



Oregon Public Health Association

The Probe

Fall, 2008

Fall, 2008

What's a vote got to do with it?

Welcome
to incoming OPHA
President, Judy
Cleave! See her
President's Corner
message inside on
page 10

Inside this issue:

<i>A Look Ahead to 2009</i>	2
<i>OPHA Visits Legislature</i>	3
<i>OPHA Health Educators</i>	4
<i>OPHA Awards</i>	4
<i>Adolescent Health Section</i>	5
<i>Going Smokefree!</i>	6 & 7
<i>Epi and Biostats Section</i>	8

By now, everyone knows the outcome of the Fall 2008 election but have we all thought about the implications for public health? It could have sweeping effects, but will it?

Nationally, the new President has promised to deal with health care. The Democrats hold the majority in the Senate and the House and most have promised to deal with health care. Obama's proposal before the election was to provide everyone with the ability to be covered by the same health care as a US Senator. Of course, we know that this will cost a lot and we wonder how the cost can be covered and there are big questions to be answered: How fast can legislation be put through? Will the lobbyists for the pharmaceutical and insurance industries be able to block legislation or make sure that amendments are added to insure their continued sway.

Obama says that he will pay for the change in health care by having companies pay for health insurance or pay a fee. He may ask for changes in the Medicare prescription provisions to allow negotiation for lower costs on pharmaceuticals. He may also ask to prohibit exclusions on health insurance for prior conditions. If insurance companies

cannot exclude people from coverage, their costs may be very high. In these instances, Obama would ask that people could automatically enroll in Medicare, no matter what age (Medicare is currently restricted to those over 65); thereby expanding Medicare coverage to bring us closer to universal health care coverage. There are many dominoes that need to fall to reach this goal. If Social Security is reformed to lift the cap on contributions based upon income, further revenue would be available for Medicare coverage. Of course, these are all speculations at this point.

In Oregon the House Democrats now hold a "super majority," 36 of the 60 votes, which means that they can pass legislation involving raising revenue (read "taxes" and "fees" and eliminate tax loopholes) without needing the votes of Republicans. However, during the past legislative session the Democrats reinstated rules that allowed Republicans to voice minority opinions and to hold Vice Chair positions on all House committees and they have been trying to pay attention to the concerns of all constituents. They are also wary that any attempt to institute a sales tax to stabilize the tax base would result in an immediate

initiative to repeal the tax. Members of the Oregon House are painfully aware of the rising cost of health care and passed legislation last session to institute a Health Fund Board to make recommendations regarding health care. This report will go to the 2009 legislature and some recommended health care changes are very likely to be instituted. This report has some attention to public health and prevention.

It is also likely that the Oregon legislature will pay attention to prevention and use that perspective to pass increases in the tobacco tax and the alcohol tax. Members recognize that most voters are in favor of these actions.

Other measures that might involve funding for public health, such as increased allocations for public health infrastructure (county health staffing) and preventive services (e.g., school based health centers) will probably face a very difficult challenge because the state's economic picture is currently bleak. In fact, state agencies may need to make cuts in the funding that is already available. Bills that are revenue neutral (do not result in increased cost to

A look ahead to 2009: Public Health Issues and Challenges

By Dr. Mel Kohn, M.D., M.P.H.



Many opportunities face us in the coming year to strengthen our ability to promote and protect the health of Oregonians. Local and state public health professionals are working more collaboratively than ever before; support is growing from academic, healthcare, and advocacy partners; and champions exist within DHS, the Governor's Office, the State Legislature and local governments for improving the public health system.

The question is where should we focus our energies?

Strengthening our Infrastructure

Public health programs are among the most powerful tools for any society in promoting and affecting the health of everyone. However, our programs today do not address all of our key public health needs in Oregon. Our public health infrastructure – at the state and local levels -- is not as robust as it should be to support our efforts. As a system, we will only be as strong as our weakest link, so if we really want to improve our capacity in a meaningful way we will need to strengthen all levels of our infrastructure.

The economic downturn is not helping our efforts. What is occurring in the economy has far reaching implications. While there is energy and excitement about the possibility of increasing support for public health's infrastructure in the next biennium, that is tempered by limits on governmental revenues and increasing public health needs of Oregonians caused by economic conditions.

Still, in the next few months I'm confident that this adversity will create some opportunities for us both to address our immediate concerns and to lay the groundwork for a long-term support for the public health system. Here are some of the areas I hope we will have an opportunity to focus attention:

Global Warming and Climate Disruption

Climate disruption will create numerous challenges for public health – health impacts from severe weather events such as floods and heat waves, increases in asthma and allergies, emergent vector-borne as well as food and waterborne diseases, worsening air pollution, changes in physical activity patterns, and challenges to our food system, among other issues.

We have many tools already to address these issues. For example, a strong surveillance system for communicable diseases will help us detect and identify changes in disease patterns, and our all-hazards preparedness activities can help us respond to extreme weather events. We can also reduce our carbon footprint, and that of the healthcare industry. The long-term nature of these challenges, however, requires us to think and plan beyond the acute challenges we face.

