UMass Worcester PRC biostatistician, led the data analysis. During the summer of 2018, Larissa Happi, a graduate student in Clark University's Community and Global Health program, joined us as an intern from the Academic Health Collaborative of Worcester. During her internship, Ms. Happi turned the data from 2013, 2015 and 2017 into public reports, which are now available from UMass Worcester PRC's website.

In this way, these reports are the result of a successful collaboration among the Worcester Division of Public Health, the Academic Health Collaborative of Worcester and the UMass Worcester PRC.





# Strong Collaborations Guide Public Health in the Greater Worcester Area

In 2018, we were active collaborators on many initiatives in Worcester. These efforts included partnering to evaluate the 2016 Greater Worcester Community Health Improvement Plan (CHIP) and implement its *Access to Healthy Foods and Physical Activity* Priority Areas. Our work included sharing expertise for the redesign of Kelley Square, joining forces with the Worcester Food Policy Council, and launching the inaugural Greater Worcester Public Health Grand Rounds.



## Greater Worcester CHIP

UMass Worcester PRC's Suzanne Cashman, ScD continued in the important work as a Steering Committee member for the Coalition for a Greater Healthy Worcester. In addition, as Co-Chair of the Research and Evaluation Subcommittee, she led a team to track progress on the 31 objectives of the 9 Greater Worcester CHIP domains. Joined by UMass Worcester PRC statistician Christine Frisard, the group

reviewed and often revised the objectives so that they could be measured, making sure that they were SMART (specific, measurable, achievable, relevant and timely.) In November 2018, this work was publicly released as the 2017 Greater Worcester Community Health Improvement Plan Annual Report.

**Access to Healthy Food:** The Worcester Food Policy Council worked tirelessly to *foster a healthy and just food system for all*. UMass Worcester PRC's Amy Borg continued to be actively involved in this coalition, comprised of representatives of many dedicated community organizations. In 2018, the Worcester Food Policy Council's work included:

- Overseeing the implementation of the Greater Worcester CHIP's Access to Healthy Food Priority Area,
- Promoting the Massachusetts Healthy Incentive Program (HIP) so that participants in the Supplemental Nutrition Assistance Program (SNAP) could receive additional fruits and vegetables at local farmer's markets,
- Collaborating with the City of Worcester to craft a local ordinance to allow urban agriculture.

**Physical Activity:** To promote physical activity in Worcester, UMass Worcester PRC's Karin Valentine Goins was active in the Greater Worcester CHIP Physical Activity priority area. Part of this work involved seeking to implement the Complete Streets policy in Worcester, designing streets for driving, biking and walking, and creating spaces for people to be active.

## Greater Worcester CHIP

The Greater Worcester CHIP is a blueprint to improve health in:

- Worcester
- Grafton
- Holden
- Leicester
- Millbury
- Shrewsbury
- West Boylston

Managed by the Coalition for a Greater Healthy Worcester, it is a collaborative effort of:

- Worcester Division of Public Health (WDPH)
- Central Mass Regional Public Health Alliance (CMRPHA)
- Fallon Health
- UMass Memorial Medical Center
- over 1500 individuals and many agencies.



UMass Worcester PRC's Suzanne Cashman, ScD with co-chair Nikki Nixon, Worcester Division of Public Health, presenting the 2017 Greater Worcester CHIP

## Redesigning Worcester's Kelley Square to make it safer to drive, walk and bike

Worcester's Kelley Square is the intersection with the most crashes in the state of Massachusetts! The Massachusetts Department of Transportation and the City of Worcester created a team of traffic experts, public health advocates, engineers, city planners, and the public to redesign the intersection. The goal was to address the safety and operational deficiencies faced by all users, including motorists, bicyclists and pedestrians, while also supporting the local businesses and residents in Kelley Square.

UMass Worcester PRC's Karin Valentine Goins, an advocate for walking and biking and co-founder of the volunteer advocacy group WalkBike Worcester, was actively involved in the effort. As a member of Worcester's Complete Streets implementation team, she provided valuable input into the Road Safety Audit and public hearings. This fast-tracked project is benefiting from such a thoughtful and inclusive process and is expected to be completed by 2020.



*Karin Valentine Goins reviewing redesign plans for Kelley Square*

## Greater Worcester Public Health Grand Rounds

### ***Tackling the Opioid Crisis in Worcester: What Massachusetts Linked Databases Tell Us About Potential Next Steps***

UMass Worcester PRC, the City of Worcester Office of Health and Human Services and the Worcester Division of Public Health partnered to organize a Greater Worcester Public Health Grand Rounds on May 24, 2018. The public health grand rounds addressed the Greater Worcester CHIP's Substance Use Priority Area's objective to decrease opioid overdoses in the region. UMass Worcester PRC's Tom Land, PhD described how data from linked statewide databases could identify priorities for tackling the opioid crisis in Worcester. Worcester Health and Human Services Commissioner Dr. Matilde "Mattie" Castiel added information about local Worcester priorities and initiatives to combat this issue.

With over 100 people attending from various sectors including mental health, public health and law enforcement, the event was a success!



*Road Safety Audit, Kelley Square, Worcester*



**Tackling the Opioid Crisis in Worcester:**  
What Massachusetts Linked Databases  
Tell Us About Potential Next Steps

Presented by:  
Thomas Land, PhD  
UMass Worcester Prevention Research Center  
Associate Professor  
Division of Preventive and Behavioral Medicine  
UMass Medical School

Discussant:  
Matilde "Mattie" Castiel, MD  
Worcester Health and Human Services Commissioner

Thursday, May 24, 2018  
2:00 – 3:00 PM  
Levi Lincoln Chamber  
Worcester City Hall

This session is the inaugural event of Greater Worcester Public Health Grand Rounds. It is sponsored through a collaboration of the UMass Worcester Prevention Research Center and the Worcester Division of Public Health, and will focus on public health topics that are important to the Greater Worcester community.



# UMass Worcester PRC Students and Trainees

At UMass Worcester PRC, students and post-doctoral fellows make valuable contributions to our work as they develop research skills. Their work takes many forms, such as conducting literature searches, writing research summaries to share with community audiences, creating social media posts, designing and implementing interventions, collecting assessment data with study participants, analyzing data, writing manuscripts, creating posters, and presenting at conferences.

