

IDPH assists with relief efforts following Katrina

By Don McCormick

As Louisiana and her neighboring states began to wonder how they would ever recover from the strongest hurricane to hit the U.S. Gulf Coast in half a century, Gov. Tom Vilsack detailed Iowa's plans to send aid. In addition to two senior staff from the Iowa Department of Homeland Security and Emergency Management who had already been deployed to Louisiana to organize response and recovery efforts, Gov. Vilsack announced that the Iowa National Guard and Iowa Department of Public Health (IDPH) would send equipment and personnel to the region.



Mary Jones stands next to Aiko Kamies, a paramedic from Sioux City outside the Des Moines International Airport prior to the response team's departure.

"Iowans know firsthand from the floods of 1993 how long recovery from such a disaster may take," Vilsack said during a press conference on August 30, one day after the storm. "We learned a lot from that experience and are glad we have the opportunity to help others who are now in need. I have asked my team to make whatever resources available as quickly as possible to the citizens of Louisiana, Mississippi and Alabama."

Mary Jones, director of the IDPH Division of Acute Disease Prevention and Emergency Response, was also on hand to explain how her staff was putting together a 30-member volunteer response team. Based on an official request from the state of Louisiana, Jones announced that Iowa would send two physicians, 10 nurses, 10 paramedics, two respiratory therapists, and six environmental health specialists.

Interstate requests such as these are supported by the Emergency Management Assistance Compact (EMAC), an agreement executed previously between states to assist one another in times of crisis.

Continued on page 2

Center for Disaster Operations and Response provides resources

By Don McCormick

In mid-August, the Iowa Department of Public Health (IDPH) launched a statewide public education campaign, *Protect Iowa Health*, to increase the public's level of emergency preparedness.

"Since the first meeting of the state board of health in 1880," IDPH Director Dr. Mary Mincer Hansen, R.N., Ph.D. reminds us, "Iowa's organized public health system has continually addressed ways to protect the health of Iowans." Helping individuals and their loved ones be prepared for an emergency, she says, is a vital part of that commitment.

A key component to the *Protect Iowa Health* campaign is the "Iowa Guide to Keeping You Safe." The ring-bound handbook is 31 pages in length and is small enough to fit into a handbag. What it contains could save your life in the event of a public health emergency.

Besides a checklist for making an emergency supply kit, the guide includes hints for developing a communications strategy to keep in touch with loved ones. It also has a section for users to enter important information such as contact numbers and local evacuation details. In addition, a glossary of terms one might hear during a

Continued on page 2



IDPH assists with relief efforts following Katrina

Continued from page 1

During its two-week deployment, Jones said that the volunteer response team would assist people with medical problems in shelters, provide support in clinics and possibly perform hospital triage. The environmental health specialists concerned themselves with indoor air and water quality as well as food safety.

With the last holiday weekend of the summer approaching, Jones publicly thanked the members of the response team for contributing their time and energy to the relief efforts. "On behalf of the Iowa Department of Public Health and the state of Iowa, we appreciate these volunteers and their families taking on the call to help other states in need during this crisis."

Gov. Vilsack also acknowledged that Iowans' first inclination is to help in times like these. He stressed the importance of acting through national disaster-relief organizations, such as the Red Cross, that can coordinate donations and resources and deliver them into the region as appropriate.

Center for Disaster Operations and Response provides resources

Continued from page 1



public health emergency is included.

The IDPH Center for Disaster Operations and Response (CDOR) is also increasing awareness of the importance of being prepared by running public education advertisements in newspapers and on

TV and radio across the state. The central theme of the ads focuses on how simple planning is nothing less than heroic.

Aimed at encouraging Iowans to put together an emergency kit, one of the print ads shows a close-up of an ordinary man in his 30s and the words, "Some heroes use a light saber. This one uses a flash light." Another ad

produced for television shows a family seated around the dining room table mapping out a communications plan, all thanks to Mom's one heroic act: "She got them together to talk."

