

NCPHA
E-Newsletter

March 2015



Newsletter from the NC Public Health Association and the NCPHA Public Awareness Committee

A close-up photograph of several blueberries, filling the entire page. The berries are dark blue with a slight white bloom on their surface. The text is overlaid on this image.

March is
**NATIONAL NUTRITION
MONTH**

*Find out what health departments and
NCSU's Plants for Human Health Institute
are doing to support good nutrition!*

Upcoming Public Health Events

April 6 – 12 National Public Health Week – *Healthiest Nation 2030* – for more information see article on page 8

April 27 NCPHA Governing Council Meeting, Morehead City

May 6-8 EDNCPHA/NCPHA Spring Conference, New Bern ncpha.memberclicks.net/spring-conference

National Public Health Week



National Public Health Week will take place April 6 – 12. The theme this year is "Healthiest Nation 2030". To get more information, submit an event or become a partner please go to www.nphw.org.

Let NCPHA know what events you have planned for NPHW. Submit your events to Kim Dittmann at kdittmann@ncapha.org and we'll post them on our website. Below are the daily themes to help you get started and get creative!

Monday, April 6: Raising the Grade

The U.S. trails other countries in life expectancy and other measures of good health, and this holds true across all ages and income levels. Too many people, including some of our political leaders, still believe we have the best health care in the world. We have great doctors, state-of-the-art hospitals and are leaders in advanced procedures and pharmaceuticals - yet our health ranks poorly when compared to other countries. To kick off NPHW 2015, the public health community will come together to talk frankly about what the data reveal about America's public health.

Tuesday, April 7: Starting from Zip

Today, your zip code says too much about your health. Within the United States, there are unacceptable disparities in health by race and ethnic group, state by state and even county by county. The effort to make the U.S. the Healthiest Nation in One Generation starts with equity across our communities. During the second day of NPHW 2015, the public health community will shine a light on local/state/regional disparities. We'll come together to discuss the role – and success – of the Affordable Care Act in addressing disparities in access to care, while also laying out what else is needed to achieve health equity across our communities.

Wednesday, April 8: Building Momentum

Influential leaders, companies and organizations are taking important steps in line with creating the healthiest nation: just look at recent actions by CVS, America's major food and beverage companies, RWJF, the American Planning Association, Michelle Obama, and many others. On the third day of NPHW 2015, the public health community will outline major recent changes and what they mean for our health. While the outcomes of these changes will play out over many years ahead, these are significant shifts that demonstrate momentum is building around a higher commitment to our nation's public health.

Thursday, April 9: Building Broader Connections

In the work to become the healthiest nation, we can't do it all on our own. We have to expand our partnerships to collaborate with city planners, education officials, public, private and for-profit organizations – everyone who has an impact on our health. During NPHW 2015, the fourth day will focus on communities mapping the network of partners and connections needed in their areas to make the U.S. the Healthiest Nation in One Generation.

Friday, April 10: Building on 20 Years of Success

2015 marks the 20th anniversary of APHA coordinating National Public Health Week, and the accomplishments of the public health community over the last two decades are significant, such as a 25-year improvement in the average lifespan for Americans and a 70 percent reduction in HIV/AIDS-related deaths. During the fifth day of NPHW 2015, the public health community (and especially public health student leaders!) will come together to celebrate these and other accomplishments and bring a renewed focus to the work ahead - and what it will take to become the Healthiest Nation in One Generation.



The Herald-Sun

Rx for Nutrition

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Veggie Van at Durham County Department of Public Health

How do you help low-income families who may not be able to afford the fresh fruits and vegetables we know are important to the health of their young children?

Try this idea: Prescribe them. And then, just as insurance or other programs help pay for the medicine they need, help defray the cost of filling those nutrition prescriptions.

The idea seems so simple, how could it have taken so long to think of it? But the idea, rippling around the country in recent years, has taken hold here. The Durham County Department of Public Health is this month rolling out its Fresh Food Prescription (FFRx) pilot program.

Jane Brody, The New York Times' longtime health writer, wrote about the advantages of such programs in a blog post in December.

"Instead of drugs or admonishments to lose weight, which typically fall on deaf ears," Brody wrote, "doctors provide families in the FVRx program with a 'prescription' to eat fruits and vegetables.

