A publication of the Alabama Department of Public Health

Minority Health Coordinator Advances Goals of the TB Division

Ithough the Department has noted many successes in the battle against tuberculosis, this disease continues to disproportionately affect African American and other minorities across Alabama. Recognizing the need for leadership in a sustained effort to address this disparity, the department selected Eric Morgan as the Statewide Coordinator for Minority Health in the Division of TB Control. In accepting this role, Morgan affirmed his commitment to the department's ultimate goal of eliminating TB in Alabama and embraced the challenge of reaching out to populations that are often isolated and medically underserved.

As the pool of TB infection declines in the majority population, tuberculosis in Alabama increasingly affects African American and other minorities. Persons with tuberculosis in these populations tend to be younger, often of childbearing age, thus increasing the risk for transmission of TB to children. To address this issue, Morgan's task is to implement the department's three-part plan to address health disparities attributable to tuberculosis.

Provider Education The epidemiology of TB is changing across the state. Providers must be made aware of these changes to facilitate rapid diagnosis and early intervention. Morgan notes that "Many of our patients are young, otherwise healthy persons and the physician may not suspect TB. Our goal in coordinating physician-to-physician education is to ask the providers to 'Think TB' when African American or other minority persons present with symptoms of pneumonia or bronchitis - especially if the symptoms return after an initial course of empiric antibiotic treatment."



Eric Morgan

Morgan goes on to say that many of these patients seek care only after they become very ill, and most often appear first in a local emergency room. After soliciting "Grand Rounds" opportunities in hospitals that serve the major metropolitan areas, Morgan matches the speaking opportunities with the schedules of physicians who comprise the TB Medical Advisory Council. "Getting our physicians together with their colleagues in the community benefits everyone - the patient, the providers and the community."

Culturally-appropriate Outreach From time-to-time, public health staff are confronted with patients who at first are not inclined to follow the recommended treatment course. Morgan has found that these patients sometimes respond a little better to health care workers from a similar background, but he insists that these patients can learn to trust health care providers with their care if we do our part. Tuberculosis Control staff across the state have observed first-hand as Morgan interacts with the "difficult" patient, and how his model for case management (respect for the

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September 2009



Public Health Social Workers of the Year Honored

aury West, director of the Division of Social Work, presented plaques recognizing Alabama's public health social workers of the year. Excerpts from letters of support summarize their

contributions and attributes. The selections were made by judges from outside the department.



Clinical Social Worker of the Year Virginia Wiggins-Motton receives plaque from West. "Virginia is a poised and polished professional who is willing to go the extra mile and think outside the box in an effort to meet the needs of her patients."



Home and Community Waiver Social Worker of the Year Chaun Paulk is shown with West. "I feel that Chaun Paulk is what social work is all about."



West congratulates Outreach Social Worker of the Year Liz Todd. "Liz exemplifies the best about our profession. She truly wants to make sure she exhibits her best work in every situation."



Social Work Manager of the Year Terrina Harris is pictured with West. "Ms. Harris is reliable, compassionate, knowledgeable, and resourceful. These traits are the backbone of the social work profession."

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

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Donald E. Williamson, M.D	State Health Officer
Jim McVay, Dr. P. A Director, Bureau o	of Health Promotion and Chronic Disease
Arrol Sheehan, M.A.	Editor
Takenya S. Taylor, J.D.	
Noelle Ahmann	Graphic Designer

Policy, Environmental Strategies Highlight Weight of the Nation Conference

labama's obesity ranking moved up a notch to become second highest in the nation in the 2009 Trust for America's Health "F as in Fat" study. Miriam Gaines, director of the Nutrition and Physical Activity Division, learned about the state's ranking shortly before the start of the Weight of the Nation Conference in Washington, D.C., July 27-29.

The conference was designed to provide a forum to highlight progress in the prevention and control of obesity through policy and environmental strategies. Ms. Gaines and Jim McVay, director of the Bureau of Health Promotion and Chronic Disease, attended, and the Video Communications Division staff members were there to broadcast eight plenary sessions via satellite and webcast to the national public health workforce.

Alabama has been aware of obesity trends

for some time and has taken steps to address the problem. The State Obesity Task Force Plan provides various approaches including education and awareness. The newly awarded BITE Community grants in five Alabama communities reduce risks for overweight and obesity through community-based nutrition and physical activity programs. In January, Scale Back Alabama will return for its fourth year.

