

## Expanding Video Conferencing Services Benefit Employees and Department

Since March 2011, the Video Communications and Distance Learning Division of the Bureau of Health Promotion and Chronic Disease has utilized video conferencing technology to increase operational efficiency for meetings and training through the establishment of 20 telehealth sites throughout the state. These include all public health area offices, the Bureau of Clinical Laboratories, and several RSA Tower conference rooms.

In addition, division staff will soon be coordinating the deployment of 40 new video conferencing units to county health departments. This initiative has been a joint project between the division and the Bureau of Information Technology. IT ensures quality of service at each site so that the necessary bandwidth is available and provides invaluable technical assistance to division staff who are responsible for scheduling and managing the meetings and training sessions.

For public health employees who haven't used this two-way video technology yet, participating in video conferencing is just like a traditional face-to-face meeting. And it is much more effective than a phone call or telephone conferencing. Each video conference site has a dedicated unit that includes computer, camera, microphone and special monitor so participants can talk and see each other, share PowerPoint slides, spreadsheets and other computer resources. Video conferencing is the name to describe the technology, but when it is used in a health setting for meetings and training, it is known as telehealth. Telemedicine is another application of video conferencing equipment when it is used with special peripheral devices such as a stethoscope so that the specialist at one site can listen to the patient's heart at the other site.

Video conferencing increases overall agency productivity. Operational advantages include reduced travel costs, per diem, and staff time spent processing travel expense accounts. It helps the environment by cutting energy use, plus for busy professionals distant from the Central Office, the result is less time spent away from the office, home and family.



State Health Officer Dr. Donald Williamson uses the technology on a regular basis for area health officers/administrators' meetings. "Video conferencing is an efficient and productive way to hold meetings and I strongly encourage our staff to use this resource," said Dr. Williamson at a recent central office staff meeting. Other regular users include the Tobacco Control and Prevention program, the Epidemiology Division and the Wellness Program. Public Health Administrative Officer Grover Wedgeworth relies on video conferencing for budget development and review, and the Office of Human Resources is now using it for Performance Appraisal and other required training.

Sandra Blakely, Ron Davis and Anna Marie Parrish are three of the employees in the division that work to make sure telehealth meetings run smoothly. In addition, each video conference site has two coordinators who serve as local support staff to make sure the room is ready and the equipment is operational. Blakely coordinates the scheduling of each meeting and assists users who have questions about the reservation process. Scheduling is done online using the LCMS system.

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# Conference Focuses on Timely Communication Topics

Effective communication in 2013 utilizes social media to empower people to make healthier decisions. “The New Face of Crisis Communication” was one of the many relevant topics risk communicators learned about when they attended a conference, “Communicating Effectively in State Government,” Oct. 10 at Alabama Public Library Service in Montgomery.

Do you realize that on a single October day, there may be 600 to 700 views of Alabama’s influenza clinic schedules driven by the ADPH mobile app? Flu shot clinics are just a small fraction of the traffic the major social media networks Facebook, Twitter, YouTube and text messaging drive to [adph.org](http://adph.org) each day.

One participant described the conference presentations as, “On point! Every speaker gave me valuable information. I enjoyed the whole day!” Other participants stated that the conference provided them with information on how to more effectively communicate with at-risk persons and communicate overall during emergencies.”

Other timely topics featured included an introduction to joint information centers presented by Yasamie August of the Alabama Emergency Management Agency, a three-member expert panel on communicating effectively through

paid media, and an insightful presentation on breaking the language barrier presented by Julia Sosa of the Office of Professional and Support Services. State Coordinator for Deaf Services Bedarius Bell, Jr., Alabama Department of Rehabilitation Services, addressed communicating effectively to people with functional/access needs.

Risk Communication Branch Director Takenya Taylor said conference attendees were not only updated on the evolving media options, but were provided strategies to communicate more effectively with all target audiences.



**Bedarius Bell addresses the conference.**



**Julia Sosa speaks on breaking the language barrier.**

## Alabama Department of Public Health

### Mission

To serve the people of Alabama by assuring conditions in which they can be healthy.

### Value Statement

The purpose of the Alabama Department of Public Health is to provide caring, high quality and professional services for the improvement and protection of the public’s health through disease prevention and the assurance of public health services to resident and transient populations of the state regardless of social circumstances or the ability to pay.