According to CDOR Risk Communications Officer Nicole Peckumn, the campaign itself has been successful in attracting attention both inside and outside the state. "IDPH has received inquiries from other states that are interested in learning how to incorporate a program like *Protect Iowa Health* into their own preparation for public health emergencies," Peckumn said.

The free guidebook is being offered at all county public health agencies and Iowa State University Extension Offices, Hy-Vee Supermarkets, Casey's General Store locations and participating U.S. Cellular shops. The guide is also available by calling 1-866-339-7906. PDF versions may be downloaded from www.protectioniowahealth.org. Visitors to the site may also view and listen to all of the current advertisements.

August sees start of West Nile virus activity

By Kevin Teale*

A total of six Iowans have tested positive for West Nile virus so far this summer. The first of these cases was reported in late August. Among them, there was one fatality: an elderly Dickinson County resident.

Across the state, 24 counties have reported some type of positive West Nile activity to the Iowa Department of Public Health. Dr. Patricia Quinlisk, Iowa state epidemiologist, warned Iowans not



to wait until West Nile is found in their county before taking precautions. "The counties with confirmed West Nile activity are scattered statewide, meaning the virus is most likely present in every county, but not yet found by our surveillance systems."

Those surveillance systems include sentinel chicken testing, tests on dead birds such as crows, mosquito surveillance, reports of human cases and equine testing performed and



reported by the Department of Agriculture and Land Stewardship.

West Nile virus is transmitted to humans through the bite of an infected mosquito that has picked up the virus while feeding on a West Nile virus-infected bird.

“Mosquito-borne illnesses such as West Nile typically peak here in late summer and early fall,” said Dr. Aileen Buckler, deputy state epidemiologist. “Mosquitoes will be with us until the first hard frost, so precautions such as

repellent use with DEET, wearing long-sleeve shirts and pants and limiting outdoor activity at prime mosquito times such as dusk and dawn, should continue.”

Information on West Nile is available from the department website at: www.idph.state.ia.us, or by calling the state toll-free West Nile hotline, 866-WNV-IOWA (1-866-968-4692).

* Kevin Teale is the IDPH Communications director

Polk County Health inspires change through *Prize Yourself*

By Joyce Allard*

In conjunction with the World Food Prize International Symposium, Oct. 12-14, the Polk County Health Department will host a free community event, *Prize Yourself: Taste a Better Life* on Saturday, Oct. 1, at the Iowa Events Center, Hy-Vee Hall, 730 Third St., Des Moines, Iowa, from 11 a.m. to 3:30 p.m.

Prize Yourself is a free event with a smorgasbord of activities, prizes and presentations for the whole family. Local celebrity chefs will demonstrate how to cook their favorite healthy meals. Gardening experts will demonstrate ways of getting the most nutrition from your backyard by having down-to-earth hands-on demonstrations. Children will be able to dance, twist and jump their way through activities that teach them about good eating and wellness.

“The goal of the day is to inspire change by making incremental steps to become a

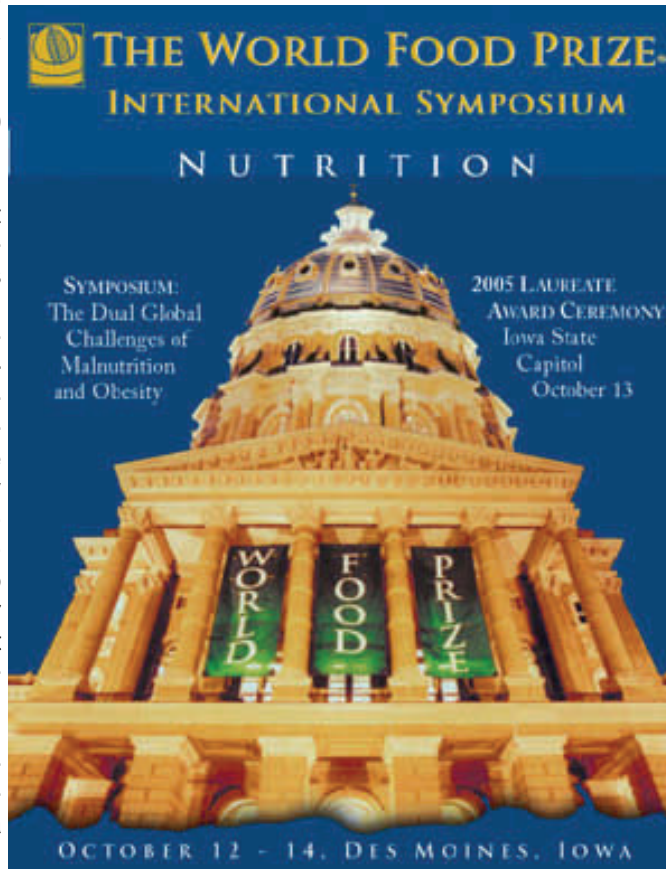
healthier person,” said Dr. Mary Mincer Hansen, R.N., Ph.D., director of the Iowa Department of Public Health (IDPH). “We invite every one to celebrate the World Food Prize by attending *Prize Yourself: Taste a Better Life!*”