Alabama is not alone in its need to address obesity. More than one third of U.S. adults and 16 percent of U.S. children are obese, according to Centers for Disease Control and Prevention data. Since 1980, obesity rates for adults have doubled and rates for children have tripled. Obesity rates among all groups in society - irrespective of age, sex, race, ethnicity, socioeconomic status, education level or geographic region - have increased markedly.

Furthermore, the CDC laments that obesity has physical, psychological and social consequences in adults and children. Children and adolescents are developing obesity-related diseases, such as type 2 diabetes, that were once seen only in adults. Obese children are more likely to have risk factors for cardiovascular disease, including high cholesterol levels, high blood pressure, and abnormal glucose tolerance. One study of 5- to 17-year-olds found that 70 percent of obese children had at least one risk factor for cardiovascular disease and 39 percent of obese children had at least two risk factors.

Obesity is Costly

At the conference, the CDC reported medical costs of treating obesity-related diseases may have increased as high as \$147 billion in 2008. The cost of treating obesity doubled over a decade, which further defines the rising continued on page 5

Commendations

fyou 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 asheehan@adph.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. Izza Afgan **Qun Zheng**

Center for Health Statistics from Arrol Sheehan Montgomery, Ala.

Pamela Byrd **Linda Cannon Sherry Young**

Health Provider Standards from Lynn Matthews Tuscaloosa, Ala.

> **Teresa Collins Debi Foster Carolyn Thomas Patricia Watson Melanie Webster**

Health Provider Standards from Jeff Kirby Dothan, Ala.

Florine Croxton

Center for Health Statistics from Kinya Q. Jamison Smyrna, Tenn.

Rachel Durden Candy Easterling

Facilities Management-**Technical Services Unit** from Thomas Dunning Moulton, Ala.

> **Debi Foster Amv Moore Connie Pavelec Patricia Murphy**

Health Provider Standards from Joyce Jones Florence, Ala.

Nicole Henderson Kim Smith

Center for Health Statistics from Judson D. Taylor, Jr. State Road, N.C.

Amy Moore Connie Pavelec

Health Provider Standards from Sherry Ginn Phenix City, Ala.

Theresa Mulkey

Center for Health Statistics from Sharron L. Godbold Clio, Ala.

Georgia Reynolds

Center for Health Statistics from Allison Brown Headland, Ala.

Melanie Rightmyer

Health Promotion and Chronic Disease from Cindy Tack, LCSW Portland, Maine

Anetha Robinson

Center for Health Statistics from Ann Fuller Georgia

Video Communications Division

from Cindy Lesinger Montgomery, Ala. Pam Varner, M.D. Birmingham, Ala.

Que Zheng

Center for Health Statistics from C.F. Erdman Mobile, Ala. Alabama's Health

September 2009

Eric Morgan, continued from page 1

individual patient, taking time to understand the barriers to care, and crafting individual solutions) can result in positive treatment outcomes.

Prevention of Future Cases Given that African American and other minority persons (particularly young males) are over represented in Alabama's prisons, Morgan spends a great deal of his time in the major prison facilities across the state.

"While it is unfortunate that so many find themselves incarcerated, there is a silver lining... we can use this time to screen for latent tuberculosis infection and assure that preventive medicine is provided." Morgan further states, "Treating TB infection today benefits and protects minority communities tomorrow all across Alabama."

To help make this prevention strategy a reality, Morgan spends many hours on the road and in classes with inmates as they prepare to return to the community. "If we are ever going to push the number of cases below 100 we must ratchet up our involvement in

the African American community." Morgan participates in the pre-release classes which are greatly needed for inmates who have poor health-seeking behaviors, limited access to care, and no medical homes.

Numerous commendations have been made for Morgan's effectiveness, including a letter from Aletha Lewis, a classification specialist and institutional re-entry coordinator, that stated, "The Tuberculosis Prevention and Control presentation provided by Mr. Morgan was very informative and heightened awareness of this potentially life-threatening disease. The personable, yet professional way that Mr. Morgan communicated with and educated the inmate population regarding the TB infection fostered a positive and alert learning environment which encouraged the inmates to listen attentively and ask questions they would not otherwise have asked."

