



Just Eliminate Lies (JEL) - JEL members attended the Iowa vs. Ohio State game to share their anti-tobacco message. Above, Herky presents JEL member Megan Mohr with an autographed basketball during the halftime presentation. See article on page 7.

WIC nutrition program has been helping Iowa families for 30 years

By Jan Steffen, Nutrition Consultant

Childhood obesity and the nutrition needs of children are in the news almost daily. The Iowa WIC program has been working to help young families make healthy food choices for literally thousands of Iowa children for 30 years.

WIC, or the Special Supplemental Nutrition Program for Women, Infants and Children, sprung out of the White House Conference on Hunger in 1970. At that meeting, discussion centered on low-income women, infants and children and whether their health was being compromised by malnutrition.

Doctors at the meeting felt at-risk mothers and their children would benefit from receiving supplemental food products and nutrition guidance.

The Iowa WIC program

began with the first clinic opening in Davenport on March 12, 1974. Within a year, the Davenport program was serving over a thousand women, infants and children.

Last year, the Scott County WIC Program served over 6,700 women, infants and children at some time during the year, averaging over 4,100 WIC participants every month. Across Iowa, over 64,000 women, infants and children were served every month during 2003.

"WIC doesn't just provide these families with free supplemental foods; it also teaches them how to make positive lifetime changes in their nutrition and health behaviors," explains Judy Solberg, Iowa WIC program director.

"The program is designed as a short-term intervention, to

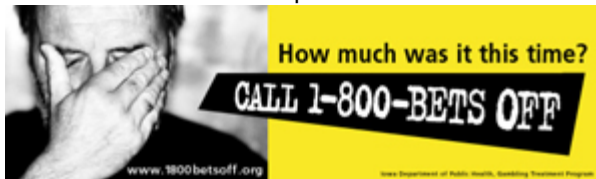
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National Problem Gambling Awareness Week

By Frank Biagioli, Executive Officer, Iowa Gambling Treatment Program

The Iowa Gambling Treatment Program is participating in National Problem Gambling Awareness Week March 8-14. The week kicks off with a multi-level public awareness and outreach campaign to educate the public and medical professionals about the warning signs of

problem gambling. It is designed to raise awareness about the help available both



nationally and locally. A new www.npgaw.org web site includes fact sheets,

brochures, and many educational resources. Screening tools are shown which identify the possible presence of problem gambling. A screening tool of special interest to medical professionals is a two-question survey, The Lie-Bet tool (Johnson et al., 1988), is valid and reliable for ruling

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Plan now for National Public Health Week

By Tom Carney, Director, Office of Communications and Public Health Education

National Public Health Week is April 5-11. Its theme, suggested by the American Public Health Association, is "Eliminating Health Disparities: Communities Moving from Statistics to Solutions." For ideas on use of this theme during the week, see <http://www.apha.org/NPHW/toolkit/Toolkit-PHW04-LR.pdf>.

While Iowa has its share of health disparities, the leadership of the Iowa Department of Public Health has decided that, with the designated week only about a month away, more planning time would be needed to mount a campaign around the national theme.

Consequently, the IDPH will concentrate on a general, but perennial need – to tell the public who we are and how our work affects their lives. Our observation of the week, which will feature a general news release

and various others on specific public health topics, an article in FOCUS, a suggested guest opinion article for Iowa media, a display on our web site and other activities, will be a variation on the theme, "Public Health: It's part of your everyday life!"

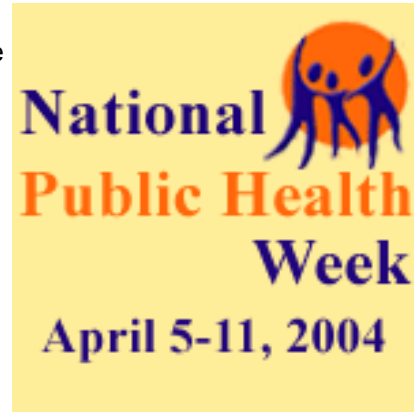
"Too few Iowans understand how important public health is," said IDPH Director Mary Mincer Hansen. "Too few realize that many of the health advances of the last century – such as the elimination of infectious diseases like polio, the introduction of antibiotics, fortified foods, and clean water – are due to public health."