The Polk County Health Department has been joined by IDPH, Hy-Vee, ISU Extension and the Des Moines Park and Recreation Department to plan this event.

For more information on *Prize Yourself* visit www.healthypolk.org, and for more information on the World Food Prize visit www.worldfoodprize.org.

Also, watch for a list of other healthy activities planned across Iowa as part of the International World Food Prize Symposium in the October FOCUS Newsletter.

*Joyce Allard is the IPDH Community Education coordinator.



Delta Dental awards educational loan repayments to three dentists

By Cindy Deppe*

Delta Dental of Iowa is awarding \$50,000 educational loan repayment grants to three Iowa dentists as part of a program to recruit dentists to rural communities and other

ties to help create economic incentive packages to recruit dentists.

areas of the state that have a shortage of dentists. In conjunction with this announcement, Delta Dental officials also called on communi-

The three loan repayment grant recipients are Dr. Christopher Bogue (Carroll, Iowa), Dr. Oluleke Jeboda (Lenox, Iowa) and Dr. Lori Mason (Parkersburg, Iowa). Besides



Iowa Department of Public Health

Advancing Health Through the Generations

the \$50,000 loan repayment grant, Dr. Mason also received a matching economic package from the city of Parkersburg. Grant recipients agree to practice in a designated dentist shortage area and devote at least 35 percent of their practice to Medicaid-eligible, elderly, disabled and other underserved patients over a three-year period.

"Loan repayments are one of the most effective ways to recruit dentists to underserved parts of the state, and having a dentist in town makes a big difference to a community's quality of life," said Donn Hutchins, President and CEO of Delta Dental of Iowa. "Delta Dental will work with business leaders and local governments to leverage other resources to recruit dentists."

The loan repayment program is a collaborative effort

among Delta Dental of Iowa, the Iowa Department of Public Health and the University of Iowa College of Dentistry. Of Iowa's 99 counties, 71 are currently designated as dentist shortage areas.

For more information call 515-261-5536 or write to cdeppe@deltadentalia.com

- *Cindy Deppe is manager, Communications and Public Benefits Programs at Delta Dental of Iowa.*



IDPH Office of Multicultural Health aims to 'Close the Health Gap' in Iowa

By Don McCormick

Are you already taking charge of your health? That is the question Janice Edmunds-Wells, a consultant within the Iowa Department of Public Health (IDPH), Office of Multicultural Health, wants Iowans to ask themselves. If you are, she says, why not help another person to do the same?

The suggestion comes from the "Closing the Health Gap" campaign run by the U.S. Department of Health and Human Services (HHS). The campaign is designed to help improve the health of racial and ethnic minority populations, who are affected by serious diseases and health conditions at far greater rates than other Americans.

Edmunds-Wells says it is time for Iowans to help address this issue right here at home by helping themselves or others who, for whatever reason, may belong to a high-risk demographic group. And there is even a special day set aside to do just that.