Leading Causes of Death

Tobacco continues to be the number one cause of death and disability, followed by

Improving our Public Health system—Where should we focus our energies?

poor nutrition and physical inactivity. We have made great strides on the tobacco issue and we know how to apply what we have learned from that work to promoting healthy nutrition and physical activity. If we can obtain appropriate financing for these efforts and jumpstart them at both the state and local levels, we have the potential to make a huge difference in the health of Oregonians.

Suicide Prevention

About three-fourths of the violent deaths in Oregon are from suicide and the rate of suicide rises with age. We need to work closely with our colleagues in mental health and in the senior services community, among others, to address this problem.

Influenza vaccination

Given the facts that less than half of healthcare workers caring for the most vulnerable in our population currently are getting vaccinated and with national standards now calling for a very large proportion of the population to be vaccinated annually -- there is tremendous potential to increase activity in this area.

Public health alone does not have near the infrastructure to deliver this number of immunizations alone, so we will have to work creatively with partners and the private sector to meet this challenge.

(Continued on page 10)

OPHA will Visit Legislature - January 16, 2009

The Adolescent Health Section and the Policy and Advocacy Committee of OPHA are sponsoring their 5th legislative visit day on Friday, January 16, 2009 at the State Capitol in Salem. They will be joined by partners from Upstream Public Health, Community Health Partnership, the Oregon Heart Association, and the Northwest Health Foundation as well as students, youth groups and others interested in public health advocacy.

The event seeks to increase support among legislators for the passage of good public health legislation. Participants plan to meet the Senate President and House Speaker, to advocate for legislative priorities including: (1) Tobacco Prevention, (2) Obesity, Physical Activity and Nutrition (3) Oral Health, (4) Alcohol and substance abuse prevention and (5) Health care access. Youth participants will also deliver materials about these policy areas and other public health priorities to each office in the Senate and the House.

Adolescent Health Section members have found that many youth who engage in one risky behavior, engage in multiple risky behaviors. Youth who report drinking alcohol are likely to

also report smoking tobacco and being sexually active. Effective prevention involves multifaceted strategies, including supportive legislation. Key strategies include:

- Increase funding for physical education instruction and teachers
- Increase funding and standards for school meals
- Raise alcohol and tobacco taxes to reduce adolescent use of these substances

Support other approaches to improve health and wellness within schools.

The event will run from 8:30 am through 1:00 pm and will be filled with fun activities and learning opportunities. Participants will have the opportunity to talk with legislators and their staff, advocate for public health, learn about the Oregon legislative process, participate in a press conference and engage others in fun public health learning activities. Participants are encouraged to make appointments with their own senators and representatives on this day, so that they will have an opportunity to speak to their legislators in person. It is easy to obtain legislators' contact information just by going to <http://www.leg.state.or.us/>

[findlegsltr/](#)

For more information about participating in this year's event, please contact Katie Riley at 503-349-2965 or katie.riley@rocketmail.com

Information about OPHA's 2009 legislative priorities and OPHA's 2007 Legislative Visit Day can be found on our website

at: www.oregonpublichealth.org. Look for the 2009 Adolescent Health Legislative Handbook on the web soon.

Submitted by Mel Rader, MS, member of policy and advocacy committee, OPHA.

**Join the Adolescent
Health Section and the
Policy and Advocacy
Committee in Salem at the
State Capitol**

What's a Vote, cont.

the state) but favor prevention or early intervention will likely have a positive hearing in Salem.

Another bright note is that the state initiatives that would have been extremely costly, e.g., mandatory minimum sentences for property crime offenders and taking a percentage of funding from the lottery funds for staffing sheriffs' offices, did not pass. The alternative property crime measure, #57, will cost the state funds for treatment programs for early intervention and prison costs for incarceration

of repeat offenders; however, these funds can be viewed as an investment in helping these individuals become contributing members of the state when they are employed and able to pay taxes.

One way to help influence the future of public health is with your vote at the ballot box. Another is to influence your legislators to pass legislation that will benefit the health of all Oregonians. The article on the OPHA Public Health Legislative Visit Day in this issue tells about plans to influence legislators positively about public health. Please make plans

to participate in that day and to have a personal visit with your legislators (your Representative and Senator) and then to keep in touch throughout the session to let them know your wishes in support or opposition to legislation. They pay attention to your vote and to your voice.

Submitted by Katie Riley, Ed.D., past OPHA board member and Director of the Epidemiology and Biostatistics Track for the Oregon MPH Program.

**QUARTERLY NEWSLETTER OF THE OREGON
PUBLIC HEALTH ASSOCIATION**

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OPHA Awards for 2008

Congratulations to OPHA Award winners for 2008!

**Carol Elliott received the
Lifetime Achievement Award**

This award is given to a person(s) or organization(s) who has demonstrated a lifetime commitment to public health, to the improvement of health in Oregon.

