

STAR.Health



What is STAR.Health?



Southeast Targeted Area Resources for Health



Vision:

Improved health and well being of people in Chicot, Desha and Lincoln Counties.

Mission:

Building healthier communities through partnerships, expanding resources, and addressing social and economic needs.



Why STAR.Health?

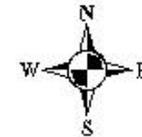
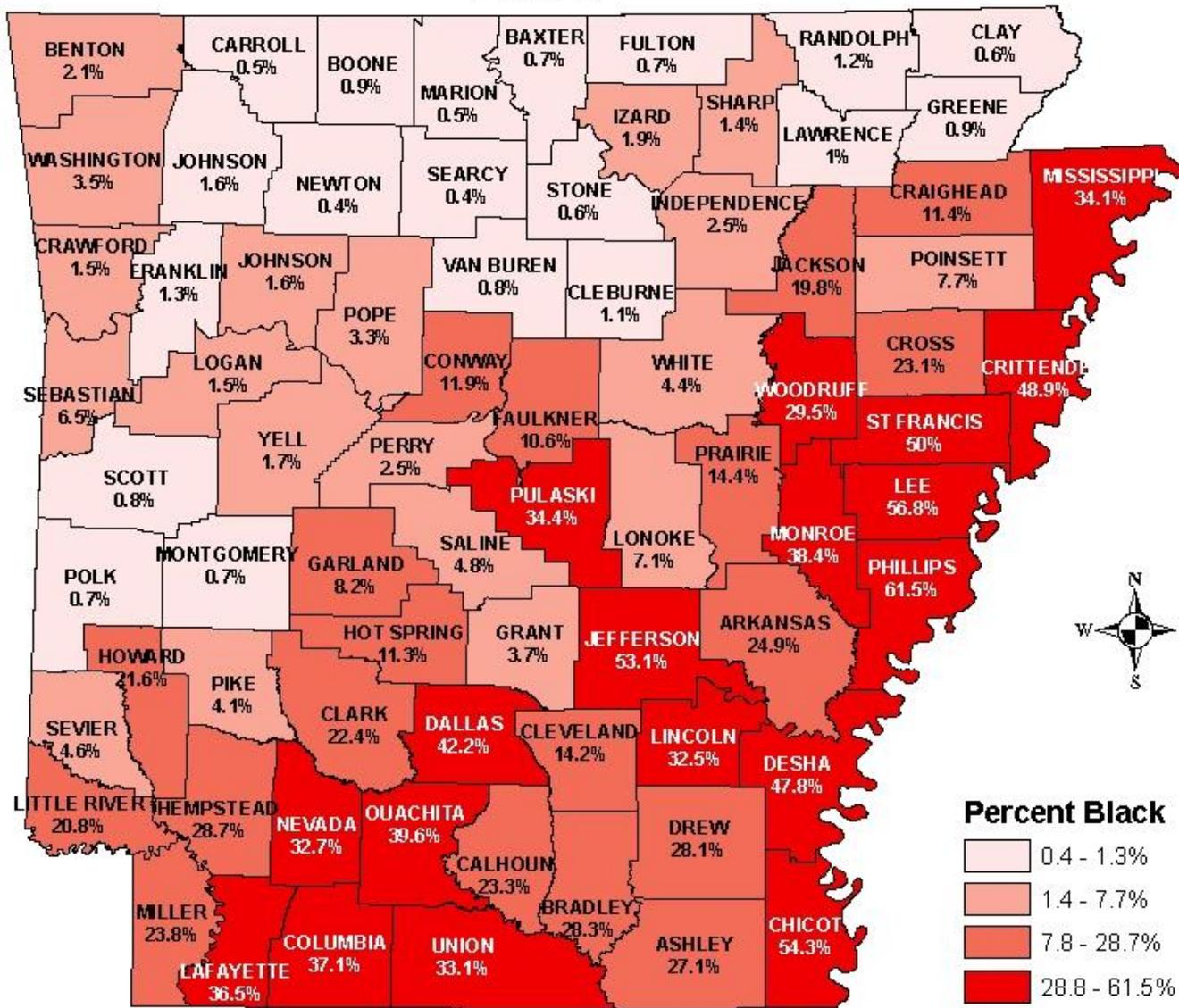


To address...

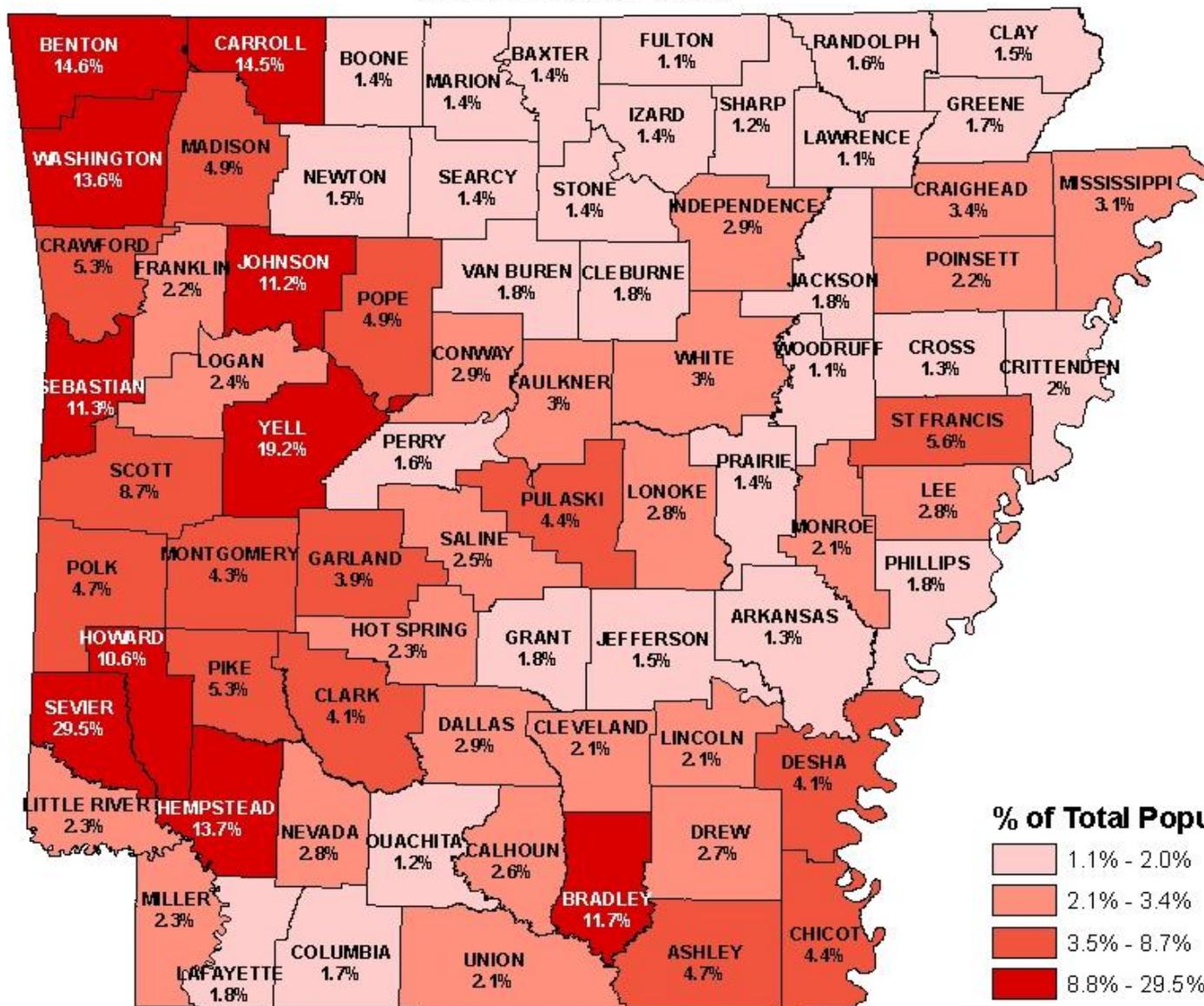
1. Poverty
2. Health Disparities
3. Educational disparities
4. Minority Population.



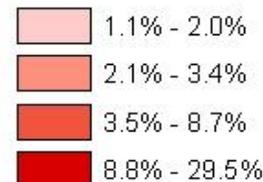
Estimated Black Population Percent of Total County Population 2008



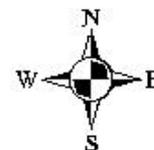
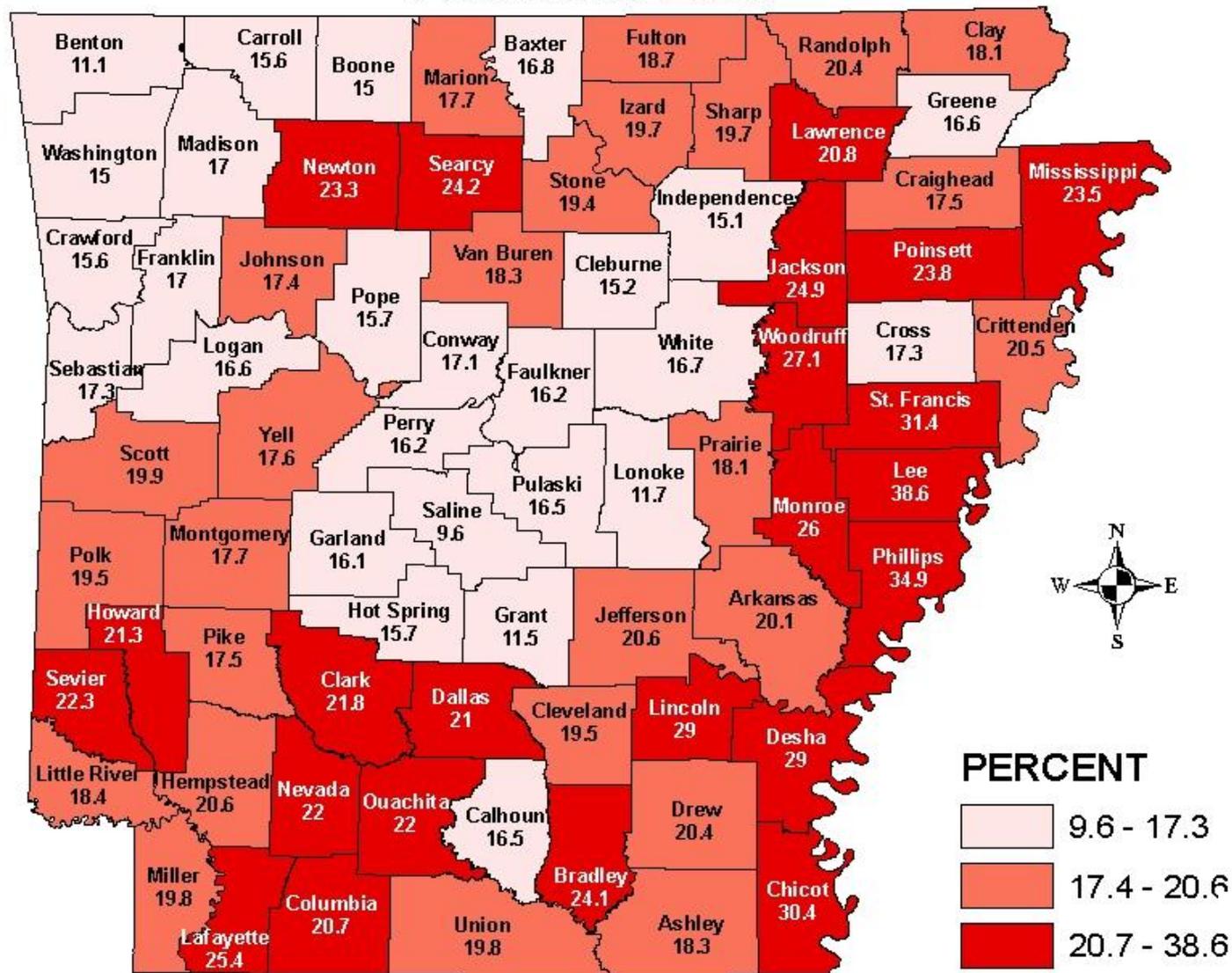
Estimated County Hispanic Population Arkansas, 2009



