

Simulated outbreak helps prepare for emergencies

By DeAnne Sesker*

On Sept. 27, nine of Iowa's counties and several state agencies completed a six-hour exercise during which approximately 300 participants responded to a simulated influenza pandemic. The Iowa Department of Public Health (IDPH) and Iowa Homeland Security and Emergency Management (HLSEM) hosted the exercise.

Facilitated by approximately 30 exercise staff, the events of the day allowed participants to gain first-hand experience responding in real time to a widespread public health emergency. The exercise was the culmination of a series of response preparedness activities and represented the most sophisticated of event scenarios used.

"This is one of the largest and most staff-intensive exercises ever put together in the state," said Pete Grandgeorge, Iowa HLSEM exercise specialist. "Pandemic influenza is something that we can pretty much bank on, so the more real we play it out the better."

The event was the second phase of a preparedness planning exercise that began in July and August. During the first stage, IDPH and HLSEM sponsored five tabletop exercises across the state. The exercises examined possible responses to the human-to-human transmission of H5N1 virus in Iowa. (See Sept. 06 *Focus*.)



(l-r) Paramedic Jerry Goetsch reviews simulated patient information with Ann Corrigan and Devan Rhum at Henry County Health Center. More than 60 simulated patients were triaged from 10:00 a.m. to 1:30 p.m.

For the September scenario, participants were provided with information over the course of five days prior to the exercise that provided details on how the simulated pandemic influenza entered Iowa.

By the time the exercise began, several key events were assumed to have happened. The governor of Iowa had declared a state of emergency. The Strategic National Stockpile (SNS), a national reserve of medication and other supplies for emergency use, was requested and approved. A plan for targeted use of those resources was also predetermined.

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Dr. Hansen elected ASTHO president

By Joyce Allard*

Iowa Department of Public Health (IDPH) Director Mary Mincer Hansen has been elected president of the [Association of State and Territorial Health Officials](#) (ASTHO). Hansen transitioned into the one-year term on Sept. 13 after serving as president-elect during the past year.

Hansen will play a key role with the national group while continuing to serve as director of IDPH. "This is a tremendous opportunity to raise awareness of the role and contribution public health plays in the quality of life for all Americans and to the economic development of our country," Hansen said.

ASTHO Executive Director Paul E. Jarris, MD, MBA, said, "Dr. Hansen's extensive experience and demonstrated leadership abilities will ensure that ASTHO remains a strong voice in serving the public health of our states and nation. Her political insight, as well as her ability to bring people with a wide range of perspectives together, will enable us to build a strong, agile, and efficient public health infrastructure."

As president of ASTHO, Hansen's duties will include talking to federal and state leaders about the importance of public health programs, including those fighting obesity, pandemic influenza, smoking, and chemical, biological or nuclear terrorism.

The state of Iowa benefits from Hansen's new leadership role in many ways. "Iowa will have a voice at the national table so our issues and concerns are heard," Hansen said. "It also increases Iowa's profile nationally regarding the ex-



(l-r) Dr. Hansen appears with former ASTHO President Dr. Leah Devlin, Centers for Disease Control and Prevention Director Dr. Julie Gerberding, and former ASTHO President Mary Selecky.

cellent public health initiatives Iowa is doing. In addition, I will be able to bring to Iowa the latest information regarding policies and future issues from public and private entities influencing funding and policy decisions."

ASTHO is a national nonprofit organization representing the state and territorial public health agencies of the United States, the U.S. Territories,

and the District of Columbia. It is dedicated to formulating and influencing sound public health policy, and assuring excellence in state-based public health practice.

"For close to 65 years, ASTHO has been a strong voice for public health in this country and I am honored to be part of its continuing legacy," Hansen said. "For more than 100 years, organized public health has saved countless lives and improved the quality of life for all Americans. It's critically important that America continue to strengthen public health services as new challenges face our country."

To learn more about ASTHO, visit www.astho.org.

* Joyce Allard is the coordinator of the Office of Community Education.



Iowa Department of Public Health

Advancing Health Through the Generations

Health care workers need vaccinations too

By Nicole Peckumn*

It's mid-December and Jennifer, a clinical nurse, wakes up with a pesky cough but heads to her shift anyway. Her clinic has seen an increased number of patients and she can't miss work. Deb quickly rushes through the hospital parking lot to punch in before her cafeteria shift begins. It takes her more energy than usual; she's feeling pretty rundown. Mike, who works at a nursing home, tries to forget about his headache, cough and fever, as he makes his rounds.