**Dianne Rosenbaum received the
Legislator of the Year Award**

This award is given to an Oregon legislator who has made an outstanding contribution to public health in Oregon

**Mel Raider received the Emerging
Leader Award**

The recipient of this award is a person(s) who has demonstrated leadership, innovation, and creativity in the beginning of his or her public health career.

**Student Poster Awards went
to Rachel Burdon and Connie
Nguyen-Truong.**



Hugs to all award winners.
Thanks for all you do for Public Health in Oregon.



Carol Elliott receives her 2008 Lifetime Achievement Award from outgoing President, Lesli Uebel

OPHA's Health Education & Promotion Section: A Brief Overview of Current Projects

Who's Who: OPHA's Health Educators: Based on responses to a Survey Monkey, it was determined that section members are highly interested in networking and knowing "who's who" here in Oregon. If you are interested in having your name listed in this document, please send your bio to adrienne.p.mullock@state.or.us (contact information may be included in your bio, if you so desire).

Best Practices/Health Educator's Toolbox: As health educators, we all know that there is no reason to "re-create the wheel". Therefore, our section would like to ask all of you to consider sharing your health education resources and best practices. This information will be posted onto our section's page on OPHA's website. As an example, Sharon Johnson, MS from OSU shared the following site, which provides a wealth of

information for how to "live well with chronic health problems in southern Oregon". <http://sohealthyoregon.org/index.htm>

Health Educators Gone Wild: Is that name catchy enough for you? The Health Education and Promotion Section would like to invite OPHA members to share your local health education success stories. If you are interested in submitting an article to *The Probe* that highlights the great health education work you are doing in your area, please contact adrienne.p.mullock@state.or.us so we can have your story included in the next edition of *The Probe*.

Many other exciting ideas are brewing, including the possibility of organizing an annual service project and trying to work on legislative changes to help fund Community Health Workers. If you are inter-

ested in participating in these efforts, please inform Section Chair Adrienne Paige Mullock.

If you are interested in sharing your health education and promotion activities via a **Health Educators Gone Wild** article submission, please contact adrienne.p.mullock@state.or.us

Adrienne Paige Mullock, MPH, CHES is the Health Education and Promotion Section Chair.

Lost and Found

Did you lose a jacket at the OPHA Conference? We found one at the registration desk. Contact Tom Engle to identify at tom.r.Engle@state.or.us

Adolescent Health Section Keeps Youth Issues in the Public Eye

The Adolescent Health Section has had a very busy and productive year! The Section has updated and expanded its set of Tipsheets for Professionals to include Tipsheets on Sexual Health, Alcohol and Drugs, Vaccinations, and Risk and Protective Factors. These Tipsheets are an easy reference that provide guidance to medical professionals in how to approach these topics with their adolescent patients. These Tipsheets are available at www.oregonpublichealth.org/arbtipsheets.html

At the 2008 OPHA Conference, the Adolescent Health Section sponsored a breakout session led by Tony Biglan to discuss both sides of the Amethyst Initiative's push to lower the legal drinking age. This session provoked lively discussion and debate about the pros and cons of allowing 18 year olds

to drink alcohol. In addition, the Section sponsored a youth poster featuring a mini-documentary, produced by 8th grader Nick Young, which captured youth perspectives on climate change.

In preparation for the 2009 Legislative Session, AHS has revised its Adolescent Health Legislative Handbook. This handbook provides youth data and legislative recommendations in areas that are important to the health and well-being of Oregon adolescents, including tobacco, access to preventive health care, sexual health, alcohol, physical wellbeing, and incarceration.

This Legislative Handbook will be distributed directly to the Oregon Legislators during the 2009 Legislative Visit Day that is being sponsored by the Adolescent Health Section and the Policy and Advocacy Committee of

OPHA. Many of our section members have been very involved in the planning of this January 16th event.

In early 2009, the Adolescent Health Section looks forward to holding its Second Annual Section Retreat to brainstorm activities and strategize for the upcoming year. Among other activities, the section hopes to increase opportunities for our members to advocate for adolescent health issues. All ideas are encouraged and new members are welcome! The section meets on the third Thursday of the month from 4-5pm in room 800 of the Portland State Office Building at 800 NE Oregon Street. Phone conferencing is available for those unable to attend in person. For more information, contact Section Chair, Ann Krier at annkrier@gmail.com. You can also check out the Section web pages on the OPHA website www.oregonpublichealth.org

Ann Krier is a Board Member and Chair of the Adolescent Health Section.

Nutrition Courses for Albany Teens

Iris Carrasco describes the nutrition classes offered at The Boys & Girls Club of Albany.

Healthy Kids Club is our elementary nutrition program serving over 250 kids during our afterschool program time. Year round nutrition education provides our kids daily opportunities to learn the benefits of healthy eating and being physically active. In addition, Healthy Kids Club members learn basic food preparation skills.