"And they don't understand that

public health currently protects and promotes their health by licensing and regulating health professionals, educating Iowans on the prevention of arthritis, asthma, diabetes and heart disease, training emergency medical practitioners, dealing with environmental hazards, such as lead in paint and radon, and helping rural hospitals stay open."

"In short, they don't realize that public health is part of their everyday lives."

Please watch our web site for aids for local public health agencies that would like to tap into the theme, "Public Health: It's part of your everyday life."



WIC nutrition program helping Iowa families for 30 years

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help assure that Iowa's youngest children are receiving the essential nutrients and vitamins they need to get a good start on life."

WIC clinics also provide support and encouragement for breastfeeding women as well as immunization screenings and health-care referrals for pregnant and postpartum mothers, infants and children up to age five, Solberg adds.

According to Solberg, young children whose diets are not nutritionally balanced will face more health risks and higher health-care costs, will grow up with less healthy eating habits, and will be less ready to learn once they start school.

In addition, expectant mothers who do not follow standard nutrition guidelines for their own food intake

may risk harming their health as well as that of their unborn – then newborn – child. A five-state Medicaid study also showed that every dollar spent on a pregnant woman in the WIC program saved Medicaid about three dollars in expenses for the newborn and mother.

"It's important to remember that WIC is a public health program rather than a public welfare program," said Cheryl Von Behrens, who has run the Polk County WIC program since it began in 1980. Participants can have a household income up to 185 percent of the poverty level. For example, a family of four with an annual income of up to \$34,040 is eligible.

A family interested in applying for the program should contact the closest WIC clinic for more information. There are more than 190 clinics

throughout Iowa, with at least one in each county. Once it has been determined that the family is income-qualified, licensed dietitians and registered nurses conduct nutrition assessment and health screening to learn any nutrition needs of the family members who may be involved in the program.

The family receives monthly checks that list specific healthy food items that may be bought at any of 700-plus approved grocery stores and pharmacies. The store deposits the check in its bank just like any other check.

For information about the WIC program in Iowa, contact your regional WIC agency or call the state office at 1-800-532-1579. Nationwide WIC information is available by calling 1-866-WIC INFO (942-4636)

Quad Cities Oral Health Partners tackle access to dental care

By Nicole A. Carkner, Quad City Health Initiative

Access to dental care for the underserved is one of the key challenges in community health today. A new partnership in the Quad Cities, Quad Cities Oral Health Partners (QCOHP), is developing a pilot project that it hopes will serve as a model for other communities across the country.

Quad Cities Oral Health Partners formed in 2003 as a partnership of two large, bi-state collaborations already working on the issue of access to oral health care. They are the Quad City Health Initiative's Smiles For All team and United Way of the Quad Cities Area Success By 6's Oral Health Task Force. Our local federally qualified health center, Community Health Care, Inc., is a key member of both collaborations.

With the support of the Illinois State Dental Society and the Iowa Dental Association, QCOHP applied for and ultimately received a \$50,000 grant from Volunteers in Health Care, the American Dental Association and the American Dental Association Foundation.

Only four communities, including the Quad Cities, received full funding from this "Community Collaborations for Oral Health Care Access" grant. The grant provides 12 months of support for QCOHP to design and pilot a Volunteer Care Network that will match volunteer dentists with patients seeking oral health care prevention and treatment. The grant will also fund education of local providers on issues of oral health care.



QCOHP has tremendous support from the local dental community and several local sponsors who have provided matching funds for the grant. Recruitment of volunteer dentists began in February 2004 and the first patients, referred from Community Health Care, will be matched with dental offices beginning in May.

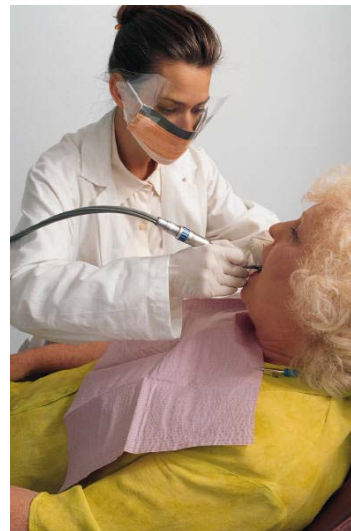
QCOHP has set a goal of 100 participating dentists for the pilot project and grant's duration. An additional grant from the Iowa Department of Public Health's ABCD-E funds will support provider recruitment. Ultimately, QCOHP hopes to sustain and grow this project to reach many of the estimated 54,000 people in need of dental services in Scott County, Iowa and Rock Island County, Illinois.