## New interns in 2018!

### Collaboration with the Eureka! program with Girls Inc. Worcester

Mia Dattis and Julia DuCharme joined our team as high school interns. They are part of the Girls Inc. of Worcester Eureka! program. Mia is a student at the Abby Kelley Foster Charter School, and Julia, at North High School. We are proud that Julia was selected to serve on the National Girls Inc. Teen Advocacy Council, helping to lead the #GirlsToo movement to end sexual harassment and violence.

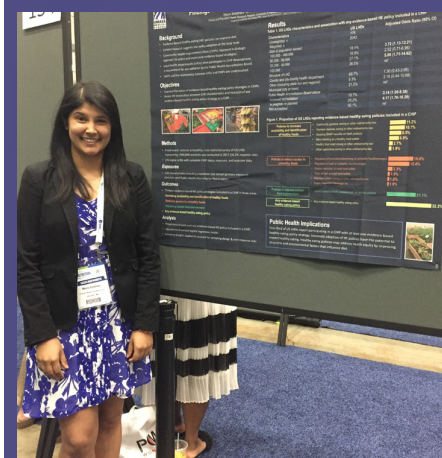
### Collaboration with the Academic Health Collaborative of Worcester

Larissa Happi, a graduate student in Clark University's Community and Global Health program, joined us as an intern through the Academic Health Collaborative of Worcester. She dedicated her time to creating new reports for the 2013, 2015, and 2017 Greater Worcester Youth Health Survey.

Name	Training Program	Research Study
Meera Sreedhara, MPH	UMass Medical School Clinical and Population Health Research (CPHR) program	<ul style="list-style-type: none"> <li>Healthy Kids &amp; Families, UMass Worcester PRC's applied research project</li> <li>PAPRN+ (Physical Activity Policy Research Network)</li> </ul>
Andrea Lopez-Cepero, MHSN	CPHR doctoral program	<ul style="list-style-type: none"> <li>Healthy Kids &amp; Families, UMass Worcester PRC's applied research project</li> <li>The Fresh Start Trial, Center for Health Equity Research</li> </ul>
Karen Ashe, MS, MSNP	CPHR doctoral program	MSWeight: Weight Management Counseling in Medical Schools: A Randomized Controlled Trial
Larissa Happi	Academic Health Collaborative of Worcester, Clark University's Community and Global Health program	Greater Worcester Regional Youth Health Survey
Jon Velez	UMass Medical School Health Sciences Preparatory Program	Healthy Kids & Families: UMass Worcester PRC's applied research project
Mia Dattis	Girls, Inc Worcester Eureka! High School Intern program	Healthy Kids & Families: UMass Worcester PRC's applied research project
Julia DuCharme	Girls, Inc Worcester Eureka! High School Intern program	Healthy Kids & Families: UMass Worcester PRC's applied research project



Andrea Lopez-Cepero



Meera Sreedhara



Mia Dattis, Milagros Rosal, Stephanie Lemon, Amy Borg, Larissa Happi, Julia DuCharme

# Former UMass Worcester PRC Trainees and Fellows - Where Are They Now?

UMass Worcester PRC is fortunate to host many students and post-doctoral fellows who make valuable contributions to our research as they develop skills and learn. We are grateful to have gotten to know them, and they have all gone on to do wonderful things.

Please read on!

## **Valerie Silfee, PhD, former post-doctoral fellow**

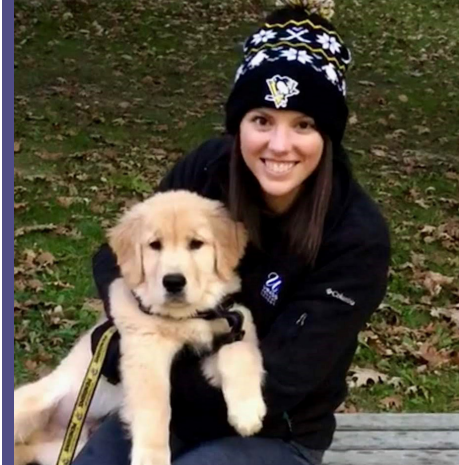
Since completing my post-doctoral fellowship with the UMass Worcester PRC, I was offered a position as Director of Lifestyle Intervention at UPMC Health Plan of the University of Pittsburgh Medical Center. In this position I oversee the development and evaluation of our suite of behavior change programs designed to help people live a healthier lifestyle by eating healthy foods, being physically active, managing their weight, managing stress, and/or quitting tobacco products. Our health plan offers a variety of opportunities to help people make decisions about their healthy habits, and I make sure that the opportunities we offer are based upon research evidence of what works.

Some of the ways I use my experience with the UMass Worcester PRC in my current position are to include scientific evidence into our programs, translate our curriculum into different formats (such as workbooks and mobile applications), develop new programs, and evaluate the success of our programs in getting people to make a change.

I am also fortunate that UPMC Health Plan is located in my home town of Pittsburgh. Since moving home, my husband and I have bought a house and added a new puppy, Bodhi, to our family.

## **Christina Griecci (Haughton), PhD, former doctoral graduate student**

Since earning a doctorate from UMass Medical Schools' Clinical and Population Health Research (CPHR) doctoral program, I have worked at the Friedman School of Nutrition Science and Policy at Tufts University. I am working with Dr. Fang Fang Zhang, whose research is evaluating the comparative and cost-effectiveness of implementing specific population-based strategies to reduce obesity and obesity associated cancer burden in the United States. My postdoctoral training builds upon my doctoral work around community-level interventions and focuses on population-level strategies. I hope to identify strategies that can effectively improve dietary intake among US children and evaluate early-life nutrition interventions on reducing obesity and chronic disease burden in adulthood.



*Valerie Silfee, PhD*



*Stephenie C. Lemon, PhD, Christina Griecci, PhD, Milagros C. Rosal, PhD*

**Princilla Minkah, PRC Intern from Girls Inc. in 2013, 2014, contributor to various projects through 2018**

I first joined the UMass Worcester PRC in 2013 as an Intern in Girls Inc. of Worcester's Eureka! program. As a rising sophomore in high school, I explored my growing interest in research. I chose to return to the UMass Worcester PRC during the summer of 2014 for a second internship, and then went on to other internships at UMass Medical School. Since then, I have returned to the UMass Worcester PRC and UMass Medical School to work on various research studies during school vacations.

I am now a sophomore at Dartmouth College, majoring in Biology with a minor in Global Health. I am on the pre-med track and hope to attend medical school and enroll in an MD/PhD program with a concentration in infectious diseases/global health. Currently at Dartmouth, my many extracurricular activities include the Dartmouth Cheer Team, the Step Team, council organizations, and many more!