Acknowledging there is no "single solution" to our nationwide obesity epidemic, she wrote that "this and similar programs at community health centers in 30 states strongly suggest that providing access to fresh fruits and vegetables, with the means to purchase them and the motivation to do so, can make a meaningful dent in the problem."

The obstacles to getting healthy food into any young person are real — if you've tried to get an adolescent to eat spinach, you know one of the more mundane ones. But a balky adolescent in a middle-class household with parents with a good understanding of nutrition is nothing compared to folks in or near poverty, sometimes too weary to press the point or with less access to information to insist.

Cost is a factor. "Energy- dense 'junk' foods cost on average \$1.76 per 1,000 calories compared with \$18.16 per 1,000 calories for low-energy but nutritious foods," pediatrician Shihka Arland wrote in "Contemporary Pediatrics" last summer.

The local FFRx program is, officials say, a natural extension of their efforts. "Public Health continues to tirelessly work to reduce as many barriers to healthy eating as possible, including cost and transportation," said Kelly Warnock, the health department's nutrition program manager.

To those ends, the 36 pregnant women who get prescriptions for fresh produce at their prenatal appointments can fill their prescriptions at Veggie Van, a mobile market in the lobby of the county's Human Services Building downtown and at three other locations. The cost of the prescribed produce will be borne by \$2.50 co-payments and a grant from the N.C. Public Health Association's Ann F. Wolfe Endowment.

The program sounds just like what the doctor ordered.

For more information about the programs and services offered through the department's nutrition program, call Kelly Warnock at 919-560-7857 or e-mail kwarnock@dconc.gov. To find out more about Veggie Van, including their market schedule, visit cnpnc.org, call 910-292-9166 or e-mail veggievan@cnpnc.org.



Public Health



Changes to NC Vaccine Requirements

The new vaccine requirements and changes to previous vaccine requirements will become effective **July 1, 2015**. Documentation of a valid medical or religious exemption would exempt an individual from the requirements.

Details of the rule changes are enclosed in the updated NCAC 10A. Highlights of the new vaccine requirements and the revised requirements are listed below.

New Vaccine Requirements

Pneumococcal conjugate vaccine (PCV) – 4 doses by 15 months of age

- The number of vaccine doses required depends on the age of the child when the vaccine series began.
- No individual 5 years of age or older is required to receive PCV.

Meningococcal conjugate vaccine (MCV) – 2 doses

- One dose for individuals is required entering the 7th grade or by 12 years of age whichever comes first.
- Booster dose for individuals is required entering the 12th grade or 17 years of age beginning August 1, 2020.
- If the first dose is administered on or after the 16th birthday the booster dose is not required.

Changes to Previous Vaccine Requirements

Polio vaccine – the booster (4th) dose is required on or after the 4th birthday and before entering school for the first time.

Varicella vaccine – 2 doses administered at least 28 days apart

- One dose is required on or after 12 months of age and before 19 months.
- A second dose is required before entering school for the first time.
- Documentation of disease must be from a physician, nurse practitioner, or physician's assistant verifying history of varicella disease. Documentation must include the name of the individual with history of disease, approximate date or age of infection and a healthcare provider signature.

Tetanus, diphtheria, and pertussis (whooping cough) – Tdap

- A booster dose of Tdap is required for individuals who have not previously received Tdap and who are entering 7th grade or by 12 years of age, whichever comes first.

School Entry from 6th to 7th Grade

- Simultaneous administration of Tdap and MCV vaccines is allowed at the 11-12 year old recommendation.



CDC/ Judy Schmidt

Continuing to follow the ACIP recommended schedule ensures providers are vaccinating clients age-appropriately to meet the new requirements. The North Carolina Immunization Program (NCIP) encourages providers to run reminder/recall reports from the North Carolina Immunization Registry (NCIR) to identify clients who need vaccines to meet the requirements.

Please note: A Certificate of Immunization must be presented for children entering a public, private, or religious child care facility; kindergarten; grades seven or twelve; and college or university. An individual who is not age-appropriately vaccinated and who does not meet NC vaccine requirements shall have 30 calendar days to meet requirements or be excluded from the facility.

For additional information regarding the new vaccine requirements please contact the Immunization Branch at 919-707-5550.