Smart Start Eating & Reading is a nutrition curriculum developed for kids in K-1st grade. This program teaches children the value of breakfast through reading kid friendly books. Each class is one hour long, and kids are able to sit and listen to a preapproved book read aloud and after discuss the importance of eating breakfast everyday. Mainly we discuss the benefits of breakfast; kids really are guiding this discussion by providing real life challenges. Iris then takes advantage of these teaching moments to provide

alternatives to these challenges.

Food as Art is a recipe for creativity. Kids are taking nutrition to the art room. Using creativity & imagination it is easy to see how nutrition is all around us. Here a child used a paper plate to describe what she had for dinner. Artistically students share food experiences. Class always begins with a lesson in nutrition and ends with a take home nutrition message in the form of art!

Healthy Kids Club Walk & Talk is a program that promotes the physical activity piece of healthy living. Each class is designed for all boys or all girls and the goal is to get your heart pumping for at least 30 minutes during this class. Again this is me using the opportunity to take nutrition out of the classroom and apply it to daily activities like exercise!

Garden Club is our Garden Enhancement Program that cultivates nutrition

through planting the food we eat. With the help of Linn County Master Gardner's, B&GC members learn to grow healthy fruits and vegetables. Once the produce is ready to eat we pick and prepare our produce in the HKC nutrition classes. This year our garden produced enough tomatoes to host a Salsa Making Extravaganza. We teamed up with Master Food Preserver Janice Gregg of Linn County Extension Service and invited parents and club members to learn to make and preserve salsa. Needless to say this year's garden club was very fruitful!

Computer Room is a place where our nutrition program teams up with the digital classroom of MyPyramid.gov. **MyPyramid Blast off** is an interactive computer game that tests the knowledge of each student. Successful completion of MyPyramid permits students to blast off in interactive space!

For more information on The Boys & Girls Club of Albany visit <http://www.bgc-albany.org/>

Tobacco-Free Environments Create Healthy Environments!

“This policy helped me quit and gave me a reason to quit”, said a tenant in Marion County who had smoked for 55 years and decided to quit after her apartment building adopted a smoke-free policy. Implementing smokefree policies in multi-housing units is a new wave of tobacco prevention efforts of the Oregon and Marion County Tobacco Prevention and Education Programs (TPEP).

The Oregon Tobacco Prevention and Education Program was launched in 1997 with a clear and simple mandate to reduce tobacco-related illness and death. Since its inception, TPEP has developed into a comprehensive program addressing issues of tobacco use by working to reduce exposure to secondhand smoke, countering pro-tobacco influences, helping people quit, and eliminating health disparities. Developing and implementing tobacco-free and smokefree policies creates healthier and safer environments for communities and individuals to enjoy.

The Marion County Tobacco Prevention and Education Program has recently focused its efforts on working with multi-unit housing management companies located within Marion County to help them develop and implement smokefree policies. One recent success of the Marion County TPEP was working with the Marion County Housing Authority (MCHA) to implement a smokefree policy for one of their properties – Edelweiss Village – that had been experiencing problems with smoking and secondhand smoke intrusion. A survey was administered to all Marion County Housing Authority tenants, asking questions about tenant willingness and acceptance of a smokefree policy being implemented at their property. The survey results demonstrated that 63% of the tenants at Edelweiss Village supported MCHA banning smoking in all of its buildings and on its outside properties.

MCHA held a tenant meeting at Edelweiss Village to discuss the decision to

go smokefree and the reason for doing so. Marion County TPEP staff attended the meeting and provided cessation resources and programs that tenants could utilize and access. The MCHA smokefree policy became effective November 1, 2008. The policy ensures that residents now live in a healthier and safer environment free of secondhand smoke.

Additionally, Marion County TPEP is partnering with the American Lung Association of Oregon as part of their effort, to coordinate a statewide tobacco-free college initiative. Portland Community College (PCC), Oregon's largest college, will be tobacco-free starting in Fall 2009. Oregon Coast Community College has adopted a tobacco-free policy; its new campus in Lincoln City is now the first completely tobacco-free community college campus in Oregon. Marion County convened the Coalition for Tobacco-Free Chemeketa Community College, which has helped Chemeketa Community College to strongly consider going tobacco-free in the same time frame as PCC. Marion County TPEP has also been collaborating with Willamette University to promote potential development of a smoke-free campus policy to not only benefit the health of their students, but to help increase compliance with the new Smokefree Workplace Law which will take effect January 1, 2009.

TPEP is also preparing businesses for the upcoming changes to the Smokefree Workplace Law. Beginning January 1, 2009, the types of indoor workplaces required to be smokefree will be expanded and the new law will prohibit smoking within 10 feet of entrances, exits, windows that open, and ventilation intakes and outtakes of workplaces or public places. Are you ready? For more information on the new Smokefree Workplace Law and how to ensure that your business complies with the law, please visit www.healthoregon.org/smokefree or contact your local County TPEP Coordinator by visiting the Oregon Tobacco Prevention and Education Program Local and State-wide contact page at <http://www.oregon.gov/DHS/ph/tobacco/programs.shtml>.