**Monica L. Wang, ScD, former post-doctoral fellow**

Since completing my post-doctoral fellowship with the UMass Worcester PRC, I was offered a position as Assistant Professor in the Department of Community Health Sciences at the Boston University School of Public Health. I continue to serve as an Instructor in the Department of Social and Behavioral Sciences at the Harvard T.H. Chan School of Public Health. Some of my favorite courses to teach are SB800 Obesity in Society (BU) and HCM 708 Social and Behavioral Determinants of Health (Harvard University).

I continue my research in addressing racial/ethnic and socioeconomic disparities in obesity and chronic diseases and the design and evaluation of culturally tailored programs and policies that promote healthy eating and physical activity among underserved children and families. For example, I am working on a K-01 award from the National Institutes of Diabetes and Digestive and Kidney Diseases (NIDDK) to reduce sugar-sweetened beverage purchase and consumption among children and families in partnership with the MA Alliance of Boys and Girls Clubs. I continue to collaborate with the UMass Worcester PRC by collaborating on manuscripts and grant submissions. My husband and I welcomed two new members to our family (two daughters now aged 4 and 2), who keep us busy and on our feet at (seemingly) all times.

**Shir Ginzburg, PhD, former post-doctoral fellow**

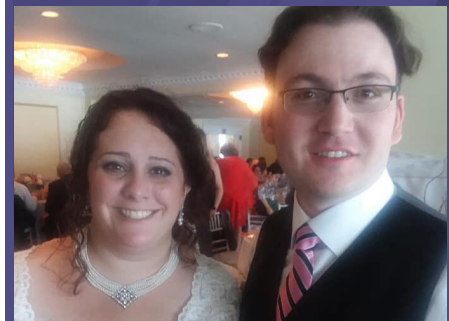
Since completing my postdoctoral fellowship with the UMass Worcester Division of Preventive & Behavioral Medicine, I was offered a position as a project director at the Albert Einstein College of Medicine in New York. My research looks at mental health and reproductive health outcomes among public high school students in the Bronx. I live in central Connecticut and got married in September 2018.



*UMass Worcester PRC interns from Girls Inc. of Worcester Mia Dattis (2018), Princilla Minkah; Julia Grace Ducharme (2018)*



*Monica Wang, ScD*



*Dr. Shir & Igor Ginzburg on their wedding day!*

# Community Advisory Board, Faculty and Staff

We thank each Community Advisory Board member, and UMass faculty and staff!

## UMass Worcester PRC Community Partners, Faculty and Staff

### Community Partners

Martha Assefa  
Manager  
Worcester Food Policy Council

Joanne Calista, MSW  
Executive Director  
Center for Health Impact

Liz Sheehan Castro  
Director of Advocacy  
Worcester County Food Bank

Kelsey Hopkins, MA  
Academic Health Collaborative  
Coordinator  
Worcester Division of Public Health

Judi Kirk, MSPE  
Director of Community Impact  
Boys & Girls Club of Worcester

Mónica Escobar Lowell  
Vice President  
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Toni McGuire, RN, MPH  
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Nikki Nixon, MS  
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Alexis Travis, PhD  
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Shelly Yarnie, MPH  
Director of Local Public Health Initiatives  
Office of Local and Regional Health  
Massachusetts Department of Public  
Health  
Central Regional Health Office

### Faculty

Stephenie C. Lemon, PhD  
Co-Director, UMass Worcester PRC  
Professor of Medicine  
Division of Preventive and Behavioral Medicine

Milagros C. Rosal, PhD  
Co-Director, UMass Worcester PRC  
Professor of Medicine  
Division of Preventive and Behavioral Medicine

Suzanne Cashman, ScD  
Professor  
Family Medicine and Community Health

Thomas Land, PhD  
Associate Professor  
Department of Medicine

Wenjun Li, PhD  
Professor  
Department of Medicine

Judy Ockene, PhD, MEd, MA  
Professor of Medicine and Chief  
Division of Preventive and Behavioral Medicine

Lori Pbert, PhD  
Professor of Medicine  
Associate Chief  
Division of Preventive and Behavioral Medicine

### Staff

Amy Borg, MPH, MEd  
Center Coordinator  
Healthy Kids & Families Project Director  
Division of Preventive and Behavioral Medicine

Christine Frisard, MS  
Biostatistician II  
Division of Preventive and Behavioral Medicine

Karen Ronayne  
Research Coordinator  
Division of Preventive and Behavioral Medicine

Karin Valentine Goins, MPH  
Coordinator, PAPRN+  
Division of Preventive and Behavioral Medicine

## Our Community Advisory Board guides our work through:

- **Feedback, thoughts, and ideas on initiatives**
- **Community perspectives on topics and populations**
- **Feedback on training programs to improve community capacity to participate as research partners**
- **Assistance for dissemination of products and findings (target constituencies, communication methods/ language/format)**
- **Input to establish specific collaborations**
- **Input on evaluation metrics required by the PRC program office**

## Overview

Over one third (36.5%) of U.S. adults are obese, a prevalence that continues to increase nationally and globally. Obesity is associated with many chronic diseases, increased health care costs, and shorter life expectancies. Research has found that people who are able to understand health information are less likely to be obese, but there is limited research about what people know and understand about weight loss (weight literacy). The purpose of this study was to create a weight literacy assessment scale that is based upon research evidence, and that can help to understand what English-speaking and Spanish-speaking individuals know and understand about weight loss.

## Main Questions

- **Questions:** Which evidence-based questions can assess what an individual might know and understand about weight loss?
- **Reliability:** Is the Weight Literacy Scale reliable, with results that are consistent when it is taken a second time?
- **Validity:** Is the Weight Literacy Scale valid, accurately measuring what people know and understand about weight management?

## Study

There were two phases in the study. During Phase 1, the team developed an initial draft of the **Weight Literacy Scale** in English and Spanish, based on a review of the literature, expert revision, and testing with 20 English- or Spanish-speaking individuals. The Scale's questions were modified based on Phase 1 results.

During Phase 2, the revised Scale was tested with 200 English- or Spanish-speaking individuals, and its validity and internal reliability were assessed through a series of statistical tests. A subset of Phase 2 participants completed the Scale two weeks later to assess test-retest reliability. Participant recruitment and study procedures took place in community settings in central Massachusetts for both study phases. The Institutional Review Board at the UMass Medical School approved the study.