Each is experiencing symptoms of influenza. Each failed to get vaccinated this year.

It's a sad fact, but health care workers infected with influenza often continue to work. This means that they can transmit the virus to others, including patients at high risk for influenza-related complications.



According to a national study, only 36 percent of health care workers receive the influenza vaccine each year.

Influenza outbreaks in health care settings are linked to low vaccination rates among health care workers. The [Centers for Disease Control and Prevention's](#) Healthcare Infection Control Practices

Advisory Committee and the Advisory Committee on Immunization Practices recommends annual vaccinations against influenza for all health care workers. This includes people working in acute care hospitals, nursing homes, skilled nursing facilities, physician's offices, urgent care centers, and outpatient clinics. It also includes people who provide home health care and emergency medical services.

"The bottom line is anyone working in a health care setting needs to get a flu shot each year," said Bridget Konz, of the Iowa Department of Public Health's [Bureau of Disease Prevention and Immunization](#). "It is imperative for organizations to recognize the importance of health care worker vaccination in infection control and patient safety. Getting vaccinated also reduces risk of acquiring influenza while at work and exposing your family at home."

Of those health care workers who don't receive the vaccine, many reasons are cited including concern about side effects and the misperception that the vaccine causes the flu. Other reasons include perception of a low personal risk of getting influenza, inconvenience, and dislike of needles.

Not only does achieving and sustaining high influenza vaccination coverage among health care workers protect other staff and their patients, it also reduces disease burden and health care costs.

* Nicole Peckumn is a public information officer at IDPH.

Influenza is the sixth leading cause of death among adults in the United States. Researchers estimate the annual direct cost of influenza infection in the U.S. between 3 and 5 billion dollars.

Recovery celebrated from capitol steps to local park

By Gena Hodges*

On Sept. 17, the Iowa Voices for Recovery celebration was held in observance of September as National Drug and Alcohol Addiction Recovery Month. The celebration, starting at the state capitol steps, included speakers, a march to Union Park in Des Moines, and family activities. The event drew approximately 500 people throughout the afternoon.

According to a proclamation signed by Governor Vilsack, and submitted by the Iowa Department of Public Health (IDPH) Bureau of Substance Abuse Treatment and Prevention, 74 percent of Iowans say alcohol addiction has affected their lives. The governor's proclamation, on display for the event, urged Iowans to participate in September's activities to encourage those in recovery.

Speakers at the event included master of ceremonies Art Schut, director and CEO of the [Mid-Eastern Council on Chemical Abuse \(MECCA\)](#); Janet Zwick, director of the IDPH [Division of Behavioral Health and Professional Licensure](#); and [Dr. H. Westley Clark](#), director of the [Center for Substance Abuse Treatment](#), U.S. Department of Health and Human Services.

Clark praised the event organizers and attendees for involving young people. "I'm pleased to see so many children at the rally, because we need to start alcohol and drug prevention at a young age to be effective." Clark also praised the alumni of the [Powell Chemical Dependency Center](#), who wore "I'm a Powell Miracle" T-shirts, for supporting one another in recovery. After Clark cut a ribbon that signified freedom from addiction, the Powell alumni led the march to Union Park.

Information, displays and activities greeted the marchers as they entered the

park. A special wall displayed success stories and included an inspiration board on which attendees could write encouraging messages to those in recovery. Several organizations had also set up booths, including [Alcoholics Anonymous](#), [Narcotics Anonymous](#), and a faith-based recovery community organized by [Point of Grace Church](#). Activities included volleyball,



Approximately 200 people marched the 1.7 miles from the Iowa State Capitol to Union Park for the Voices of Recovery Walk.

carousel rides, carnival games, and face painting. Alcoholics Anonymous and Narcotics Anonymous meetings were also held at the park.

The event was organized by substance abuse treatment providers from MECCA, [Employee and Family Resources](#), [House of Mercy](#), [Bernie Lorenz Recovery, Inc.](#), Powell Chemical Dependency Center and IDPH staff. The event was funded by community donations and a grant from U.S. Department of Health and Human Services Administration, [Substance Abuse and Mental Health Services Administration](#), and the Center for Substance Abuse Treatment.