% of Total Population

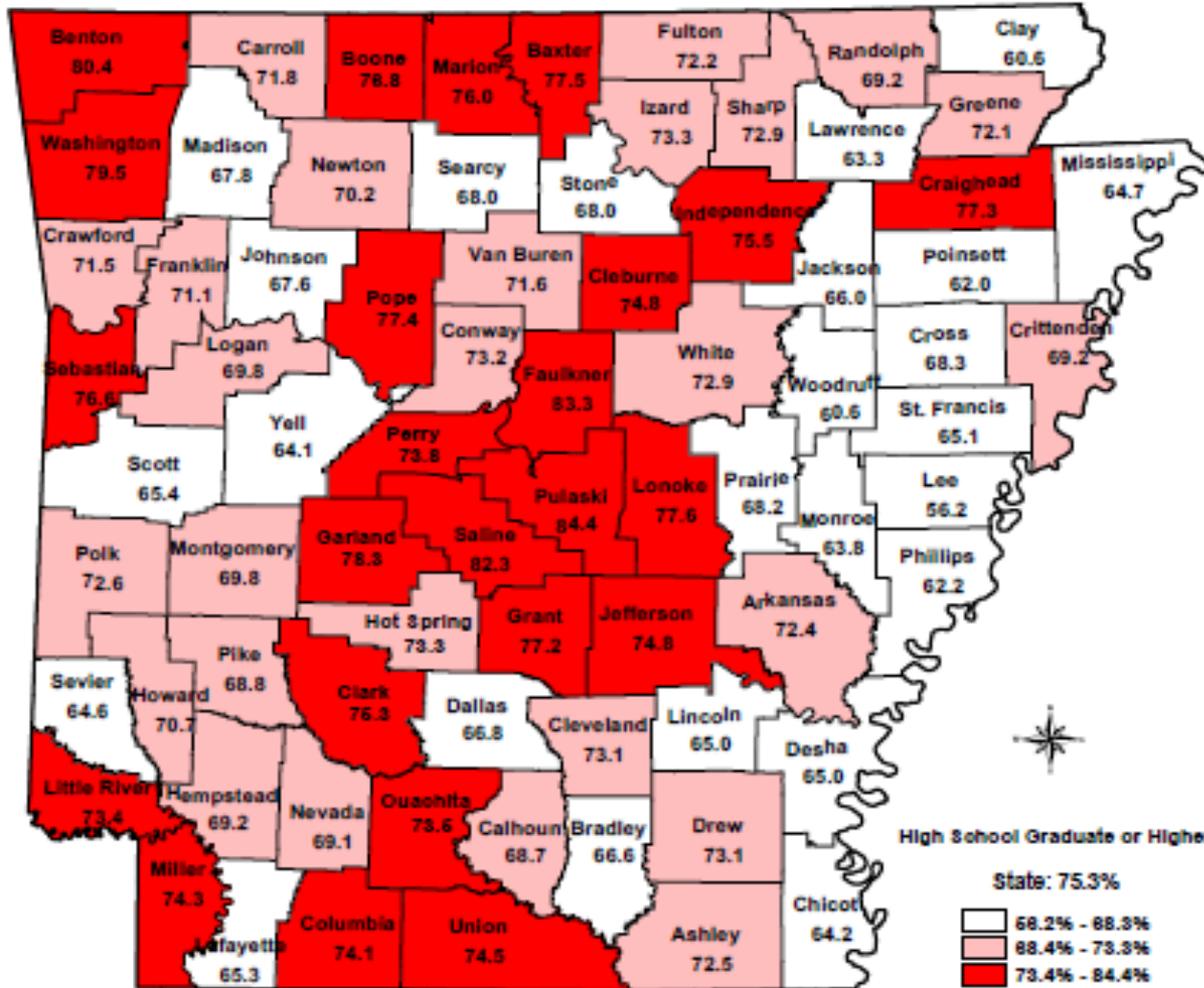


Percent Individuals at or Below Federal Poverty Level Arkansas 2008



Source: US Census Bureau, American Community Survey, 2007 and 2008;

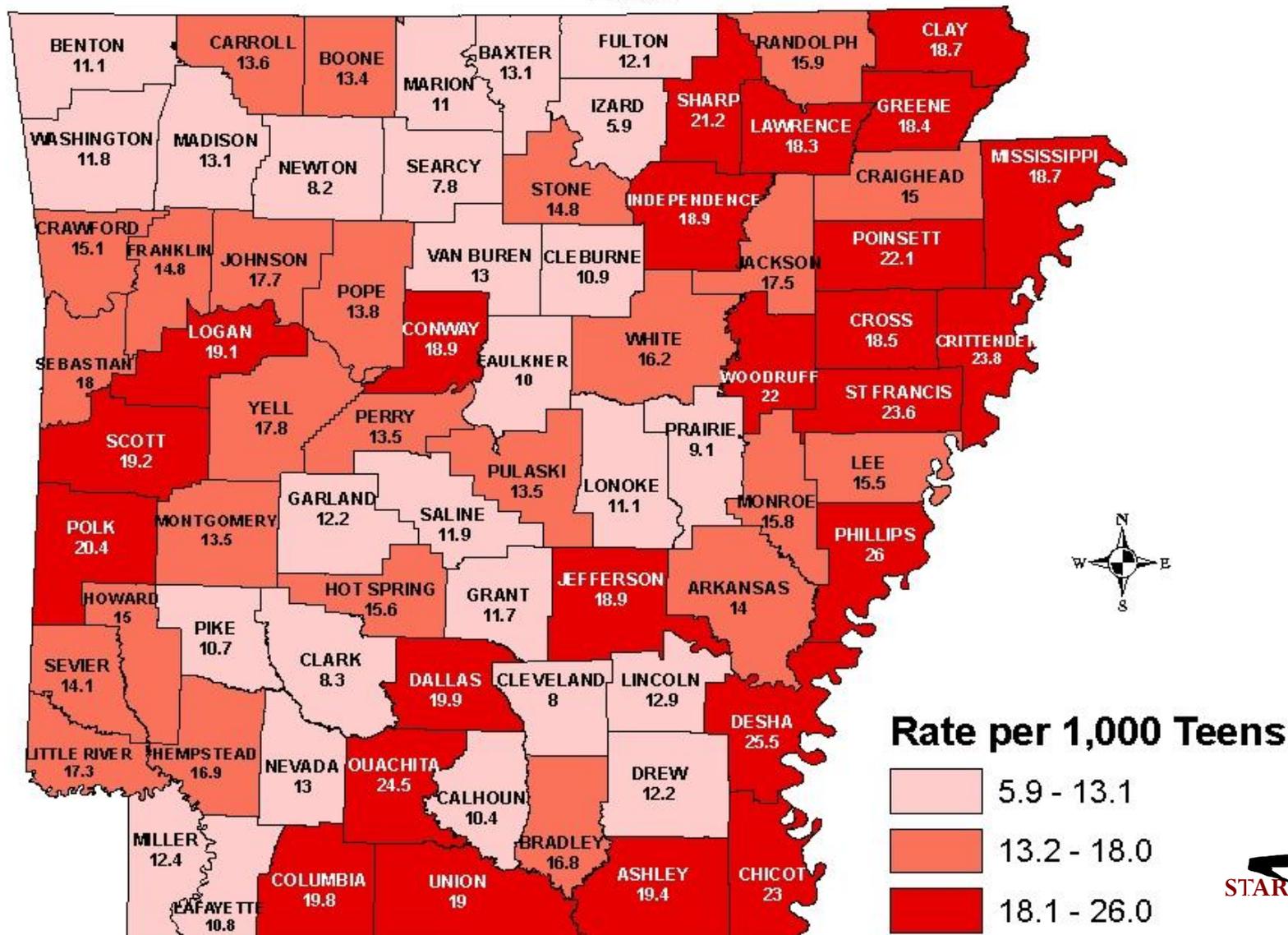
Percent High School Graduate or Higher; Arkansas by County: 2000



Source: Census 2000 S99 Demographic Profiles, Arkansas, prepared by the Bureau of the Census, U.S. Department of Commerce, Washington, D.C., June 4, 2002.