Scheduled for the third Tuesday of each September, *Take a Loved One for a Checkup Day* encour-



ages individuals to take charge of their health by visiting a health professional, making an appointment for a visit, attending a health event in the community or helping a friend, neighbor or family member do the same.

Edmunds-Wells plans to make Iowans aware of *Take a Loved One for a Checkup Day* by calling it to their attention wherever she can. At the top of her list is the upcoming Latino Heritage Festival, which will be held in Des Moines on Sept. 17. "This will be the first time IDPH has had a booth representing the entire department at the festival," Wells pointed out. "With this special day coming only three days later on September 20, the timing couldn't be better."

Racial and ethnic minorities face the same kind of health problems everyone does, but in disproportionate numbers, including:

- Cancer – African Americans are 19 percent more likely to die from all types than Whites.
- Diabetes – American Indians and Alaska Natives are



- more than 2.3 times as likely as non-Hispanic Whites of similar age to have diabetes.
- Heart Disease – Mexican Americans, who make up the largest share of the U.S. Hispanic population, suffer in greater numbers from overweight and obesity, two of the leading risk factors for heart disease, than Whites.
- HIV/AIDS – In 2003, 80 percent of babies born with HIV/AIDS belonged to minority groups.
- Immunizations – In 2001, Asian/Pacific Islanders had over 18 times the number of new tuberculosis cases as compared to non-Hispanic whites.
- Infant Mortality and Sudden Infant Death Syndrome (SIDS) - In 2002, the infant mortality rate for African American infants was more than twice the rate for non-Hispanic White infants.
- Stroke – African Americans are almost twice as likely to have a first-time stroke as Whites.

To find out how you can help “Close the Health Gap,” visit www.healthgap.omhrc.gov.

October is Breast Cancer Awareness Month

By Peggy Claraham*



“Early detection through screening is our best defense against morbidity and mortality from breast cancers,” says Dr. Julie L. Gerberding, M.D., MPH, director of the Centers for Disease Control and Prevention. Awareness and education, she

its earliest, most treatable stage. However, mammograms may not find all cancers, and sometimes find something that is non-cancerous. This occurs more often in women under age 50. Thus, it is important for women of all ages to have an annual clinical breast exam.

During the month of October, BCCEDP, along with other groups, will be educating women and promoting the importance of mammograms and early detection throughout the state. Activities include billboards, pink ribbons and ‘pink parties.’ One of the largest events will be the Des Moines Affiliate of the Susan G. Komen Breast Cancer Foundation’s annual *Race for the Cure* on October 8 in Des Moines. Thousands will run, walk and raise funds for breast cancer awareness, research and early detection.

says, are keys in promoting regular screening, which leads to early detection.

For the past 10 years, the Iowa Breast and Cervical Cancer Early Detection Program (BCCEDP) has been committed to the mission of reducing mortality and morbidity from breast and cervical cancer for women in Iowa. Over 25,000 eligible women have received services through this federally funded program. The program is administered by the Iowa Department of Public Health (IDPH) and has local sites throughout the state.

In Iowa, approximately 450 women die annually from breast cancer. Roughly 75 percent of women with breast cancer are over age 50 at the time of diagnosis.

**Peggy Claraham is a Community Health consultant with the IDPH Breast and Cervical Cancer Early Detection Program.*

Mammography is the best way to detect breast cancer in

Improving health literacy: a goal for this October and beyond

If you are reading this, your profession probably requires you to keep up with information that relates to public health in Iowa. Perhaps you work for a local health agency, clinic or hospital. Maybe you are a pharmacist. You might work for an insurance company. Or perhaps you are a policy maker.

If you are reading this, you might very well be in a position to help the more than 90 million American adults who have limited ability to read and understand the instructions contained on prescriptions or medicine bottles, appointment slips, informed consent documents, insurance forms and health educational materials.