## The Bottom Line

The **Weight Literacy Scale** is a reliable and valid research instrument to assess weight literacy among English- and Spanish-speaking adults.

### Source

Wang ML, Little TV, Frisard C, Borg A, Lemon SC, Rosal MC (2018) Development and validation of a Weight Literacy Scale in English and Spanish. PLoS ONE 13(10): e0204678. <https://doi.org/10.1371/journal.pone.0204678>

### Contact

Milagros C. Rosal, PhD | Division of Preventive and Behavioral Medicine | University of Massachusetts Medical School. E-mail: [Milagros.Rosal@umassmed.edu](mailto:Milagros.Rosal@umassmed.edu)



## Spotlight on Results

- The final **Weight Literacy Scale** has 31 questions, available in English and Spanish.
- The **Weight Literacy Scale** has psychometric properties with evidence of reliability and validity.

## Call for Action

The **Weight Literacy Scale** may be used to assess individual's knowledge and understanding of weight management for research, and to screen individuals who may need more assistance with making informed weight loss decisions. It may also be used to help identify the educational content of weight loss interventions.

**Acknowledgement:** This publication is a product of a Health Promotion and Disease Prevention Research Center supported by Cooperative Agreement Number (U48 DP005031) from the Centers for Disease Control and Prevention (awarded to MCR and SCL), and a grant from the National Institute of Minority Health and Health Disparities (1P60 MD006912) (awarded to MCR and SCL). The findings and conclusions are those of the authors and do not necessarily represent the official position of the funding sources.

## Overview

Women who live below poverty, especially women from racial and ethnic minority groups, face higher rates of obesity. Gaining excess weight during pregnancy and then retaining this weight post-partum can place these women at risk for obesity. Weight loss studies with postpartum women have had limited impact. These studies have struggled with low attendance rates due to childcare, transportation, and scheduling needs. There is a need to develop effective post-partum programs that can be delivered in resource constrained settings where diverse low-income women seek care. This study pilot-tested a Facebook-delivered postpartum weight loss intervention for diverse low-income mothers.

## Main Questions

- **Engagement:** Do women participate?
- **Retention:** Do women complete the program?
- **Weight loss:** Do women lose weight?
- **Satisfaction:** Would women recommend it to a friend?

## Study

In collaboration with the Women, Infant, and Children (WIC) program in Worcester, Massachusetts, we implemented 3 pilot studies. The study adapted information from an existing intervention called Fresh Start. The team turned Fresh Start content into daily Facebook posts for weight loss, using text, photos, infographics and videos to provide women with knowledge, skills, and support. Feedback from participants was used to improve the Facebook posts over the 3 pilots. The intervention included an intensive 8-week phase with two posts per day and group interaction facilitated by a coach. An 8-week maintenance phase followed, with one post per day and no coach. The Institutional Review Board at the UMass Medical School approved the study.

## The Bottom Line

Most participants participated in and completed the study, and would recommend the program to a friend. Over half of them lost weight. The intervention was acceptable to participants and could be feasibly delivered to diverse, low-income women.

## Source

Silfee VJ, Lopez-Cepero A, Lemon SC, Estabrook B, Nguyen O, Wang ML, Rosal MC. Adapting a Behavioral Weight Loss Intervention for Delivery via Facebook: A Pilot Series Among Low-Income Postpartum Women. *JMIR Formative Res* 2018;2(2):e18. URL: DOI: 10.2196/formative.9597

## Contact

Milagros C. Rosal, PhD | Division of Preventive and Behavioral Medicine | University of Massachusetts Medical School  
E-mail: [Milagros.Rosal@umassmed.edu](mailto:Milagros.Rosal@umassmed.edu)

**Acknowledgement:** Support was provided by NIMHD (1 P60 MD006912-02), NHLBI Training Grant (1T32HL120823-01), and CDC (U48 DP005031-01). We thank the Worcester WIC Program and UMass Medical School colleagues. The findings and conclusions are those of the author(s) and do not necessarily represent the official position of the funding sources.



### Pilot Group 1: 27 participants

- **Engagement:** 62% of women posted, liked or replied to posts each week. 71% read the entire post most of the time or always
- **Retention:** 89% completed the final assessment at 16 weeks
- **Weight loss:** Average of 2.6 pounds
- **Satisfaction:** 79% of women would recommend the program to a friend

### Pilot Group 2: 24 participants

- **Engagement:** 55% posted, liked or replied to posts each week. 70% read the entire post most of the time or always
- **Retention:** 83% completed the final assessment at 16 weeks
- **Weight loss:** Average of 2.5 pounds
- **Satisfaction:** 80% would recommend the program to a friend

### Pilot Group 3: 16 participants

- **Engagement:** 67% posted, liked or replied to posts. 43% of women read the entire post most of the time or always
- **Retention:** 88% of women completed the final assessment at 16 weeks
- **Weight loss:** Average of 7 pounds
- **Satisfaction:** 100% would recommend the program to a friend

## Call for Action

Social media can be an effective way to involve new mothers from socio-economically disadvantaged groups in behavioral interventions for weight loss.



### Overview

Physical inactivity is responsible for 1 out of 10 premature deaths worldwide and is a risk factor for numerous chronic diseases. Although the World Health Organization recommends that adults engage in at least 150 minutes of moderate-intensity physical activity per week in order to receive the benefits of regular physical activity, only about 1 in 4 adults are this active. Researchers are developing and testing new ways to help adults be more active. It is critical to be able to reliably measure the impact of these strategies and programs with valid, reliable, and direct measures of physical activity. Two types of measures are most common – subjective and objective measures. Subjective measures, such as self-reported questionnaires, are often not accurate. It can be challenging for people to remember what they have done. Objective measures, such as wearable devices (e.g. pedometers, accelerometers) or direct observation, have been shown to be more precise. The purpose of this systematic review was to 1) evaluate the extent to which physical activity is measured objectively, and 2) describe the objective measures used, and how they were used.

### Main Questions

- To which extent is physical activity measured objectively in physical activity interventions for adults?
- Which objective measures have been used, and how has the information been reported?

### Study

A computerized search was conducted in March 2016 for peer-reviewed original research published in English after January 1, 2006. The following databases were searched: Pubmed, Cochrane Central Register, and PsychInfo. The keywords in the search included (“physical activity” OR “physical activities” OR “exercise” OR “leisure time physical activity” OR “leisure time physical activities”) AND (“intervention” OR “interventions” OR “randomized controlled trial” OR “comparative study” OR “clinical trial”). Studies were included if they were randomized controlled trials or quasi-experimental interventions focused on increasing lifestyle physical activity among adults ( $\geq 18$  years of age). Articles also needed to be published in English, peer-reviewed, and published between January 1, 2006 and March 30, 2016. The search yielded 13,718 articles, and 342 met the review criteria.