The partners are also continuing other related efforts to increase access to oral health care prevention and treatment. The Quad City Health Initiative's Smiles For All team, formed in December 2002, prepared and distributed 4,000 oral health prevention kits through local food pantries beginning last fall. Another 1,000 kits are slated for distribution to senior-citizen meal sites this spring. With a new grant by a local health system foundation, the team plans to replenish supplies and distribute 10,000 new kits in 2004.

In September 2003, Smiles For All sponsored the inaugural visit of

Christina's Smile Children's Dental Clinic to the Quad Cities. With the help of 18 volunteer dentists, 122 children were provided with dental care over a three-day period. The team is also working on plans to increase access to care for the elderly and to educate the community on policy and regulatory issues that impact dental care access.

Success By 6's Oral Health Task Force has recently sponsored the second annual Give Kids a Smile Day, February 6, matching over 600 children with 75 volunteer dentists. Participation of dentists increased about 45 percent over the first event in February 2003 and Give Kids a Smile Day has become a model for other communities in eastern Iowa as well as the basis for the Volunteer Care Network design.



In addition, Success By 6 is developing public service announcements focused on oral health care for kids.

For more information about the Quad Cities Oral Health Partners, contact the Coordinator, Kelly Jacobs, at 563-355-4310. Questions about the Quad City Health Initiative may be directed to Nicole Carkner, at 563-

421-2815, and questions about Success By 6 to Becky Sipes, at 563-355-4310.

Obtaining Past Issues

Back issues of *Iowa Health FOCUS* are available on the Iowa Department of Public Health web site at www.idph.state.ia.us. The link is under Quick Links on the right side of our home page under Publications & Data.

Iowa Hospitals Rewarded for Innovation

By Kevin Teale, Communications Director

A state/federal program designed to improve hospital services to Iowans has singled out 15 programs for financial assistance because of novel approaches they've developed to provide services. The facilities will share \$133,500 in federal money provided through the Iowa Medicare Rural Hospital Flexibility Program. The awarded hospitals all applied for funds designed to encourage innovative planning, development of partnerships, or a review of federal designations for hospitals that will provide better funding opportunities.

The recipients of Iowa Rural Hospital and Network Hospital grants are:

- Belmond, Belmond Medical Center - \$9,800 to enhance emergency-care services;
- Britt, Hancock County Memorial - \$9,400 for medical staff training to increase efficiency of treatment;
- Clarion, Wright Medical Center - \$8,200 to improve internal procedures and improve patient care;
- Elkader, Central Community Hospital - \$4,000 to assess the health needs of Clayton County and develop a data reporting scorecard;

- Hampton, Franklin General Hospital - \$9,800 to enhance the quality of pediatric care;
- Hawarden, Hawarden Community Hospital - \$3,440 to develop a strategic and facility master plan;
- Jefferson, Greene County Medical Center - \$9,900 to develop a diabetes self-management education program;
- Keosauqua, Van Buren County Hospital - \$9,900 to convert financial software program to improve accuracy of billing and claims;
- Le Mars, Floyd Valley Hospital - \$5,900 to analyze an application for a Critical Access Care designation that will allow for increased federal reimbursement for patient care;
- Marengo, Marengo Memorial Hospital - \$9,460 to examine the feasibility of opening a kidney dialysis center;
- Mason City, Mercy Medical Center North - \$24,000 to assist in patient safety through development of an potential event/error reporting system;
- Orange City, Orange City Health System - \$5,900 to analyze an application for a Critical Access Care designation that will allow for in-

creased federal reimbursement for patient care;

- Primghar, Baum Harmon Mercy Hospital - \$8,000 to partner with Hawarden Community Hospital to examine how the facilities can best adapt to a changing health care environment;
- Rock Valley, Hegg Memorial Hospital - \$9,900 to improve the quality of care by working to reduce the possibility of errors in the physician order entry system; and
- Storm Lake, Buena Vista Regional Medical Center - \$5,900 to analyze an application for a Critical Access Care designation that will allow for increased federal reimbursement for patient care.