ARKANSAS TEEN BIRTH RATES by County 2009*

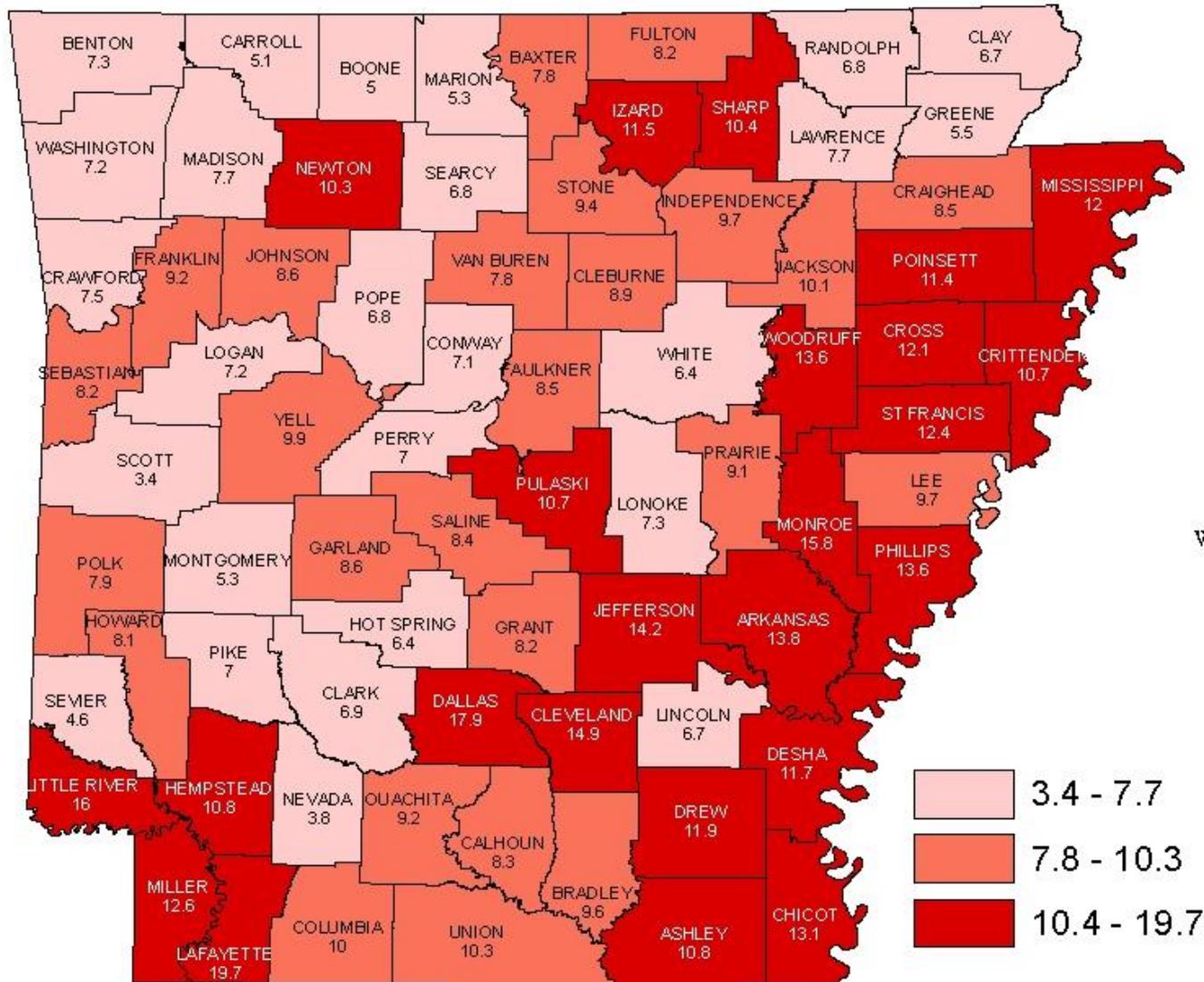


* Provisional Data

Low Birthweight Births

Arkansas *2009

Percentage of All Live Births, by County

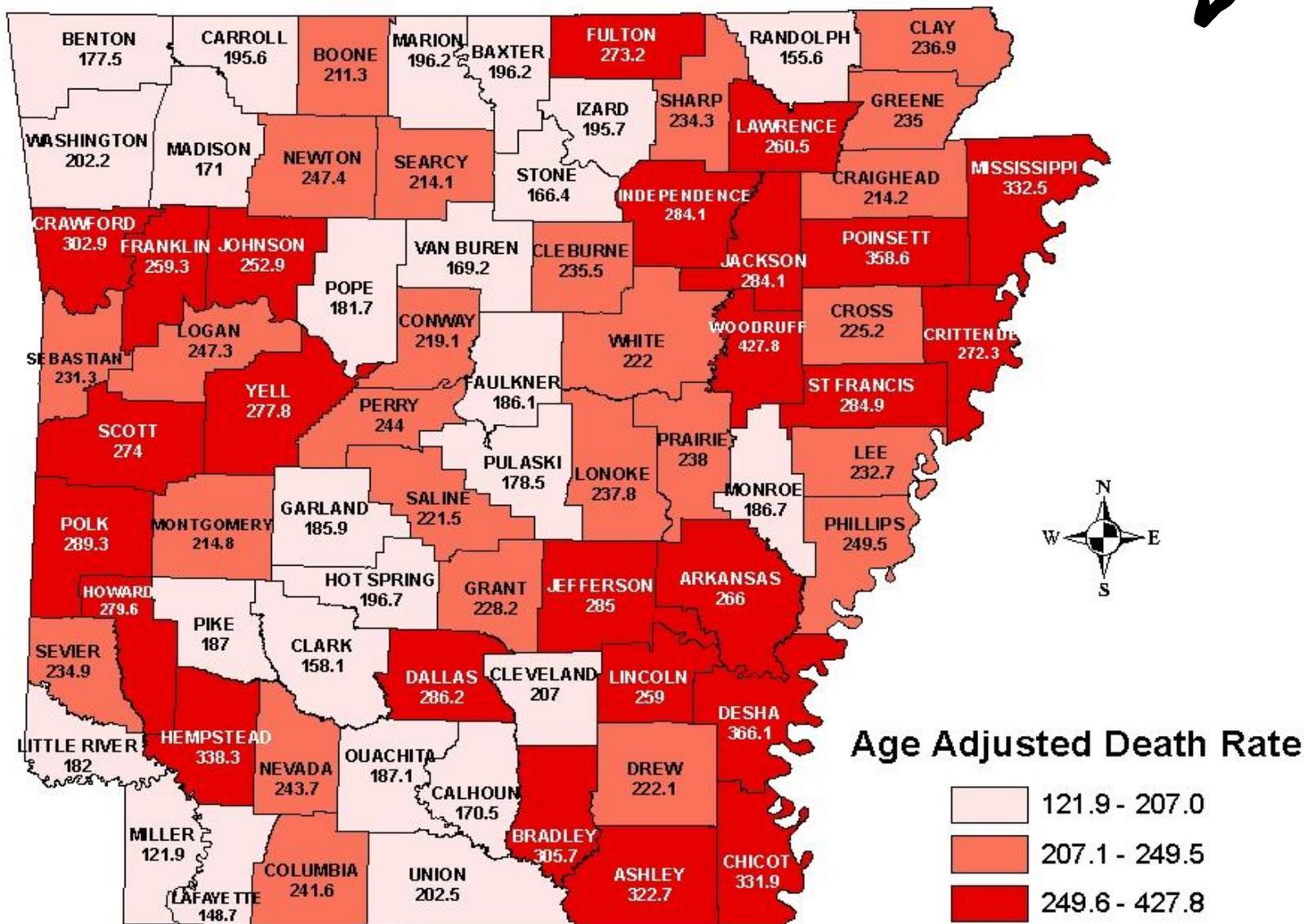


Source: Arkansas Department of Health
Center for Health Statistics



*Provisional Data

Age Adjusted Mortality for Diseases of the Heart, 2007



Source: Arkansas Department of Health, Center for Health Statistics

Concept of Asset-Based Development

There are:

- Strengths/Assets
- Problems/Needs in local communities.

Concept:

- Building and linking these critical strengths (assets) with the needs of the community.



Funding Partners

- Arkansas Department of Health
- Arkansas Minority Health Commission
- Delta ACCESS
- Arkansas Community Foundation
- March of Dimes



Local Partnerships

- Local Health Units
- Hometown Health Improvement Coalitions
- County Extension Offices
- Local Human Service Offices
- City-County Elected Officials
- Chambers of Commerce
- Local Financial & Media Organizations
- Faith-based Community
- Daughters of Charity
- Mainline Health Systems
- Delta Regional Hospital Alliance
- Local Physicians
- In-home Nurse Providers
- Non-profit Organizations
- Public & Private Schools
- McGehee Boys & Girls Club
- Phoenix Youth & Family Services
- Young Mom's Club

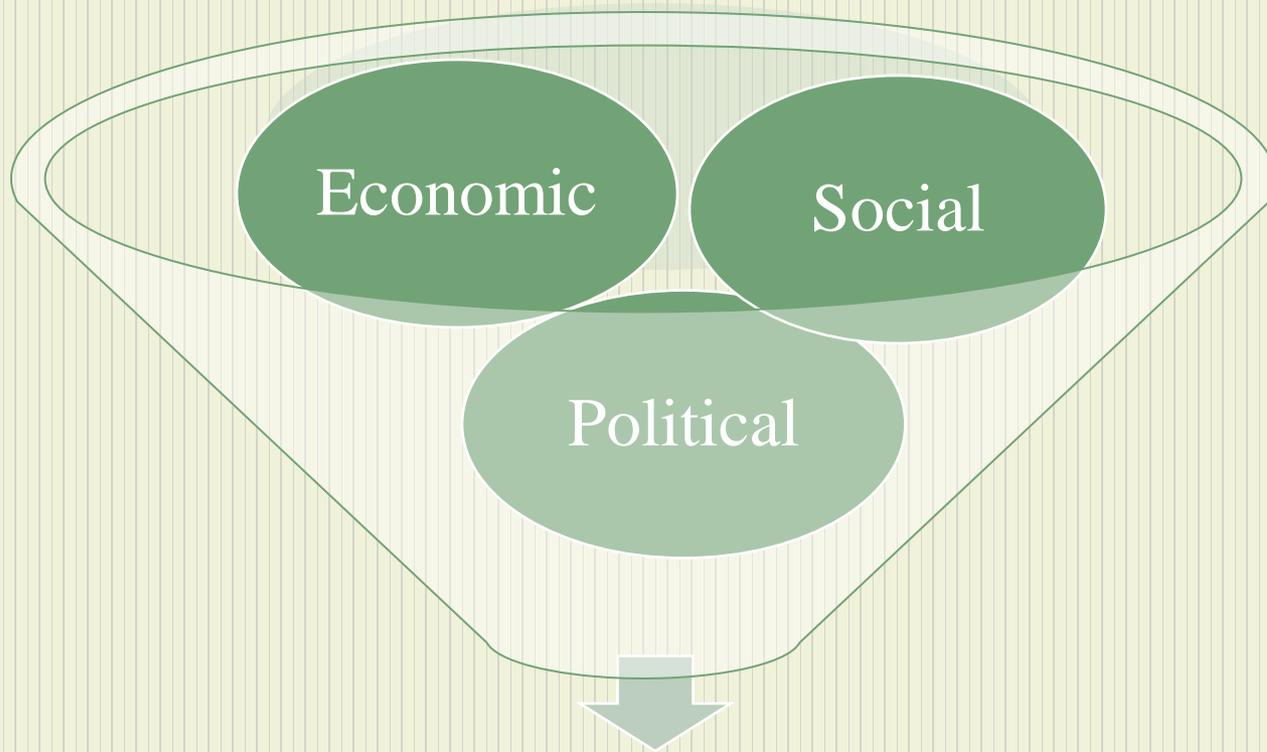


State Partnerships.

- AR Minority Health Commission
- AR Dept. of Health
- AR Dept. of Human Services
- AR Dept. of Education
- AR Economic Development Commission
- AR Community Foundation
- AR Dept. of Workforce Services
- UA Cooperative Extension Service
- UAMS Area Health Education Centers
- UAMS College of Public Health
- AR Children's Hospital
- AR Easter Seals



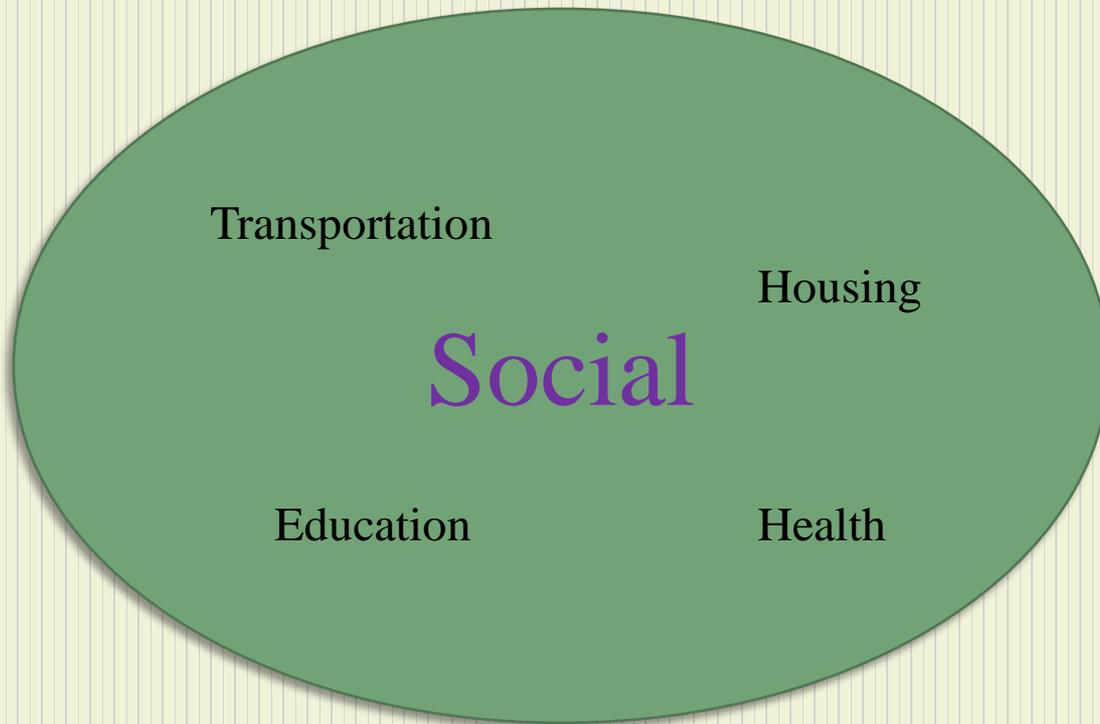
Conceptual Framework Development



STAR.Health



Social



1. Poverty

Arkansas Delta - Economic Trends :

- Agrarian economy - 20th century
- Farm workers replaced by machines
- Lost jobs in agriculture and manufacturing



Poverty...

