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The Update is a bi-weekly web newsletter published by the Iowa Department of Public Health's Bureau of Family Health. It is posted the second and fourth week of every month, and provides useful job resource information for departmental health care professionals, information on training opportunities, intradepartmental reports and meetings, and additional information pertinent to health care professionals.

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Injury Prevention Report Card

Trust for America's Health & the Robert Wood Johnson Foundation



In a new report, *The Facts Hurt: A State-By-State Injury Prevention Policy Report*, 24 states scored a five or lower on a set of 10 key indicators of steps states can take to prevent injuries. Two states, California and New York, received the highest score of nine out of a possible 10, while two states scored the lowest, Montana and Ohio, with two out of 10.

Injuries - including those caused by accidents and violence - are the third leading cause of death nationally, and they are the leading cause of death for Americans between the ages of 1 and 44.

The Facts Hurt report, released on June 7 by the Trust for America's Health and the Robert Wood Johnson Foundation, concludes that millions of injuries could be prevented each year if more states adopted additional research-based injury prevention policies, and if programs were fully implemented and enforced.

Overall, New Mexico has the highest rate of injury-related deaths in the United States, at a rate of 97.8 per 100,000 people, while New Jersey has the lowest rate at 36.1 per 100,000. Overall, the national rate is 57.9 per 100,000 Americans who die in injury-related fatalities.

Approximately 50 million Americans are medically treated for injuries each year, and more than 2.8 million are hospitalized. Nearly 12,000 children and teens die from injuries resulting from accidents each year and around 9.2 million are treated in emergency rooms. Every year, injuries generate \$406 billion in lifetime costs for medical care and lost productivity.

Injury Prevention Report Card

continued

For *The Facts Hurt* report, TFAH and RWJF worked with a committee of top injury prevention experts from the Safe States Alliance and the Society for the Advancement of Violence and Injury Prevention to develop a set of indicators of leading evidence-based strategies that have been shown to reduce injuries and save lives. Some key findings include:

- 29 states do not require bicycle helmets for all children
- 17 states do not require that children ride in a car seat or booster seat to at least the age of 8
- 31 states do not require helmets for all motorcycle riders
- 34 states and Washington, D.C. do not require mandatory ignition interlocks for convicted drunk drivers
- 18 states do not have primary seat belt laws
- 44 states scored a "B" or lower on a teen dating violence law review by the Break the Cycle organization
- 14 states do not have strong youth sport concussion safety laws

"There are proven evidence-based strategies that can spare millions of Americans from injuries each year," said Jeff Levi, PhD, Executive Director of TFAH. "This report focuses on specific, scientifically supported steps we can take to make it easier for Americans to keep themselves and their families safer."

The report found that many injury prevention activities have been scientifically shown to reduce harm and deaths, for instance:

- Seat belts saved an estimated 69,000 lives from 2006 to 2010
- Motorcycle helmets saved an estimated 8,000 lives from 2005 to 2009
- Child safety seats saved around 1,800 lives from 2005 to 2009
- The number of children and teens killed in motor vehicle crashes dropped 41 percent from 2000 to 2009
- School-based programs to prevent violence have cut violent behavior among high school students by 29
 percent

The report also identified a set of emerging new injury threats, including a dramatic, fast rise in prescription drug abuse, concussions in school sports, bullying, crashes from texting while driving and an expected increase in the number of falls as the Baby Boomer generation ages.

"Seat belts, helmets, drunk driving laws and a range of other strong prevention policies and initiatives are reducing injury rates around the country," said Amber Williams, Executive Director of the Safe State Alliance. "However, we could dramatically bring down rates of injuries from motor vehicles, assaults, falls, fires and a range of other risks even more if more states adopted, enforced and implemented proven policies. Lack of national capacity and funding are major barriers to states adopting these and other policies."

To read the full report, go to <u>www.healthyamericans.org</u>.

I am speaking at an upcoming event. How do I command the room?

ALWAYS think of your job as persuading the audience, not dumping information on them. Your presentation should begin by setting up the problem for which your information is the solution. Figure out what you want the audience to do differently as a result of your presentation, and persuade them of that. If you've presented the problem well, you've made your job easier. Audiences appreciate information delivered in a way that makes sense to them.

SOMETIMES vary when you take questions. Most speakers talk for 45 minutes and take questions at the end. But a typical attention span last about 20 minutes, so by 45 minutes, you've used up two attention cycles. Then there's the problem of leaving your parting words at the mercy of the questioners- the session may end not with your brilliant, prepared thoughts, but with the last question. Instead, stop for questions at the 20 and 40 minute marks. Then, if you wish, pause one last time for questions at the end. But be sure to save time to deliver a killer closing remark.

NEVER fall into the Powerpoint Triangle of Death. Many speakers- even confident, highly paid speakers- talk to their slides instead of the audience. When the speaker stands between the computer and the screen, all his motions and gestures are confined to that triangle, not focused on the audience. What is that bad? People are only interested in motion toward or away from them. Motion directed toward the screen or a computer causes participants to check out. Learn your slides so you can address the audience.

Nick Morgan is the founder of executive training company Public Words and author of several books about public speaking

CDC: Drowning Still a Leading Cause of Death for Toddlers

Drowning remains the leading cause of death in children under age 4 other than birth defects, according to a new report from



the Centers for Disease Control and Prevention.

From 2005 to 2009, about 3,880 people died from drowning each year in the United States, and more than 5,700 received emergency care for near-drowning incidents, states the CDC.

Death rates were highest for children between ages 1 and 4. In this age group, about 2.5 deaths occurred for every 100,000 children in the population. Overall, there were 1.3 deaths per 100,000 people in the U.S. More than half of all people treated in emergency rooms for near drowning were less than 4 years of age.

The rate of death for males of all ages was about four times that of females (two deaths per 100,000 for males versus 0.5 deaths per 100,000 females). Males might be at a higher risk for drowning because they are more likely to overestimate their swimming ability, put themselves in riskier situations or use alcohol more frequently, the report said.

"To prevent drowning, all parents and children should learn survival swimming skills," which include learning how to right oneself after falling into water, and how to float or tread water, the report said. Formal swimming lessons have been shown to reduce the risk of drowning among children under 4 years of age in the United States.

A New Network Focus on Maternal and Child Health

The Network for Public Health Law

Many health problems begin in infancy and childhood, which means that protecting and promoting the health of children, youth, mothers and pregnant women can positively affect the entire community. The Network is pleased to announce the addition of Maternal and Child Health to its list of official public health areas of focus. In collaboration with individuals and organizations dedicated to maternal and child health, Network leaders are available to provide legal assistance, resources and connections on a range of issues that affect maternal and child health, such as newborn screenings, immunizations, nutrition, child safety and more.

For more information about this new addition, go to www.networkforphl. org/public health law topics/maternal and child health. For more information about Network activities and news of public health law, go to www.networkforphl.org.



Calendar

June 21, 2012
*Bureau of Family Health Grantee Committee Meeting
9 - 11:30 a.m., GoToWebinar

* Required meeting

JUNE Contract Required Due Dates

12 - FP Client Visit Records

15 - Electronic Expenditure Workbooks

21 Grantee Committee Meeting

28 Export WHIS Records to IDPH

30 CAReS/WHIS Service Note Review



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