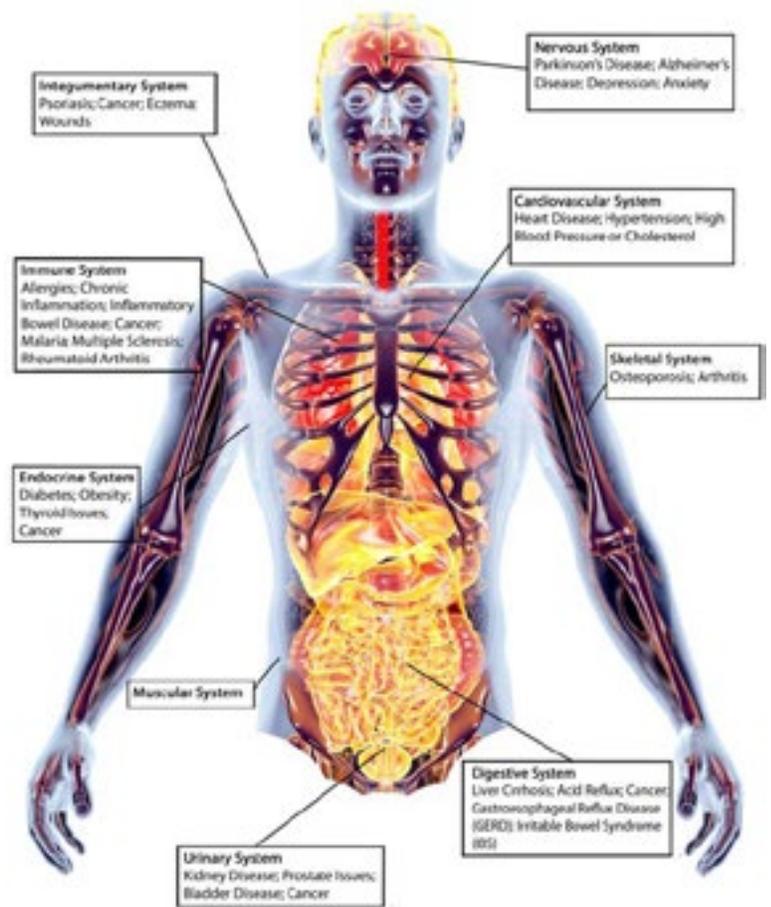
Researching the Healing Power of Plants

At North Carolina State University's Plants for Human Health Institute; we are leading in the discovery and delivery of innovative plant based solutions to advance human health.

Food has always been considered a source of energy, fueling both mind and body, though there is a rich tradition of medicinal uses as well. Scientists are examining food crops for their health promoting, disease preventing properties. They are identifying powerful phytonutrients and discovering how they contribute to reduced inflammation, improved gut health, and neuro-protective effects. Illness and disease can affect any system of the body and can bear great consequences on a person's health and longevity. Visit plantsforhumanhealth.ncsu.edu/healthy-living to learn more about foods that can assist the body and mind in overall health and wellness.

One of the research studies we were involved with indicated that the anthocyanins found in blueberries may increase the secretion of insulin, while reducing the digestion of sugars in the small intestine, resulting in multiple and simultaneous anti-diabetic effects.

Blueberries are just one example of the plant-based solutions being researched at the Plants for Human Health Institute. Cinnamon, quinoa, seaweed and watermelon are other crops that have been found to be beneficial to the health of the endocrine system. More than 30 different crops, their effect on disease and their benefit to the body systems can be found at plantsforhumanhealth.ncsu.edu/healthy-living.



Map of human body system's and associated diseases.

Blueberry Parfait with Cream

- 2 cups fresh or frozen blueberries
- 2 14oz can of cold creamed coconut milk
- 2 bananas, sliced
- ½ cup favorite granola or roasted oats
- ¼ cup roasted coconut
- ¼ cup fresh mint, chopped
- ¼ cup raw honey
- 2 tbsp. vanilla

Scoop cold coconut milk out of cans, drain the liquid and set aside for another recipe. Blend together honey, vanilla, mint and solid coconut milk. Stir dry ingredients together of roasted coconut and granola. Create a banana layer, top with granola mixture and then coconut cream mixture, repeat with blueberries and continue to rotate the process. Chill for 10 minutes.



Chatham County Public Health Department: *Eat a Rainbow Week*



From September 21st- September 27th, 2014, Chatham County celebrated its fifth *Eat a Rainbow Week*, a community-wide campaign promoting the importance of eating a variety of fruits and vegetables.