The Iowa Department of Public Health (IDPH) is focusing on making all of its communication efforts health literate. During the month of October, IDPH encourages readers like you to start thinking about getting involved in



Health in Iowa: a historical perspective

With this summer marking the beginning of the 125th year of organized public health in Iowa, during the coming year FOCUS is proud to highlight major historical events in public health. This issue's article is drawn from one originally published in the Summer 2005 issue of *Iowa Heritage Illustrated*, a quarterly magazine produced by the State Historical Society of Iowa.

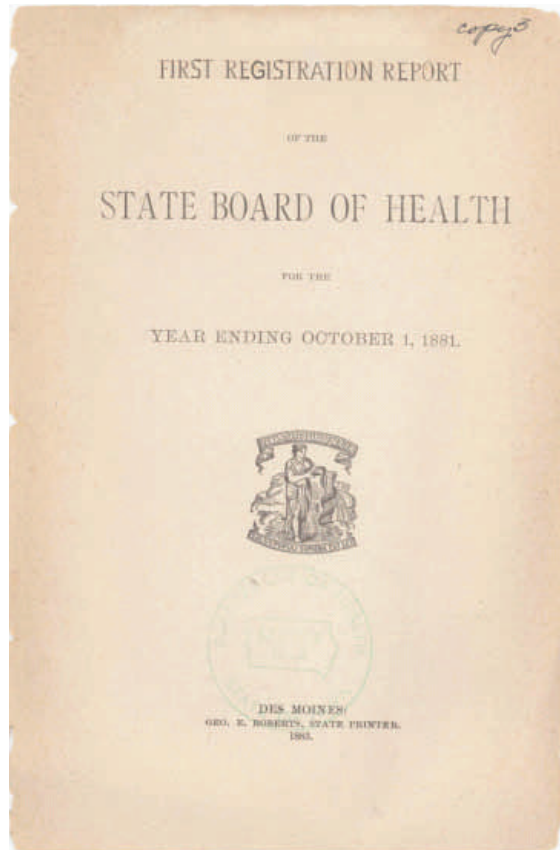
Vital records and statistics: the beginnings of public health in Iowa

By Dr. Ronald D. Eckoff and Sandy Briggs*

Collecting vital records was one of the major responsibilities – and challenges – of the State Board of Health when it was established in 1880. Vital records (births, deaths, and marriages) would be tabulated and analyzed to identify problems and assess the effectiveness of sanitary and other preventative measures.

Though counties in Iowa started registering births in 1867 on the local level, the records submitted to the State Board of Health were incomplete and erratic. In the first few years, many local health authorities did not report to the board. A Charles City doctor, for example, found the board's list of questions "exhaustive" and answered only a few. When compared to census figures, it was clear that only half the Iowa deaths in 1880-1881 were reported to the State Board of Health. But eager to analyze the available numbers, and after an enormous amount of hand tabulation, the board published nearly 700 pages of tables and statistics in 1883. They found that, due to uneven compliance, the statistics provided only a limited understanding of the prevailing fatal diseases in the state.

The Board of Health optimistically anticipated that reporting would rapidly improve with a little time and education. The board's 1917 quarterly bulletin reminded readers that birth certificates, which the Board of Health provided, were often needed for individuals to prove age, citizenship and the rights to vote, hold public office and inherit property. However, collecting records continued to be relatively unsatisfactory until the Iowa Legislature passed the U.S. Census Bureau's Vital Records Model Registration Act in 1921.



exploded. In June 1940, the Department of Health, as it was then known, employed 13 people to search records and make certified copies of birth certificates. Within six weeks, the staff was doubled and divided into three eight-hour shifts. The workload continued to increase until the attack on Pearl Harbor. Then the staff tripled overnight. Within two weeks the incoming mail rose from 3,000 letters per week to 10,000, and the Vital Statistics staff was expanded to 100 employees.

Today the Bureau of Vital Records and Health Statistics, as it has come to be known, keeps detailed records of births, deaths, marriages and family dissolutions. Numbers are provided by race, gender, county and age. Since 1995, births have been registered electronically. Most births are registered with the state within five days of the birth.