Other TPEP efforts include developing and

implementing tobacco-free and smoke-free policies in K-12 schools, hospitals, outdoor events, and Head Starts as well as promoting implementation of the new Smokefree Workplace Law, and building capacity for tobacco related and other chronic disease prevention. For more information on what your county is doing in tobacco prevention, be sure to contact your local county coordinator.

Finally, there are three new DHS tobacco related legislative concepts being proposed for the upcoming legislative session. These include requiring landlords to disclose smoking status of multi-unit rental properties as a standard part of any lease, a ban on free sampling of non-cigarette tobacco products in Oregon, and a ban on cigarette and other tobacco vending machines.

If you would like more information on these concepts, please contact Dana Kaye at the American Lung Association of Oregon at 503-718-6141.



implementing tobacco-free and smoke-free policies in K-12 schools, hospitals, outdoor events, and Head Starts as well as promoting implementation of the new Smokefree Workplace Law, and building capacity for tobacco related and other chronic disease prevention. For more information on what your county is doing in tobacco prevention, be sure to contact your local county coordinator.

Encouraging Business Owners to go Smokefree in Advance of Oregon's Law

In June 2007, the Oregon Legislature expanded the Smokefree Workplace Law to include bars, bowling centers and bingo halls, effective January 1, 2009. This lull between the law's passage and its implementation created tremendous opportunity for education and outreach that would encourage business owners to go smokefree early, drive customers to smokefree establishments, applaud legislators for passing the law and motivate smokers to quit.

To take advantage of this opportunity, Oregon's Tobacco Prevention and Education Program (TPEP), working with media contractors Metropolitan Group and Coates Kokes, developed the Why Wait? campaign targeting the public as well as business owners with research-based messages about the advantages of the law.

TPEP grantees throughout Oregon—including health departments in all 36 counties—met one-on-one with business owners in their county, which allowed them to raise awareness of the law and establish a solid list of business supporters whom they could later partner with in their media advocacy efforts.

The campaign used a combination of mass media and direct outreach by local tobacco prevention programs to reach business owners and patrons through the following five strategies:

Strategy one focused on building tools for affected businesses on the benefits of becoming a smokefree establishment and tips on how to make the switch. MG and grantees identified businesses that could be champions for smokefree workplaces and serve as informal advisors during the campaign.

Strategy two directly engaged businesses to make the case for going smokefree. This strategy included direct outreach by the program grantees. Also, a survey of all bar owners in the state showed that two-

thirds of bars were already smokefree and 9 percent were interested in switching, which enabled local tobacco prevention programs to target outreach to those businesses most open to switching early.

Strategy three provided ongoing support for early adopters of the law to reinforce their decision and to build customer awareness and patronage of smokefree spaces. It also positioned early adopters as success stories for their peers. This strategy included planning public celebrations of smokefree spaces to attract media and public attention. TPEP grantees are currently working on planning New Year's Breathe events at bars, bingo halls and bowling centers throughout the state.

Strategy four created public support for the law and its early adoption, as well as a general demand for smokefree spaces. MG and local program staff worked together to create a source bank of businesses, employees, customers, etc. to provide adequate sources for proactive media outreach. We also completed an editorial board tour—with grantees, smokefree business owners and community members—that resulted in supportive editorials in each of Oregon's major daily papers, and extensive feature and news story placement at the statewide level and in individual communities.

Strategy five engages businesses and the public to effectively enforce the law. We also provided paid media, including business advertising, extolling the benefits of going smokefree and consumer advertising encouraging customers to "rediscover" newly smokefree places they previously avoided. advertising encouraging customers to "rediscover" newly smokefree places they previously avoided.

Our coordinated efforts have led businesses to make the switch early, positioned going smokefree as a smart

business decision, and prepared businesses for a smooth transition to the new law. There has been a shift in short-term business operations and policy, and we are working to establish a long-term shift in social norms as smokefree places multiply and smoking becomes less common and visible.

Also throughout the campaign we provided support for smokers wanting to quit, including employees, owners and customers of affected businesses. All of the resources and collateral created for the Why Wait? campaign provided information directing people to the Oregon Quit Line.

For more information please visit www.smokefreeoregon.com!

Submitted by Amy Columbo and Jennifer Messenger Heilbronner, Metropolitan Group

OREGON'S SMOKEFREE WORKPLACE LAW

INCLUDING THE 10-FOOT OUTDOOR SMOKEFREE ZONE

SMOKEFREE oregon

News from the OPHA Epidemiology and Biostatistics Section

Greetings from the Epidemiology and Biostatistics section! Our section, composed of a group of volunteer professionals and students, remains alive and well and continuing to work in support of public health and OPHA. We thank our members and invite those of you who practice epidemiology and biostatistics and those who use data in your public health profession to join our section.