- The area has lost jobs since the 2000 census
- Wages in the Arkansas Delta have declined
- Per capita income and median income lower than state averages
- In April 2009, the area's unemployment rate was 7.92%



2. Health Disparities

- In Arkansas a half-million or more people are unable to afford or access needed care
- The quality of care also ranges widely
- There are morally unacceptable disparities
- Example: Life expectancy is 10 years less for a child born today in one of the Delta counties than in Benton County, AR



Health Disparities...

- These three counties represent SE Arkansas
- The ethnic make-up is similar of people from these areas
- Higher levels of morbidity and mortality from acute and chronic conditions



Healthy People 2010 Health Status Report Executive Summary

The following data demonstrate significant and important differences in the health status among these subgroups:

CATEGORY	WHITES	BLACKS	LATINOS
Access to Care			Most Striking Disparities
Cancer		Most Striking Disparities	
Diabetes			Most Striking Disparities
Family Planning		Most Striking Disparities	
Heart Disease		Most Striking Disparities	
HIV		Most Striking Disparities	
Injury	Most Striking Disparities		
Maternal Child Health		Most Striking Disparities	
Nutrition		Most Striking Disparities	
Oral Health		Most Striking Disparities	Most Striking Disparities
Physical Activity		Most Striking Disparities	
Tobacco	Most Striking Disparities		



MATERNAL, INFANT, CHILD HEALTH

16.1. Reduce infant deaths (within 1 year of life).
Target: 4.5 deaths per 1000 live births

White	Black	Latino
6.6	***14.7***	6.8

Year, Data Source: 2005, ADH Health Statistics Branch

16.2. Reduce rate of child deaths.
Target:
ages 1 - 4 years: 18.6 deaths per 100,000
ages 5 - 9 years: 12.3 deaths per 100,000

	White	Black	Latino
Ages 1 - 4 years	***48.9***	42.4	46.0
Ages 5 - 9 years	20.3	***26.1***	0

Year, Data Source: 2005, ADH Health Statistics Branch

16.3. Reduce deaths of adolescents and young adults.
Target: ages 10-14 years: 16.8
ages 15-19 years: 39.8
ages 20-24 years: 49.0

	White	Black	Latino
Ages 10 - 14 years	18.4	***22.3***	8.4
Ages 15 - 19 years	93.7	***103.7***	90.7
Ages 20 - 24 years	131.8	***192.7***	151.6

16.6. Increase the proportion of pregnant women who receive early and adequate prenatal care.
Target: 90% of all live births

White	Black	Latino
75%	***65%***	***64%***

Year, Data Source: 2005, ADH Health Statistics Branch

16.11. Reduce preterm births.
Target: 7.6 percent of all live births

White	Black	Latino
11%	***14%***	***13%***

Year, Data Source: 2005, ADH Health Statistics Branch

16.17. Increase abstinence from alcohol, cigarettes, and illicit drugs during pregnancy.
Target: Cigarettes 99%

White	Black	Latino
73%	87%	98%

Year, Data Source: 2005, ADH Health Statistics Branch



meets or exceeds national target



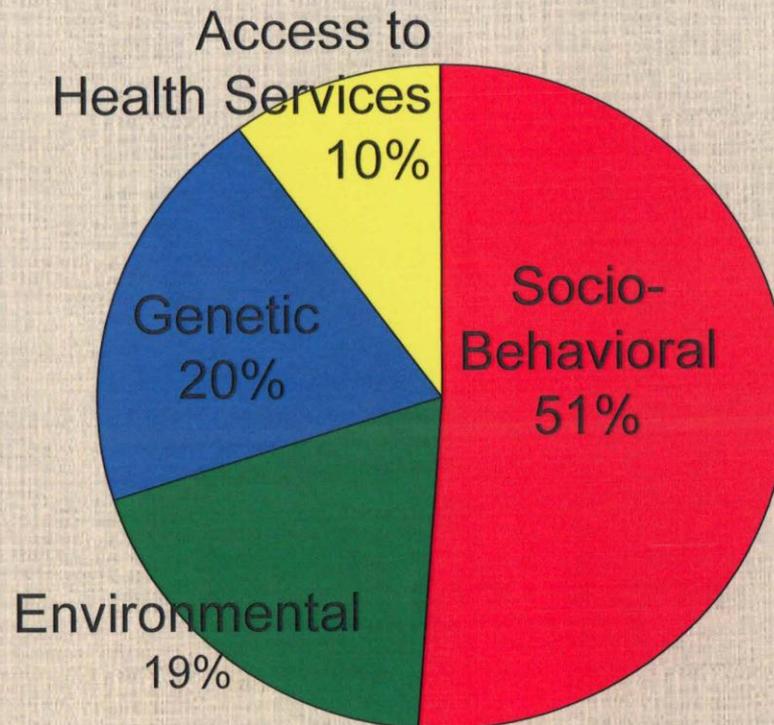
within 15% away from national target



more than 15% away from national target



Causes of Premature Death in US in 1991



Source: McGinnis and Foege, 1993.



By rank, the six leading causes of death in 2006 were:

- Diseases of heart (heart disease)
- Malignant neoplasm (cancer)
- Cerebrovascular diseases (stroke)
- Chronic lower respiratory diseases
- Accidents (unintentional injuries)
- Diabetes mellitus (diabetes)

(Ref. National Vital Statistics Reports)



Health Disparities

According to Arkansas Cardiovascular Health Examination Survey (ARCHES) adults (18+ years) in Arkansas,

- Higher prevalence of high blood pressure than national average(48% v/s 28%);
- African-Americans in Arkansas are significantly more likely to have high blood pressure(60% vs. 46%);
- About 41% of known hypertensive's on antihypertensive medication do not have their blood pressure under control;
- About 25% of hypertensive's are undiagnosed;

cont...,



Health Disparities

- Prevalence of type 2 diabetes is about 15%, with a higher (20%) prevalence among African-Americans.
- About 36% of diabetics are undiagnosed.
- Between 40-55% of diabetics on treatment are not adequately controlled.



Economic Costs of Cardiovascular Disease.

- \$403 billion spent in 2006
- \$258 billion in health care costs;
- \$146 billion in lost productivity.

(Ref: CDC: Division for Heart Disease and Stroke Prevention)



History of STAR.Health

- Started in July 2009.
- A collaborative approach.
- Links people in local communities with professional resources in health, education and economic development.



STAR.Health...

STAR.Health is coordinated through Steering Group that consists of local and state representatives.



Goals of STAR.Health

- Health
- Educational enhancement.
- Poverty reduction.
- Safe communities.



Contributions of Arkansas Dept. of Human Services

- Surveys of local pre-school programs.
- Plans for expansion of quality child care and education.
- Plans for parent education.
- Plans for well-baby assessment.
- Plans to integrate social services delivery with WIC and health services.



Contributions of Arkansas Economic Development Commission

- Surveys of local high school career interests.
- Planning future requests to Delta Regional Authority.
- Plans to channel existing AEDC programs and services to the targeted counties.



Contributions of Arkansas Department of Education

- Plans to strengthen troubled school districts (5).
- Initiate 'Coordinated School Health' in all districts.
- Plans to expand after-school services, in partnership with other local organizations.
- Plans to enhance pre-school learning, zero to five.



Health Components

- Chronic Disease
- Maternal Child Health
- Oral health



Health Components

Chronic Disease:

- Hypertension
- Diabetes

(Implement programs for high blood pressure and diabetes control.)



Health Components

Maternal-Child Health

- Reduce infant mortality.
- Reduce the number of underweight births.
- Reduce teen pregnancy.



Health Components

Oral health

- Reduce the number of dental caries in children and adults.
- Fluoridation of water
- Dental sealants.



Community Health Workers

- Women who know their neighborhoods and the ways of their communities.
- Trained (6 weeks) in basic health concepts, confidentiality, and the importance of local cultural patterns and of adding community voices in health improvement





Community Health Workers

Year One (2009-2010):

- Three CHWs per county (Total No: 9 CHW's).
- Work approximately half-time.

- **Year Two (2010-2011):**

- CHW's made full-time as ADH employees.
- Total four (4) full-time and one (1) half-time.
- Salary support from a grant provided by the Arkansas Minority Health Commission



Community Health Workers

- Distribute brochures about:
 - breast feeding
 - safe sleep for baby
 - nutrition
- Work with Chicot County Young Mom's Healthy Lifestyle Program (20 mothers) on parenting skills and stress management
- Enroll new WIC families at Head Start parent meetings



Community Health Workers

- Prescription assistance.
- Identify and refer people with chronic disease (diabetes, hypertension, etc).
- Network with area health providers and hospitals.
- Home visits and special assistance to prenatal and family planning patients.
- Focus group meetings on Women's Health (average 25 women per group)



Community Health Workers

- Help with Asset Mapping surveys.
- Conducted nutrition seminars.
- Training sessions for children and youth
 - anti-smoking
 - oral health
 - healthy eating
- Men-only health sessions at local post offices and discount stores



AmeriCorps Volunteers

- **Year One (2009-2010):** Eight (8) assigned to STAR.Health initiative.
- **Year Two (2010-2011):** Three (3) assigned to work for STAR.Health counties.
- Federally funded, with local match provided by Arkansas Community Foundation and tobacco funds from the Arkansas Department of Health.
- **Helping hands with:**
 - administrative duties in local health units
 - school health programs
 - pharmacy assist programs



AmeriCorps Volunteers

- Organize community health fairs.
- STAMP OUT SMOKING [SOS] Quit-Line promotion.
- Health education in churches and community groups.
- Refer health problems identified to CHWs.



Possible Chronic Disease Branch Activities in STAR. Health

- Education on hypertension and health literacy – offer CME (Continuing Medical Education) through UAMS.
- Set up more DSME (Diabetes Self Management Education) sites in the 3 counties.
- Tobacco and diabetes media campaign: Radio, TV and print.
 - Partly targeted in three counties
 - Brochures being developed
 - TV campaign, focus groups



Possible Maternal Child Health Activities in STAR. Health

- Home visiting by Community Health workers.
- Encouraging Antenatal and postnatal care.
- Preventing Low Birth Weight babies and decreasing infant mortality.