Over the past three Community Health Assessments (CHAs), obesity has been a top priority in Chatham County. In the 2014 CHA, nearly 50 percent of Chatham residents

reported that they ate only one to two servings of fruits and vegetables a day, and almost 12 percent of middle and high school students reported not having eaten vegetables in the past week.

The goal of *Eat a Rainbow Week* is to increase community awareness of the importance of consuming a diet with a variety of fruits and vegetables. Awareness, in turn, increases the likelihood of fruit and vegetable consumption, resulting in improved long-term health benefits for Chatham residents.

The week's events are coordinated by the Chatham County Public Health Department and the *Eat a Rainbow Week* planning committee, a collaborative team comprised of individuals from multiple sectors.

The *Eat a Rainbow Week* planning committee teams up with community organizations and businesses to bring the *Eat a Rainbow* message across the county! Throughout the week, local restaurants add colorful fruit and vegetable dishes to their menus so that patrons could choose healthy eating options. Chatham County Schools, Pre-K centers, farmers' markets, libraries, and other partners sponsor *Eat a Rainbow Week* activities as well. Individuals visiting each of the participating locations throughout the week are encouraged to complete an *Eat a Rainbow Passport* to qualify to win a Magic Bullet Blender.

In addition to all the great places around the county to eat a rainbow, residents and county employees are also encouraged to eat a rainbow at home. Through *Eat a Rainbow* challenges, individuals are challenged to count the number of servings they ate per day, with the goal of meeting the recommended five to eight servings a day.

To learn more about *Eat a Rainbow Week* visit: chathamnc.org/eatarainbow.



My Public Health Experience: “Getting to Zero” in the Ebola Response

Lauren Boyle-Estheimer, PhD, MS, CHES



Lauren Boyle-Estheimer

Last summer, I left NC DPH to pursue a fellowship with the Centers for Disease Control and Prevention (CDC) in Atlanta. I was hired as the CDC Surveillance Strategy Coordinator in the Office of Public Health and Scientific Services. Little did I know this opportunity would lead to an even more exciting experience!

In December, I was selected for a 60 day detail to the CDC Emergency Operations Center (EOC), serving as the Medical Care Task Force (MCTF) Operations Team Lead to support the Ebola response. MCTF is one of the largest task forces, with over 200 staff and contractors. The goal of the task force is to provide technical assistance and guidance to leadership, and ensure ongoing communication between CDC, federal, state, local, tribal, and territorial public health agencies and partners. Internationally, this guidance facilitates healthcare workers deployed to West Africa to safely and effectively diagnose and treat potential Ebola patients to improve infection control per CDC standards. Domestically, the MCTF collaborated on a tiered hospital strategy for

managing and caring for suspected and confirmed patients with Ebola. Additionally, the MCTF developed and implemented training programs for healthcare workers to respond and care for patients, ultimately reducing the risk of Ebola infection.

My primary duties while on the task force included supporting the coordination of MCTF functions across the CDC Incident Management System and preparing and coordinating presentations and reports summarizing progress to the Incident Manager and the CDC Director for critical decision making.

Working alongside distinguished public health experts taught me about the commitment it takes to respond to an event of this magnitude. I'm humbled and grateful to have this experience, strengthening my dedication to public health!

For more information on the Ebola response, please visit: cdc.gov/vhf/ebola.



2015 NC Prevention Report Card: State Scores Poorly in Nutrition, Obesity, Exercise; A Little Better For Tobacco Use



TOBACCO



NUTRITION



PHYSICAL
ACTIVITY



OBESITY



It is no surprise to public health professionals that behaviors including cigarette smoking, poor diet, and not enough physical activity -- alongside too little access and cultural support for making healthy choices -- give North Carolina poor grades for its overall health. Prevention Partners drew on data from state and federal agencies and its own proprietary workplace data to grade the state in the newly released 2015 North Carolina Prevention Report Card. The results are hardly honor-roll material: tobacco, C; physical activity, D; nutrition, F; and obesity, F.

Prevention Partners has published eight North Carolina report cards since 1998 to raise awareness about the human and economic costs of poor health. The 2015 report card, an interactive publication found at: forprevention.org/p2/2015ReportCard/, was published in collaboration with North Carolina Department of Commerce, the North Carolina Hospital Association, and Center for Healthy North Carolina. The report card is sponsored by The Jim Long Fund, Kate B. Reynolds Charitable Trust, and United Healthcare.

