



Welcome!

Welcome to the first issue of *Chronic Disease Prevention and Health Promotion Updates*, a quarterly email newsletter designed to provide timelier information about the work we do in the Section of Chronic Disease Prevention and Health Promotion (CDPHP). Our mission is a difficult one; the challenge in Alaska is great. Success requires a coordinated effort by internal and external partners statewide, so we are excited about this opportunity to share news about our projects and activities. Our hope is that this information will enhance collaboration both inside and outside of state government. Please feel free to contact our program managers if you have questions about CDPHP programs, or ideas about collaboration.

Specifically, the mission of CDPHP is to improve the health and well being of all Alaskans by: monitoring behavioral risk factors and chronic diseases through the collection, interpretation, and dissemination of surveillance data; educating the public and health professionals; collaborating with communities and other partners in the planning, implementation and evaluation of evidence-based strategies and interventions; advocating for the prevention and control of chronic diseases; and promoting healthy lifestyles.

Events

contact cdphp@health.state.ak.us for information

Thursday, **August 9**, 9:30 am

CDC, Division of Nutrition and Physical Activity
Teleconference

Wednesday, **August 15**, 12-1 pm

Health Summit planning meeting

Thursday and Friday, **August 16-17**

AK Tobacco Control Alliance Steering Committee
meeting and strategic planning session

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Good Morning to everyone!

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State of Alaska, Sarah Palin, Governor

Department of Health and Social Services
Karleen K. Jackson, PhD, Commissioner
<http://www.hss.state.ak.us/>

Division of Public Health
Jay Butler, MD, Director



For more information contact:
(907) 269-2020 or cdphp@health.state.ak.us

Arthritis Program

The Alaska Arthritis Program began in 1999 and is staffed by the Arthritis Program Coordinator, Diane Peck. The Arthritis Program works to prevent and control arthritis and other rheumatic conditions by: assessing the burden of arthritis and other rheumatic conditions; educating the public and health professionals; collaborating with communities and other partners in planning, implementing and evaluating science-based strategies and interventions; and advocating for the prevention and control of arthritis and other rheumatic conditions.

The Alaska Arthritis Program has partnered with The Arthritis Foundation, Pacific Northwest Chapter to train instructors and offer classes in the Arthritis Foundation Exercise and Aquatic Programs. The Alaska Arthritis Program has also partnered with the Alaska Diabetes Program to support Living Well Alaska, a chronic disease self management program. The Alaska Arthritis Program works with the Alaska Arthritis Advisory Group, which recently developed the "Alaska Arthritis Resource Guide". The Group is currently updating the 2002 "Alaska Arthritis and Osteoporosis Plan". For more information about Arthritis you can visit this website: arthritis@health.state.ak.us

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Tobacco Prevention and Control

The Alaska Tobacco Prevention and Control (TPC) Program was initiated in 1999, with a grant from the Centers for Disease Control and Prevention. The Alaska TPC Program currently has a staff of eight full time employees and is funded at over \$7 million, which comes from federal grants and the state Tobacco Use and Cessation Education Fund (TUCEF). The TUCEF receives small percentages of the Master Settlement Agreement funds that Alaska receives from tobacco companies, and the state taxes on cigarettes.

The mission of the Alaska TPC Program is to provide leadership, coordinate resources, and promote efforts that support Alaskans in living healthy and tobacco-free lives. Our goals are:

1. Eliminate exposure to environmental tobacco smoke
2. Identify and eliminate tobacco-related disparities experienced by Alaska population groups
3. Ensure that all Alaskans have the resources to quit tobacco
4. Prevent initiation of tobacco use among youth

The Alaska TPC Program components are: (a) the community-based prevention grant program, (b) the cessation grant program, (c) the Alaska Tobacco Quit Line, (d) the K-12 school tobacco grant program, (e) coordinated statewide media, (f) Leadership for Eliminating Alaska Disparities (LEAD) for Tobacco, (g) surveillance and evaluation, (h) partnership with chronic disease prevention and health promotion partners, (i) facilitation of the Alaska Tobacco Control Alliance (ATCA) partnership, and (j) administration. In the upcoming year we anticipate increasing the number of community prevention grants, demonstrating success in our first school grants, conducting a fax-referral pilot program for the Alaska Tobacco Quit Line, and completing a statewide strategic plan for tobacco with ATCA.