Possible Maternal Child Health Activities in STAR. Health

- EPSDT (Early and Periodic Screening, Diagnosis, and Treatment)
- Providing Cribs for pregnant mothers for safe baby sleeping position to prevent SIDS. (SIDS- Sudden Infant Death Syndrome)



Participating Programs

- PAT (Parents as Teachers)
- HIPPY (Home Instruction for Parents of Preschool Youngsters)
- Sister Friend Program (Birthing Project)
- Early Head Start
- Coordinated School Health



Coordinated School Health

The CSH focus on the following components:

- K- 12 Health Education.
- K- 12 Physical Education/Physical Activity programs.
- Nutritional Services.
- School Health Services.
- Counseling, Psychological and Social Services.
- Healthy School Environment
- Staff Wellness and Promotion.
- Family and Community Involvement.



Coordinated School Health

The CSH addresses the risk factors determined by CDC as detrimental for children and adolescents:

- Inadequate physical activity.
- Unhealthy dietary habits.
- Sexual behaviors that may result in HIV/STD's/Unintended pregnancies.
- Alcohol/drug/tobacco use
- Behaviors that result in intentional (suicides/homicides)and unintentional injuries (MVA).



Possible Oral Health Branch Activities in STAR. Health

- Fluoridation of drinking water.
- Dental Sealants for 3rd and 4th grade students in schools.
- Mobile dental vans.
- Providing Toothbrush and toothpaste for children.



Operating Financial Support

Minimal, by design.

Capitalize on existing personnel/programs;

- Arkansas Department of Health
- Arkansas Department of Education
- Arkansas Department of Human Services
- Arkansas Economic Development Commission
- Arkansas Department of Workforce Services
- UA Cooperative Extension Service
- UAMS College of Public Health
- UAMS Regional Programs



Operating Funds

- Many volunteers, both community and professional.
- \$100,000 from AR Minority Health Commission for CHWs.
- \$94,000 from ADH Tobacco Control/Prevention for training and AmeriCorps match.



Funding...

- \$40,000 '*Healthy Communities*' grant for Hometown Health Coordinator.
- \$28,000 from Arkansas Community Foundation for AmeriCorps match,
- Coordinated School Health startup, and STAR. Health Evaluation.
- \$10,000 from Cancer Coalition for asset mapping in two counties.



Evaluation

- ADH
- AFMC
- Battelle Group
- UAMS College of Public Health



Evaluation – Maternal Child Health

- Reduce infant mortality
- Improve women's health
- Reduce number of unplanned pregnancies
- Expand the number of routine immunizations
- Increase the number of mothers who breastfeed their babies
- Expand EPSDT program
- Implement coordinated school health.



Evaluation – Chronic Disease

- Define the chronic disease in each site.
- Decrease chronic disease burden.
- Detail the health promotion activities(i.e., tobacco cessation, nutrition, physical activity).
- Increase the proportion of residents who meet physical activity standards.



Evaluation – Oral Health

- Increase percent of population on fluoridated water systems.
- Increase % of 3rd grade children having dental sealants.
- Increase % of pre-school children receiving fluoride varnish twice/year.



Major concerns or challenges

- Health literacy.
- Changing health outcomes quickly.
- Lack of funding and professional caregiver shortages (e.g., dental).



Major concerns or challenges

- Security.
- People attempting to survive in the present economic situation .
- Lack of transportation.
- Manpower hours, the administrators feel overwhelmed with all the time they spend in the unit and this is one more thing they must do.



Measuring Long-term Local Level Community Changes

- New economic opportunities arising as a result of the public health improvements.
- Local residents being involved in promoting a healthier community.
- These community changes could attract new residents and new businesses.

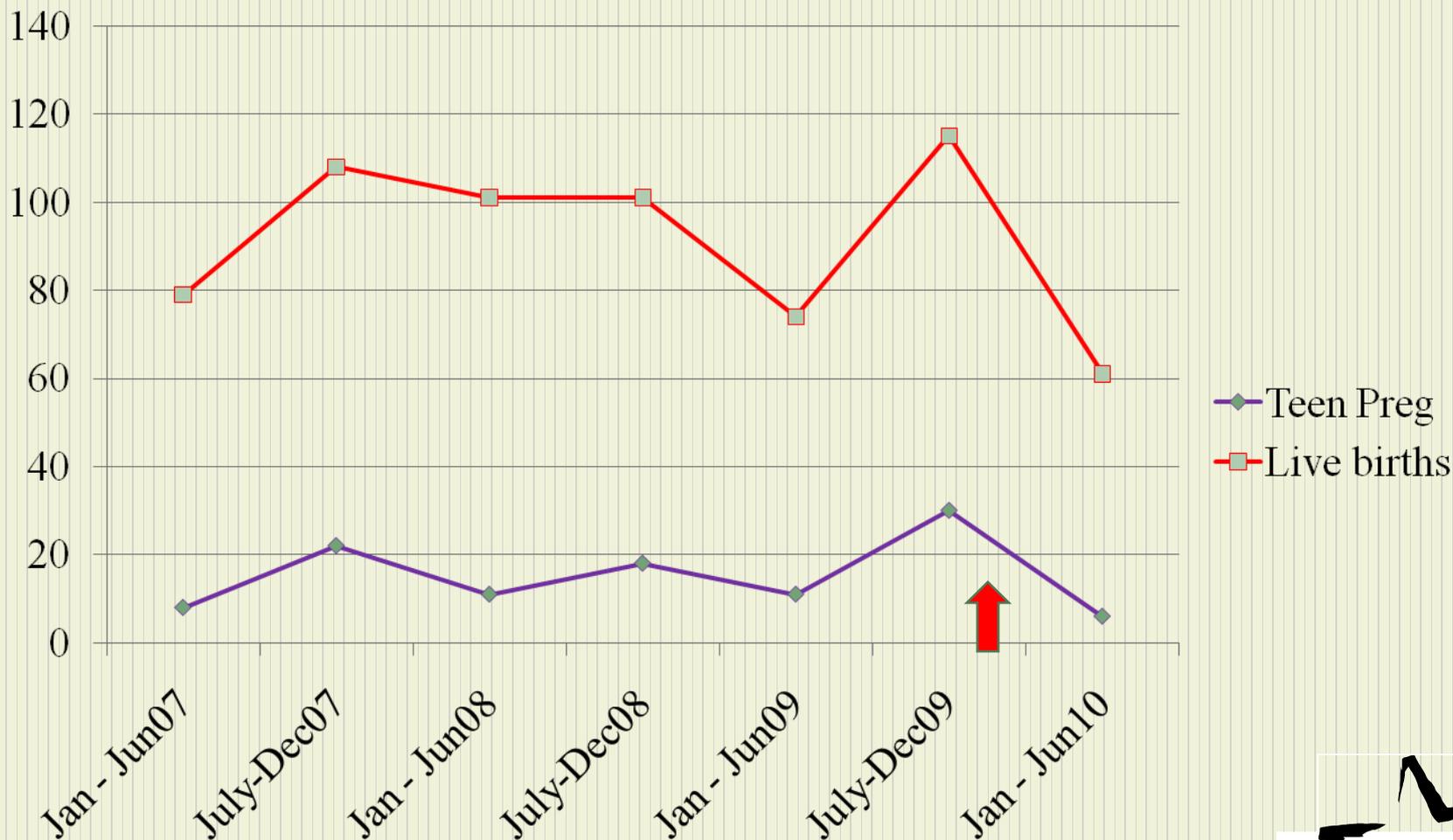


Measuring Long-term Local Level Community Changes

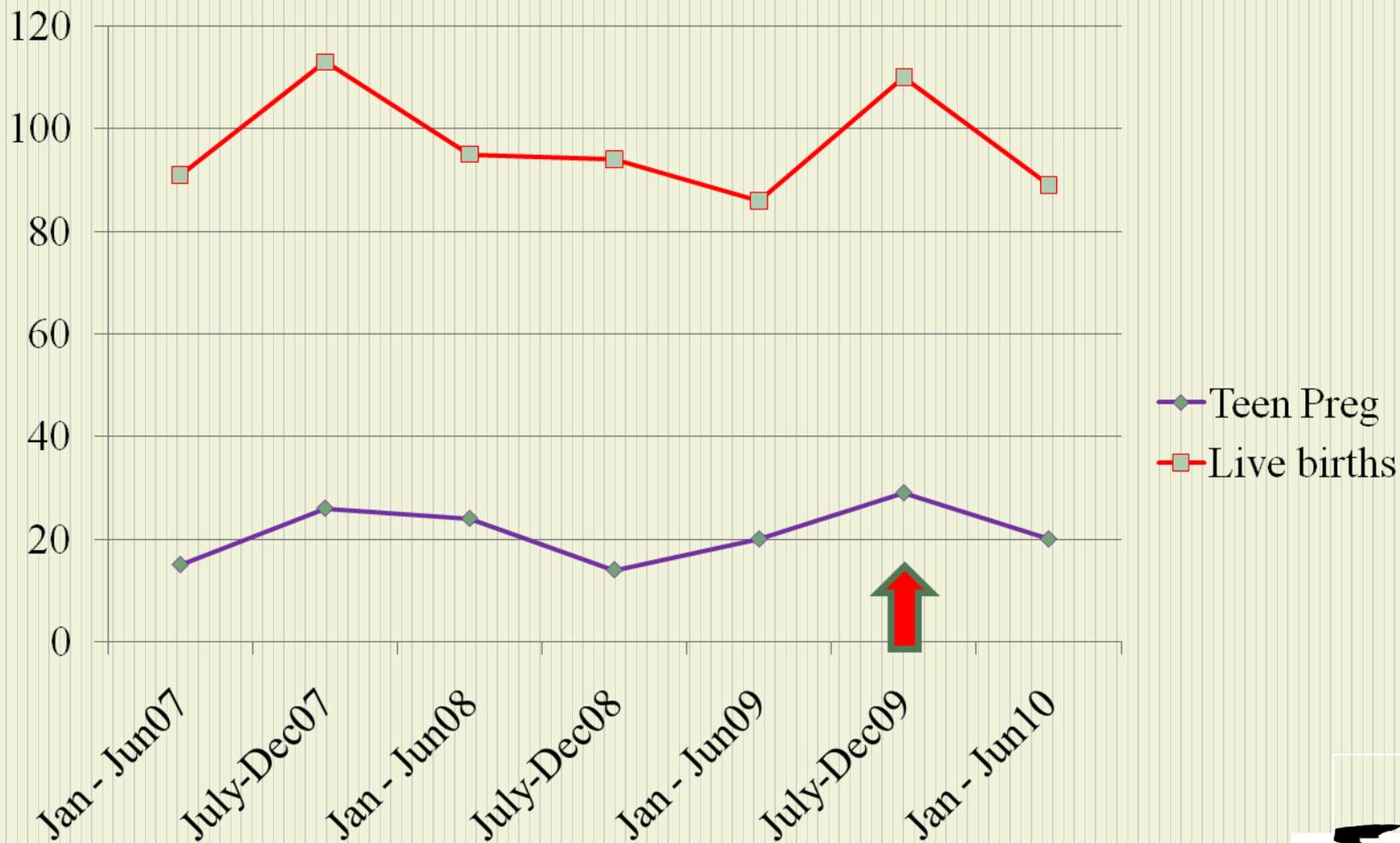
- Funding opportunities to develop new educational programs within the three communities.
- Changes in such developments need to be evaluated pre and post new program implementation.