Several of the inmates said that they weren't aware of the severity of the disease until Morgan explained the symptoms. One inmate said he thought of refusing the TB treatment because he didn't want to go through the required nine months of treatment, but after

participating in the presentation, he was "very thankful" and subsequently completed his treatment regimen.

Ms. Lewis concluded, "It is my belief that in our joint efforts to educate and inform the inmate population we are providing them with a real 'road map to success.""

Morgan's work has led to many success stories, but his own personal journey is a success story of a public health employee who has worked his way up through the department, earning promotions at every step of the way. He began as a temporary administrative support assistant in Baldwin County and advanced his career through hard work, attention to detail, and pursuit of higher education. After earning his undergraduate degree, Morgan accepted the challenges of a Disease Intervention Specialist in Mobile County - ultimately leading that team of TB staff while beginning work on his graduate degree. He completed his Master's in Public Health shortly after arriving in Montgomery to lead the statewide minority health initiative for TB.

Public Health Takes the Lead in Novel H1N1 Influenza Preparedeness Efforts

ovel H1N1 influenza has been the subject of numerous briefings, news conferences, radio and television interviews and talk show appearances, guest editorials, newsletter articles and other efforts to keep the Alabama public informed about the latest recommendations regarding this pandemic. Dr. Donald Williamson, state health officer, has kept the public informed and shared recommendations on a regular basis.

A vaccine for novel H1N1 influenza is expected in October. When it first arrives, target groups for the novel H1N1 vaccine are pregnant women, household contacts of children under 6 months of age, health care and emergency services personnel, children 6 months and older through adults up to age 24, and persons aged 25 through 64 who are at higher risk for novel H1N1 because of chronic health disorders or compromised immune systems.

Parents were advised to develop contingency plans in the event that either their children become sick and must stay home or their schools are closed. Businesses were reminded to refresh their COOP plans and institutions of higher education were advised to

facilitate the self isolation of residential students with flu-like illness. The department's Web site (www.adph.org) is updated regularly with the latest recommendations.

State Superintendent of Education Dr. Joe Morton appeared at a news conference with Dr. Charles Woernle Aug. 7 to alert the public that preventative measures are needed to reduce the spread of the virus in Alabama.



Public Health Education Day for Childrane Providers A Huge Success

Peveral months ago, three public health nurses (Brenda Davis, Gerrie McMillian and Jamie Manning) came up with the idea of offering childcare providers in the county continuing education hours while at the same time incorporating public health into the program to provide valuable health information to promote healthier lifestyles.

The workshop was conducted on Saturday, June 20, at the Monroe County Health Department community room and was a huge success. Programs were presented by Gerrie McMillian, RN, Dental Health, that included a skit and song; Jamie Manning, RN, ALL Kids; Brenda Davis, RN, Healthy Childcare Consultan; Tina Findley, RN, Tobacco Coordinator; Elaine

Reaves, RN, Immunization. Jane Mims Agee and Willie Frye from the Department of Human Resources also provided information. Door prizes and refreshments were provided for the participants.

Several public health programs set up tables with information sharing health department services. This was a great time to share with community members the various services available at the health department and partner with other community agencies and programs within the public health department. We had many positive comments and suggestions, especially "when is the next workshop"?

Valuable public health information was provided that participants could take back to their communities and daycares to help promote healthier lifestyles and prevent long term health issues.



Obesity, continued from page 3

prevalence of obesity. The prevalence of obesity rose 37 percent between 1998 and 2006, and medical costs climbed to about 9.1 percent of all U.S. medical costs. Obesity is taking a toll on the health care system.

Medical expenditures for obese workers, depending on severity of obesity and sex, are between 29 percent—117 percent greater than expenditures for workers with normal weight.

From 1979–1981 to 1997–1999, annual hospital costs related to obesity among children and adolescents increased, rising from \$35 million to \$127 million.

Policy and Environmental Change Initiatives

The CDC states that the determinants of obesity in the United States are complex, numerous, and operate at social, economic, environmental, and individual levels. American society has become 'obesogenic,' characterized by environments that promote increased food intake, non-healthful foods, and physical

inactivity. Public health approaches that affect large numbers of different populations in multiple settings are needed. Policy and environmental change initiatives that make healthy choices in nutrition and physical activity available, affordable, and easy will likely prove effective in combating obesity.