The hospitals and the Iowa Department of Public Health, Bureau of Health Care Access, are working together to preserve access to primary and emergency health-care services, improve the quality of rural health services, provide health services that meet community needs, and foster a health-delivery system that is both efficient and effective. For further information, contact the bureau at 515-281-8154 or 515-281-4808.

National Problem Gambling Awareness Week

By Frank Biagioli, Executive Officer, Iowa Gambling Treatment Program

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out pathological gambling behaviors.

Have you ever felt the need to bet more and more money?

Have you ever had to lie to people important to you about how much you gambled?

If an individual answers yes to one or both of the questions on the questionnaire, further assessment is indicated.

Governor Thomas J. Vilsack has

signed a proclamation proclaiming the week of March 8-14, National Problem Gambling Awareness Week.

The awareness week is a collaborative effort by the National Council on Problem Gambling, the Association of Problem Gambling Service Administrators, the Iowa

Gambling Treatment Program in the Iowa Department of Public Health, Iowa providers of gambling treatment services,

and local organizations nationwide. This initiative is also a celebration of the men and women who are overcoming excessive gambling.

People can access information on problem gambling at the Iowa Gambling Treatment Program web site www.1800betsoff.org or call the 1-800-BETS OFF Helpline (1-800-238-7633).

Outside Iowa, people can call 1-800-522-4700.



Cancer society: get the polyp, stop the cancer

By Kerry Finegan, American Cancer Society and Lorrie Graff, Bureau of Cancer Prevention and Control

Colorectal cancer, commonly known as colon cancer, almost always starts with a polyp. Get the polyp early and stop cancer before it starts. It's that simple.

This year, nearly 1,840 men and women in Iowa will be diagnosed with colon cancer. In 2004, almost 710 Iowans are expected to die from the disease. Statistics also show that colon cancer is most common in men and women over the age of 50, and overall, it is the third deadliest form of cancer.

Think about it. How many of your friends and loved ones might this someday impact? The good news is that testing can find non-cancerous colon polyps or colon cancer early on, when they can be easily removed or cured.

More good news is that colon cancer is not only preventable by early detection, but is also very treatable. Ninety percent of Americans whose colon cancer is found and treated at the earliest stage survive and go on to live long and healthy lives.

However, use of early detection tests for colorectal cancers is low in Iowa. Data collected in 2002, through the Iowa Behavioral Risk Factor Survey, show that approximately 49 percent of Iowans 50 years and older reported ever using a home blood-stool test and a little over 48 percent reported ever having a sigmoidoscopy or colonoscopy screening test.

In an effort to improve colorectal

cancer screening rates, the Iowa Colorectal Cancer Task Force is developing education programs for the general public and for health-care providers. In addition, the Iowa Consortium for Comprehensive Cancer Control is planning projects that will encourage Iowans to get screened.

However, individuals with a personal history of polyps, colon cancer, inflammatory bowel disease, or a family history of colon cancer or polyps are at higher risk for colon cancer and may need to start being tested before they reach the age of 50.

For testing, the American Cancer Society recommends one of the following: a yearly fecal occult blood test (FOBT); a flexible sigmoidoscopy every five years; both a flexible sigmoidoscopy and FOBT every five years (preferred over either test alone); or a colonoscopy every 10 years, or a double-contrast barium enema every five years. A consultation with your doctor will help you to determine which testing option is right for you.

Certainly, colon cancer is not a topic usually brought up in causal conversation. However, it makes no sense to ignore a disease that can so easily be avoided. Self-education and regular testing are vital in the fight against this disease, so arm yourself with good information and preventive habits.

The American Cancer Society is dedicated to eliminating cancer as a major health problem by saving lives, diminishing suffering and preventing cancer through research, education, advocacy and service. Founded in 1913 and with national headquarters in Atlanta, the Society has 14 regional divisions and local offices in 3,400 communities, involving millions of volunteers across the United States. For more information, call 800.ACS.2345 or visit www.cancer.org.

Most colon cancers begin as polyps that continue to grow and later become cancerous. If the polyps are found early enough, they can be removed before the cancer develops. However, even in the early stages of cancer, detection also reduces the likelihood of major surgery.