During the 2005 legislative session, funds were appropriated for new electronic renovations for the vital statistics bureau. Work is now in progress to move the birth registry to a web-based system. Vital Records Bureau Chief, Jill France, says that this system will allow hospitals to record data directly with her bureau. "Because the authenticated user connects to our server instead of transmitting the data," France says, "the new system will allow us to save money and staff time. It will also make more efficient use of resources, provide more timely data and, best of all, be more secure."

Dr. Eckoff retired in 2002 after 36 years at the Iowa Department of Public Health. Sandy Briggs is an information specialist with the department's Community Education team.

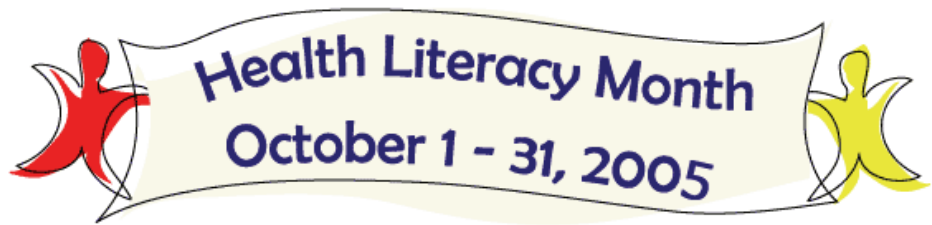


As American involvement in World War II approached, the demand for birth certificates

Improving health literacy: a goal for this October and beyond

Continued from page 5

Health Literacy Month. The grass-roots campaign, which began in 1999, promotes awareness by focusing attention on the fact that much of the health information people need is difficult or even impossible to understand.



The campaign's website, www.healthliteracy.com, can help you get started with some of the following ideas:

Think about your message. This may include introducing health literacy or demonstrating ways to improve understanding. To learn more about health literacy, go to [health literacy fact sheets](#). To read articles about ways you can make a difference, go to [articles](#).

Find partners to work with. Seek out others in your organization or community who share your commitment to understandable health information. To find like-minded folks in your local area, go to [map](#). To learn more about Health Literacy Month sponsors and partners, go to [sponsors and partners](#).

Plan and run a Health Literacy Month event. This October, help promote the need for awareness about health literacy. Your event can be small, large, or somewhere in-between. To read what others are doing, go to [FAQs](#). To download the Health Literacy Month logo or order posters and postcards, go to [poster and postcards](#).

Put yourself on the Health Literacy Month map. Let the world know how you are making a difference. To put your Health Literacy Month event on the map, go to [put your event on the map](#). To contact Helen Osborne, the founding director of Health Literacy Month, go to [contact us](#).

Brochures, giveaways promote health at state fair

By Don McCormick

With more than one million visitors to the Iowa State Fair last month, the Iowa Department of Public Health (IDPH) informational booth again proved an effective venue for highlighting the department's mission of "Promoting and protecting the health of Iowans."

Sandy Briggs, an information specialist at IDPH, played a major role in planning activities and operations coordination during the 11-day fair. "Each day we delivered several boxes (to the booth) filled with brochures and giveaway items which came to us from over 10 different divisions and bureaus within the department," Briggs said. "In many cases, we found it difficult to keep up with the demand from visitors to our booth."

According to surveys received from among the 61 IDPH staff members who worked in the booth, the most popular pieces of literature were those that related to gambling, tobacco use, babysitting tips and substance abuse. Educational materials pertaining to the problems associated with methamphetamine use were also hot items.

Giveaways included bandage cases, cell phone holders and pencils. However, the most popular items by far



were the “sun spots,” stickers coated with a material that changes color when exposed to the sun for a certain period of time. When the pattern disappears, the wearer knows that it is time to apply more sunscreen. Small packets of sunscreen were also available.

The “Walk the Fair,” scavenger hunt was held again this year as a cooperative effort between the Governor’s Office and IDPH booths. Designed to promote physical activity, the game required participants to walk around the fairgrounds and find six pieces of specific information before returning their task sheet to the IDPH booth. Nearly 400 fairgoers completed the activity. Each received a t-shirt and was entered into a drawing to win a bike trailer and other cycling gear. The winner was 14-year-old Lucas Perrigo of Creston, IA.