** Gena Hodges coordinates the Targeted Capacity Expansion Adult Methamphetamine Treatment project in the Division of Behavioral Health and Professional Licensure.*



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Scenario brings state and local partners together

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On the local level, Amy Marlow, Buchanan County Medical Center community care manager, said the exercise strengthened the link between local partners and public health employees. "The exercise allowed local partners to interact with a number of public health employees," Marlow said. "Now, we will better understand each other's roles and have a working relationship during a real-world event."

The real-time exercise was developed by

subject-matter experts during three, day-long meetings held across the state. "The exercise design team did a fantastic job," said Ed Farley, director of Henry County Emergency Management. Farley also praised the exercise for drawing attention to areas for improvement and cited communications as one example. "We didn't anticipate how difficult



Exercise play began at 8:00 a.m. at the State Emergency Operations Command Center.

dissemination of news releases to the media and communication with the Emergency Operations Center might be," Farley said.

State Medical Director, Dr. Patricia Quinlisk emphasized that scenario-based exercises are an important part of preparedness. "Whenever we do this sort of thing, we aren't just thinking about a future pandemic or whatever the disease in the scenario happens to be; we're preparing for anything," Quinlisk said. "We hadn't prepared specifically for a mumps outbreak, for example. But when we found ourselves dealing with one earlier this year, our successes

in responding were due to preparing for this *kind* of thing."

** DeAnne Sesker is the education/exercise coordinator in the IDPH Center for Disaster Operations and Response.*

FROM VISION TO VICTORY

The 2006 Iowa Tobacco Control Conference will be held at the Des Moines Marriott Downtown, Nov. 1-2. The conference will feature Iowa Department of Public Health Director Mary Mincer Hansen as well as speakers Vinnie Demarco, Annie Tegen and Joe Tye. This two-day conference will instill powerful knowledge on reducing the use of tobacco through grassroots organization, smoke-free campaigns, implementing tobacco-free campuses, utilizing media, mobilizing youth, reducing disparities, and engaging priority populations. Approximately 200 partners and advocates from across the state are expected to attend. To learn more about the conference or to register visit www.idph.state.ia.us/register.

www.idph.state.ia.us/register



Iowa Department of Public Health

Advancing Health Through the Generations

Fenton to present at Fit for Life symposium

By Sarah Taylor*

Imagine Iowa 20 years from now.

Children are walking and riding their bikes to school. Inside their backpacks are fresh fruits and vegetables their parents bought at the local farmers' market. At worksites, elevators are "hidden"; the stairs are located in the center of the building. There is a basket of fresh fruit near the coffee maker. Families eat dinner together, and then walk or bike to the park instead of watching television. Vending machines offer an abundance of healthy options. Iowa's trail system is as connected as its roads. The obesity epidemic has leveled off. Diabetes rates are on the decline. Bones and joints are less stressed. Fewer arteries are clogged. Iowans are well-rested, and have improved mental well-being.

To begin the work that will lead to this vision, the [Iowans Fit for Life](#) Implementation Symposium will be held on Nov. 16 at the Stoney Creek Inn and Con-

ference Center in Johnston. A presentation by Mark Fenton, host of the new PBS series "[America's Walking](#)," is expected to be a highlight of the symposium. Fenton, well-known to walking enthusiasts, is a champion racewalker, racewalking coach, and former columnist and editor of *Walking Magazine*.

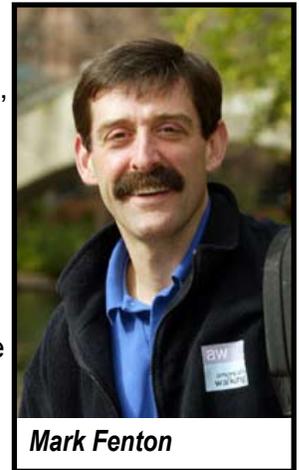
The symposium will mark the implementation of [Iowa's Comprehensive Nutrition and Physical Activity Plan](#). The plan was written in 2005 by the Iowans Fit for Life Partnership. The Partnership is headed by the Iowa Department of Public Health's [Division of Nutrition and Health Promotion](#), and consists of a network of agencies and organizations from across the state with a vested interest in nutrition and physical activity.