Comprehensive Cancer Control

The Alaska Comprehensive Cancer Control Program (ACCCP) mission statement is “Working Together for a Cancer Free Alaska”. Through a partnership of individuals and organizations around the State, we work to reduce the burden of cancer. The first cancer plan was written in 1994; the most recent was produced in 2006 and is available at: <http://www.hss.state.ak.us/dph/chronic/cancer/comprehensive.htm>.

Program staff include Julia Thorsness and Viktoriya Myers.

General goals include dissemination of the Alaska Comprehensive Cancer Control Plan, retention of current partners and expansion of the partnership.

With cancer as the leading cause of death in Alaska, the partnership has chosen goals to address all aspects of cancer: prevention, diagnosis, treatment, survivorship, palliative care and end of life care. Current efforts include supporting the Ride for Life – a bike ride from Anchorage to Seward -- that raises funds for screenings while increasing visibility and understanding of this preventable disease, and increasing provider knowledge about the best practices for pain and symptom control.

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Heart Disease and Stroke Prevention

The Heart Disease and Stroke Prevention (HDSP) Program was first funded by CDC in 2001 and has a 2.5 person staff. The focus of the HDSP grant is on secondary prevention of heart disease and stroke. The HDSP Program’s primary tools for accomplishing this mandate are policy and systems change.

There are two specific foci for the coming year.

- The primary focus is to assess statewide capacity to treat stroke as an emergency, and to promote standards of care for treating stroke by implementing protocols and a training curriculum. The secondary focus is to enhance a statewide infrastructure to support worksite health promotion programs, enabling them to adopt HDSP Program priorities. This will be accomplished through work with the University of Alaska to offer degree and certificate programs, with the Southeast Alaska Regional Health Corporation to develop a training curriculum for small businesses, and with the Section’s Worksite Health Promotion Collaborative on training trainers to present this curriculum.
- We also support efforts by faith based, worksite, and health care systems to incorporate heart disease and stroke risk factor reduction strategies in their work with their constituents. These activities will increase blood pressure and cholesterol control, especially among low-income Alaskans.

The Heart Disease and Stroke Prevention Program supports the Take Heart Alaska Coalition, which is the primary organization for accomplishing the work of the program.

AHELP: CDPHP sponsors the Alaska Health Education Library Project (AHELP), an electronic health education resource for Alaskans. Go to <http://ahelp.org/Default.aspx> to learn more.

Health Survey Lab

The goal of the Health Survey Lab is to provide ongoing, systematic collection, analysis, interpretation, and dissemination of telephone survey data. In 1991, the Health Survey Lab was developed to collect Behavioral Risk Factor Surveillance System (BRFSS) data; collection of the BRFSS data has continued yearly. The new 2006 BRFSS Annual report is available at <http://www.hss.state.ak.us/dph/chronic/hsl/brfss/publications.htm>.

Alaska is one of the few states with the capacity to collect telephone survey data in-house. Interviewers collect survey data 7 days a week from the lab in Juneau. The Lab is staffed with a program manager, survey supervisor and 10 interviewers. In addition to the BRFSS, the lab is currently conducting a Modified BRFSS survey focused on tobacco use and attitudes, and an adult and child asthma survey. The program manager and the BRFSS Workgroup will convene in August to plan the 2008 BRFSS and Modified BRFSS surveys. If you have questions about the Survey Lab or are interested in the data it collects, please contact Rebecca Wells, Health Survey Lab Manager at 907-465-8540 or rebecca.wells@alaska.gov.

AHELP listserve: CDPHP sponsors a listserve that supports discussion and information exchange among professionals involved in health education and health promotion in Alaska. Go to <http://ahelp.org/People/Discuss.aspx> to subscribe.