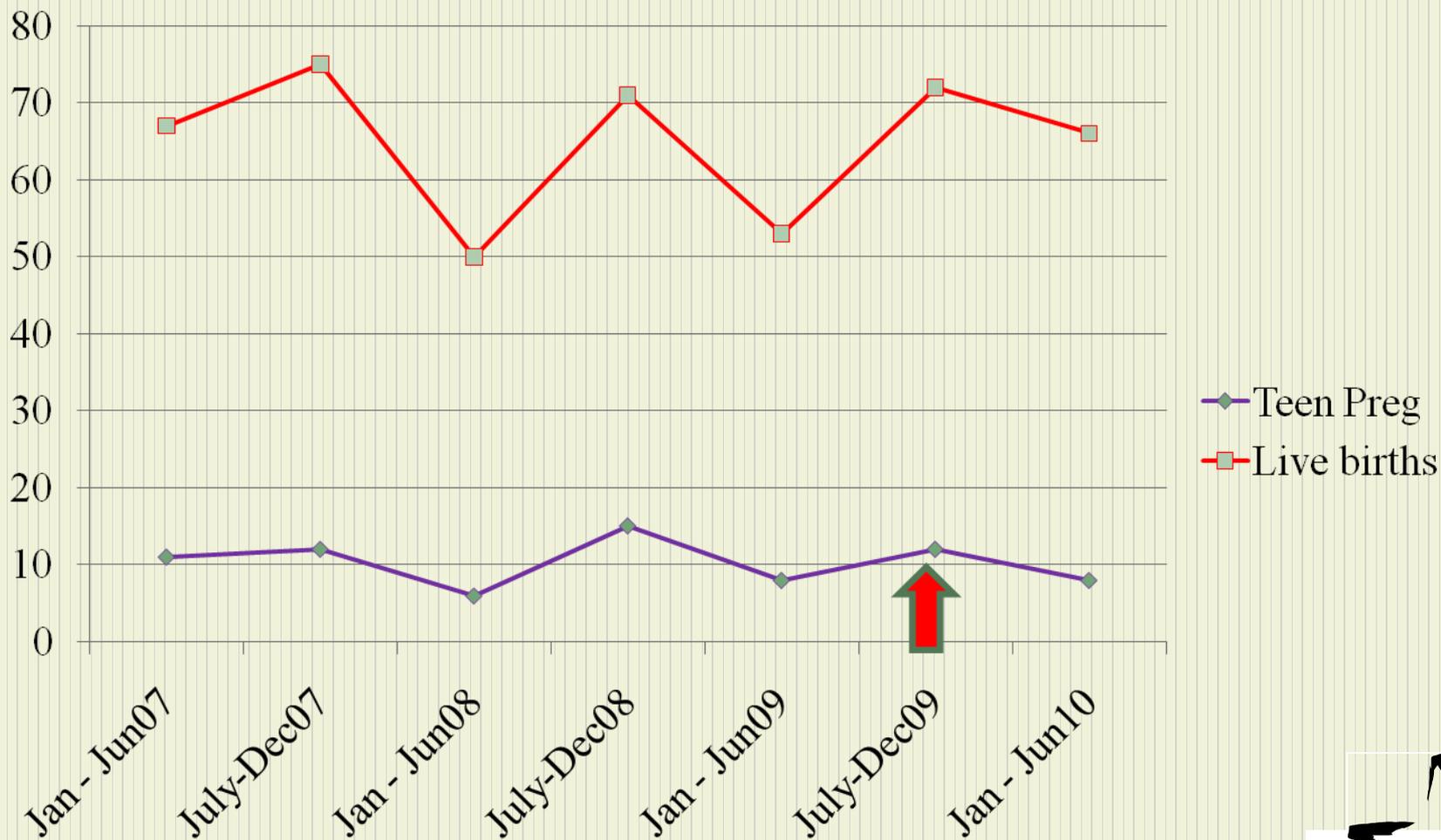
Trends from 2007 – 2010 (Chicot)



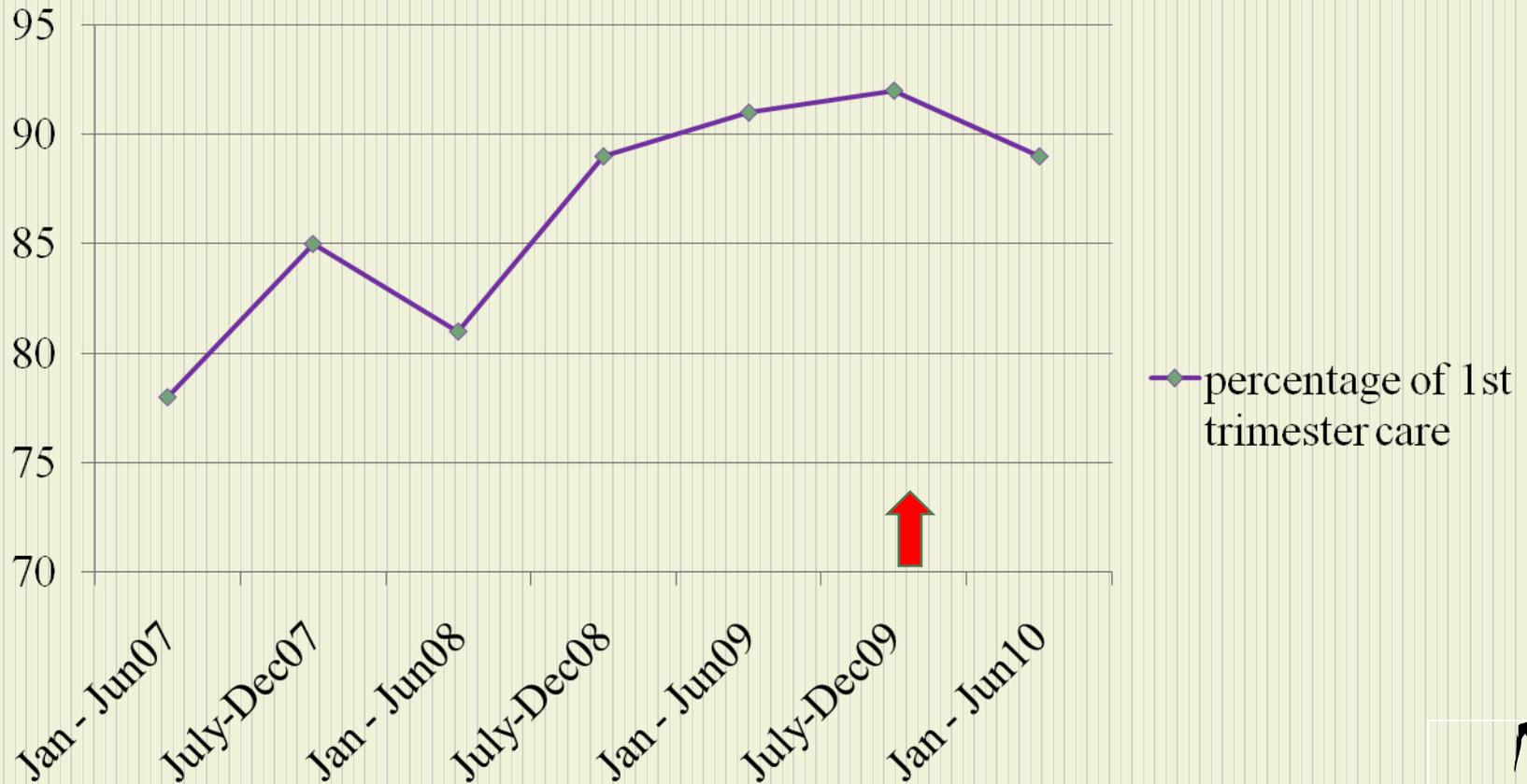
Trends from 2007 – 2010 (Desha)



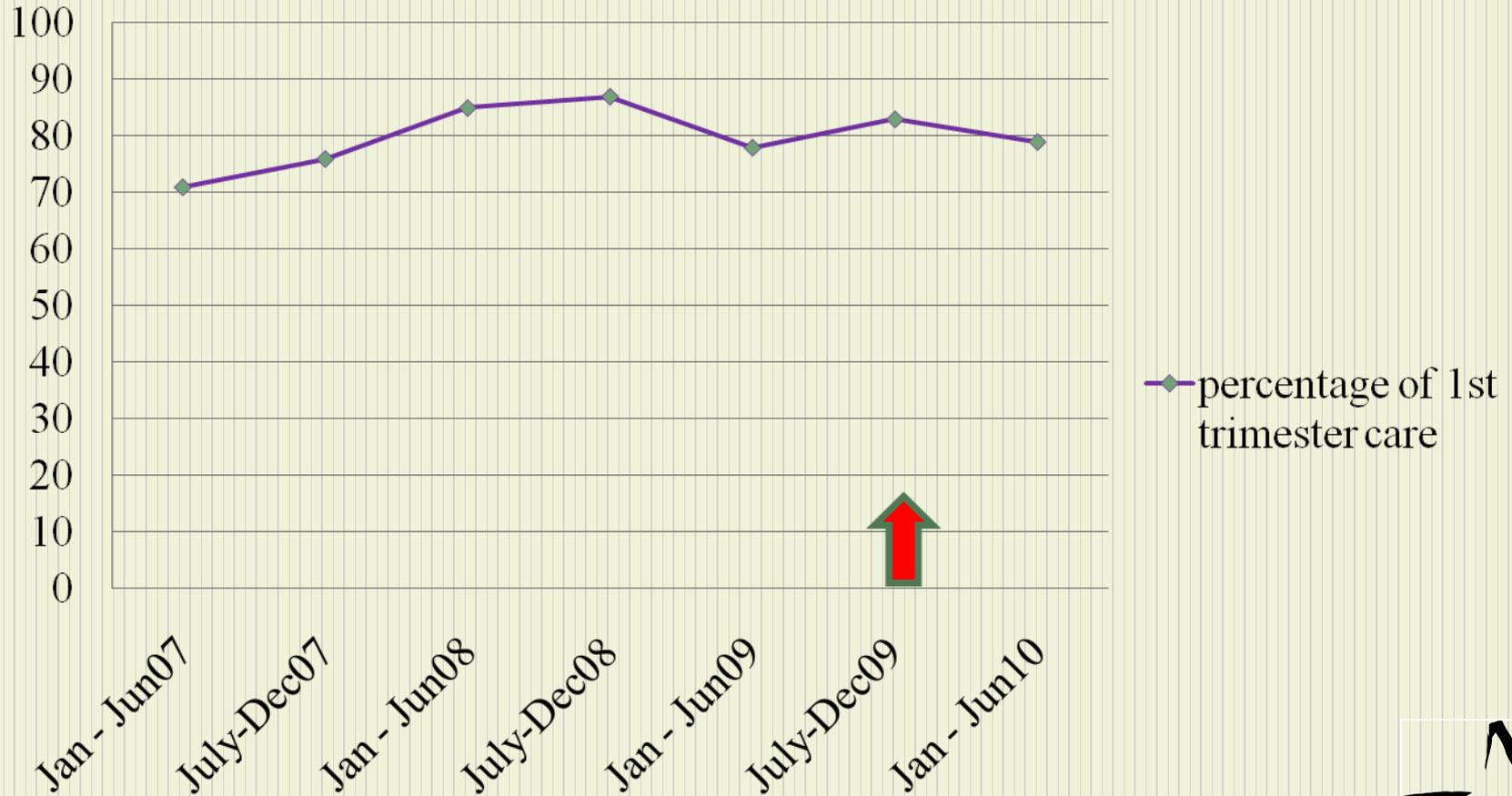
Trends from 2007 – 2010 (Lincoln)