The comprehensive state plan includes 10-year goals and addresses Iowans of all ages and at all levels of the socio-ecological model, which acknowledges the roles of the individual, social network, organization, community, and public policy in chronic disease prevention. Strategies to implement this plan in educational settings, in early childhood, with older Iowans, in business and agriculture, health care, and community are also included in the plan.

Carol Voss, nutrition coordinator at IDPH is excited about the Department's role in the plan. "The great thing about this plan is that while IDPH is bringing the partners together, it's the partners who will decide how the plan will be implemented."

For more information on Iowans Fit for Life visit www.iowa.gov/iowansfitforlife. To learn more about the symposium, contact Dennis Haney at ghaney@idph.state.ia.us or 515-281-7501.

* Sarah Taylor is the physical activity coordinator at IDPH.



Mark Fenton

Hansen appears on "Move It"

On Sept. 20, Iowa Department of Public Health (IDPH) Director Mary Mincer Hansen, R.N., Ph.D. appeared on [WHO-TV 13 News](#) to help kick-off the program's newest health segment, "[Move It](#)." The weekly reports will follow two Des Moines area families for six months as they incorporate better nutrition choices and more physical activity into their lifestyles in an effort to improve their health.

"Scientists are warning that if we do not get a handle, as a society, on obesity and overweight in our children, they may have a decreased lifespan when compared to their parents," Dr. Hansen said in an interview with WHO-TV Reporter Sonya Heitshusen. "This is unacceptable."

Watch "Move It" every Wednesday at 10 p.m. to check on the families' progress and to hear more from Dr. Hansen.

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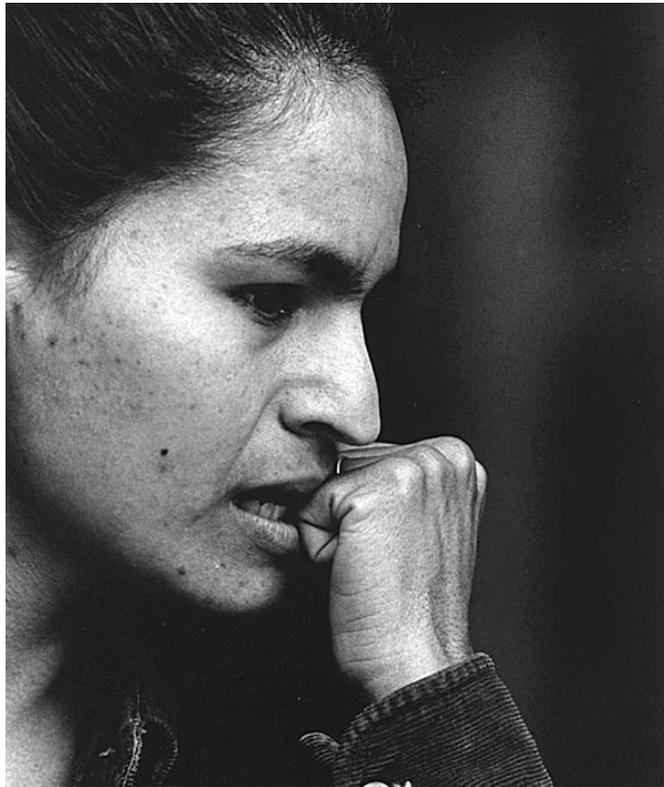
Advancing Health Through the Generations

Intimate partner violence often goes unreported

By Binnie LeHew*

Five years ago, “Elena” was an immigrant whose American spouse battered her repeatedly. She could tell no one for fear of more beatings and was afraid of losing her daughter if she left. When she finally found help from a legal services program for immigrants, she discovered another problem: she had no “proof” that she was a victim of domestic abuse because she hadn’t told anyone.

Elena had never called the police. When she sought medical care during her pregnancy or went to the emergency room for her injuries, she didn’t tell the staff that her husband beat her. And since Elena didn’t



speak much English, her husband accompanied her on every visit as her “interpreter.” In fact, her husband was able to convince others that he was very concerned for Elena’s welfare. Even if she tried to tell someone, Elena feared no one would believe her story.

Fortunately, even without Elena’s admission, her health care provider knew how to recognize the signs of abuse and documented these signs in her medical record. So, when Sonia Parras-Konrad, Elena’s attorney, sought copies of her medical records for court proceedings, she got the evidence she needed.