The Department of Public Health works closely with the community to preserve and protect the public’s health and to provide caring quality services.

## Alabama’s Health

Alabama’s Health is an official publication of the Alabama Department of Public Health, Bureau of Health Promotion and Chronic Disease. If you would like to receive the publication or wish to submit information for future articles, please telephone requests to (334) 206-5300. Articles may be reprinted provided credit is given to the Alabama Department of Public Health. The department’s website is <http://www.adph.org>.

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## Social Media: A Powerful Force for Public Health Environmentalists

User-generated real-time social media is powerful. That's the message Leigh Salter, assistant environmental health director at Montgomery County Health Department, communicated in a presentation delivered to Alabama Environmental Health Association chapters last August. In addition to defining and describing the various forms of electronic communication and how they work, she provided specific examples of ways social media is being utilized in the environmental services arena.

"Social media is no longer a tool; it's the worldwide engine for real-time communication," according to a statement in her PowerPoint presentation. "We receive environmental complaints based on social media, and we investigate."

A few of the incidents illustrating how social media has helped improve environmental services in Montgomery County when used correctly are as follows:

- To identify illegal tattooing and body art operations, including their addresses and hours of operation
- To provide a photographic description of both a non quarantined pit bull dog and its owner
- To identify an illegal catering operation that advertised on Facebook
- To locate an unlicensed business applying "permanent cosmetics"

But there are also drawbacks to the use of social media, which include the following:

- Enabling the spread of unreliable and false information
- Causing people to spend less time interacting face to face

- Leading to job loss after sharing work-related information

Social media abuse reaches the nightmare level when there are untrue rumors circulated about restaurant sanitation. A few well-known national examples are a viral image of an employee licking taco shells, another restaurant worker devouring ice cream straight from the nozzle, and a YouTube post of a prank where one employee filmed the other sticking a piece of cheese up his nostrils and then placing the cheese on a sandwich.

Ms. Salter's presentation concluded with these observations and recommendations. "For the environmentalist, it can be friend or foe." She also reminded employees to be aware of what they post on their personal social media pages, and never to post anything related to their jobs. Social media postings can be permanent records - "What happens in Las Vegas, stays on Twitter."

Other precautions she recommends are to be aware of surroundings since cameras and video equipment are readily available in cell phones during inspections and anywhere else.

Sherry Bradley, deputy director of the Bureau of Environmental Services, said, "Environmental health continues to have unique challenges. By utilizing all technical and social media at hand, we continue to protect the public's health and do what we do best - serve the public."

For more information, contact Leigh Salter, leigh.salter@adph.state.al.us, (334) 293-6516.

## Office of Minority Health Partners with Corrections on Sensitivity Training for Public Health Staff

The Office of Minority Health continues to implement the strategies from the U. S. Department of Health and Human Services National Partnership for Action Plan to reduce and eliminate health disparities in minority and underserved communities. One of the strategies encourages partnering with state agencies and community organizations to increase awareness of health disparities and also to provide workforce training to improve cultural sensitivity and competency among social service agencies and health care providers that serve minority and at risk populations.

On Nov. 19, the Office of Minority Health partnered with the Alabama Department of Corrections (ADOC) to offer a cultural sensitivity training to public health

staff. Correctional trainer Dr. Eddie Lancaster, Chaplains Tom Woodfin and Alicia Brown provided policy driven information related to the volunteer do's and don'ts when working with incarcerated offenders, maintaining professional and personal boundaries, gender-specific and responsive practices, and the prison rape elimination act or (PREA).

The ADPH partners with ADOC to implement health education programs, disease control services and health care linkages to approximately 25 prison facilities statewide. This training was also offered to area and county public health staff in Montgomery, Jefferson, Bibb and Morgan counties.

# Alabama Celebrates National Rural Health Day

Rural communities have health care needs that differ from those of urban or suburban areas. To highlight access needs and to promote awareness, Alabama joined in “Celebrating the Power of Rural” on National Rural Health Day, Nov. 21.

For the third consecutive year, the National Organization of State Offices of Rural Health and all 50 state Offices of Rural Health joined with other local, state and national rural health care providers and stakeholders to celebrate National Rural Health Day. Fifty-five of 67 of Alabama’s counties are considered rural, and 2 million residents or 43.6 percent of the entire Alabama population live in rural areas. Seven rural counties (Bibb, Bullock, Coosa, DeKalb, Perry, Sumter and Wilcox) are among the 250 U.S. counties with the lowest per capita incomes among all 3,113 counties and parishes.