E-learning builds Iowa’s health workforce

By Eileen Gloor*

More than 90 percent of Iowa nursing education programs are expected to increase student enrollments during the 2005-2006 school year. In nursing alone, 128 faculty vacancies have been reported.

This trend is not confined to registered nurses and licensed practical nurses, however. A 2005 study conducted by the Iowa Department of Public Health (IDPH) Center for Health Workforce Planning found that there are fewer individuals entering other licensed professions as well. Dentists, dietitians, emergency medical technicians, health service providers, marital and family therapists, nursing home administrators, psychologists and respiratory care therapists are all at risk for shortfall if current trends continue.



Educators in Iowa are introducing E-learning as a new teaching option for the growing number of students and new health workers who will be needed to prevent shortages in several health professions. A statewide strategic plan is now available to assist educators in Iowa’s colleges, universities and health facilities increase access to health occupations education through the use of E-learning.

One faculty member reported, “E-learning increases the flexibility of education in time and place, allowing students to study when they want and where they want in a way that suits their own learning style.”

E-learning requires the use of computer-mediated communications. It is frequently combined with face-to-face learning or other distance education modalities. E-learning addresses workforce shortages by improving the quality and flexibility of education for health workers and students in remote locations. Programs and products shared by practice and academic settings result in cost-

savings, increased access and efficient use of limited faculty and staff resources.

The strategic plan recommends ways to enhance E-learning competency in Iowa’s faculty and staff development personnel, train preceptors and include more practicing professionals in health occupations education. Also described in the plan are strategies for acquisition, use and sharing of high-fidelity human patient simulation. In 2005 and 2006, new projects supported by IDPH will use components of the plan to increase access to E-learning opportunities by health workers, faculty and students throughout Iowa.

The strategic plan is posted on the IDPH website at http://www.idph.state.ia.us/hpcdp/common/pdf/workforce/strategic_plan.pdf. For additional information, write to egloor@idph.state.ia.us or (515) 281-8309.

* Eileen Gloor is Executive Officer, Center for Health Workforce Planning, Bureau of Health Care Access.



Epidemiology Notes

From the Center for Acute Disease Epidemiology, 1-800-362-2736 (24-hour number)

Study of Personal WNV Protection Measures

In the September issue of the *Emerging Infectious Disease* journal, there is an interesting study concerning reducing risk for West Nile Virus (WNV) infection. Dr. Loeb *et al* conducted a cross-sectional household survey of personal protective behaviors (avoidance of exposure to mosquitoes, wearing long sleeves and pants and using mosquito repellent) and compared these with risk of WNV infection. They found that people who practice two or more of these protective behaviors had a greater than 50 percent reduction in risk of infection.

The study also found that time spent outside at dusk or dawn on a non-work day was a significant risk factor for WNV infection, and that finding mosquitoes in the home was not associated with WNV infection. This is the first study to provide evidence to support the benefit of personal protective behavior in reducing risk for WNV infection. More details can be found at the CDC website at www.cdc.gov/ncidod/EID/vol11no09/04-1184.htm

Vaccine Coverage Rates Continue To Improve

According to the National Immunization Survey report, U.S. children are getting vaccinated at record-high rates, with 81 percent of toddlers 19 months to three years old receiving the full, recommended series. This exceeds the Healthy People 2010 goal. This is up from 79.4 percent in 2003. Iowa's 2004 rate was 86.1 percent. (The full recommended series consists of four doses of diphtheria, tetanus and pertussis (DTaP) vaccine, three or more doses of polio vaccine, one or more doses of measles-containing vaccine, three or more doses of Hib vaccine and three doses of hepatitis B vaccine.)

The survey also showed that more than 73 percent received at least three doses of the new pneumococcal conjugate vaccine and 87 percent got the varicella vaccine. Since the varicella vaccine introduction, chickenpox case reductions have ranged from 70 percent to 87 percent. In outbreaks of chickenpox, unvaccinated children's attack rate has been 67 percent but only 13 percent among those vaccinated and those who do get ill have less severe disease.