Early colon cancer often has no outward symptoms. Nevertheless, later in its progression, symptoms may include rectal bleeding, stomach cramps, changes in bowel habits, weight loss or fatigue. However, just because you may have one or more of these symptoms, doesn't mean you have colon cancer. Only a visit to your physician and subsequent screening can tell you for sure.

All men and women 50 years of age and older should be tested.



IDPH 2003 Annual Report and Budget Summary

The IDPH 2003 Annual Report and Budget Summary are now available at www.idph.state.ia.us. The link is located on the IDPH home page under recent additions.

Meeting begins HI 2010 mid-course review

By Tom Carney, Director, Office of Communications and Public Health Education

Passionate about improving health in Iowa, over 200 Iowans, met on March 3 at an Urbandale hotel to plan the mid-course review of Healthy Iowans 2010.

HI 2010 is the state's blueprint for health improvement for the decade, a plan with 23 chapters on everything from asthma to access to health care to the public health infrastructure. Over 500 Iowans put together HI 2010, modeled after Healthy People 2010, the parallel national plan, back in 2000.

Now it's time to review the plan, and bring it up to date, and that was the job of participants in the Urbandale meeting, under the watchful eye of HI 2010 coordinator, Louise Lex.

Groups responsible for each of

the 23 chapters, and for two new chapters, reviewed their chapters, determining progress toward goals, barriers that obstruct progress and needed revisions.

Emmeline Ochiai, a public health advisor with the U.S. Department of Health and Human Services, who has been involved in the development and planned revision of Healthy People 2010, was a featured speaker.

She praised Iowa's efforts, saying the state had its plan together before the national plan was formed and was a model for other state plans. She also had plenty of praise for Lex, the Iowa coordinator.

"We'd like to have a Louise Lex in Washington," she said, "and one of her in every state."



She also acknowledged the contribution of Lighten Up Iowa to reducing the problem of overweight and obesity.

As the mid-course review proceeds, many Iowans involved in public health and health care will become involved in the review and revision of Healthy Iowans 2010, resulting in a plan that can serve the state until the end of the decade.



At Left: Lt. Governor Sally Pedersen speaks on the health of Iowans. Above: Roger Chapman and IDPH Director Mary Mincer Hansen listen to Kathy Widelski highlight Chapter 7, Family Planning. At Right: Mary Mincer Hansen, RN, PhD discusses how far we have come since 2000 when Healthy Iowans 2010 was published.



Senator Harkin making tracks in Cerro Gordo County

By Cerro Gordo County Public Health

Senator Tom Harkin went to Southbridge Mall in Cerro Gordo County on February 7

to learn about two Public Health programs that were designed to prevent health problems before they occur. About 100 people came to see him.

Making Tracks and **Junior Tracks** are coordinated by the Heart Healthy Cerro Gordo County Coalition and the Cerro Gordo County Department of Public Health. Both

are offered at no cost in all Cerro Gordo County communities.

Senator Harkin also had the opportunity to see what Emmett County was doing with its Lifestyle Challenge Program through Avera Holy Family Health.

“We are so thrilled that Senator Harkin took the time to visit Cerro Gordo County and learn about Making Tracks, Junior Tracks and the Lifestyle Challenge Program,” said Tammy Bryant, Junior Tracks coordinator.

“Senator Harkin supports preventable health initiatives and wellness programming that targets communities.”

Senator Harkin believes prevention is important to put a stop to skyrocketing health-care costs and decrease the alarmingly high rise in preventable chronic conditions. One of Senator Harkin’s top legislative priorities this year is to develop a



From Left: Tammy Bryant, Cerro Gordo County, Senator Harkin, and Michelle Welch, Emmett County.

package to promote wellness and disease prevention.

“It was a wonderful event Saturday. It gave Senator Harkin a chance to speak directly with Making Tracks members as well as school officials, students and parents who have been involved in Junior Tracks,” Bryant said. “We really believe that Senator Harkin understands how important federal and state funding is for programs such as these three. These types of programs can have a positive impact on the health of our residents.”