Alabama currently needs 156 strategically placed primary care physicians to eliminate all primary care shortages and 434 to provide optimal care. Only three of Alabama’s 55 rural counties (Coffee, Marion and Pike) are not entirely

or partially classified as primary care shortage areas. Eight rural Alabama counties do not have hospitals. In 1980, 46 of Alabama’s 55 rural counties had hospitals performing obstetrics. Today only 19 of the 55 offer this basic service.

Dental care is also scarce in Alabama’s rural areas. Alabama currently needs 262 strategically placed dentists serving the Medicaid population to eliminate all dental shortages and 363 to provide optimal care. All of Alabama’s 55 rural counties are classified as dental shortage areas for the Medicaid population.

National Rural Health Day was launched in 2011 to increase awareness of the unique health care issues facing rural Americans and highlight the efforts of state offices of rural health and others in addressing those issues.

The Office of Primary Care and Rural Health and the Alabama Rural Health Association celebrated National Rural Health Day by providing celebration posters to rural hospitals and rural health clinics, and through social media posts on Twitter and Facebook.

## Alabama Obesity Task Force Urges the Public to ‘Rethink Your Drink’

The Alabama Obesity Task Force has launched a new yearlong campaign called “Rethink Your Drink” which focuses on making healthy choices when deciding what to drink and reducing the amount of sugar-sweetened beverages that Alabamians currently have in their diet.

The first core message of the new campaign is to choose water in the place of sweetened drinks. As an example, a 20-ounce soda or sweet tea contains around 16 teaspoons of added sugar. This translates into about 240 empty calories. That added sugar really adds up, especially considering the American Heart Association recommends individuals consume only six to nine teaspoons a day.

“Drinking plenty of water is essential in staying healthy and hydrated,” Miriam Gaines, task force member and former director of the Nutrition and Physical Activity Division, said. “In addition to drinking water, future messages we will promote are to watch calories, and replace sugar-sweetened beverages with skim or 1 percent low fat milk.”

When the body has excess weight, referred to as obesity, it inhibits some of the body’s normal functions and can lead to health problems. In fact, obesity can put a person at a high risk for many diseases including type 2 diabetes and certain cancers. Obesity can also cause a buildup of plaque in the arteries that can lead to coronary heart

disease, high blood pressure and stroke. Alabama is ranked as fifth most obese state, with almost 67 percent of the population either overweight or obese. Obesity causes an economic concern, too. In 2008, medical care costs related to obesity reached \$147 billion in the U.S.

The Rethink Your Drink campaign materials were showcased at the Alabama Wellness RX Health Summit hosted by the Alabama Obesity Task Force and Alabama Action for Healthy Kids in October at the Pelham Civic Complex.

The Alabama Obesity Task Force was established to address overweight and obesity issues through advocacy, policies, environmental changes and programs that support healthy lifestyle changes. It is a volunteer organization comprised of 172 members that represent a diverse variety of organizations.

If you are interested in joining the Alabama Obesity Task Force, you may fill out and submit an application form online. For more information, visit [www.adph.org/obesity](http://www.adph.org/obesity).



# Expanded Radiological Emergency Response Teams Train to Respond to a Radiopharmacy Incident

The Office of Radiation Control (ORC) regulates over 420 radioactive material licenses in Alabama by an agreement with the U.S. Nuclear Regulatory Commission. Unfortunately, these licensees may experience an uncontrolled event such as a fire or even an intentional incident like sabotage. To assist with a radiation response in Alabama, the Expanded Radiological Emergency Response Teams (ERERT) composed of trained public health environmentalists and nurses volunteer their time and expertise to help protect the citizens of Alabama.

ERERT members play an instrumental role by being one of the first responders at an emergency involving radioactive material within the state. Once at the scene, the ERERT would be able to provide the state health officer or his designee with an initial assessment of radiological conditions and provide initial assistance in the resolution of radiological hazards in coordination with incident commanders, such as local emergency management agencies, law enforcement or radioactive material licensee personnel.