The report shares the data used to compute the grades then points to a number of solutions and success stories and offers basic, actionable steps for making improvements. "Such poor grades can feel overwhelming," says Meg Molloy, DrPH, MPH, RD, Prevention Partners' President and CEO. "But we know effective, affordable solutions, and we're finding strong leadership interest in bringing these solutions to all 100 counties across the state. Positive change is possible -- North Carolina showed national leadership over the last ten years in adopting voluntary policies and public laws to slow

tobacco use. Poor health is an economic development issue. Business leaders, and local school and government employers, are particularly well positioned to bring prevention policies and practices to their workplaces and communities. And ultimately, a healthy workforce leads to a thriving economy."

On average, North Carolinians have shorter life expectancies (a half-year less than the national average) and more risk factors for expensive, debilitating chronic diseases. But life expectancies drop by as much as four years -- and health care costs increase -- in the state's economically distressed areas. So a focus of Healthy Together NC, a collaborative initiative, is to reach all 100 counties in the state, including its 85 rural counties.

"Local health departments will be key partners in improving health at the county level," said Molloy. "I invite local health directors and all our public health colleagues across the state to use this report card to inform their program and policy decisions. Together we can move these grades in the right direction," she said.

Just 12.3 percent of adults in North Carolina eat the recommended five servings of fruits and vegetables each day. The effect of poor diets is reflected in North Carolina's adult obesity statistics -- a whopping 66 percent of our adults are overweight or obese. The state's D grade in physical activity reflects that only 48 percent of adults get the recommended 150 minutes of physical activity a week. More middle- and high-school students spend two or more hours of inactive screen time per day (36.5 percent of middle schoolers, 33 percent of high schoolers) than get at least one hour of physical activity per day (25.9 percent).

Considered as a whole, North Carolina's 2015 grades in tobacco, obesity, nutrition and physical activity point to weaknesses that need to be addressed in order to reach state and national year 2020 health goals. "If we could implement statewide just a handful of the policies we recommend," notes Molloy, "things like ensuring that all employees get 30 minutes of physical activity during their workdays, our state would be a national leader in healthy workplaces."



EDNCPHA/NCPHA Spring Conference

“Making Public Health Personal” is the theme for this year’s collaborative Educational Conference for EDNCPHA and NCPHA. If you haven’t already *Saved the Date*, do so now-- May 6-8, 2015 at the New Bern Riverfront Convention Center. Eastern District also extends a welcome to the NCALHD and hopes that those attending the monthly meeting will extend their stay for the conference.

The conference will open with a luncheon and a presentation on “County Health Rankings and the Power of 10”. Following lunch Dr. Carl Williams, DVM, DHHS-DPH, will enlighten us on hot topics in the field of epidemiology and Sally Herndon and Jim Martin, Tobacco Prevention and Control Branch, DHHS will provide the latest information in Tobacco Control and Prevention.

A multitude of informative and awareness raising sessions will also be available on Thursday. Speakers that will be of interest to public health leadership include Dr. Sheila Davies, PhD (Tele-health and Public Health Opportunities); College of Health and Human Services, University of North Carolina Wilmington (Development of the NC Public Health Training Center – implications for workforce devel-

opment, present and future) and a lengthy session by Steven Garner, DHHS, on Medicaid Cost Settlement. Nursing and Environmental Health have full agendas in which continuing education credits are being requested. Health Education, Management Support and Communicable Disease have prepared agendas or joining with other sections for joint sessions.

The conference will close on Friday with a breakfast and a crash course on “Advocacy 101”. Learn how to be better advocates for public health policies and practices that support current health goals, to sustain funds, and to develop and deliver effective preventative strategies to combat obesity, heart disease and other preventable diseases. Scholarships and awards will be presented immediately following Advocacy 101.

A complete educational agenda, including networking and social events, is available at either ncpha.memberclicks.net/spring-conference or edncpha.com/edncpha-events/. We look forward to seeing you in New Bern.

---Len Gilstrap, EDNCPHA President



Awards and Recognition

Jerry Parks, left, Health Director for Albemarle Regional Health Services, received the annual Ronald Levine Legacy Award at last month’s annual conference of state health directors. Parks was cited for being a distinguished public health professional. Johnston County’s Dr. Marilyn Pearson, third from left, received recognition as Health Director of the Year.

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