“The nurse not only described the injuries, but also documented the emotions and behaviors that made her suspect abuse,” said Parras-Konrad, who directs the Mujeres Unidas por un Nuevo Amanecer or Women United for a New Dawn (MUNA) Legal Clinic in Des Moines. As a result, Elena was able to get an order of protection when she separated from her husband and got custody of her daughter.

Today, Elena is an American citizen and has a job and a safe home for herself and her daughter. However, her story would have ended very differently if Elena’s health

care providers had accepted Elena’s denial and not made the effort to document what they had observed.

Unfortunately, Elena’s story is not uncommon, even among non-immigrant women in Iowa. Almost one in five Iowa women experience some form of physical violence from an intimate partner during their lifetime. In a recent report produced by the Iowa Department of Public Health and available on the IDPH Web site in mid-October, the reality of domestic violence is that most people, like Elena, do not report abuse to authorities.

Compared to the number of domestic assaults reported to police, approximately 6,000 annually, it is more likely that someone in an abusive relationship will have contact with a health care provider, clergy, neighbor, or a family member before law enforcement is ever called. Moreover, women are most at risk of death when they try to end an abusive relationship, as data from the Iowa Domestic Abuse Death Review Team reveals.

For more information about intimate partner violence, or to learn more about what health care providers in Iowa can do, visit www.idph.state.ia.us/bhpl/domestic_violence.asp. To view the IDPH report look for the Behavioral Risk Factor Surveillance Survey (BRFSS) 2005 on the link above.

* Binnie LeHew is the violence prevention coordinator at IDPH.



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Advancing Health Through the Generations

Care For Yourself: A personal story

By Ann Short*

Five months ago Gayle Higginbotham did what the [Iowa Care for Yourself \(CFY\)](#) program recommends all women do. She saw a doctor for her annual physical.

Unfortunately, Higginbotham became one of the 212,290 women the [American Cancer Society](#) expects to be diagnosed with new cases of invasive breast cancer in 2006. An estimated 2,200 women will be diagnosed in Iowa.

Even before getting the results of her mammogram and ultrasound, Higginbotham remembers being nervous about her potential medical bills. "Even though I was still thinking it couldn't happen to me, I was concerned with how I would be able to pay for some of the medical fees," said Higginbotham. "I remembered hearing about the [CDC's Breast and Cervical Cancer Early Detection Program](#) and decided to call and see if I was eligible."

Because of Higginbotham's foresight and the efforts of Webster County CFY Contact, Joan Peterson, Higginbotham now has a better chance of not becoming one of the expected 430 Iowa breast cancer deaths in 2006.

Administered by the Iowa Department of Public Health, CFY is the Iowa branch of the Centers for Disease Control and Prevention's (CDC) National Breast and Cervical Cancer Early Detection Program.

Higginbotham called Peterson for information on the program. Peterson was able to provide information on both of the procedures Higginbotham was set to undergo, as well as future options if the lump in her breast was indeed cancer.

After her cancer diagnosis, Higginbotham called Peterson again. "Joan let me know that I have the power to decide where I want to go for medical services and that I have a choice of my treatments," Higginbotham said.

Higginbotham underwent a lumpectomy and is currently undergoing chemotherapy.

According to the American Cancer



When Gayle Higginbotham started to lose her hair due to chemotherapy, her brother, Dwayne, showed his support by shaving his head.

Society, roughly 45 million people, about 15 percent of the U.S. population, don't have health insurance. The national program has helped low-income, uninsured, underinsured and underserved women gain access to screening exams for early detection of breast and cervical cancers since 1991. CFY has been screening women since 1995 and to date has provided breast cancer screening for 25,574 women.

"My advice to anyone experiencing cancer treatment is to surround yourself with family and friends," Higginbotham said. "I contribute my strength to my family, friends, medical team, the parents and children I work with, and the people in my community who came to my aid when they heard about my diagnosis."

For more information about CFY or its programs, call 1-800-369-2229 or 1-800-735-2942.

** Ann Short is the professional development, public education and regional consultant for the IDPH "Care for Yourself" program.*



Iowa Department of Public Health

Advancing Health Through the Generations

Mentors help with recruitment and retention

By Rob Stewart*

Joyce King, a veteran home care aide with Home Caring Services, Inc. (HCS) in Des Moines County, couldn't help but notice the problems plaguing her profession. According to King, low pay, little to no insurance or benefits, and work that she says requires "some grit," sent many first-time aides running to local factories and other more financially rewarding jobs in the community.