The conference featured addresses by many renowned figures including U.S. Department of Health and Human Services Secretary Kathleen Sebelius on the HHS efforts to combat obesity; Dr. Thomas Frieden, Director, CDC; and by former President Bill Clinton.

The conference also:

- Highlighted strategies that overcome barriers to the primary prevention of obesity for youth and adults in four settings: communities, medical care, schools and workplaces.
- Provided economic analysis of obesity prevention and control efforts, such as the cost burden of obesity on healthcare system and employers and the cost effectiveness of prevention.

- Highlighted the use of law-based efforts to prevent and control obesity.
- Discussed promising strategies for the prevention and control of obesity.

After returning from the conference, Ms. Gaines and McVay stated they both felt encouraged with the environmental and policy directions that are being taken. The benefit of the environmental changes and policies are that they will reach everyone. This has a strong preventive aspect, which Ms. Gaines stated was a key for the future.

Fourteen presentations from this conference are available as on demand programs which can be viewed on the Internet. The handouts are also available.

Visit the Alabama Public Health Training network Web site www.adph.org/alphtn and click on the Featured Projects link to assess the Weight of the Nation conference sessions.

If you would like to know more about the State Obesity Task Force, contact Ms. Gaines at mim. gaines@adph.state.al.us.

Public Health Partners with Department of Corrections to Aid the Prison Population

public Health and the Alabama Department of Corrections recently concluded a two-year partnership that helped serve both of their departmental missions - one to assure conditions in which Alabamians can be healthy and the other to provide rehabilitative programs for convicted felons. In 2007 the Department of Corrections initiated plans to create a new reentry program for its 30 prison facilities and partnered with various state agencies to accomplish the program's many goals. One of those goals was to decrease public health and social disparities within the offender population and Public Health became an instrumental partner in completing that task.

With Professional and Support Services employee Elana Parker serving as the liaison to the Alabama Department of Corrections, Public Health conducted activities to ensure that the reentry program met its health goal and reached a population that has been significantly underserved in the past. Parker believes during the time that she worked with the reentry program, considerable gains were made in educating both staff and inmates on the importance of health care.

"The health education component of the reentry program was very successful because we were able to incorporate preventive health topics to an underserved and at-risk population of people who were soon to be released back into the community. This information has been helpful by encouraging the inmates to make better decisions that ultimately result in healthier lifestyles before and after release from prison," said Parker.

During the special collaboration period, Parker focused on three major activities. The first activity was to provide preventive health education programs to reentry and prerelease inmates on topics such as hepatitis, tuberculosis, HIV/AIDS, STDs, staph infections, body piercing and tattooing, cardiovascular disease, nutrition and physical activity, tobacco prevention, cervical and breast cancer and pandemic influenza. The second activity was the dissemination of public information to Corrections' staff and inmates through news releases, pamphlets, brochures and other materials. More than 2,000 pieces of material were distributed during the project period.

"Representatives from county health departments throughout the state participated in monthly, bimonthly or quarterly reentry/prerelease programs to facilitate health education classes for approximately 5,250 inmates who were soon to be released back into the community," said Parker. "In addition, 130 Public Health media releases were disseminated electronically to an estimated 1,400 Department of Corrections staff throughout the state."

The final activity was a referral program to statewide county health departments. Each prison facility hosts a prerelease program that targets inmates who are within 30 to 90 days of release. With an estimated 30,000 incarcerated offenders and 13,000 annual releases, steps are now taken to ensure that each soon-to-be-released inmate is aware of the following: 1) location and services available at the county health department where he/she is being released, 2) testing and screening procedures for infectious and communicable disease, 3) how to obtain a birth certificate, and 4) preventive risk reduction information on HIV/AIDS and other sexually transmitted diseases.

Although the official partnership has concluded, the department will continue with future plans to provide ongoing preventive health education, dissemination of public information, county health department referrals and the Women's Health Initiative for the Incarcerated — WHI-FI program. WHI-FI is a program at Tutwiler Prison, Birmingham Community Based Facility and the Montgomery's Community Based Institution, through the partnership with the Aid to Inmate Mothers (AIM) organization and administered by the department's Office of Women's Health. The program provides health information and education for women dislocated and disadvantaged due to incarceration.