To help prepare public health area teams, ORC conducted an annual hands-on training titled "A Radiopharmacy Incident" on Nov. 20, 2013 in Montgomery. The incident scenario involved a simulated burglary and subsequent injury of an employee at a nuclear pharmacy. Additional hands-on training was provided to team nurses on how to properly decontaminate a person with radioactive contamination. The purpose of the training was to test communication between an ORC duty officer and a team member, don appropriate personal protective equipment, prepare and issue radiological equipment, document

incident information, use and accurately read radiological survey meters, and provide care for a contaminated patient.

To measure the success of each team's response, ORC personnel conducted evaluations based on five areas of criteria. Results of the exercise showed that ERERT members successfully demonstrated the ability to care for a contaminated injured individual while protecting themselves from a radiation hazard. The cooperation and teamwork of the ERERT members was evident by providing good patient and personal contamination control while maintaining an emphasis on medical care. ORC acknowledges the efforts of those who participated and made the exercise a success.

*By Kevin Hicks*



**Radiation Control provides hands-on training to area responders.**



## Stacey Jernigan and Zeta Phi Beta Receive First OWH Linda Mays Volunteer of the Year Awards

The Office of Women's Health Steering Committee honored Stacey Jernigan as the first recipient of the OWH Linda Mays Volunteer of the Year Award at a luncheon on Dec. 13. Ms. Jernigan is the founder of Mommy & Me Fitness in Birmingham.

The Zeta Phi Beta Sorority, Inc., Alpha Rho Zeta Chapter of Montgomery, was also presented the OWH Linda Mays Volunteer of the Year Award for their group participation. This special recognition was for their support of OWH activities in Central Alabama during 2013. The steering committee only plans to present this group award one time.



**Office of Women's Health Steering Committee member Beth Taylor, left, presents Stacey Jernigan, center, the first Linda Mays Volunteer of the Year Award. Ms. Mays, a long-time member of the Steering Committee, is shown at right.**

Supporters praised Ms. Jernigan as a mother who helps with her family's business in addition to running her fitness program for moms and their children. This year she helped the OWH tremendously with the Annual Women's Health 5K Run and One-Mile Mother-Daughter Walk in Jefferson County by distributing advertisements, soliciting volunteers and participants for the event, and securing much-needed equipment.

Award recipients were selected in appreciation for their tireless efforts as a volunteer with services that were above and beyond the norm.



**Also receiving the Linda Mays Volunteer of the Year Award was the volunteer group, Zeta Phi Beta Sorority, Inc., Alpha Rho Zeta Chapter of Montgomery. Shown are, left to right, Dr. Evelyn Crayton, Louvenia Graham, Joann Ashley, Darwina Johnson and Ghandi Williams.**

## Alabama Selected to Participate in Initiative to Improve Birth Outcomes

The National Governors Association (NGA) selected Alabama as one of five states to participate in a Learning Network on Improving Birth Outcomes in the United States.

The goal of the learning network is to assist states in developing, aligning and implementing their key policies and initiatives related to the improvement of birth outcomes, as measured by the incidence of preterm births and infant mortality. NGA will convene in-state sessions with the selected states to facilitate this process as well as a networking conference for those states to share lessons learned and improve their planning processes.

"I am excited about the opportunity for Alabama to participate in NGA's Learning Network on Improving Birth Outcomes," said Alabama Gov. Robert Bentley. "I am encouraged to see that NGA is recognizing a significant and growing public health challenge."

The learning network will focus on demonstrated best practices of states with improved birth outcomes. Activities including an in-state conference in January are being planned. This conference will provide an opportunity for participants to learn about coordinating activities across agencies and available options to accelerate the pace of improving outcomes and reducing costs. In total, 13 states have participated in this learning network. This is the third and final opportunity for states to participate in this initiative.

Other states selected in this round of training were Arizona, Nevada, New Jersey and Virginia. The initiative is part of the Alliance for Information on Maternal and Child Health Services (AIM). AIM is sponsored by the Maternal and Child Health Bureau of Health Resources and Services Administration of the U.S. Department of Health and Human Services.

# The Dannon Project Implements Programs to Reduce Health Disparities Among Agency Participants

The Dannon Project, a community based non-profit agency in Jefferson County, implements preventative health programs to juvenile and adult ex-offenders aimed at eliminating health disparities and reducing social determinants to care.

The Dannon Project provides participants with direct linkages to health care services and social service agencies to promote a holistic approach to health and wellness. The project has worked to integrate health screenings and health information into community reentry and orientation services to encourage staff and clients to healthy choices that will improve their physical and mental health.