### The Bottom Line

In order to accurately test new programs and strategies for increasing physical activity, researchers need an accurate way to measure physical activity to see if the new interventions are working. Research is increasingly using objective measures, but technology needs to improve to be able to capture all forms of physical activity consistently.

### Contact

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### Source

Silfee V, Houghton CF, Jake-Schoffman DE, Lopez-Cepero A, May CN, Sreedhara M, Rosal MC, Lemon SC. Objective measurement of physical activity outcomes in lifestyle interventions among adults: A systematic review. *Prev Med Rep.* 2018 May 10;11:74-80. doi: 10.1016/j.pmedr.2018.05.003. eCollection 2018 Sep.

### Acknowledgment

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### Spotlight on Results

- Of the 342 articles that met the inclusion criteria, 239 studies used subjective measures to measure physical activity and 103 studies use objective measures.
- The proportion of studies using objective measures increased from 4.4% to 70.6% from 2006 to 2016.
- All of the studies using objective measures used wearable devices; half (50.5%) used pedometers only and 40.8% used accelerometers only.
- A majority of the 103 studies reported steps (73.8%) as their physical activity outcome metric.

### Call for Action

Researchers should continue to use objective measures to measure physical activity. More work is needed to address the challenges of comprehensive and consistent collecting, reporting, and analyzing of physical activity metrics.

#### Overview

Sugar-sweetened beverages, such as sodas, fruit drinks, and sports drinks contain added calories with little to no nutritional value. As both the consumption of these beverages has increased more than 300% in the past 3 decades, and the percentage of adolescents who are overweight or obese has also increased, research points to these beverages as being a major contributor to weight gain. As adolescents are the highest consumers of sodas, fruit drinks, and other sugar-sweetened beverages, this study explored the availability of these beverages at home, the school and neighborhood.

#### Main Questions

- How often are sugar-sweetened beverages available at home?
- How often are sugar-sweetened beverages available in vending machines at school?
- How often are sugar-sweetened beverages available in stores in the neighborhood?

#### Study

This study performed secondary data analyses with the 2014 cross-sectional, Internet-based Family Life, Activity, Sun, Health, and Eating (FLASHE) study of 1494 adolescents (age 12-17 years). Ordinal logistic regression analyses were conducted to examine the association between sugar-sweetened beverage availability in the home and adolescents' frequency of sugar-sweetened beverage consumption adjusting for adolescent age, sex, race, and body mass index and parent marital status and housing insecurity. Stratified ordinal logistic regression analyses were used to examine the associations by school and school neighborhood sugar-sweetened beverage availability.

#### The Bottom Line

Sugar-sweetened beverage availability in the home was associated with adolescent sugar-sweetened beverage consumption, regardless of sugar-sweetened beverage availability in other settings.

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#### Source

Haughton CF, Waring ME, Wang ML, Rosal MC, Pbert L, Lemon SC. Home Matters: Adolescents Drink More Sugar-Sweetened Beverages When Available at Home. *J Pediatr.* 2018 Jul 18. pii: S0022-3476(18)30871-0. doi: 10.1016/j.jpeds.2018.06.046. [Epub ahead of print] PMID: 30029864 [PubMed - as supplied by publisher]

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#### Spotlight on Results

- 32.6% of adolescent did not consume sugar-sweetened beverages every day.
- 33.9 % of teens consumed sugar-sweetened beverages every day.
- 44.4 % reported sugar-sweetened beverages were often or always available at home.
- The frequency of sugar-sweetened beverage availability at home was associated with more sugar-sweetened beverage consumption.

#### Call for Action

Interventions that focus on parents and their purchase of sugar-sweetened beverages can be a key target for preventing overweight and obesity among adolescents.

The UMass Worcester Prevention Research Center, located at UMass Medical School in Worcester, MA, is a member of the CDC's Prevention Research Center (PRC) network. Our work promotes health and prevents disease and disability through: real-world community engaged research, evidence-based practice, and education.

For more information, visit:  
[www.umassmed.edu/prc](http://www.umassmed.edu/prc)

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## Overview

Regular physical activity can help prevent cardiovascular diseases (CVD), such as heart disease, heart attacks, and strokes, and manage blood pressure. Research has found that regular physical activity in the form of at least 150 minutes of moderate-intensity PA per week, or at least 75 minutes of vigorous-intensity PA per week helps to prevent and control the effects of CVD.

The United States Preventive Services Task Force (USPSTF) recommends that health care providers advise or refer patients with overweight/obesity and at least one additional CVD risk factor to programs that will counsel them to be more active. This study looked at the association between physical activity among US adults with overweight/obesity and at least one additional risk factor for CVD and reported provider advice to increase physical activity.

## Main Questions

- How often do health care providers advise adults with overweight/obesity and at least one additional CVD risk factor to be more physically active?
- Did this advice vary by activity level?

## Study

This study analyzed information from a national survey, called the National Health and Nutrition Examination Survey (NHANES) 2011–2012 and 2013–2014. To participate in the NHANES survey, participants answered questionnaires and completed a physical examination. The NHANES survey collected body mass index and asked participants about their history of CVD risk factors, their PA, and whether their health care providers advised them to increase their PA using the Global Physical Activity Questionnaire.

## The Bottom Line

Only about half of these adults report receiving advice from their health care provider to be more active. Inactive U.S. adults with CVD risk were more likely to receive advice from their providers to be more active.

## Source

Sreedhara M, Silfee VJ, Rosal MC, Waring ME, Lemon SC. Does provider advice to increase physical activity differ by activity level among US adults with cardiovascular disease risk factors? *Fam Pract.* 2018 Jan 30. doi: 10.1093/fampra/cmx140.PMID: 29390106

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**Acknowledgement:** Support was provided by the Centers for Disease Control and Prevention (U48 DP005031-01) for SCL, MCR and VJS. MS was supported by the UMass Center for Clinical and Translational Science Grant #UL1TR001453. Support for VJS was provided by the National Heart, Lung and Blood Institute Training Grant 1T32HL120823-01 and partial support for MEW was provided by NIH grant KL2TR000160. The content is solely the responsibility of the authors and does not necessarily represent the official views of the NIH or the CDC.