"The last two years was an opportunity to develop a foundation for unique interdepartmental programming. The continuation of the Public Health and Corrections collaborative partnership will result in mutual benefits for both state agencies and, ultimately, the public we serve," Parker stated.

The collaboration project between Public Health and Corrections has expanded to other state agencies, community organizations, social services agencies and faith-based programs that target underserved populations.

By TAKENYA TAYLOR



Health Disparities in Alabama: Mental Health

This is the sixth in a series of articles exploring health issues that affect Alabamians, and which focus on disparities. Disparities are defined as differences in the incidence, prevalence, mortality and burden of disease and related adverse health conditions that exist among specific population groups in the United States. These groups may be characterized by gender, age, ethnicity, education, income, social class, disability, geographic location or sexual orientation. The November 2008 publication, "A Preliminary State Plan of Action to Reduce and Eliminate Health Disparities in Alabama 2008," describes the mental health burden in Alabama and is updated and excerpted here. By an act of the Alabama Legislature, the agency name was changed in June 2009 to the Alabama Department of Mental Health.

STATISTICAL DATA

The Center for Mental Health Services (CMHS) in August 2008 reported 5.4 percent of Alabama's adult population has or will experience a serious mental illness in their lifetime, accounting for some 188,504 individuals. CMHS reports that as many as 20 percent of Alabama's adult population has or will have a mental illness during their lifetime.

According to the landmark "Global Burden of Disease" study, mental disorders are the second leading source of disease burden in established market economies. Major depression takes an enormous toll on functional status, productivity, and quality of life, and is associated with elevated risk of heart disease and suicide. Approximately 20 percent of the U.S. population is affected by mental illness during a given year. Of all mental illnesses, depression is the most common disorder. More than 19 million adults in the United States suffer from depression. Major depression is the leading cause of disability and is the cause of more than two-thirds of the suicides each year.

According to Substance Abuse and Mental Health Service Administration (SAMHSA), in 2005 there were an estimated 24.6 million adults aged 18 or older who experienced Serious Psychological Distress (SPD), which is highly correlated with serious mental illness. The research showed that ages 18 to 25 years have the highest prevalence of mental health problems, but is the age group with the lowest rate of help-seeking behaviors.

The Division of Substance Abuse Services has the responsibility for development, coordination, and management of a comprehensive system of treatment prevention services for alcoholism/drug addiction and abuse.

THE DISPARITY

According to the American Association of Suicidology, in 2005, Alabama ranked 28th in the nation in the rate of suicide deaths. In 2007, 586 Alabama deaths were lost to suicide. Because of the tragic implications of suicide, family members and friends have to deal with the stress of their loss.

The Alabama Department of Mental Health is the agency responsible for serving Alabama citizens with mental illness, intellectual disabilities and individuals recovering from substance abuse. Over 230,000 people are served annually through a broad network of state mental illness, intellectual disabilities and substance abuse programs. Currently there is one developmental center for persons with intellectual disabilities and six facilities for persons with mental illness. Through community-based services the department contracts with hundreds of local service providers in all 67 counties.

The Division of Mental Illness provides a comprehensive array of treatment services through six state operated facilities and contractual agreements with providers across the state. Over 4,000 individuals are served annually in the state-operated facilities and over 100,000 receive services in certified community-based programs.

The Division of Intellectual Disabilities is organized to provide a comprehensive array of services and supports to individuals and their families in the state through the state-operated developmental center, or through regional community service offices. This division also provides services for children with cognitive disabilities and diagnoses of intellectual disabilities, which include an adaptive functioning assessment for service eligibility. Services and supports may range from information and referral, to very minimal direct such as case management or hourly services, to maximum support that provides 24-hour care.

Some individuals may request assistance to address immediate needs, or to plan for the future, or to obtain assistance to apply for special benefits such as Social Security or Medicaid, through other agencies.

POLICY IMPLICATIONS

Stigma presents a barrier to individuals seeking mental health services. The Alabama Department of Mental Health (ADMH) has partnered for the past five years with NAMI Alabama to

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Major Changes Announced for WIC Food Packages

The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) announces that food packages are changing to better meet the nutritional needs of WIC participants. The new food packages:

- align with the 2005 Dietary Guidelines for Americans and infant feeding practice guidelines of the American Academy of Pediatrics
- better promote/support breastfeeding
- provide WIC participants a greater variety of food.