**The Dannon Project staff implements and engages in activities to support health awareness.**

In 2013, The Dannon Project partnered with the Office of Minority Health to coordinate health consultations including sexually transmitted disease screenings, blood pressure checks and diabetes risk assessments for minority at-risk participants. The Dannon Project has also partnered with the Birmingham Healthy Start Initiative to implement the Living Well Alabama – Chronic Disease Self-Management Program with women at the Birmingham Work Release Center and Healthy Start Community sites in Birmingham and Bessemer.

For more information on The Dannon Project, please contact (205) 202-4072 or [www.dannonproject.org](http://www.dannonproject.org).

## Alabama Asthma Burden Document Issued

Asthma is a chronic disease of the airways, and it is a major health burden in Alabama. There is no cure for asthma; however, through medication use and reduction of asthma triggers, asthma can be controlled. The Alabama Asthma Program, established in 2009, monitors the burden of asthma via a comprehensive surveillance system. This system assists in understanding the reach of asthma from a statewide perspective.

The program announces the release of the 2013 Alabama Asthma Burden Document. This report outlines the burden of asthma in Alabama for adults and children based on available data.

“We remain committed to working with public and private partners to preserve and protect the public’s health and to assure conditions in which people can be healthy,” Jonathan R. Edwards, program manager, said.

This document is available electronically on the program’s website at <http://www.adph.org/asthma/index.asp?id=3968>. If you would like to receive additional information regarding this document, please contact Edwards at (334) 206-5605.



**Program Manager Jonathan Edwards, Asthma Epidemiologist Aruna Rikhi and Research Unit Director Dr. Debra Hodges are pictured with the 2013 Alabama Asthma Burden Document.**

## Commendations

If you would like to praise employees for their accomplishments, send letters of commendation to the State Health Officer or the employee's supervisor and a copy by e-mail to [Arrol.Sheehan@dph.state.al.us](mailto:Arrol.Sheehan@dph.state.al.us) for inclusion in this list. Four items are needed: the employee's name, work unit, name of the person making the commendation, and his or her city and state.

### Center for Emergency Preparedness

from Mylinda Brown  
Montgomery, Ala.

### Terra Foster

Center for Health Statistics  
from Diana Fields  
New York, N.Y.

### Jeanie Gregg

Bureau of Health Provider Standards  
from Michael I. Hanna, M.D.  
Anniston, Ala.

### Tim Hatch

Cyndi Tereszkiwicz  
Center for Emergency Preparedness  
from Sara Bourdeau  
Tallahassee, Fla.

### Bill (William) Hause

Bureau of Information Technology  
from Belinda Hensley  
Del Manning  
Grover Wedgeworth  
Montgomery, Ala.

### Ross Hudson

Public Health Area 2  
from Tracey Maples  
Huntsville, Ala.

### Teresa Kilburn

Center for Health Statistics  
from Zeda Constable  
Buena Vista, Ga.  
Edward Deal  
Brockton, Mass.  
Gregory McIntyre  
Brandon, Miss.

### Saundra Levert

Center for Health Statistics  
from Leona "Lee" Douglas  
Pell City, Ala.  
Christale Kerfoot  
Enterprise, Ala.  
Ryan Wooden  
Fyffe, Ala.

### Theresa Mulkey

Center for Health Statistics  
from Rickey Christopher  
Conway, Ark.  
Marlene Warren  
Huntsville, Ala.

### Sharon Nichols

Colbert County Health Department  
from Genevieve Moore  
Montgomery, Ala.

### Janice Nix

Home and Community Services  
from Belinda Hensley  
Shirley Offutt  
Montgomery, Ala.

### Kathie Peters

Center for Health Statistics  
from Jim Beard  
Guntersville, Ala.

### Georgia Reynolds

Center for Emergency Preparedness  
from Lady Nightingale  
Astoria, Ore.

### Marta Reynoso

Marshall County Health Department  
from Pam Fortner  
Montgomery, Ala.

### Terra Tuck-Foster

Center for Health Statistics  
from Michael James Rogers  
Fort Payne, Ala.

## Retirees

The following departmental employees have retired recently.