## Spotlight on Results

- About half of US adults with overweight or obesity and at least one additional CVD risk factor reported receiving advice from their provider in the past 12 months to be more active.
- More of these adults (57.7%) who did not meet physical activity guidelines were advised by their health care provider to be more active. 49.7% of these adults who met the physical activity guidelines received the same advice.
- Adults who did not meet physical activity guidelines were more likely to report being advised by health care providers to be more active (aOR = 1.21; 95% CI = 1.00-1.47).

## Call for Action

Strategies that encourage health care providers to advise patients to be more active are needed. They are especially needed for patients with overweight or obesity and who have other health conditions that put them at risk for cardiovascular disease, heart attacks and stroke.

The UMass Worcester Prevention Research Center, located at UMass Medical School in Worcester, MA, is a member of the CDC's Prevention Research Center (PRC) network. Our work promotes health and prevents disease and disability through: real-world community engaged research, evidence-based practice, and education.

For more information:  
[www.umassmed.edu/prc](http://www.umassmed.edu/prc)

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## Overview

In the United States, 16.8% of adults smoke, contributing to 480,000 deaths per year. Despite strong evidence that tobacco-treatment methods are effective in helping users quit using tobacco, few users actually use these methods. Treatment is slowly being incorporated into clinical care, and screening and quitting assistance has improved. The Affordable Care Act has required insurance coverage for such services, thus increasing the demand for them. Since 1999, The University of Massachusetts Medical School's Center for Tobacco Treatment Research and Training (CTTRT) has offered the UMass Tobacco Treatment Specialist training (UMass TTS). Recognizing the need for more trained tobacco treatment specialists, it created an additional program to train others to deliver the training, called the Train-the-Trainer in Tobacco Treatment (T4) program. Both training models are included in the program's accreditation by the Council for Tobacco Treatment Training Programs. Graduates of both models are eligible to apply for the National Certificate in Tobacco Treatment Practice, a new national recognition co-sponsored by the Association for the Treatment of Tobacco Use and Dependence and NAADAC, the Association for Addiction Professionals. The purpose of this study was to test if the T4 model could extend the reach of the On-site UMass TTS Training Program and if its trainees could offer the same quality of training to participants.

## Main Questions

- Could a well-designed train-the-trainer model for tobacco treatment specialists make the evidence-based program accessible to more people?
- Is the training delivered by the individuals trained in the T4 model of similar quality to that delivered by the On-site UMass TTS Training program?

## Study

As an effort to expand the reach of the UMass TTS Training program, the CTTRT developed a program to provide the participants with the information and skills required to be able to coordinate and deliver the UMass TTS Training program in a standardized manner. This study compared the reach and quality of training provided by the On-site UMass TTS training program with the training provided by individuals trained by the Train-the-Trainer in Tobacco Treatment (T4) program. Tobacco treatment specialists trained by both methods completed the same online survey of demographic information including age range, education, race, gender and work setting; course evaluations; and content exams.

## The Bottom Line

The Trainer-the-Trainer in Tobacco Treatment (T4) program has significantly increased the quantity of UMass-trained TTSs in the United States and beyond. There were no significant differences in participant knowledge as measured by exams. In addition, participants in both training models reported an increase in their ability to deliver tobacco dependence treatment.

## Contact

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## Source

Jolicœur, D., Cranos, C. L., Frisard, C., & Pbert, L. (2018). Evaluation of a Train-the-Trainer Program to Build Capacity for Training Tobacco Treatment Specialists. *Nicotine & Tobacco Research*. doi:10.1093/ntr/nty125



## Spotlight on Results

- Fifty-three Trainers were certified during 2014–2017 and conducted 26 TTS trainings with 351 participants, thus extending the reach of the UMass TTS Training program.
- There were no significant differences in participant mean exam scores [On-site = 86.33 (SD = 7.83); Trainer-led = 86.15 (SD = 8.47)].
- Similar percentage of participants obtained a passing score on the exam (On-site 94.4%, Trainer-led 94.0%).
- There were no significant differences in increased self-efficacy in delivering effective tobacco-treatment services [On-site = 2.92, Trainer-led = 2.93;  $p = .52$  (3-point Likert scale, 1 = not at all, 3 = a great deal)] or in overall satisfaction with the training [On-site = 3.84; Trainer-led = 3.81;  $p = .072$  (4-point Likert scale, 1 = very dissatisfied, 4 = very satisfied)].

## Call for Action

The prevalence of efficient and local TTS training programs and specialists would increase the quantity of available tobacco dependence services, consequently reducing the frequency of tobacco-related deaths in the United States per year.

### Overview

Health care provider advice about weight gain during pregnancy matters. Too much weight gain during pregnancy may increase the risk of complications for the mother and the infant. Unfortunately, about half of all pregnant women gain more weight than recommended. This is particularly true for poor women and women from racial/ethnic minority groups. Research has found that health care provider advice plays an important role in patients deciding to change their behaviors.

### Main Questions

The researchers wanted to answer these questions:

- What percentage of pregnant women receive advice from their health care providers regarding how much weight they should gain?
- What percentage of pregnant women follow their provider's advice regarding how much weight to gain?
- Is there an association between health care provider advice and weight gain during pregnancy?



### Study

Using baseline data from the Pregnancy and Postpartum Observational Dietary Study (PPODS), this study examined health care and the relationship between advice about weight gain during pregnancy and actual pregnancy weight gain. The PPODS study is a prospective cohort study that followed 110 women through their pregnancy. This study analyzed data from 91 baseline surveys, which were administered at 28-34 weeks of gestation.

### The Bottom Line

When health care providers give advice about pregnancy weight gain and this advice is followed, women are more likely to gain a healthy amount of weight during pregnancy. Pregnant women may benefit from their health care provider's advice regarding how much weight to gain during pregnancy. However, not all women receive advice and only about half of women who receive advice follow the advice.

### Source

Lopez-Cepero A, Leung K, Moore-Simas T, Rosal MC. Association Between Obstetric Provider's Advice and Gestational Weight Gain. *Matern Child Health J.* 2018 Feb 15. doi: 10.1007/s10995-018-2497-y.

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**Acknowledgment:** This research was supported by the NIH/NCATS (UL1TR000161), NIH/NIMHD (1 P60 MD006912-02), the CDC (U48 DP001933) and NIH-National Institute of General Medical Science (R25 GM113686-02). The content is solely the responsibility of the authors and does not necessarily represent the official views of the NIH or the CDC.

