

# SUPPLEMENT 1: PHASE 1 OF THE GIRLS HEALTH ENRICHMENT MULTI-SITE STUDIES (GEMS)

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## INTRODUCTION

In this supplement to *Ethnicity & Disease*, we present the main results from Phase 1 of the Girls Health Enrichment Multi-site Studies (GEMS). GEMS, sponsored by the National Heart, Lung, and Blood Institute (NHLBI), was a multi-center research program in which 4 field centers independently developed and pilot-tested interventions to prevent excess weight gain in African-American girls as they entered and proceeded through puberty. Phase 1 of GEMS was a 2-¾ year development phase during which investigators conducted formative assessments consisting of focus groups, interviews, and surveys to direct their specific intervention approaches. Phase 1 culminated in a 12-week pilot study during which time the site-specific interventions were implemented and evaluated, with measurements taken at baseline and at the end of 12 weeks of intervention.

We include 3 original methodological papers and 4 original research reports for this supplement. These papers are bracketed by an initial Overview of the GEMS genesis and rationale and a Conclusion that attempts to put these GEMS Phase 1 projects and results into the context of current research needs and public health issues. The methodological papers focus on the common study design elements across the four GEMS field centers, the experience with recruitment, and a description and results of a unique process used to plan collaboratively the formative assessments to enhance the GEMS interventions with respect to cultural appropriateness. The research reports are the main pilot study findings from each of the four GEMS field centers, which were at Bay-

lor College of Medicine, the University of Memphis, the University of Minnesota, and Stanford University.

To prepare for this supplement, we have taken steps to provide for rigorous peer-review and critical input from knowledgeable colleagues with relevant expertise. In identifying reviewers, we sought expertise in several relevant areas: pediatric obesity, nutrition and physical activity interventions, both in general and specifically with African-American populations, and obesity in Black females. The process is described below, and the reviewers who so generously provided us with their time and insights are listed by name at the end of this introduction.

With the exception of the Introduction and Conclusion articles, which were reviewed by the guest editors and went through the NHLBI internal peer review process, each article was reviewed using a multi-stage process involving both internal and external review, as follows:

- The guest editors initially critiqued submitted manuscripts and in most cases requested revisions before considering the papers ready for external review.
- Each manuscript was then sent to two external reviewers (assigned by consensus of the four guest editors) based on our knowledge of the content of the papers and the expertise of the reviewers.
- Simultaneously, the paper was also sent to two knowledgeable NHLBI staff scientists for content review as part of a standard NHLBI internal peer review process and then to a director for policy review. The identity of these reviewers was known only to the NHLBI guest editor (EO).
- All reviews were collated by the NHLBI guest editor and sent anonymously, except where one of the guest

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editors was the primary author, to the primary author, with a request to revise and provide written responses as to how each point raised by each reviewer was addressed.

- Authors' responses and revised papers were then re-reviewed by at least 2 of the guest editors, resulting in additional revisions.

- Final acceptance of 7 of the 8 articles was determined by the guest editors. The eighth paper was referred back to the authors for submission elsewhere because the external review indicated that it was not a good fit with the overall theme of the supplement.

On behalf of the GEMS investigators, we hope you will enjoy reading these articles and will learn from our experiences in developing and conducting these studies targeting obesity prevention. We also trust that many of those who read this will join us in our efforts to address this critical problem in research, clinical and community practice settings.

### *Guest Editors*

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### ACKNOWLEDGMENT

We are indebted to the 16 colleagues named below and to the anonymous NHLBI reviewers who took the time and interest in reviewing and commenting constructively on these manuscripts.

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