From Left; Michele Appelgate, CGCPH; Rich Lorence, CGCPH New MT Coordinator; Penny McCaslin, CGCPH; Michelle Welch, Emmett County Lifestyle Challenge Program; Senator Harkin; Tammy Bryant, CGCPH Junior Tracks Coordinator; Phillip Dougherty, CGC Supervisor; Gretchen Nissen, CGCPH; Ann Lundvall, CGCPH.

Just Eliminate Lies (JEL) has been visiting the University of Iowa and Iowa State University this basketball season. JEL attended the Iowa vs. Ohio State game and members of JEL passed out literature and talked with fans. Pictures were taken of people who wanted to stand in the JEL coffin holding an anti-tobacco message. Kassie Hobbs (at left), took part in the halftime presentation, where Herky presented JEL members with an autographed basketball.

JEL made a trip to Ames for the Iowa State vs. Oklahoma State Men’s Basketball game on February 7. JEL passed out literature, talked with college basketball fans at Hilton Colliseum, and took pictures with the JEL coffin and anti-tobacco messages. Steph Dillon, a JEL member from Hampton, was presented with an autographed basketball during the halftime presentation. At right, JEL members provide Cyclone fans with JEL information.



Epidemiology Notes



From the Center for Acute Disease Epidemiology, Iowa Department of Public Health, 1 800 362-2736 (24-hour number)

Iowa Lyme Disease Surveillance Project - Summary for 2003:

The Iowa Lyme Disease Surveillance Project is a statewide effort that monitors the population and distribution of tick specimens found in Iowa. The project is based on ticks submitted by health-care professionals and the public to Iowa State University's Medical Entomology Laboratory.

Ticks were received between March 19 and December 1, 2003. The three primary species in Iowa are *Dermacentor variabilis*, the American dog tick; *Amblyomma americanum*; the lone star tick, and *Ixodes scapularis*; the deer tick. *Ix. scapularis* specimens were forwarded to the University Hygienic Laboratory where they were tested with TaqMan® PCR for *Borrelia burgdorferi*, the bacteria that causes Lyme disease.

During 2003, the Medical Entomology Laboratory received 858 tick specimens. The species composition of the 858 ticks was; 179 *A. americanum*, 446 *D. variabilis*, and 233 *Ix. scapularis*. Ticks were received from 79 of the 99 counties. The 233 *Ix. scapularis* specimens were tested for the presence of *B. burgdorferi*. Twenty-eight were positive. They originated from Alamakee, Clayton, Delaware, Hamilton, Iowa, Johnson, Muscatine, Polk, and Winneshiek counties.

The percentage of *Ix. scapularis* positive for *B. burgdorferi* has fluctuated from a high of 18 percent in 1996, to a low of 0 percent from 1991-1995. During 2001 and 2002, about 8 percent of deer ticks in this study were positive. The percent positive in 2003 was 12 percent. The percentage of positive deer ticks received in 2003 was right on the 12-year average.

By monitoring tick populations and testing deer ticks for the agent that causes Lyme disease, the IDPH,

UHL and the Entomology Department at Iowa State University have increased Lyme-disease awareness in the public. Also, we have a better idea of the vector potential and the distribution and spread of *Ix. scapularis* in Iowa.

This project would not be possible without the commitment, support, and efforts of local health-care professionals, the public, and the University Hygienic Laboratory. The full report will be available on the ISU web site.

Tuberculosis: a zoonotic disease:

During January 2004, a Holstein steer from east central Iowa was slaughtered at a Green Bay, WI packing plant and condemned by USDA inspectors due to the presence of tuberculosis lesions. TB was confirmed by PCR and cultures are pending (eight week process).

The animal was procured about a year earlier from a livestock broker in New Mexico (where bovine TB is known to exist). Skin testing of the remaining 200 animals in Iowa showed no evidence of tuberculosis. The feedlot operator and one employee were also tested and found to have no reaction. No further investigation is planned at this time. Other than this anomaly, Iowa's cattle have been tuberculosis-free since May 1986.

Tuberculosis is an infectious disease caused by a *Mycobacterium* organism. There are several different types of the *Mycobacterium* organisms dependent on the type of animal in which it usually occurs. Human disease is typically caused by *Mycobacterium tuberculosis* and in bovines (cattle) it is typically caused by *Mycobacterium bovis*.