### Spotlight on Results

- About two-thirds (67%) of the study participants received advice on how much weight to gain during pregnancy.
- Among the women who received the advice, about half (54.1%) followed the advice. These women gained, on average 11 lbs less than women who did not report following the advice.
- Women who reported following their provider's advice were 82% less likely to gain too much weight.

### Call for Action

Strategies to both encourage health care providers to counsel women on weight gain during pregnancy, and to encourage women to follow this advice are needed to lower the risk of excessive weight gain during pregnancy are needed.

# 2018 UMass Worcester PRC Associated Research Projects

## Policy, Systems and Environment

### **UMass Worcester PRC PAPRN+ (Physical Activity and Policy Research Network Plus) Collaborating Center**

This grant re-establishes the UMass Worcester PRC as a member of the PAPRN+ Collaborating Center. Our team is leading research related to municipal officials' involvement in local built environment policy processes.

**UMass Worcester PRC Investigator:** Stephenie C. Lemon, PhD

**Funder:** Centers for Disease Control

**Dates:** 2014-2019

### **Integrated Transport and Health Impact Model Development (ITHIM)**

ITHIM is a tool to estimate the health impacts of changing transportation behaviors through three pathways: physical activity; air pollution; and roadway injuries (serious and fatal). The goal of this project is to calibrate the tool for use in Massachusetts. It is a collaboration among UMass Medical School, the University of Massachusetts Amherst College of Engineering and School of Public Health.

**UMass Worcester PRC Investigator:** Stephenie C. Lemon, PhD

**Funder:** Massachusetts Department of Public Health

**Dates:** 2018

### **Public Health Assessment for Transportation Projects**

This project assembles tools and metrics including ITHIM for use in evaluating the impact of transportation investments on health and equity and incorporating relevant outcomes into decision making at MassDOT and at the community level. Project goals are to identify available frameworks, tools, data and performance measures; utilize existing datasets to develop additional performance measures; develop a framework that could be incorporated into planning and decision-making processes for transportation projects; and provide recommendations for further investigation. UMass Medical School has responsibility for the physical activity elements.

**UMass Worcester PRC Investigator:** Stephenie C. Lemon, PhD

**Funder:** Massachusetts Department of Transportation

**Dates:** 2018-2019

### **Identifying successful childhood obesity interventions in Massachusetts schools and using findings to improve programs at schools left behind**

This project investigates the determinants of recent declines and widening disparities in childhood obesity among public school students in Massachusetts.

**UMass Worcester PRC Investigator:** Wenjun Li, PhD

**Funder:** Robert Wood Johnson Foundation

**Dates:** 2016-2018

### **Healthy Kids & Families: Overcoming Social, Environmental and Family Barriers to Childhood Obesity Prevention**

Healthy Kids & Families is the applied research project of the UMass Worcester PRC. It is testing the impact of a community health worker-delivered intervention aimed at helping families overcome barriers to childhood obesity prevention. The intervention is compared to a comparison condition aimed at helping families improve positive parenting skills.

**UMass Worcester PRC Investigators:** Milagros C. Rosal, PhD, Thomas Land, PhD

**Partners:** Oak Hill Community Development Corporation, Worcester Public Schools

**Funder:** US Centers for Disease Control and Prevention

**Dates:** 2014-2019

### **Randomized Lifestyle Intervention in Overweight and Obese Pregnant Hispanic Women**

The overall goal of this randomized clinical trial is to test the efficacy of a culturally and linguistically modified, individually-tailored lifestyle intervention to reduce excessive gestational weight gain, increase postpartum weight loss, and improve maternal metabolic status among overweight/obese Hispanic women and their children.

**UMass Worcester PRC Investigator:** Milagros C. Rosal, PhD

**Funder:** National Institutes of Health, National Institute of Diabetes and Digestive and Kidney Diseases

**Dates:** 2013-2018

### **Get Social: Randomized Trial of a Social Network Delivered Lifestyle Intervention**

The purpose of this study is to conduct a randomized controlled trial to compare the efficacy of an online social network-delivered intervention to a traditional in-person group-based lifestyle intervention. We hypothesize that an online social network intervention will not be inferior to the traditional delivery approach.

**UMass Worcester PRC Investigator:** Stephenie C. Lemon, PhD

**Funder:** National Institute of Diabetes and Digestive and Kidney Diseases

**Dates:** 2015-2019

### **Asthma Symptom Management Through Mindfulness Training**

The goal of this study is to evaluate the effect of participation in a Mindfulness-Based Stress Reduction program compared to an active control on asthma symptom control and the role of mindfulness, psychosocial, and biological processes in intervention-related changes.

**UMass Worcester PRC Investigator:** Lori Pbert, PhD, Wenjun Li, PhD

**Funder:** National Institutes of Health /National Center for Complementary and Integrative Health

**Dates:** 2014-2019

### **The Fresh Start Trial, Center for Health Equity in Research**

This study aims to assess the effectiveness and implementation of a culturally adapted weight loss intervention for low-income, postpartum women participating in the Special Supplemental Nutritional Program for Women, Infants, and Children (WIC) through a randomized controlled trial.

**UMass Worcester PRC Investigator:** Milagros C. Rosal, PhD, Stephenie C. Lemon, PhD

**Funder:** Center for Health Equity Intervention Research, National Institutes of Health, National Institute on Minority Health and Health Disparities

**Dates:** 2012-2018

### **Greater Worcester Regional Youth Health Survey**

The goal of this contract is to survey middle and high school students in the Greater Worcester Area about health risk behaviors that include bullying, smoking, alcohol and drug use, food security and others.

**UMass Worcester PRC Investigator:** Stephenie C. Lemon, PhD

**Funder:** Worcester Division of Public Health

**Dates:** 2016-2018

### **Continuation of the Nicotine Dependence in Teens (NDIT) Study to Age 30**

The study follows the use of tobacco products, quit attempts, and genetic and environmental factors among study participants. It extends the ability to follow participants until they are 30 years old and develop intervention tools.

**UMass Worcester PRC Investigator:** Lori Pbert, PhD

**Partners:** University of Montreal

**Funder:** Canadian Cancer Society Research Institute

**Dates:** 2015-2019

## Clinical-Community Linkages

### **FITLINE: Pediatric Practice-based Obesity Intervention to Support Families**

The goal of this randomized clinical trial is to test a program consisting of telephone coaching and a family workbook of informational materials to see if it reduces obesity among children. The trial is enrolling 512 children of ages 8 to 12 with overweight and obesity and their families from 16 pediatric practices.