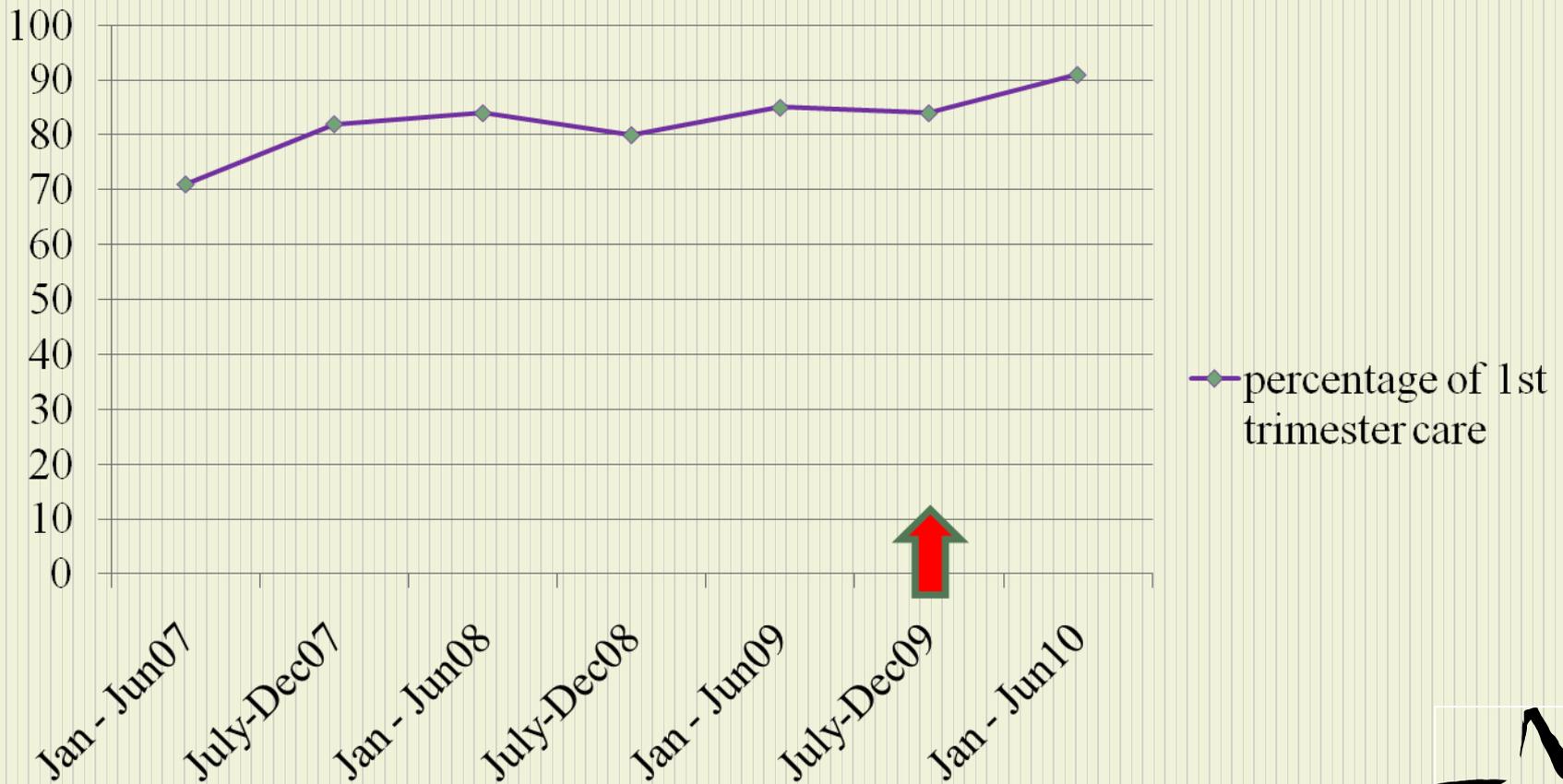
Percentage of 1st Trimester care (Chicot)



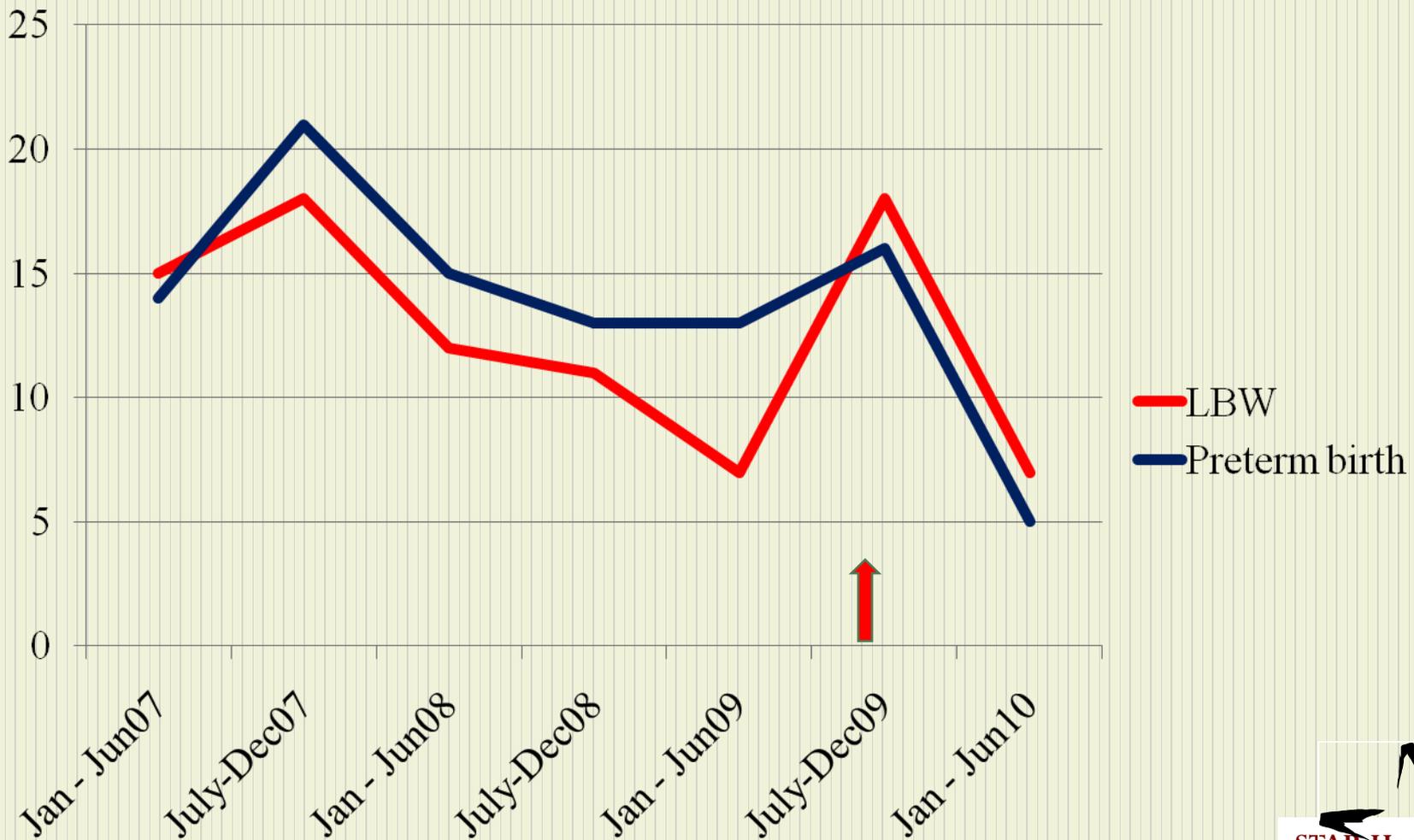
Percentage of 1st Trimester care (Desha)



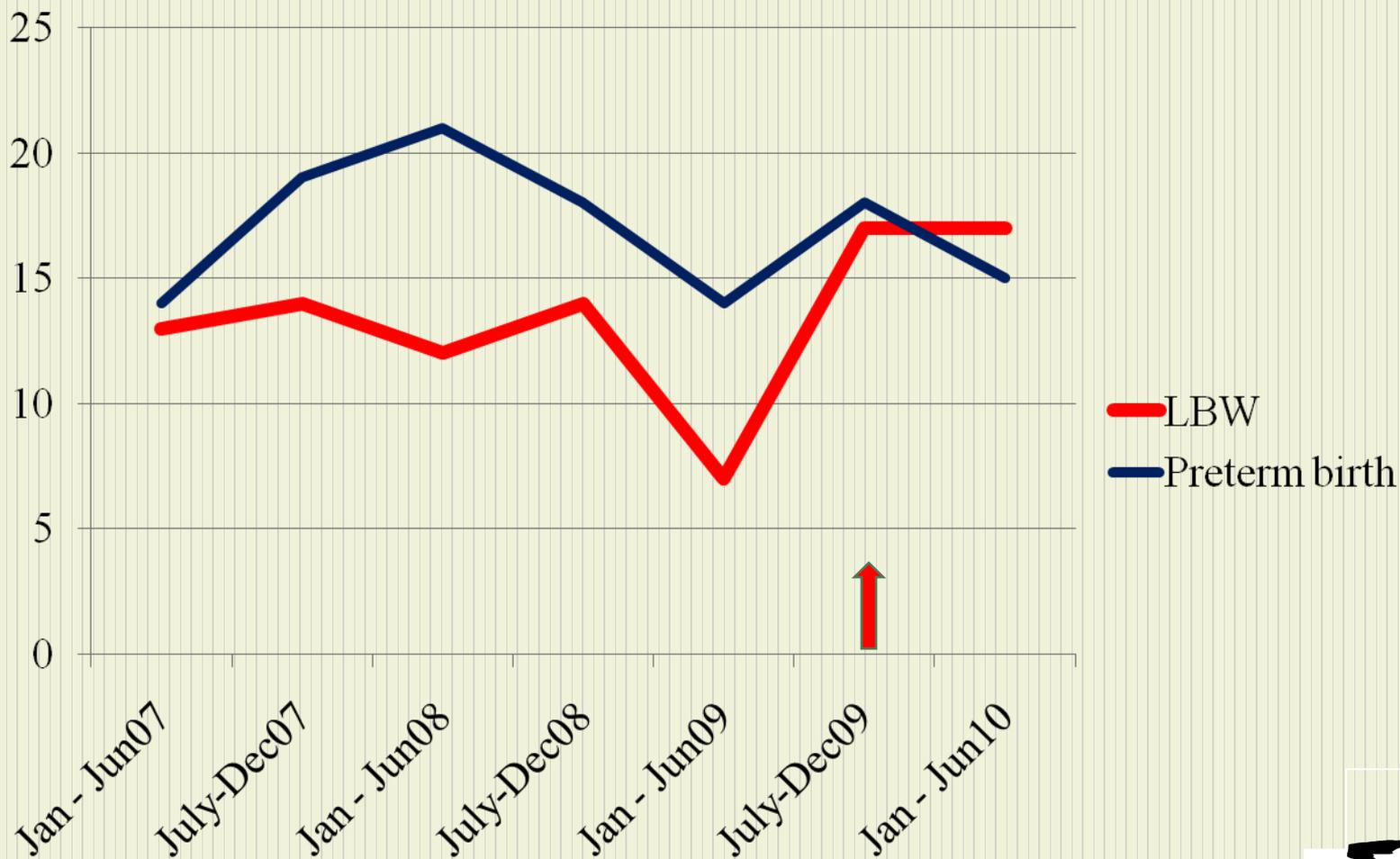
Percentage of 1st Trimester care (Lincoln)