Both organisms are distributed worldwide and are zoonotic, meaning that humans can be infected with the cattle organism and cattle can be infected with the human organism. His-

torically, transmission of *M. bovis* from cattle to humans occurred after consuming unpasteurized milk and dairy products. Due to mandatory pasteurization and successful eradication programs to control and eliminate the disease in domestic cattle, the prevalence of *M. bovis* in humans has dramatically decreased. (Many other animals, such as elephants, rhinoceros, and birds in zoos, can become infected with either organism.)

Tuberculosis in cattle caused by the human organism, *Mycobacterium tuberculosis*, is very rare since cattle are very resistant to this species of the organism. Zoos, however, are a different story and are a public health concern because of the close contact between TB susceptible animals (i.e., elephants, rhinos, birds, primates) and humans (i.e., animal handlers, caretakers, trainers, veterinarians, and visitors to the zoo).

Tuberculosis caused by *M. tuberculosis* was documented in elephants at the Los Angeles Zoo between 1997 and 2000. Routine husbandry of elephants and autopsy of one infected elephant was responsible for transmission of primary TB infections to several zoo workers.

Thus, it is very important for zoo employees in close contact with the animals to be skin tested for TB annually and to follow strict infection control measures (i.e., wearing N95 respirators), especially during medical procedures and necropsy. Given that visitors to the zoo are kept a significant distance from the animals, usually view the animals outside, and usually do not have direct physical contact with the animals, the likelihood of exposure is extremely low for visitors.

Worth Noting

Advancing Public Health: Meeting the Challenge

The 2004 Public Health Conference will be held March 30 and 31, 2004 at the Scheman Center in Ames. This conference is jointly sponsored by the Iowa Public Health Association (IPHA), the Iowa Environmental Health Association (IEHA), University of Iowa College of Public Health, Child Health Specialty Clinics, and the Iowa Department of Public Health, Bureau of Family Health, Oral Health Bureau, Bureau of Nutrition, Bureau of Health Care Access, and Center for Local Public Health Services and Health Improvement. For more information, please visit www.ieha.net or www.iowapha.org.

Public Health Quick Reads

IDPH Director Mary Mincer Hansen is now publishing a biweekly newsletter, Quick Reads, for local public health partners. Quick reads can be found on the IDPH web site www.idph.state.ia.us under "Recent Additions."

How to Support Breastfeeding Mothers in the Child Care Setting: A Train-the-Trainer Session

This ICN session will prepare participants to train others about strategies for supporting breastfeeding in the child care setting. The session will be held Wednesday, March 17, 10 a.m. to 12 p.m. and is sponsored by Healthy Child Care Iowa and the Iowa WIC program. Presenters include Holly Szcodronski and Brenda Dobson of the Iowa WIC program. For more information call 515-281-5024 or 515-281-7769 or go to www.idph.state.ia.us/conferences.asp.

IDPH en Español

Check out the IDPH web site for documents of the department and it's affiliates available in Spanish. The site is in the IDPH Quick Links box on the right side of our home page.

2002 Behavioral Risk-Factor Surveillance System Annual Report

The 2002 BRFSS Annual Report is now available online, www.idph.state.ia.us/brfss/Default.htm.

Fundamentals of HIV Prevention Counseling

Fundamentals of HIV Prevention Counseling will be held March 2-4, June 15-17, and September 21-23. This three-day workshop will demonstrate effective, client-centered HIV prevention counseling strategies to assist clients in reducing their risk of acquiring or transmitting HIV. For more information contact Training Resources at 515-309-3315 or go to www.idph.state.ia.us/conferences.asp.

The 2004 Iowa Community Health Prize

The Iowa Community Health Prize is a collaborative effort of the Iowa Health System and the Iowa Farm Bureau Foundation to recognize community efforts making a positive impact on the health and well-being of Iowans. In 2004, the Iowa Community Health Prize will award four projects with a cash award of \$6,000 each—one award in each of four award categories. For more information visit www.ihs.org.

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**Check out our web site
at www.idph.state.ia.us**

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What would you like to see in the Iowa Health FOCUS? Send your suggestions for future articles, letters to the editor, upcoming events, or to add names to the mailing list by e-mailing us at staylor@idph.state.ia.us.