

Maine Center for Public Health

www.mcph.org

YEAR 2000 LOOMS LARGE FOR PUBLIC HEALTH

This is an eventful year, full of opportunities for many people in public health-related work in Maine. You may want to follow the progress of the four important and interconnected activities that are described briefly below:

Committed advocates have managed to gain a large share of the **Tobacco Settlement** revenue for health promotion and disease prevention. While this may seem to be a natural consequence given the source of the funds, this connection has not led to a similar outcome in many other states. This is the first major new funding in Maine for public health purposes in many years. The Governor and the Legislature have committed the dollars in order to ultimately achieve reductions in tobacco-related and preventable chronic disease. More immediately legislators want to reduce tobacco use, improve nutrition and increase physical activity, especially among the young. These three major behavior risk factors are major contributors to Maine's high rate of chronic disease. Tobacco Settlement funds will be allocated by grants near the end of this (2000) year. Please check www.mcph.org for a detailed breakdown on the tobacco settlement allocations and information about trainings for communities.

At the same time many of the same public health advocates have been involved in the **Maine Turning Point Project**. This is a planning project funded by the Robert Wood Johnson Foundation intended to ultimately strengthen the state's public health system. This project has a longer term (5-10 years) results horizon than the Tobacco Settlement and a much wider scope; it is meant to improve Maine's ability to meet the full range of public health issues including infectious diseases, substance abuse, and environmental threats. Turning Point planners, however, realize that they must integrate their process with Tobacco Settlement decision-making. They want the Tobacco Settlement funds to lead to lasting,

broad and statewide improvements in health, not just short-term gains in a few diseases or risk factors for a few communities with skilled grant-writers. Funds are promised by the Robert Wood Johnson Foundation to assist with implementation activities.

Both the Tobacco Settlement and Turning Point activities revolve around goal setting. State government as well as private sponsors such as the Johnson Foundation requires explicit goals and measurable objectives for accountability purposes; without evidence of measurable gains on-going support is likely to wane. Currently the first recommendation from the Turning Point project calls for goal-setting processes at both the state and local levels, in ways that involve as many individual and key organizations as possible. As we prepare this newsletter our state's performance relative to Healthy Maine 2000 is being analyzed. This summer meetings across the state will be initiated for **Healthy Maine 2010**. This is a process that began in Washington, that continues as we set state priorities, and that hopefully will catch fire in our communities where most of the work, and health improvement, must occur. The goals and measurable objectives set for Maine will guide much of our work for the next ten years.

At this point many Maine citizens are unaware of all three of the above endeavors, from the Tobacco Settlement and Turning Point plans, to the Health Maine 2010 goal setting process. Governor Angus King has decided to raise the visibility of public health issues in Maine, specifically related to the Tobacco Settlement. He has called for a **Prevention Summit** for October 11 and 12 in Augusta. The Summit will gather individuals committed to creating a healthier Maine, to reducing tobacco use, improving nutrition and increasing physical activity.

All four of these activities are directed at the same goal. All will hopefully enhance our ability to improve the length and quality of life in Maine.

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This issue features Maine Turning Point Project's latest updates.



For an update on Turning Point's **WORKFORCE WORKGROUP** progress, see the complete report at www.mcph.org

Maine Turning Point Update, May 2000

This has been a busy and exciting winter for Maine Turning Point (MTP). In late January, Burgess Advertising began working with MTP to develop a logo and tag line. The resulting product has been very well received and both the logo and slogan, "Maine Turning Point: New Directions in Public Health" were premiered in April. A media packet was developed with guidance from Burgess Advertising and was distributed with results from the MTP public health opinion poll.

MTP activities have been well received by several media outlets. In February, the Bangor Daily News featured an article about the MTP poll results along side its story about the Legislature's Public Hearing on allocation of Tobacco Settlement funds. In March, the Lewiston Sun Journal covered the first two Healthy Community Dialogues. In April, the completed public opinion poll results were featured in a story by Charlotte Renner of the Maine Public Radio program "Maine Things Considered." We were especially honored by an editorial in the Courier Gazette, a prominent weekly serving the Camden and Rockland areas. The editorial proclaimed that Maine Turning Point "is no flash in the pan effort...It is a process with a mission" and discussed our commitment to working with communities to design AND IMPLEMENT a Public Health Improvement Plan. The editorial went on to encourage area residents to participate in one of the three Community Dialogues taking place along the coast (Camden, Rockland, and Union). Many MTP Partner's were able to bring media attention to their own organizations through collaborative efforts to host 20 Community Dialogues during April and May.

Maine Turning Point "is no flash in the pan effort...It is a process with a mission"
COURIER GAZETTE

The Community Dialogues have been a major success. The Dialogues are funded through the MTP Technical Assistance funds in cooperation with the Bingham Program, Communities for Children, and the Division of Community and Family Health at the Maine Bureau of Health. Target communities and host organizations were contacted. All host organizations participated in facilitation training and used the same nine dialogue questions. The dialogues were used to expand participation and increase consumer input or to launch new efforts.