We are excited about the progress we have made this past year with the OPHA Workforce Survey—a comprehensive, 53-item survey conducted of approximately 700 OPHA and APHA member and non-member professionals and students in Oregon by Dr. Jim Gaudino, Ms. Brenna Lobb, and Dr. Siobhan Maty. Our survey aims are to describe Oregon's public health workforce and training issues and preferences, assess participation of public health workers and students in OPHA and APHA, obtain feedback on how OPHA can be more relevant as a public

health organization. We presented key findings to the OPHA Board earlier this year, and our final report to OPHA now rests with the OPHA leadership. In addition, four papers were presented— at the spring '08 OMPH Symposium, at the annual OPHA meeting in October, and two at the APHA meeting in October in San Diego. Please feel free to contact us for more information.

Also, this year we are excited about our first ever student award! Recognizing the extraordinary work of Ms. Brenna Lobb, OHSU MPH candidate who several years ago joined the survey team as part of her MPH internship and who has continued as a key survey team member, the OPHA Epidemiology and Biostatistics Section recently awarded Ms. Lobb our section's first student award for outstanding contributions to OPHA and the Section. Congratulations, Brenna!

Coming up for the new year, we invite all of you to join our listserve and coming events of the Portland Epidemiology Fo-

rum—a lecture series of “hot topics” from leading public health epidemiologists and biostatisticians, sponsored in various locations in Portland.

As a volunteer organization, we are only as strong as the involvement of our members. This year, it's time to pass the torch. We are seeking new leadership for the section including Chair, Vice-Chair, Webmaster, and Section representatives to the following OPHA committees: Policy, Communications, Bylaws, Awards, Nominations, Elections. These are opportunities to get involved, meet great colleagues and make a difference for Oregon public health. (Please see position descriptions at: <http://www.oregonpublichealth.org/committees.html>)

Epidemiology remains the core science and practice of public health. As such, the Section's mission is:

(1) to foster epidemiologic and biostatistical research, training and professional development as well as science-based public health practice; and (2) to serve as a conduit between the epidemiologic and biostatistical research communities and those who need scientific information for the development, implementation, and evaluation of programs and policies affecting the public's health in Oregon.

Let us leave you with two key findings from the OPHA Workforce survey: 1) the leading reason respondents gave for not being involved in OPHA was that they did not know enough about OPHA and 2) the primary way people said they had heard about OPHA was through their colleagues, work and faculty. Bottom line, as OPHA members, your involvement is important to advance the organization and objectives.

For more information about our Section, see our website (<http://www.oregonpublichealth.org/Epie.html>). Or contact: Jim Gaudino, MD, MS, MPH, Section Chair, james.a.gaudino@state.or.us; 971 673-0288 (w) or Ken Rosenberg, MD, MPH, Section Vice-Chair; rosenbergkd@yahoo.com; 971 673-0237 (w)



Ms. Brenna Lobb, OHSU MPH Candidate, presenting findings from the OPHA Workforce Survey at the Annual APHA meeting in San Diego, California with Dr. Ken Rosenberg and Dr. Jim Gaudino (from left to right)

Assessing Social, Environmental, and Behavioral Determinants of Health and Chronic Disease among Latinos in Benton County, Oregon: A Pilot Quantitative Approach

Benton County Health Department (BCHD) hosts a "Benton County Soccer Tournament and Family Weekend," an outdoor community outreach event that targets Latino men and their families, attracting over 600 participants annually. BCHD conducted health surveys among participants attending the soccer tournament on August 9-10, 2008 to improve understanding of social, environmental, and behavioral determinants of health and chronic disease among Latinos living in the region. The survey was conducted in conjunction with BCHD's tobacco and other related chronic diseases (TROCD) community needs assessment funded through Oregon DHS.

Sixty-eight Latinos aged 18 years and older participated in the survey. Data was collected using a personal digital assistant (PDA)-based questionnaire that incorporated various socio-demographic factors and assessed levels of acculturation, self-rated health, and food security. Two bi-lingual, bi-cultural health educators conducted the surveys in connection with the prevention screening services provided by the Mid-Valley Lions Club. Sixty-five percent (n=44) lived in Benton County, two-thirds (64%) were men, fifty-nine percent (59%) were married and the majority (93%) had a high school edu-

cation or less.

On average, participants visited a health provider two times during the last year. The majority (86%, n=38) did not have health insurance. Eighty-percent of participants did not have a primary care provider, and almost half (46%) could not see a doctor during the previous 12 months because of the prohibitive cost of health services. Less than half (39%) were 'moderately satisfied' and 25% were 'very satisfied' with health care services received. While only 36% of men reported having fair/poor health, the proportion of women with fair/poor health almost doubled (69%).

Eighty-nine percent (n=39) of survey participants participated in any physical activities or exercises during the past month. This is consistent with 91% of participants who responded that there is a park, playground, or open space within walking distance of their home. Also, 73% (n=32) live within walking distance of a full-service grocery store (with fresh fruits, vegetables and meat). Thirty-six percent (n=16) typically eat in a day about three portions of fruits and vegetables while 39% (n=17) eat about five or more portions of bread, tortillas, rice, pasta and cereals.