School Health

The Division of Public Health became interested in school health issues when it began implementing the Youth Risk Behavior Survey (YRBS) in 1995 in cooperation with the Alaska Department of Education & Early Development. There is one health program manager dedicated to the YRBS and other school health issues. Currently this program is funded by the Department of Education & Early Development and general funds.

The YRBS is an anonymous school-based survey developed by the Centers School Health for Disease Control and Prevention (CDC). It is conducted every other year to better understand and address the health issues facing high school students in Alaska. The results of the 2007 YRBS will be available this fall.

The CDPHP School Health Program also promotes the components of the CDC Coordinated School Health Program model including health education, physical education, nutrition services, school health services, parent and community involvement, healthy school environment, counseling, psychological and social services and health promotion for staff. Most recently, the program collaborated with the Department of Education & Early Development and the Association of Alaska School Boards on supporting Alaskan school districts with the development and implementation of school wellness (nutrition and physical activity) policies. The program also worked with the Obesity Prevention and Control Program to produce the *Alaska School Wellness Toolkit* and coordinated a successful School Wellness Institute in 2006. Another School Wellness Institute is being planned for 2007.

Obesity Prevention and Control

The AK Obesity Prevention and Control Program (OPCP) has two staff: Karol Fink, MS RD is the nutrition specialist and program manager and Russ Stevens is the physical education specialist. The OPCP: (a) assesses and monitors the burden of overweight and obesity, physical activity and nutrition behaviors in Alaska, (b) offers public and provider information, (c) coordinates physical activity and good nutrition promotion with other governmental, voluntary, professional and academic organizations, (d) provides staff and other support for Alaskans Promoting Physical Activity and Eat Smart Alaska, both of which are committees of the statewide Take Heart Alaska Coalition, and (e) supports the annual Bike to Work day in May.

The OPCP worked with the School Health Program, the Association of Alaska School Boards and the AK Department of Education and Early Development to produce *The Alaska School Wellness Toolkit* which supports physical activity and nutrition policies and practices that promote healthy Alaskan children and reduce childhood overweight in Alaska. The *Physical Activity and Nutrition Training Manual for Head Start Kids* will be distributed to Child and Adult Care Food Program recipients across the state during summer, 2007; it will support programmatic development and provider training in physical activity and nutrition to promote healthy behavior and reduce overweight among Alaska preschool children. During FY 2008, the OPCP will also produce reports on the prevalence of overweight among Anchorage School District students in 2003-2006 and a report on the Burden of Obesity in Alaska, and Eat Smart Alaska will coordinate the statewide rollout of the brand transition from 5 A Day to Fruits and Veggies: More Matters.

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Social Marketing / Media

The Social Marketing / Media Program began in July 2006 with Paula Recchia as the sole staff person. She coordinates efforts with programs throughout AK DHSS and coalitions to develop and implement health communication strategies to improve the health of all Alaskans through the lifespan. The Alaska Health Education Library Project www.ahelp.org is a key strategy for this program; it includes a repository of information and contacts and offers a listserve. The Current Health Topic featured on the Division of Public Health and Section of Chronic Disease Prevention and Health Promotion websites also highlights health information and links to resources. Watch for *The Healthy Body...Healthy Brain* campaign, which identifies risk factors for Alzheimer's disease and related dementias. The Social Marketing / Media program and the Alaska Commission on Aging are developing this campaign, which has been funded through the Alaska Mental Health Trust Authority.



Karol Fink counting bikes for Bike to Work day

Health Promotion

The Division of Public Health started centralized health promotion and education in 1982, when it received its first Preventive Health and Health Services Block Grant. Staffing grew to as many as twenty-five employees over the years. It currently consists of one person, whose goal is to improve the health and well-being of Alaskans by increasing the competency, skills, resources and effectiveness of community-based health promotion efforts throughout Alaska regardless of disease or risk factor. Program activities include:

- Providing education, training opportunities, and technical assistance on health education, health promotion, and community development
- Developing and supporting partnerships and collaboration with other statewide, regional, and local public health agencies in the public and private sectors, to improve the health status of Alaskans throughout the state
- Advocating for statewide, regional, and local health promotion activities, policies, and resources

The overarching focus for 2008 is continuing a community mobilization and development project in conjunction with the Section of Public Health Nursing. Using the nationally recognized Mobilizing Action through Partnerships and Planning (MAPP) process, the Health Promotion Program is supporting communities to enhance their ability to organize, assess, plan and implement initiatives aimed at improving the quality of life and health in their area. As part of this effort, the Health Promotion Program will convene a discussion among state-level entities that promote local community mobilization to build an understanding of their expectations of communities, and to look for ways to improve the effectiveness of statewide resources.