"Once they got into a client's home and had problems or questions, or found out it was harder work than they had expected, some aides would just leave," King said. "We needed to get people to know the job better, so they could make that decision before they got out in the field."

In an effort to overcome some of these and other challenges facing home care aides, HCS Executive Director Suzanne Russell applied to participate in the national [Better Jobs Better Care program](#) (BJBC). After a lengthy selection process, HCS was one of only 14 sites in Iowa chosen to participate.

The BJBC program is supported by a grant from [the Robert Wood Johnson Foundation](#) and [the Atlantic Philanthropies](#) and administered to HCS by the [Iowa CareGivers As-](#)



(l-r) HCS home care aides Roselyn Egan, Tami Ballard, and Joyce King.

sociation. It provided funds for King and her fellow home care aides to attend workshops and training sessions on a variety of topics. Among them was a training session on how to initiate and implement a mentoring program.

King said the mentoring program was a welcome addition to HCS. "This job can be intimidating when you're new. You're in someone's house, who you don't know, by yourself," King said. "Before the mentoring program, if you had any questions or problems there wasn't anyone there to help."

Since the implementation of the mentoring program, experienced home care aides like King accompany new aides on visits to clients. The mentors work with the new aides until they feel comfortable on the job. According to King, this provides a space for learning, comfort and opportunities to build relationships with clients.

Mia Martin, a home care aide who recently completed the mentoring program, said the experience better prepared her for her job. "My mentor explained each client's specific challenges and care needs," Martin said. "It was a great way to get hands-on training and made me feel more comfortable on the job."

As part of the BJBC program, Director Russell, King, and fellow home care aide Roselyn Egan attended the national BJBC conference in Boston. At the conference, all five states that received grant funds gathered to share best practices and brainstorm solutions to the daily challenges they face.

"Personally, [the BJBC conference] changed my life," King said. "I didn't realize how many people cared about the work we were doing, or felt the same loyalty to our clients."

To learn more about home care aides in Iowa or the Better Jobs Better Care program go to www.iowacaregivers.org.

* Rob Stewart is an intern in the Office of Community Education at IDPH.

Public health dietitians - beyond WIC

By Erin Feld*

The [proposal](#) in August by the [U.S. Department of Agriculture](#) to update the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) was historic and significant. For the first time in WIC's 32-year history, fresh fruits and vegetables would be made available to participants. The proposal was touted as finally allowing WIC to "come in line with current nutrition science." (See Sept. 06 [Focus](#).)

Nutrition science *has* changed. Angie Tagtow, regional nutrition consultant at the Iowa Department of Public Health (IDPH), says the role of the public health dietitian, whose job is to study nutrition, has also changed significantly.

"Traditionally, these professionals focused on providing adequate nutrition to low-income women and young children," Tagtow said. Now, public health dietitians play an even larger role in shaping nutrition programming and policy across several program areas.

"Take the eight dietitians who work in the [IDPH Bureau of Nutrition and Health Promotion](#)," Tagtow began. They promote healthy behaviors in individuals, groups, and communities to prevent and reduce illness, injury, and disease in a variety of ways.

Dietitians help families achieve food security by assuring utilization of: the Food Assistance Program; the Child and Adult Care Food Program; WIC; elderly meal programs; local food banks; soup kitchens and food

pantries. They advise the public at grocery stores and restaurants about healthy food options through campaigns and outreach activities.

Through the Pick a **better** snack & Act and the Iowans Fit for Life programs, dietitians address overweight and obesity. They are also instrumental in the Cardiovascular Risk Reduction program.

Policy development is another area in which dietitians work hard at all levels of government. Without them, changes to the WIC program would have never been proposed. In Iowa, dietitians help develop policy through the Food Policy Council, the State Nutrition Action Plan, and the Nutrition Network, which focus on improving access to and affordability of fresh produce.

Dietitians promote sustainable agriculture through health education regarding seasonal, local and organic foods including the WIC Farmers' Market Program. They also conduct research for establishing evidenced-based practice for the provision of accurate nutrition messages.

And have you ever seen "Healthy Minutes," the Iowa Public Television health program aimed at 2- to 5-year-old children? Dietitians work on this as well.



IDPH dietitian Carol Voss and Fleming's restaurant Chef John Meier conducted healthy cooking demonstrations in the Agriculture Building at the 2006 Iowa State Fair.