"We are pleased that more healthful food choices will be offered to participants," said Carolyn Battle, state WIC director. "We are also happy that breastfeeding mothers will have a greater quantity of nutritious foods available through WIC."

The changes released by the U.S. Department of Agriculture in the Interim Food Package Rule will be implemented

by the Alabama WIC Program on Sept. 28. Major changes to the WIC food packages include:

- 1. The addition of new foods, fresh fruits and vegetables, whole grain breads, and infant foods.
- 2. Reduced quantities of juice for children and women and elimination of infant juice.
- 3. Reduced quantities of milk and cheese for children and women.
- 4. Reduced quantities of infant formula for partially breastfed infants and infants 6 months of age and older.

How do the new food packages provide greater consistency with the Dietary Guidelines for Americans?

The package will provide fruits and vegetables and whole grains for the first time. Reductions are made to the amounts of milk and juice to be more consistent with recommendations in the Dietary Guidelines for Americans and

WIC's role as a supplemental nutrition program.

How do the new food packages provide greater consistency with infant feeding practice guidelines?

Introduction of complementary foods is delayed from 4 months to 6 months of age and formula amounts are modified based on the infant's age. Infant foods are added and juice eliminated in the package for older infants in order to promote health dietary patterns.

How do the new food packages promote breastfeeding?

The food packages for breastfeeding infant-mother pairs provide stronger incentives for continued breastfeeding, including providing less formula to partially breastfed infants and additional quantities and types of food for breastfeeding mothers.

WIC NEW FOOD PACKAGE

This table summarizes the total food package revisions:

Key Changes	Key Nutrition Components
Dairy: Less milk & cheese, whole milk only for children 12 — 24 months of age, reduced fat milk for all participants over 2 years of age	LOWER FAT
Fruit and vegetables: Cash-value vouchers for fresh produce, flexible choice for ethnic and seasonal variety	EAT MORE FRUIT AND VEGETABLES
Whole Grain Products: Whole wheat bread & brown rice, whole grain cereals emphasized	INCREASE WHOLE GRAINS AND FIBER
Juices: Infant juice eliminated, reduced amounts for children	DRINK LESS JUICE AND SWEETENED BEVERAGES
Revised Food Packages for Breastfeeding Moms & Infants: Additional incentives for fully breastfeeding moms & infants, formula amounts based on actual breastfeeding practice for partially breastfed infants	BREASTFEEDING IS THE PREFERRED METHOD FOR FEEDING INFANTS
Revised Food Package for Formula-fed Infants: Maximum formula amount based on infant's age, infant juice replaced with infant fruits and vegetables, introduction of solid food delayed to 6 months of age	NUTRITIONAL NEEDS OF INFANTS BASED ON AGE AND FEEDING PRACTICES

Health Disparities, continued from page 7

produce mass media campaigns to reduce stigma. The most recent campaign TV commercials titled, Labels are for Boxes... not People, may be viewed in the media center at www. mh.alabama.gov. Additionally, the ADMH has partnered with the Alabama Coalition for a Healthier Black Belt by producing TV and radio spots targeting African Americans in rural west Alabama. The overall project was part of a Bristol Myers Squibb grant to change perceptions and reduce stigma in that population. Two commercials, one featuring Leon Davis, M.D., and the Rev. Phillip White were produced and aired on stations targeting the prescribed region of the state. Lastly, the Public Information Office of the ADMH attends numerous health fairs and conferences in order to distribute literature and educational materials about mental illness and recovery. Literally, thousands of brochures, videos and booklets have been distributed through these events.

RECOMMENDATIONS

- 1) Healthy People 2010 Objective 4.14 Reduce the suicide rate to at least 10.0 per 100,000 people.
- 2) Healthy People 2010 Objective 18.9b Increase the proportion of adults with recognized depression who receive treatment.
- 3) Expand statewide consumer-run mental health organizations offering services to adults, particularly ages 18-25 years. Introduce legislation to fund specialized services for individuals transitioning from child and adolescent services.
- 4) Build on the current efforts to reach young adult communities by developing radio and print public service announcements to address mental health awareness among the African American/Black, Native Hawaiian/Pacific Islander, American Indian/Alaska Native, Asian American, and Hispanic/Latino American populations.