### August

#### John Blackmon

Bureau of Information Technology  
Cheryl Browder  
HIV/AIDS Division  
Jane Cheeks  
HIV/AIDS Division

### September

#### Joanne Jordan

Dallas County Health Department

### October

#### Ann Dillard

Geneva County Health Department  
Fleetwood Hines

Bureau of Clinical Laboratories

#### Heather Owens

Fayette County Health Department

#### Patricia Phelps

Financial Services

#### Charlotte Plumb

Baldwin County Health Department

#### Deborah Thompson

Tallapoosa County Health Department

#### Willie Washington

Dallas County Health Department

#### Patricia Williams

Madison County Health Department

### November

#### Linda Hill

Lauderdale County Health Department

#### John McKeller

Pike County Health Department

#### Nitza Matthews

Baldwin County Health Department

#### Bene Torbert

Lee County Health Department



**Administrative Support Assistant Bettye Gipson retired from the Division of Tuberculosis Control after 21 years of departmental service.**

## Video Conferencing, continued from page 1

Blakely said, "Department staff who have used this technology are really amazed about the quality of the picture and how easy it is to use. In October we coordinated 21 telehealth meetings including three in one day."

Division employees Parrish and Davis manage the online technical services including setting up the meetings and providing support before and during a conference to solve any technical issues. At the start of the meeting they ensure that all units are connected. To conference participants, it all seems so easy – not much different than Skype or FaceTime. Most people do not think about what happens in the "background" to ensure a successful conference. Sometimes the remote units must be restarted because of inadequate bandwidth or other technical issues. The division maintains a toll-free number (1-877-359-7206) which users should call at the first instance of a technical problem.

The division developed video conferencing online resources in addition to the LCMS Reservation Form. Go to [www.adph.org/alphtn](http://www.adph.org/alphtn) and on the left navigation bar is a link for Video Conferencing.

Resources include:

- How to Schedule a Video Conference
- ADPH Site Locations and Coordinators
- Meeting Etiquette/Tips
- Remote Control Instructions
- Frequently Asked Questions
- Video Conference Calendar
- Video Conference Reservation Form

The success of video conferencing is a result of collaboration and teamwork among several department units including Information Technology, Video Communications and Distance Learning, area administrators and our Video Conference coordinators at each site. If you have any questions or want additional information about how telehealth meetings can be used for your program, contact

Sandra Blakely (334-206-5635; [Sandra.blakely@adph.state.al.us](mailto:Sandra.blakely@adph.state.al.us)) or your local video conference coordinator:

### PHA 1

Nicole Hallmark, SaDonna Bretherick (Colbert County)

### PHA 2

Michael Tyler, Cindy Daigre (Morgan County)

### PHA 3

Karen Crawford, Tracey Holladay, Karen Ralston (Tuscaloosa County)

### PHA 4

Gwendolyn Banks, Dan Foster (Birmingham)  
Donald Howlett, Sonya Hardin (Bessemer)

### PHA 5

Becky Sherrell, Tamara Clem (Etowah County)

### PHA 6

Denise Helms (Calhoun County)

### PHA 7

Nedra Driver, Donna Rhone (Marengo County)

### PHA 8

Shawanda Surles (Montgomery County)

### PHA 9

Deborah Hoffman, Jessica Wade (Baldwin County)

### PHA 10

Sylvia Pope, Stacey Sullivan (Coffee County)  
Kathy Mobley, Linda Cantlin (Houston County)

### PHA 11

Donna Tate, James Currie (Mobile County)

### Bureau of Clinical Laboratories

Ben Hicks, Courtney Jones (Montgomery)

### Central Office

Administration, Carol Gray, Linda Forney, Shenell Fuller

### Center for Emergency Preparedness

Video Communications, Sandra Blakely, Ron Davis,  
Anna Marie Parrish, Charlie Crawford, Angie Wright

### Medicaid Agency

Kelli Pugh, Tracey Bavaro (Montgomery)



**Susan Washington, nurse coordinator with the Bureau of Family Health Services, retired effective Nov. 27. She is shown with Chris Haag, FHS Deputy Director, at her retirement party Dec. 9.**



**Jim McNees, director of the Office of Radiation Control, right, was honored with a retirement reception Dec. 20 in honor of his more than 41 years of state service. He is shown with State Health Officer Dr. Donald Williamson.**



**Colleagues honored David Pettway upon his retirement from the Bureau of Information Technology after 26 years of service.**

# WINNING!

An editorial by Wiley Mullins

What a game the Iron Bowl was and the stakes could not have been bigger for either team. On one hand you had the defending national champion, The University of Alabama, the #1 ranked team in the country versus Auburn University, ranked 4th. Both were positioned to be BCS National Championship contenders. Combined, both schools' teams have brought the national title back to the state of Alabama the past four consecutive seasons, and both are positioned well to do it again this year. WOW, what a record!