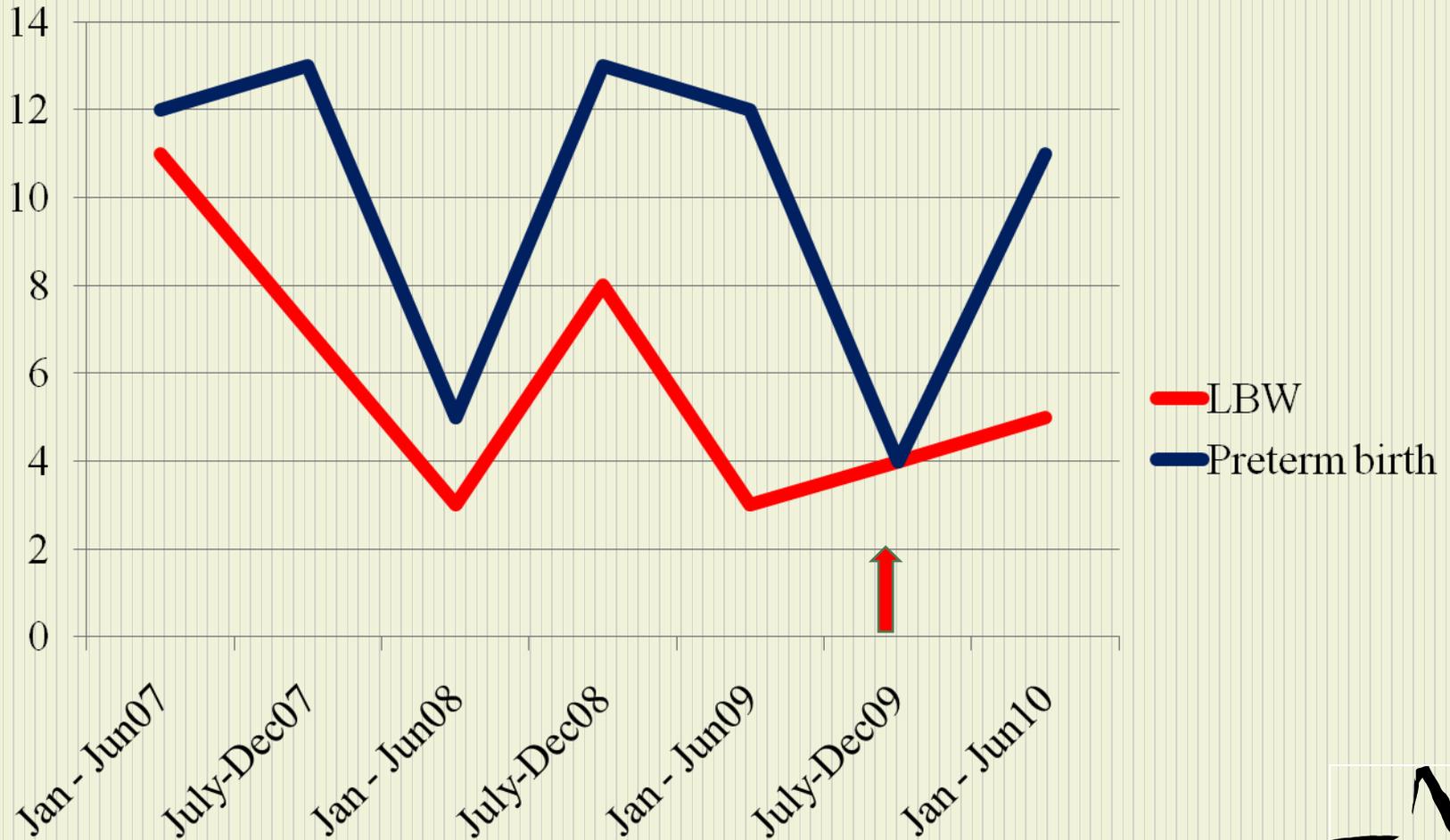
Chicot



Desha

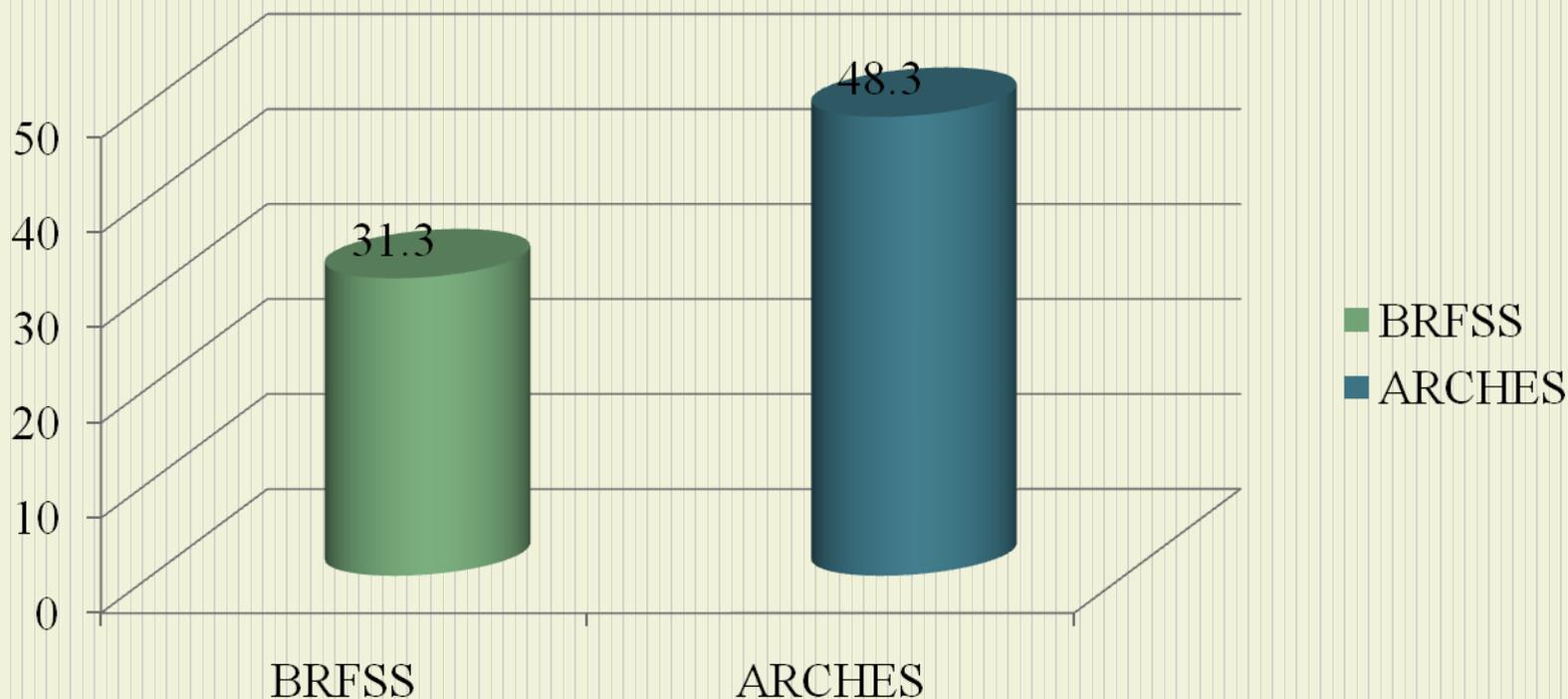


Lincoln



Hypertension (AR) 2007

HTN Prevalence



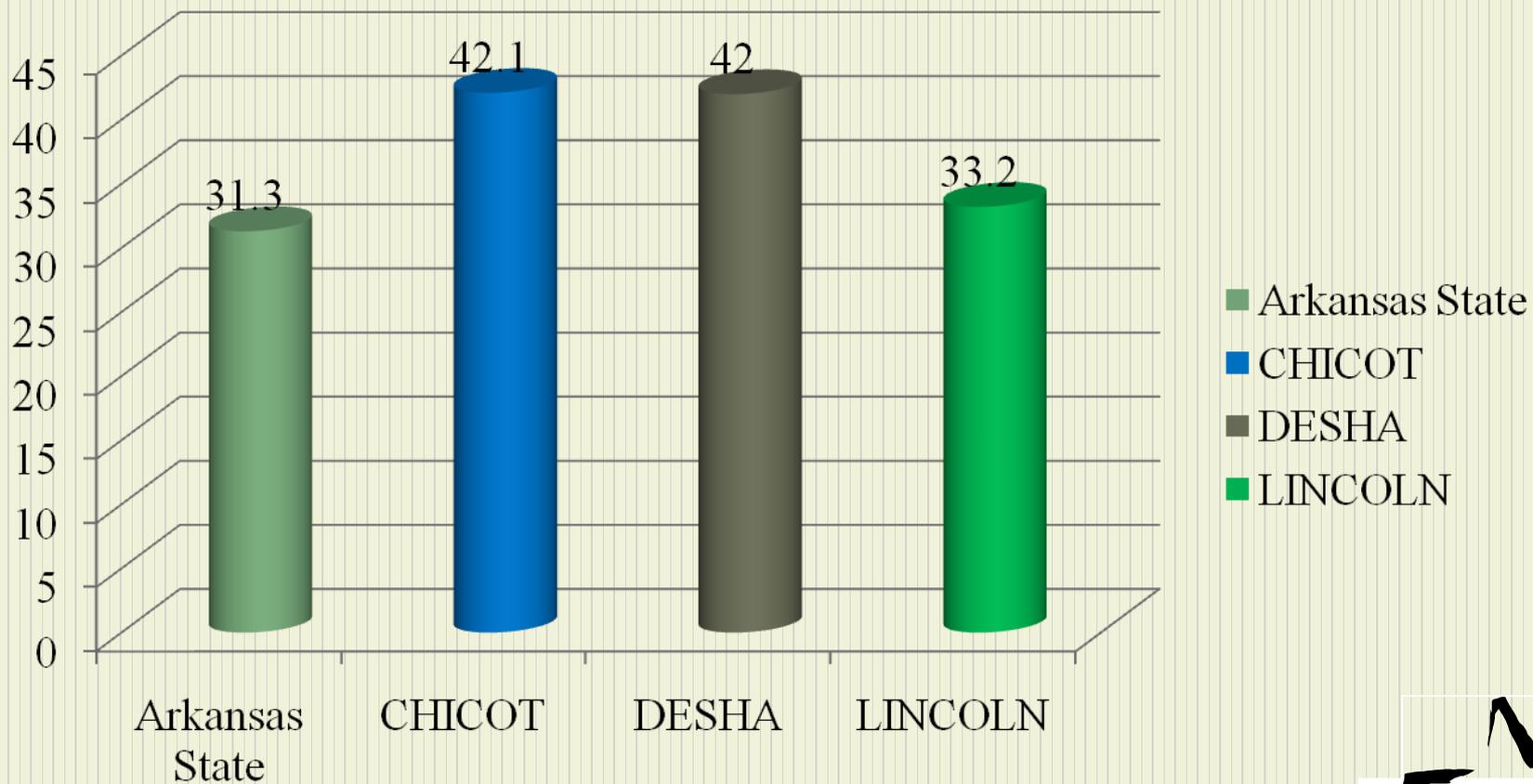
BRFSS: Behavioral Risk Factor Surveillance System

ARCHES: Arkansas Cardiovascular Health Examination Survey



BRFSS (Tri-county) 2007

HTN Prevalence



Pregnancy associated HTN

HTN during Pregnancy