**UMass Worcester PRC Investigator:** Lori Pbert, PhD

**Funder:** National Institute of Health/National Heart, Lung, and Blood Institute

**Dates:** 2016-2021

### **Translating Research into Practice: A Regional Collaboration to Reduce Disparities in Breast Cancer Care**

Translating Research into Practice (TRIP) draws upon the principles of community-engaged implementation science to facilitate dissemination and utilization of: (a) regional patient registries; (b) systematic screening for social barriers to care with referral plans; and (c) patient navigation services into one integrated model of care to improve the quality and effectiveness of care delivery for African American women with breast cancer.

**UMass Worcester PRC Investigator:** Stephenie C. Lemon, PhD

**Funder:** National Institutes of Health

**Dates:** 2017-2022

### **Assessment of Patient Navigation for Breast Cancer Treatment**

The purpose of this project is to garner a better understanding of current models of patient navigation for breast cancer treatment that are being implemented in Boston hospitals/cancer treatment centers. This project will be accomplished by employing a mixed methods evaluation in six Boston hospitals that currently employ breast cancer patient navigators.

**UMass Worcester PRC Investigator:** Stephenie C. Lemon, PhD

**Partners:** American Cancer Society, New England Division

**Dates:** 2018-2019

### **Childhood Obesity Research Demonstration Project – Phase 2**

A new clinical-community intervention was proposed using the Integrated Clinical and Community Systems of Care Model in order to address obesity through optimized screening and management and to inform care of >7 million children with obesity covered by the Children's Health Insurance Program or Medicaid

**UMass Worcester PRC Investigator:** Thomas Land, PhD

**Funder:** US Centers for Disease Control and Prevention

**Dates:** 2016-2019



### **MSWeight: Weight Management Counseling in Medical Schools: A Randomized Controlled Trial**

The goal of this study is to test the effect of a curriculum to teach medical students how to screen and assess all adult patients for obesity and offer counseling intervention to promote weight loss.

**UMass Worcester PRC Investigator:** Judith Ockene, PhD, MEd, MS

**Funder:** National Cancer Institute

**Dates:** 2014-2019

### **Patient Navigation and Financial Incentives to Promote Smoking Cessation**

This randomized clinical trial tests a patient navigation program with financial incentives to an enhanced traditional care control condition for smoking cessation.

**UMass Worcester PRC Investigator:** Lori Pbert, PhD

**Funder:** America Cancer Society

**Dates:** 2014-2018

## Training

### **Implementation Research Training Program in Cancer Prevention and Control (PRACCTIS)**

This education and training grant establishes a postdoctoral training program at UMMS focused on community and clinical implementation science in cancer prevention and control.

**UMass Worcester PRC Investigator:** Stephenie C. Lemon, PhD

**Funder:** National Cancer Institute

**Dates:** 2014-2019

### **K12 Cardiopulmonary Implementation Science Scholars Program**

This interdisciplinary K12 training program for junior faculty promotes the development of independent implementation researchers committed to addressing cardiopulmonary disease prevention, treatment and management. The program is led by the UMass Medical School in collaboration with Baystate Health and the Center for Healthcare Organization and Implementation Research of the Veteran's Health Administration.

**UMass Worcester PRC Investigator:** Stephenie C. Lemon, PhD

**Funder:** National Institutes of Health

**Dates:** 2017-2022

### **CHEIR: UMass Center for Health Equity Intervention Research**

This collaboration between UMass Medical School and UMass Boston establishes a Center for Minority Health. This center provides infrastructure to identify, train, mentor and foster the career development of minority students, faculty and individuals with interests in health disparities intervention research. It provides an infrastructure to support faculty interested in developing research ideas aimed to reduce and eliminate health disparities through administrative, research and community engagement cores.

**UMass Worcester PRC Investigator:** Milagros C. Rosal, PhD

**Funder:** National Institutes of Health, National Institute on Minority Health and Health Disparities

**Dates:** 2012 - 2018

**STRIDE: Strengthening Translational Research in Diverse Enrollment**

This collaborative study between UMass Medical School, Vanderbilt University and the University of Alabama at Birmingham is developing innovative approaches to enhancing informed consent procedures with a goal of improving research literacy among under-served populations. This project is developing a multilevel informed consent platform that integrates e-consent with patient storytelling and simulations-based research assistant training. The intervention will be tested in the context of six ongoing clinical trials in a multiple time series design randomized trial.

**UMass Worcester PRC Investigator:** Stephenie C. Lemon, PhD

**Funder:** National Institutes of Health, National Center for the Advancement of Translational Science

**Dates:** 2016-2021

**Community Engagement Core, UMass Center for Clinical and Translational Science**

The Community Engagement and Research section aims to enhance academic and community capacity to address urgent health priorities among communities in Massachusetts using community engaged research approaches through the establishment of regional community- based research networks (CBRN) and junior faculty training programs.

**UMass Worcester PRC Investigator:** Stephenie C. Lemon, PhD

**Funder:** National Institutes of Health

**Dates:** 2015-2019

**Science Participation Resource Center, UMass Center for Clinical and Translational Science**

The Science Participation Resource Center seeks to engage special populations in clinical and translational research with strategies that reach out to investigators and community members using tailored, culturally responsive methods.

**UMass Worcester PRC Investigator:** Milagros C. Rosal, PhD, Stephenie C. Lemon, PhD

**Funder:** National Institutes of Health

**Dates:** 2015-2019

**Community Engagement Core, Center for Health Equity Intervention Research (CHEIR)**

This core is supporting community engagement activities in affiliated projects. It also includes an independent project intended to advance the field of community-engaged science through the development, dissemination, and evaluation of an innovative, culturally responsive video storytelling intervention to increase research literacy among community members.

**UMass Worcester PRC Investigator:** Stephenie C. Lemon, PhD

**Funder:** Center for Health Equity Intervention Research, National Institutes of Health, National Institute on Minority Health and Health Disparities

**Dates:** 2012-2018

**Multi-CTSA mini Sabbatical Evaluation and Quality Improvement (SEQUIN) Project**

This supplement establishes best practices and a registry for mini-sabbatical opportunities offered throughout the CTSA network.

**UMass Worcester PRC Investigator:** Stephenie C. Lemon, PhD

**Funder:** National Institutes of Health

**Dates:** 2017-2018






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