

# Health Promotion



- 4 NOV. 2548

## In Brief

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## THE SCIENCE OF HEALTH PROMOTION

### Intervention Focus

- Fitness**
- Karen A. Croteau 217 **A Preliminary Study on the Impact of a Pedometer-based Intervention on Daily Steps**  
Thirty-seven college employees participated in an 8-week program involving goal setting, pedometer usage, self-monitoring, and weekly email reminders. Average daily number of steps taken increased by 23% for the group as a whole, with greater percent increases for those who had lower baseline levels and thus set higher goals, and for those with higher baseline BMI levels.
- Nutrition**
- Ingrid Steenhuis 221 **The Effectiveness of Nutrition Education and Labeling in Dutch Supermarkets**  
Thirteen supermarkets were randomly assigned to an educational program with shelf labeling, an educational program without labeling, and a control condition to test the impact of the program on reducing fat intake in Dutch supermarkets. A total of 2,203 shoppers were included in the study. Measures included a food frequency questionnaire, BMI, psychosocial factors, and household size. No significant differences were found in total fat intake, behavioral determinants of eating less fat between the intervention and the control groups.
- Smoking Control; Health Policy**
- Ellen J. Hahn 225 **Tobacco Use Prevention and Cessation Policies in Manufacturing Facilities in the Tobacco-Growing State of Kentucky**  
Telephone interviews were conducted with 437 human resource managers in manufacturing facilities in Kentucky to determine tobacco use prevention and cessation policies. Only 43% banned indoor smoking, 26% provided health plan reimbursement for cessation treatments, and 21% provided tobacco use education. Unionized companies were 2.2 times more likely to support cessation efforts but 2.4 times more likely to allow employees to smoke, and 6.3 times more likely to sell cigarettes on site. Large companies were 2.6 times as likely to have a written smoking policy, and 3.0 times more likely to have a tobacco use prevention program, but 4.4 times more likely to sell cigarettes on site.
- Smoking Control; Financial Analysis**
- Terrell W. Zollinger 232 **Estimating the Economic Impact of Secondhand Smoke on the Health of a Community**  
Models were developed to estimate medical care costs and premature loss of life costs of secondhand smoke for adults and for children. Factors in the model included the risk for 14 health conditions attributable to secondhand smoke and the medical costs related to these conditions. The model was applied to actual data on incidence of these health conditions for Marion County, Indiana. Based on the assumptions in this model, secondhand smoke cost Marion County \$53.9 million, or \$62.68 per capita in 2000. This included \$10.5 million for medical costs and \$20.3 million of loss of life for children and \$6.2 million for medical costs and \$16.9 million for loss of life for adults.

### Applications

- Health Promoting Community Design**
- Nancy Humpel 239 **Associations of Location and Perceived Environmental Attributes With Walking in Neighborhoods**  
Eight hundred employees of an Australian university located in coastal and non-coastal suburbs completed telephone interviews on their walking and physical activity habits and their perceptions of the environment near their homes. Men were more likely to walk in their neighborhoods if they lived in a coastal suburb (OR = 1.66), rated the neighborhood aesthetics as high (OR = 1.91), walking opportunities as convenient (OR = 2.29), and access to services as high (OR = 1.98). Good access was the only factor that impacted total amount of walking (OR = 2.09). None of these factors impacted total physical activity. For women, convenience was the only predictor of neighborhood walking (OR = 3.78) and good access was the only predictor (OR = 1.92) of total amount of walking.