Among survey participants, only 14 % had

health insurance and only 25% had income levels higher than the 2006 federal poverty level for a family of four (\$20,000). In addition, 34 % of respondents were food insecure at some point during the past year. Despite their low socioeconomic status, participants showed relatively high levels of physical activity and fruit consumption which may be related to low levels of acculturation (98% as identified through the survey).

Survey results demonstrate that although Latinos in the county report good access to parks and recreational areas as well full service grocery stores, lack of health insurance and low income pose a significant financial barrier to accessing health services for Latinos in the region. Policymakers need to look more closely at these and other factors (e.g. language barriers, personal experiences with health care providers, etc.) when trying to improve access to health care and other social services, and promote healthy environments and behaviors, including incorporating positive, protective habits of 'less acculturated' Latinos.

For a complete report of survey results, including literature citations, please contact Daniel López-Cevallos, PhD, MPH, Assistant Professor, Western Oregon University, at lopezced@wonu.edu or Tatiana Dierwechter, MSW, Health Promotion Program Manager, Benton County Health Department at tatiana.dierwechter@co.benton.or.us.

OPHA Conference Success!

The Oregon Public Health Association annual conference and meeting was held in early October in Corvallis. It was a tremendous success 300 attendees, over 50 presentations, over 20 posters, 5 awards, and 7 elected to leadership positions in OPHA. In addition to breakout sessions we heard four stimulating plenary talks: APHA president Linda Degutis spoke on advocacy, Dan Beauchamp spoke about social justice, Mel Kohn and Dave Houghton spoke about current gaps, and Barney Speight covered Oregon health care reform.

Judy Cleave assumed the OPHA presi-

dency at the end of the meeting, Lesli Uebel moved into her term as past-president, and we elected our new president-elect: Don Austin. Elected to the Board: S. Marie Harvey, Nurit Fischler, and Karen Elliott to at-large positions; Belle Shepherd was elected to represent Region 2; and Muriel De La Vergne-Brown was selected from Region 4. Elected to the nominating committee were Sue Woodbury and Jennifer Young.

The conference would not be a success if it had not been for the generous donations of our sponsors. Their sponsorship allowed registration fees that were af-

fordable by everyone.

Please take the opportunity to thank:

Northwest Health Foundation
Coalition of Local Health Officials
Oregon State University Department
of Public Health
Samaritan Health Services
Community Health Partnership
Oregon Masters in Public Health Programs
Yakima Valley Farm Workers
PacifiSource

Look ahead to 2009, cont.

The importance of investing in children

This not only makes good political sense, but research demonstrates that good pre-conceptual health and appropriate intervention for young children, particularly those aged 0-3, can make a huge difference in the future health of our population. Public health should continue to focus attention on these needs.

Keeping "health" in healthcare reform

Healthcare reform is likely to continue to garner a great deal of attention in Oregon and nationally. However, we know that without investments in community-based public health programs to address problems like obesity and diabetes, healthcare reform is likely to have limited impact on the health of our citizens and will likely be unsustainable. We need to keep carrying that message forward into these policy discussions.

With the challenges ahead, it is clear that all of us in public health need to continue working together and strengthen the partnerships we have built over the years. We all have roles to play in addressing these issues, and I look forward to working with you all in the coming months on to find ways to bolster the public health system in Oregon.

(Mel Kohn is the Acting Director of the Oregon Public Health Division, DHS and State Health Officer. Prior to being named as Acting Director of the Oregon Public Health Division, Dr. Kohn has been Oregon's State Epidemiologist and Administrator of the Office of Disease Prevention & Epidemiology since 2000. He is also Oregon's public health representative on the state's [Climate Change Integration Group](#).)

President's Corner

It was the best of times, it was the worst of times, it was the age of wisdom, it was the age of foolishness, it was the epoch of belief, it was the epoch of incredulity, it was the season of Light, it was the season of Darkness, it was the spring of hope, it was the winter of despair, we had everything before us, we had nothing before us, we were all going direct to heaven, we were all going direct the other way - in short, the period was so far like the present period, that some of its noisiest authorities insisted on its being received, for good or for evil, in the superlative degree of comparison only ~ *Charles Dickens, A Tale of Two Cities*.

Dickens' quote has timeless meaning for us as we anticipate our nation's future with its first African American president and the shift in our nation's political leadership from a Republican majority to a Democratic majority. We are in the midst of a significant recession with high unemployment as our own state prepares for its next legisla-

tive session. We have a choice to view this time as the best of times or the worst of times. We have a choice to affect the future in a positive manner.

I am proud to be a member of Oregon's Public Health Association. This organization offers opportunities to network and share with other public health professionals, to learn from people I respect and enjoy being with, and to work together to affect public health policy. I have always enjoyed the educational offerings at the OPHA fall conference and always leave with new contacts, renewed friendships, and a renewed commitment to improve my public health practice.

