



NATIONAL CANCER INSTITUTE  
Division of Cancer Control & Population Sciences

## Evidence-Based Cancer Control Programs (EBCCP) Connection



December 2023



### EBCCP Featured Profile

**Rebecca Seguin-Fowler**, PhD, RDN, LD, CSCS, is Associate Director for the Texas A&M Institute for Advancing Health through Agriculture (IHA). As a public health scientist with expertise in community-based nutrition and physical activity intervention research, Dr. Seguin-Fowler provides leadership for the organization's social and behavioral intervention research initiatives via the IHA's Healthy Living program. In other roles at

Texas A&M University, she is chief scientific officer for Healthy Texas, professor in the Department of Nutrition in the College of Agriculture & Life Sciences, and graduate faculty in the Department of Health Promotion and Community Health Sciences at the School of Public Health.

Improving community health for underserved and underrepresented populations has been at the core of Dr. Seguin-Fowler's work for more than 2 decades, through widely disseminated dietary and physical activity interventions, innovative food systems intervention projects, and a variety of adapted evidence-based programs for at-risk populations. Her current research focuses on understanding how social, food, and physical activity environments influence behavior change and maintenance—particularly in at-risk populations and settings, such as low-income families and rural communities.

A registered dietitian, Dr. Seguin-Fowler received her bachelor's degree in clinical exercise physiology from Boston University. She earned a master's degree in nutrition communication and a doctorate in food policy and applied nutrition from Tufts University.

## Can you tell us about the program?

There are four StrongPeople programs. One program has been listed on the National Cancer Institute's [Evidence-Based Cancer Control Programs \(EBCCP\)](#) for several years ([StrongPeople Living Well](#), previously called StrongWomen Healthy Hearts). Two were recently added to the EBCCP: [StrongPeople Strong Bodies](#) and [StrongPeople Strong Hearts](#).

**StrongPeople Strong Bodies** is a strength training program aimed at mid-life and older individuals. The benefits of strength training for older individuals have been studied extensively and include increased muscle mass and strength; improved bone density and reduced risk for osteoporosis and related fractures; reduced risk for diabetes, heart disease, arthritis, depression, and obesity; and improved self-confidence, sleep, and vitality. The StrongPeople Strong Bodies program includes progressive resistance training, balance training, and flexibility exercises. Classes typically have eight to 12 participants and last approximately 45 to 60 minutes. Generally, classes meet twice per week for 12 weeks.

**StrongPeople Strong Hearts** is a nutrition and physical activity program that aims to reduce morbidity and mortality from cardiovascular disease in mid-life and older individuals who have low levels of physical activity. Based on extensive research, the program combines elements from other StrongPeople programs including StrongPeople Strong Bodies and StrongPeople Living Well. The multi-level curriculum combines

dietary skill-building, aerobic activity, and strength training. The program focuses on experiential learning, aiming to improve health knowledge and understanding of environmental influences and to increase adoption of healthy behaviors and social support. Classes meet for 1 hour twice a week for 12 weeks.

Each of these programs is implemented in local communities by allied health professionals, fitness specialists, and community leaders trained in the curriculum at day-long training workshops or via an online training course. The curriculum provides individuals with the primary functional materials to be used by community leaders to start programs within their town.

## **What role did community partners/stakeholders play in the development and/or testing of the program?**

Community partners were instrumental in implementing the programs and referring participants to them. Examples of how partners assisted with Strong Bodies and Strong Hearts are described below.

### **Strong Bodies**

- In 2002, prompted by class leaders in Kansas and Alaska, the StrongPeople Strong Bodies Tool Kit was created to translate research findings into a formalized community-based program for implementation by Extension educators (class leaders) and other allied health professionals. Strong Bodies was disseminated nationally through the Extension network.
- Over 4,100 educators—primarily Extension agents but also health care system staff and other community health educators—have been trained to deliver the program.
- The randomized trial of Strong Bodies was run through Extension in Montana.

### **Strong Hearts**

- Inspired by the success of the Strong Bodies and Living Well programs, the team was funded to create Strong Hearts and test it rigorously in community-engaged trials.
- Community focus groups were held to determine cardiovascular disease prevention issues in the community and get input to guide development of the intervention.

- Randomized trials were run through Extension in Montana and through Extension and a health care system in New York.

## **What were some of the successes of partnering together?**

Our partners know their communities best—the environments, the assets, the barriers, and the people. They were best suited to help us understand what would work and how we could reach people who might not have been reached by other programs. We were highly invested in our partners and in developing a true partnership with them, one that we hoped could serve the people of their community.

Across a variety of places and populations, the StrongPeople programs have continued for years. It's a really great thing to see that once a program starts, both the educator and the participants will continue to meet. In several cases, participants have decided to train to become StrongPeople leaders to provide classes in their area.

Over the years, educators have provided valuable feedback about a number of logistical details that make running the programs easier (e.g., best sources for ankle weights, recommended carts to store dumbbells). The lessons learned inform the guidance that we give to those just starting a program. This is just one example of the successes of partnering.

We also used an ambassador model for training, in which an Extension leader was certified to train new educators in their own state; this model helped facilitate rapid expansion and capacity building across the country and into other countries.

## **What challenges were encountered?**

Even when there is a commonality, like a focus on rural communities, it doesn't mean all rural people, families, and environments are the same. It is critical to observe and listen to communities with an open mind and willingness to be wrong about assumptions.

## **Do you have any final thoughts?**

I am delighted that we have been able to train thousands of leaders and offer classes to tens of thousands of participants; the success of the programs is largely due to our partnerships with Extension and health care systems. I am passionate about making it easier and more fun for people to choose healthy behaviors to live a long, full, independent life, and that includes strengthening bones and muscles, doing some

aerobic activity most days, eating healthfully, and helping change the local environment little by little to make it easier to be healthier. In the last few years, we have changed the name of the programs from StrongWomen to StrongPeople. The focus had originally been on women, but many communities were already offering programs to all genders, so it made sense to change the name to be more inclusive. We also now offer self-paced online leader trainings for our programs.

Over the past 20 years, as demonstrated through the work of hundreds of researchers and Extension professionals across approximately 40 different university and clinical settings, combined with the time and effort of thousands of participants, the evidence base and health quality-of-life improvements through the StrongPeople programs are inspiring. It is exciting to imagine the next 20 years of real-world research and program expansion we can accomplish to improve more lives and communities.

## Next Issue

Share the newsletter with your colleagues and peers and stay engaged with us by subscribing!

If a peer sent you this newsletter, you may subscribe here: <https://ebccp.cancercontrol.cancer.gov/newsletter.do>

If you no longer wish to stay up to date with EBCCP, you may unsubscribe here: <https://ebccp.cancercontrol.cancer.gov/newsletter.do>

## Feedback

We want your feedback! Do you like what you see? Do you have any recommendations to improve the EBCCP website? Do you plan to share the website with your colleagues and peers? [Submit your feedback here](#)—we would love to hear from you.

### Stay Connected with the National Cancer Institute



Chat with us: [LiveHelp](#) Call us: 1-800-4-CANCER (1-800-422-6237)

SUBSCRIBER SERVICES:  
[Manage Subscriptions](#) | [Help](#)