I quickly detected Iron Bowl Fever last week on a visit to the state. Although, I'm an Alabama native, I've lived in Connecticut for more than 25 years. My trip back to the state came as a result of an invitation to address attendees at the 2013 Alabama Conference on Diabetes and Obesity held in Montgomery. Unfortunately, Alabamians will not have bragging rights as America's Healthiest State. The state has one of the highest incidence of type 2 diabetes in the country and ranks third nationally for levels of adult obesity.

The state of Alabama has cultivated a rich collegiate football culture that is second to none. The "real" challenge is how do we generate comparable energy and support for stemming and reversing these lifestyle impacted health concerns. Such a plan was presented last week in Montgomery to an audience composed of health professionals, academicians, county extension agents, diabetes educators, nutritionists and dieticians from across the state. Once presented, the audience exploded in applause and anticipation.

The game of football is about gaining yards, moving the ball down the field, and ultimately WINNING. We certainly saw the importance of inches in the Iron Bowl on Saturday. Measurement is also how we attack obesity and diabetes. Every Inch Matters® is a new approach to move these troubling health concerns down. Every Inch Matters® describes both trimming inches off the waistline as well as a new waistline measure that easily identifies your risk of lifestyle related chronic illness, (type 2 diabetes, obesity and heart disease epidemics). Similarly, this waistline measure provides important information for those currently dealing with these health conditions. This simple little tool can be the turning point for anyone in pursuit of a healthier lifestyle and seeking to WIN the game of a bulging waistline.

As someone who lost his brother to type 2 diabetes at far too early an age, I unapologetically am on a mission to ignite a movement in America. The movement will begin here in Alabama towards trimming our waistlines. Yes, I know how culturally ingrained our eating habits

are and how difficult it is to alter them. Recently, the region has been referred to as The Diabetes Belt Frankly, that's because so much of our food is fried, and contains way too much sugar, salt and fat. This problem is not just isolated to the southeast! It's a huge problem for our entire country! Changing the way we prepare and consume food is imperative. It's the only way to break the vicious cycle that has generation after generation locked in a deadly spiral of obesity, illness, diminished capacity and shortened life spans.

So how do we conquer this formidable enemy? Inch by stubborn inch. Our initiative, Every Inch Matters, is so-called because the measure of a person's waistline has been proven to be a highly valid predictor of whether or not you're at risk for chronic illnesses like heart disease, diabetes and cancer. No matter what you or your loved ones' midsections now measure, new research has shown that taking off a single inch at a time, which amounts to losing 8-10 pounds, can put you on a path to achieving a healthy body weight and most importantly, long-term good health.

An inch at a time is very doable. And you know what? You can prepare the same foods you love now just as deliciously, and a lot more nutritiously, by using special seasonings and healthier cooking methods. You can learn how to do this, and what the ideal waistlines men and women need to strive via the website ([www.everyinchmatters.com](http://www.everyinchmatters.com)).

It's time to take action. Measure your waistlines right now. Set goals. Get the whole family involved. Start eating and exercising your way to vigorous health - One Inch At A Time!

Unlike a standard tape measure, the waistline measure features bold color-coded inscriptions that allow for a quick and easy determination of a healthy waistline. A risky waistline or "Danger Zone" is reflected by the color red, and the color green signals a waistline "Safe Zone." Studies confirm that women with waistlines that exceed 35 inches and men with waistlines that measure 40 inches or greater are at elevated risk for chronic diseases.

The Every Inch Matters® Waistline Measure doesn't stop there. On the reverse side is a wealth of critical wellness information, including the common risk factors for diabetes; guidelines for preventing and controlling the disease; tips for exercising daily, losing weight and eating properly; and ways to battle heart disease and hypertension.

The goal of Every Inch Matters® is to get a waistline measure in every Alabama household by year-end

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## Winning, continued from page 10

2014. We are seeking partners, to aid in the promotion and distribution of the waistline measure and to boost awareness of the dangers of being overweight and its deadly link to diabetes. Alabama's 1st annual Measure Your Waist Month is set for January 2014.