Retirees

May

Andrew Adams
Chambers County Health Department

July

Helen Baty

Bureau of Clinical Laboratories

Julia Dean

Monroe County Health Department

Elizabeth McGraw

Health Care Facilities

Joseph Orban

Bureau of Clinical Laboratories

Deborah Robinson

Escambia County Health Department

Patricia Thomas

Information Technology

August

Angie Bretherick

Public Health Area I

Charles Crosby

Bureau of Clinical Laboratories

Mary King

Morgan County Health Department

Bennie Rollings

Center for Health Statistics



Jeam Academy June

Randy Astin, Jenny Adams, Pam Barrett, Harold Brown, Chris Caldwell, Teela Carmack, Susan Carpenter, John Clement, Valerie Cochran, Charity Cook, Vera Davis, Laurie Eldridge-Auffant, Sherry Ford, Kimberly Gordon, Dawn Harris, Shona Hester, Elsie Jones, Robert Kelly, Jim Koenig, Kipp Kyzar, Yolanda Martinez, Lauren McVeigh, Rachel Parrish, LaMargaret Powell, Shannon Roberts, Anetha Robinson, Kumari Seetala, Shirley Smith, Marilyn Waker, Holly West, Avis Whitworth, Pat Williams.

AlPHA Honors Health Professionals

he Alabama Public Health Association recognized persons from across the state who demonstrated exceptional merit during the past year in the field of public health. The following individuals were presented awards at the association's 53rd Annual Meeting and Health Education Conference at the Ashbury Hotel and Suites in Mobile.



David Pettway presents plaque to Dr. Williamson.

Dr. Donald Williamson was presented the Dr. Ira L. Myers Award for Excellence in Public Health. During his tenure as Alabama's state health officer, Dr. Williamson has spearheaded numerous initiatives including the construction or renovation of 60 new health department buildings, the approval of the nation's first state Children's Health Insurance Program, the creation of the Center for Emergency Preparedness, and the promotion of healthy lifestyles.

A nominator stated, "Dr. Williamson enjoys recognizing people for jobs well done. He believes qualified and committed people are the heart of public health. His support of TEAM Academy and the Alabama Public Health Association's educational format has forged a closer working relationship among staff while grooming leaders."

This prestigious award was established to honor the late Dr. Myers for his accomplishments

by recognizing an individual, group or organization that, through excellence in work, has made a significant impact on some



Wendy Burnett receives honor from David Pettway
aspect of public health in Alabama.

Wendy Burnett, a nurse with the Coffee County Home Health program, was presented the Guy M. Tate Award. In recognition of her tremendous nursing skills, nominators stated that she does not hesitate to be the patient's advocate. "She believes that each person's life is valuable, and her actions support her belief."

A letter stated, "In her time away from work she might be cooking a batch of homemade chicken and dumplings to take to the hospital for her patient who won't eat hospital food, securing the church van to pick up patients for church services, or even leaving cash in an envelope and placing it in the mailboxes of her patients who cannot afford to purchase their medications or other needed items."

The Guy M. Tate Award is given annually to a public health employee, group or agency with 10 years or less in public health for outstanding current or recent service or contribution to public health.

The Frederick S. Wolf Award was presented to **Dr. Leon Davis.** Dr. Davis founded the



Leon Davis, M.D., receives congratulations from Awards Chairman David Pettway.

Community Care Network in 1999. Since that time, his vision of helping to eliminate health disparities in cancer, cardiovascular disease, diabetes, HIV/AIDS and infant mortality in Alabama has not wavered. The model Community Care Network provides low-cost health care for residents who are uninsured or underinsured. His efforts have resulted in the collaboration with several state, regional and community partners. The network consists of nonprofit organizations, pharmaceutical companies, clergy, health care professionals and elected officials.

The procurement and utilization of one of the first medical mobile vehicles (Care-A-Van) enables health care to be delivered to citizens in Lowndes, Montgomery and Wilcox counties. The procurement and utilization of these vehicles has demonstrated that Dr. Davis has provided unselfish community services in areas unrelated to public health.

A peer stated in a supporting letter, "He demonstrates excellence in his efforts focused on racial and ethnic health disparities that have particular impact in rural Alabama."