On-going responsibilities include serving on the SEARHC Steps to a Healthier SE Alaska Leadership team, the DELTA Leadership Team, the Rape Prevention and Education planning team, the Alaska Asthma Association, Eat Smart Alaska, the CDPHP Worksite Health Promotion Collaborative, and Staffing the Preventive Health and Health Services Block Grant Advisory Committee. The Health Promotion Program is also active in the national Directors of Health Promotion and Education (DHPE), playing a leadership role in forwarding Alaska's health promotion concerns for the national agenda, as well as sharing DHPE resources with Alaskans.

New resources from CDPHP

Health Risks in Alaska Among Adults: Alaska Behavioral Risk Factor Survey, 2006 Annual Report
<http://www.hss.state.ak.us/dph/chronic/hsl/brfss/pubs/BRFSS06.pdf>

Physical Activity and Nutrition for Alaska's Head Start Kids: A training manual for parents, teachers and food service staff

<http://www.hss.state.ak.us/dph/chronic/obesity/pubs/HSTrainingManual/HSTrainingManual.pdf>

Diabetes Program

The Alaska Diabetes Prevention and Control Program (AK DPCP) is staffed by Barbara Stillwater, RN, PhD, Program Coordinator, Gail Stolz, MPH, Data and Evaluation Lead, and Charles Utermohle, PhD, data analyst. The AKDPCP applies an integrated and coordinated approach to prevent complications and premature mortality among people with diabetes. The goals of the AKDPCP are consistent with national diabetes goals in that priority is placed on the secondary and tertiary prevention of diabetes. In addition to the national diabetes goals, the AKDPCP is guided by the goals of the *Alaska Diabetes Strategic Plan*. These goals are: (1) Health promotion is prioritized through statewide planning and coordination; (2) Evidence-based clinical management is provided to Alaskans with diabetes; (3) Diabetes data are collected, analyzed, and reported to understand the burden of diabetes in Alaska and to predict its effect on Alaskans in the future; and (4) Community-based programs are empowered to develop and use evidence-based models of diabetes prevention and health promotion.

The Alaska Diabetes Program is a lead in CDPHP cooperative efforts to expand the reach of Living Well Alaska, a proven chronic disease self-management training program. The Alaska Diabetes Program also participates in the CDPHP Worksite Health and Productivity Promotion project and the CDPHP website development project. In cooperation with other CDPHP programs, the Alaska Diabetes Program is expanding web-based training resources for partners on topics including data resources, data use and interpretation, and program evaluation.

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Cancer Registry

The Alaska Cancer Registry (ACR) is a population-based cancer surveillance system and began collecting cancer data in January 1996. It is funded by the Centers for Disease Control and Prevention (CDC). ACR collects data on all newly diagnosed cases of cancer (including benign brain). There are 5.25 staff in the program.

Two major goals of ACR are to obtain complete, accurate and timely reporting by collecting data on at least 95% of all newly diagnosed cancer cases and to compute the incidence of cancer in Alaska with respect to geographic and demographic characteristics.

ACR is currently working on a cancer publication using the most current available data for the State of Alaska. By August, 2007 ACR will be implementing an electronic cancer reporting system called Web Plus for small clinics and individual providers.

The Registry's overall measure of success is to meet the North American Association of Central Cancer Registries (NAACCR) Call for Data standards. ACR has achieved this measure of success, the highest standard (gold standard), for the past 6 years.

Thursday, **September 6**

Community Forum on Arthritis

Thursday, **September 13**, 9:30 am

CDC, Division of Nutrition and Physical Activity Teleconference

Wednesday—Friday, **Sept 19-21**

Alaska School Wellness Institute