Knowing that education is key to achieving this movement's objectives, a free Every Inch Matters Curriculum has been developed with new tips and information weekly. These brief yet powerful lessons provide valuable tips on eating right and exercising regularly to maintain a healthy weight

and trim waistline. A new lesson is available weekly at [www.everyinchmatters.com](http://www.everyinchmatters.com).

I sincerely hope that Every Inch Matters® becomes both the symbol and the language for defeating type 2 diabetes and obesity in our lifetime. It's time that we all WIN, even if it is inch by inch!

*Wiley Mullins is a food entrepreneur, wellness advocate and author. He is a Tuscumbia, Ala., native and currently resides in a New York City suburb.*

## ALL Kids Turns 15.....Happy Birthday!

Alabama's Children Health Insurance Program has celebrated its 15-year anniversary. ALL Kids has played a major role in reducing the number of children in the state without health insurance.

In 1997 Congress enacted the State Children's Health Insurance Program (SCHIP) to provide coverage for uninsured children living in families earning too much for Medicaid. Alabama is recognized as the first state in the nation to have an approved SCHIP plan.

ALL Kids has provided comprehensive healthcare coverage to over 337,000 children since its inception. As you can imagine, that enrollment figure has made a profound impact on the health of Alabama's most vulnerable citizens – its children.



**Employees of the Bureau of Children's Health Insurance gathered for a group photo recently as they celebrated 15 years of service to Alabama's children and families through the ALL Kids program.**

The ALL Kids program covers children under the age of 19 and benefits include well child checkups, immunizations, doctor visits, prescriptions, vision, dental, hospitalization, mental health and substance abuse. For more information about ALL Kids, call the program's customer service line at 1-888-373-KIDS(5437) or visit the website at [www.adph.org](http://www.adph.org).

## Environmental Services Q and A - Piercings

The Bureau of Environmental Services is often called upon to respond to a variety of questions from the public. The following inquiry was sent to our departmental website recently.

**QUESTION:** Are restaurant employees who handle food or serve customers permitted to wear piercings such as those for the face, tongue or nose?

**RESPONSE:** The Food Code, the rules and regulations that govern food service in our state, addresses jewelry in section 2-303.11. It states, "Except for a plain ring such as a wedding band, while preparing food, food employees may not wear jewelry including medical information jewelry on their arms and hands." From this reference you can see the Food Code does not prohibit food employees from having a facial, tongue or nose piercing.



## Breastfeeding Facts

### Did you know...

1. Barriers to breastfeeding may include lack of knowledge, embarrassment or returning to work.
2. Providing mother-to-mother support through peer counseling is an effective strategy to address these barriers in order to improve breastfeeding rates. Currently, there are 21 peer counseling sites in the Alabama WIC Program.
3. Ensuring access to services provided by International Board Certified Lactation Consultants (IBCLCs) can improve breastfeeding rates. The IBCLC credential is the highest certification and the only internationally recognized credential in the field of lactation.

<http://www.surgeongeneral.gov/library/calls/breastfeeding/calltoactiontosupportbreastfeeding.pdf>

For additional information about breastfeeding, contact the State Lactation Coordinator, Michell Grainger, MSN, RNC, IBCLC, WIC Program, Bureau of Family Health Services, (334) 206-2921.

## Calendar of Events



**January 8**

Obesity - Changing the Shape of Alabama, 10 a.m.-noon.

For more information contact Marilyn Knight, (205) 562-6954.



**January 9**

ADPH Statewide Staff Meeting, 3-4 p.m.

For more information contact Video Communications, (334) 206-5618.



**January 16**

Scale Back Alabama Kickoff 2014, 10-10:30 a.m.

For more information contact Video Communications, (334) 206-5618.



**January 22**

Home Health Professional Program, 2-4 p.m.

For more information contact Shirley Offutt, (334) 206-2481.



**February 12**

Home Health Paraprofessional Program, 2-4 p.m.

For more information contact Becky Leavins, (334) 206-3867.



**February 19**

Nurse Inservice/Hypertension, 10 a.m.-noon.

For more information contact Marilyn Knight, (205) 562-6954.

**April 9-11**

Public Health Partnerships: Working Together Today for a Healthier Tomorrow, Alabama Public Health Association 58th Annual Health Education Conference, University of Alabama at Birmingham and Doubletree Hotel, Birmingham. For more information visit [www.alphassoc.org](http://www.alphassoc.org).