National Food Safety Education Month

September marks the eleventh annual National Food Safety Education Month. The National Restaurant Association Educational Foundation's (NRAEF) International Food Safety Council (IFSC) organizes the month-long event to focus attention on the importance of food safety. This year's theme is "Keep Hands Clean with Good Hygiene." A variety of training activities and promotional materials are available at the

NRAEF website to aid in reinforcing proper hand and personal hygiene: www.nraef.org/nfsem/default.asp.

FDA Approval of Fluarix

The Food and Drug Administration (FDA) announced the approval of Fluarix, a vaccine for adults containing inactivated A and B flu virus. The vaccine is approved for use in adults 18 and older. The approval of this vaccine adds an estimated eight million doses to the 53 million doses already available from Sanofi Pasteur and MedImmune. Fluarix is manufactured by GlaxoSmith-Kline.

Favorable Letter Post-Inspection of Chiron Facility

In a separate announcement, the FDA released a statement on the inspection of Chiron vaccine manufacturing facility in England. Chiron manufactures the FLUVIRIN vaccine, previously approved for individuals ages 4 and above. Estimates of the amount of vaccine Chiron may provide if approved by FDA range between 18 and 26 million doses.

Before the vaccine is supplied for use in the U.S., Chiron must receive supplemental approvals from the FDA. Chiron's ability to deliver FLUVIRIN in time for this flu season will also depend on successful production and final testing of the vaccine. Potential vaccine delays are unknown at this time.

Respiratory Illness From Exposure to Backyard Hot Tub and Pool

Seven people who attended a party at a backyard hot tub and pool in eastern Iowa reported respiratory symptoms accompanied by fever and body aches approximately 36 to 48 hours after the party. Initial information indicated that no guests had been sick before the party. Thinking it might have been something circulating in the water of the hot tub, the owner of the pool contacted the local public health agency. Several attendees were diagnosed clinically with bronchitis and treated with antibiotics; however, no blood or sputum specimens were sent for laboratory testing and all recovered in a few days.

Testing of water from the spa and pool showed no coliform bacteria or *Pseudomonas aeruginosa*, indicating good water quality in both venues. During the course of investigation, a further possible case was discovered who had contact with one of the party guests but was not present when the hot tub was in use. The evidence in this outbreak suggests that one of the guests may have been contagious with a respiratory illness during the event.



...and then some

U.S. Ag. Dept. grants and loans available

The U.S. Department of Agriculture has an array of grant and loan programs that provide enhancements to rural communities. Several of the programs fund training and technical assistance initiatives. Community programs can fund distance learning and telemedicine programs. Some programs assist with construction of buildings and rural distance learning networks. Depending on the program, both public and private nonprofit corporations are eligible to apply. For more information, go to <http://www.rurdev.usda.gov/ia> then click on the "Programs: Business and Cooperative" tab. The Rural Business Enterprise Grants (RBEs) and Rural Business Opportunity Grant (RBOGs) will detail several types of programs. You may also contact Teresa Bomhoff, assistant to the State USDA director, at 515-284-4447.

October is Domestic Violence Awareness Month

An estimated one in four women will experience physical violence by an intimate partner in their lifetime. On Wednesday, Oct. 12, health care providers are specifically encouraged to organize or participate in activities for *Health Cares About Domestic Violence Day*.

For more information about planning public awareness activities and resources available to health care providers, visit the IDPH website at: http://www.idph.state.ia.us/bhpl/domestic_violence.asp, or contact Binnie LeHew, Violence Prevention coordinator, at (515) 281-5032.

Iowa Department of Public Health

Lucas State Office Building
321 E. 12th Street
Des Moines, IA 50319-0075
Phone: 515 281-5787
www.idph.state.ia.us

Please send your suggestions for future articles, comments on this issue and requests regarding our mailing list to FOCUS Editor Don McCormick at dmccormi@idph.state.ia.us.