Kelly R. Evenson Aileen P. McGinn	243	<p><b>Availability of School Physical Activity Facilities to the Public in Four U.S. Communities</b> All of 351 schools located in four geographic areas were contacted to identify indoor and outdoor physical activity facilities, determine if the public had access to them, and identify barriers and benefits to access; 289 (82%) responded and site visits were conducted to examine outside facilities at the other 62 schools. Approximately 27% had no indoor facilities and 11% had no outside facilities; 46% made some or all indoor and 68% made some or all outdoor facilities available to the public. Common reasons given for denying access were heavy use by students, and safety and liability concerns. Of the schools that made facilities available to the public, two thirds of schools had no problems, but 14% said facilities were overused, and 10% said they were misused or damaged. Benefits cited included helping the community be active, providing good publicity for the school, and fulfilling an obligation to the taxpayers.</p>
Patricia A. Sharpe Michelle L. Granner Brent Hutto Barbara E. Ainsworth	251	<p><b>Association of Environmental Factors to Meeting Physical Activity Recommendations in Two South Carolina Counties</b> Telephone interviews were conducted with 2117 adults in two counties in South Carolina concerning current physical activity levels as well as knowledge, presence, conditions, and use of recreational facilities, environmental and workplace supports, and sidewalks. After controlling for gender, race, age, and education, people were more likely to meet recommended levels of physical activity if neighborhood sidewalks were well maintained (OR = 2.04), their workplace provided sports teams (OR = 1.30), or they were aware of mapped routes for cycling (OR = 1.39) and for walking or jogging (OR = 1.33).</p>
Joel S. Hirschhorn	258	<p><b>Zoning Should Promote Public Health</b> Legally, governments use their police powers to protect public health, safety, and welfare through zoning. Many zoning guidelines were developed to protect the public's health. However, many zoning laws promote sprawl development, which does not promote health. Furthermore, zoning laws often stand in the way of health promoting community designs. The author argues for a paradigm shift in which the requirement of zoning laws to support the public's health should be invoked to force zoning laws to require health promoting community designs.</p>

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**Research**

		<b>Commentary</b>
David R. Anderson	261	<p><b>Understanding the Relationship Between Health Risks and Health-Related Costs</b> Dr. Anderson reflects on the lack of consistency in studies on the relationship between health risks and medical costs. Part of the inconsistency is caused by differences in risk assessment instruments, but a more important concern is lack of clear conceptualization and statement of research goals. One reason for exploring this relationship is to be able to predict health care costs accurately; a very different reason is to identify causal variables, the modification of which will have an impact on costs.</p>
		<b>Financial Analysis; Weight Control</b>
Shirley Musich Chifung Lu Timothy McDonald Laura J. Champagne Dee W. Edington	264	<p><b>Association of Additional Health Risks on Medical Charges and Prevalence of Diabetes Within Body Mass Index Categories</b> The relationship between medical costs and number of risk factors and diabetes prevalence and number of risk factors within BMI categories was measured among 38,841 active General Motors employees who completed HRA's between 1996 and 2000. Medical care costs increased as number of risk factors increased within each BMI category, and as BMI levels increased within each risk category. Prevalence of diabetes increased as number of risk factors increased within each BMI category, and as BMI levels increased within each risk category. Note: This manuscript uses absence and other medical problems as predictor variables.</p>
Abstracts	269	<b>11 abstracts are featured from a variety of publications.</b>
DataBase: Research and Evaluation Results	273	<b>Four new studies are critiqued and added to the DataBase chart.</b>

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**The Art of Health Promotion**

William R. Miller	1	<p><b>Motivational Interviewing in Service to Health Promotion</b> Motivational Interviewing as a concept comes primarily from the substance abuse and mental health fields and offers us a new tool for health promotion programming. A definition, conceptual model, supporting perspective, methods, and efficacy for health promotion professionals are provided. References and recommended resources are provided along with practical examples of interventions that have appeared in the peer review literature. Defining attributes are also suggested that help differentiate Motivational Interviewing from traditional health counseling interventions.</p>
	10	<p><b>Selected Abstracts</b> Abstracts are provided for nine articles on Motivational Interviewing.</p>
	12	<p><b>Closing Thoughts</b> Editorial comments on Motivational Interviewing are offered in the Closing Thoughts column.</p>