This year I have the unique opportunity to lead this organization with a strong and committed board that will embark on a new venture with its first association manager, Mary Peaslee. Mary is a medical doctor with her Master of Public Health. She is currently completing the graduate certificate program in the Institute for Non-profit Management at Portland State Uni-

Thanks to our OPHA 2008 Conference Sponsors

The OPHA annual meeting and conference would not be possible without our very generous sponsors:

Northwest Health Foundation
Oregon State University Department of Public Health
Coalition of Local Health Officials
Samaritan Health Services, Corvallis
Oregon's Masters in Public Health Program
Community Health Partnership PacificSource
Yakima Valley Farm Workers

At your next meeting, take some time to thank them for their support of our public health community!

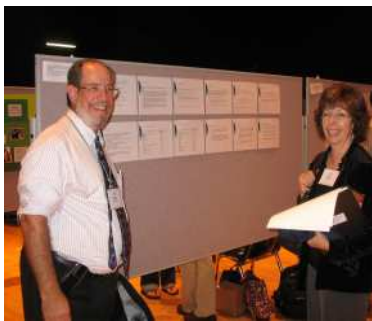
versity. She brings skills to this position that will lead us through a focused strategic planning process to create sustainability in an environment that is constantly changing. We must develop financial stability and also must become an organization that appeals to a younger more diverse generation of public health workers. We have our work cut out for us.

I look forward to sharing developments from this process with you and look forward to a vibrant active membership that will positively affect the future of Oregon's Public Health System.

Please become an active member of a section or committee if you have not done so already. Check our website out for more information, and feel free to email me with questions or ideas at cleavefamily@comcast.net.

Judy Cleave was elected President at this past Annual Meeting. She will serve through October, 2009.

2008 OPHA Conference Memories



Advocating for Public Health: How Can We Make a Difference?

Linda C. Degutis, DrPH, MSN
President
APHA



OPHA Grant Update

It has been a year since OPHA received a Affiliate Capacity Building Initiative (ACBI) grant from APHA. The purpose of the grant funding from APHA is to assist state affiliates in developing their organizational infrastructure and capacity to be successful organizations. Many state affiliates are similar to OPHA with limited resources and staff to carry out the work. The majority of the funding received by OPHA is to be used to hire Association Manager to assist the Board with strategic planning and business planning.

In September the Board approved the hiring of Mary Peaslee MD, MPH as our Association Manager. This is a part time position. Mary brings a public health background with an interest in non profit or-

ganizations. She is currently enrolled in the PSU Institute for Non Profit Management program. This quarter a team of students from the class on governance are using OPHA and the Board as a learning lab. Through interviews with Board members, surveys and research, the students will develop recommendations for the Board. This has been a great collaboration with Mary, PSU and her fellow students. First major grant task for Mary will be working with the Board on strategic planning. Board members have also been able to participate in ACBI trainings presented by APHA. These have included financial management, membership development, marketing, and board governance.

One of the grant requirements is participation in APHA Get Ready Cam-

paign. Get Ready provides information, resources and tools so individuals, families and communities in US are more prepared for a potential influenza pandemic, outbreak of an emerging infectious disease or other hazard or disaster. See the link on OPHA home page to the Get Ready website. OPHA will be working this year to develop some of the Get Ready Strategies for Oregon. If you are interested in being involved with Get Ready, contact Jan Wallinder ACBI grant manager <janet.L.wallinder@co.multnomah.or.us

Jan Wallinder has been the lead in obtaining funding and managing this grant. She has lead the OPHA in strategic planning for the past several years.

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Oregon Public Health Association

Membership Application

Name _____

Address _____ **State, ZIP** _____

Phone _____ **Fax** _____

E-mail _____

Organization/school _____ **Title** _____

You receive one **section affiliation** with your membership.*
Please mark below:

- Adolescent Health section
- Chiropractic section
- Community Health Promotion & Health Education section
- Disability section
- Epidemiology & Biostatistics section
- Nursing section

*If you would like to join more than one section, please include an additional \$10 per additional section.

- Active membership \$50/ year**
General OPHA membership
- Special membership \$20/ year**
Students enrolled in 10 or more quarter hours, retirees, active members unable to work due to physical limitations, or persons earning less than \$20,000 per year.
- Contributing membership \$100/ year**
Non-profit organizations, community health agencies, or educational institutes interested in demonstrating their support of the work of OPHA, public health principles and programs.
- Sustaining membership \$250/ year**
Businesses and for-profit organizations interested in demonstrating their support of the work of OPHA, public health principles and programs.

If you would like to be involved in a committee, please mark below:

- Communication committee
- Membership committee
- Programs committee
- Policy committee

Please return this form, with your check payable to OPHA, to:

OPHA
818 SW 3rd Avenue, #1201
Portland, OR 97204
OPHA Tax ID#: 93-6097025