This award was established in 1982 to recognize an individual who has been active in public health at the local level for more than 10 years; who has demonstrated

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efficiency, dedication and professionalism in delivery of public health services; and who has provided unselfish community services in areas unrelated to public health.

The Dr. D.G. Gill Award, which honors an individual who has made an exceptional contribution to public health in Alabama, was presented to **Stefany Washington**. This award was the first established by the association in 1967 to honor a former State Health Officer, Dr. D.G. Gill. As the founder of Homeward Bound in Phenix City eight years ago, she started the fight to bring about a change in society to remove stigmas for HIV/ AIDS patients.



Stefany Washington is shown with Dr. Williamson.

Supporters said, "She envisioned a safe place for people with HIV to meet and become empowered while increasing awareness in the general public."

Ms. Washington thinks "outside the box" to reach those in need by providing HIV awareness materials and doing actual testing when permitted in barber and beauty shops and homeless shelters. She uses her own personal vehicle as a mobile health van, distributes food baskets, serves on the homeless task force network, volunteers for the Russell County-Phenix City Red Cross, and works with the Russell County Crisis Center for sexually assaulted, battered and abused women.

Barbara Woods was presented the Virginia Kendrick Award. This award is given annually



Barbara Woods is pictured with Dr. Williamson.

to an individual who has provided notable service to the people of Alabama while serving in a supportive position in the field of public health. Ms. Woods is a home health aide with the Pike/Crenshaw County Home Health program. Letters of support credited her wonderful "people" skills that include observational details. She used these skills to report an irregular heartbeat which identified a malfunctioning pacemaker. A physician credits Ms. Woods for saving the patient's life.

In her efforts to make her patients feel comfortable and respected, she quietly purchases items needed, knowing she will not be reimbursed. Supporters said it is not unusual for Ms. Woods to brighten the day of her patients with an unexpected visit or with a token of love, such as balloons or flowers. In describing Ms. Woods, a peer stated, "Pike and Crenshaw counties are truly blessed to have an employee like Barbara Woods who goes over and beyond her job duties, making sure her patients are well cared for."

The Alabama Public Health Association presented **Jonathan Drewry** the Ira L. Myers Scholarship at the University of Alabama at Birmingham where is pursuing a Doctor of Public Health degree. In his work with the U.S. Peace Corps in Nicaragua, Drewry supervised more than 100 volunteers. He also served with the Peace Corps in Bolivia and is engaged in numerous other voluntary pursuits.

Two esteemed veterans of public health were also inducted into the Class of 2009 of the AIPHA Hall of Fame.



Ruth Harrell (left) makes presentation to Judy Smith.

In her 36-year career in public health, **Judy Smith, R.N., M.P.H.,** area administrator for Public Health Area 2, was praised for inspiring many coworkers, promoting healthy living, helping her coworkers maximize their potential, and for her dedication to the association and public health. Letters of support praised her leadership skills and management abilities which have helped her area excel in many programs and initiatives. Since she became area administrator in 2006 new facilities have been opened in Limestone and Marshall counties.



Jim McVay

Jim McVay, Dr.P.A., director of the Bureau of Health Promotion and Chronic Disease, has been an AIPHA member since 1974 and has made numerous contributions to the association, including serving as its president in 1987 and 2003. Supporters praised him as a dedicated leader "with a clear vision" who has seen through to completion many initiatives.

Calendar of Events



September 16

Infection Control Update (for Home Health Aides and Attendants), 2-4 p.m.

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



September 23

Immunization Update:
Get Prepared for
Influenza Season,
10 a.m.-12 noon.

For more information contact Thresa Dix, (334) 206-3377.



September 30

ADPH Workforce Development Program for Nurses, 8-9 a.m.

For more information contact Thresa Dix, (334) 206-3377.



October 1

Scale Back Alabama 2010 Coordinator Training, 10-11 a.m. For more information contact Mim Gaines, (334) 206-5649.

ADPH Statewide Staff Meeting, 3-4 p.m. For more information contact Video Communications, (334) 206-5618.



October 6

HINI Update, 3-4:30 p.m.

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



October 7

Home Health Nurses, 2-4 p.m.

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



October 21

Health Disparities in Minorities Town Hall Meeting, 2-3 p.m.

For more information contact Elana Parker, (334) 206-7980.



November 4

Home Health Aides and Attendants, 2-4 p.m.

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