"From the farm to the fork, the strength of a dietitian is apparent wherever consumers make nutritional decisions," Tagtow added. "Thanks to the dietitians here in the department, the 110 dietitians working in local WIC clinics, and the many others working in or partnering with programs across the state, Iowans are getting a lot of support in making important choices for themselves and their communities."

** Erin Feld works at Iowa Health Des Moines and is a Des Moines University MPH student intern in the IDPH Bureau of Nutrition and Health Promotion.*



Iowa Department of Public Health

Advancing Health Through the Generations

IA-EHRT: its beginnings, Hurricane Katrina, and beyond

By Katrina Karasch and Rob Stewart *

"Hurricane Katrina was a horrible thing that happened; a true tragedy," reflects Cory Frank, Iowa Environmental Health Response Team (IA-EHRT) coordinator in the Iowa Department of Public Health's (IDPH) [Division of Environmental Health](#). Frank should know. He was there.

On Sept. 3, 2005, six environmental health professionals were deployed from various locations around Iowa as part of IA-EHRT. "The conditions and environment were chaotic," Frank said. "But amid the chaos, we were able to stay focused on our mission tasks and make a huge impact to the response areas we were deployed in. It's an experience that will always be remembered."

For 16 days, the team focused on issues such as food safety and protecting public water supplies.

But Katrina wasn't the event that prompted the formation of IA-EHRT. While Iowa doesn't necessarily prepare for hurricanes, they aren't the only causes of environmental health emergencies.

With a small amount of funding from the [Centers for Disease Control and Prevention](#) (CDC) bioterrorism grant in 2003, Ken Sharp, executive officer in the IDPH [Office of Local Board of Health Assistance](#) at IDPH, initiated a state advisory panel to discuss emergency environmental response. The panel included local environmental health professionals from around the state who gathered to dis-

cuss the mission of a possible environmental health emergency response team, the structure of that team, and its incorporation into existing response systems. After these discussions, the panel received approval for more funding and established IA-EHRT with Frank as its coordinator.



(l-r) Aimee Devereaux, environmental health director for Pocahontas county in September 2005, conducts water testing with fellow IA-EHRT team member Cory Frank during the team's deployment to Louisiana last year.

Recently, IA-EHRT and its members have been honored in many ways. The team was recognized for its response efforts during several pilot environmental health response trainings offered nationally by the CDC. Members have been asked to attend and participate in several state and national panel discussions, including the the National Environmental Health Association's Annual Education Confer-

ence. And Frank has authored a guest commentary for the October 2006 issue of the [Journal of Environmental Health](#).

"We take pride in working to stay on the edge of things," Frank said. "Even though Iowa may never experience anything of the magnitude of a Category 4 hurricane, real public health emergencies can and do happen in Iowa and we need to be prepared."

* Katrina Karasch and Rob Stewart have interned in the IDPH Office of Community Education.



Iowa Department of Public Health

Advancing Health Through the Generations

...and then some

Health literacy education opportunities upcoming

The [National Rural Health Association](#) is sponsoring a workshop entitled *Health Literacy: Improving Clear Health Communication For Better Patient Outcomes* on Oct. 30-31 in Asheville, NC, and on Dec. 8-9 in Austin, TX. These hands-on workshops will help attendees develop the skills needed to convey important health information to patients. For more information contact Rosemary McKenzie at 816-756-3140 or rmckenzie@NRHArural.org or visit www.nrharural.org.

The Fifth Annual National Health Communication Conference will be held Nov. 29, 2006, at the National Academy of Sciences in Washington, D.C. Co-sponsored by the [American College of Physicians Foundation](#) and the [Institute of Medicine](#), the conference provides a unique opportunity for attendees from various sectors to learn about the growing problem of low health literacy and hear about innovative solutions that can be implemented in various locales and settings. For a complete list of topics, speakers or for more information call 877-208-4189 or visit www.foundation.acponline.org.



(l-r) Bruce Hokel of IDPH speaks with Burt Kross, formerly of the University Hygienic Laboratory, and Bernard Geschke of the Progressive Agriculture Foundation, in the IDPH-sponsored Health & Safety tent at the Farm Progress Show in Amana. IDPH employees Tom Brown, Dale Chell and Debbi Cooper also staffed booths at the show during the three-day event in late August.

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