The other major focus of MTP work this winter and spring has been the MTP Public Health Summit, which took place at Sugarloaf/USA on May 11th and was attended by more than one hundred individuals! Workgroup participants gave updates on their progress and received insightful feedback. The conversations and links that were made through this event will be put to good use as MTP prepares to go "on the road" with preliminary findings and ideas for additional, targeted feedback from specific populations, professional associations and interest groups.

For more information on Maine's Turning Point Project, contact Kathleen E. Perkins, MPA (KEPerkins@mcd.org)

Turning PointPoll Shows Strong Support for Public Health Services

Our Vision:
A Healthier Maine

Our Mission:
To Support communities in creating and sustaining coordinated delivery of public health services

This winter Maine Turning Point used funds from the Robert Wood Johnson Foundation to conduct a statewide public health opinion poll. This was designed to measure consumer perceptions and support of public health programs. Results are based upon interviews with 600 likely voters, with sample distribution conforming to Maine's population demographics. (The results are representative to plus or minus 4% at the 95% confidence interval).

Of particular interest to MTP organizers was the fact that two-thirds of respondents agreed that the government spends too little to improve health. Second, 63% of those surveyed felt that public health services are essential and should be expanded. Lastly, support for expanded public health services "even if it means paying higher fees or taxes," was strongest in Oxford, Androscoggin, and Cumberland counties.

The results in Maine are generally consistent with results of a national poll conducted in March 1999 for the PEW Charitable Trusts. That study found that Americans believe we are devoting insufficient resources to public health (65%) and want the U.S. to expend more money and more effort on public health (61%). According to the PEW report, only education was a higher priority for expanded funding; building roads & highways, tax cuts, missile defense, and fighting crime were all lower priorities for expanded funding than was public health.

For a more detailed report on the Maine Turning Point Project poll, see the website www.mcph.org.

Public Health Infrastructure Development

Participants in the Turning Point Project having been working since September (1999) on plans “to strengthen the public health system in Maine.” The Infrastructure Work Group decided at an early point in its work that the most serious deficit in Maine was the lack of a consistent local public health capacity across the state. Unlike most other states Maine does not have a government system at the local level, with municipal or county health departments. There are several exceptions to this rule; the City of Portland for example does operate a capable health department offering an array of services and programs.

Project participants also determined that Maine’s extensive non-governmental health structure, including many community hospitals and health centers, offered strengths to build upon. They are now promoting what they have labeled a “Patchwork Quilt” to cover the state. They want to have designated community coalitions (or health departments where they exist) in every region of the state providing the basic public health functions of assessment, policy development and assurance. They are seeking financial support from the state to underwrite this core structure (sufficient to cover basic staff, equipment and general office expenses) for the foreseeable future. This approach is a major change from the past, when state agencies periodically offered requests for proposals for categorical purposes and only the best proposals, covering only a portion of the state, were funded. The new approach seeks to cover populations and commits state agencies and their non-profit collaborators to develop effective community health capacity where there is little or none at the current time. Programs for specific purposes will then be added as appropriate and funded to this core structure.

The Infrastructure Plan contains many other features, from promoting state and local goal setting to enhancing clinical prevention activities, to enhancing information system development. It may be accessed through the Center web site www.mcph.org for a complete reading.

Hepatitis C Needs Assessment

Under the leadership of Paul Keuhnert, Director of the Division of Disease Control at the Maine Bureau of Health, and Geoff Beckett, Assistant State Epidemiologist, Maine has begun an extensive needs assessment around a variety of issues related to Hepatitis C.

The Hepatitis C Virus (HCV) has emerged as a major public health problem in the United States. Some estimate there are as many as 15,000 people in Maine chronically infected with HCV. Public health and medical care professionals in Maine are concerned about the steadily increasing mortality, morbidity and costs due to HCV-related disease but few health departments in the country have addressed the full range of Hepatitis C-related challenges. Those challenges include surveillance of chronic infection and disease, meeting the needs for counseling and testing of persons at risk, ensuring high quality public and professional education, and providing leadership in health care planning for HVC chronic disease.

The needs assessment has been designed to generate information for the following activities: 1) Formulating strategies for HCV surveillance, 2) Determining statewide needs for HCV-related prevention, 3) Developing approaches to integrating program resources for HCV primary and secondary prevention, 4) Increasing access to HCV testing and counseling.

A consultant has been hired to conduct the needs assessment. The work will include collecting currently available data, conducting interviews, holding focus groups and administering surveys. The preliminary report is expected in the fall.

The key collaborators with the Bureau of Health on this project include the Department of Corrections, Department of Mental Health, Mental Retardation and Substance Abuse Services, Portland Public Health Division, Maine Council of HMO Medical Directors, Maine Hospital Association, Maine Council of Practitioners of Infection Control, Hospital Social Work Departments, the AIDS Project of Southern Maine, and individual gastroenterologists, infectious disease specialists, HCV care consumers and advocates.

The Maine Center for Public Health will act as the fiscal agent for the project and support the efforts of the Needs Assessment Advisory Committee. For more information, see www.mcph.org.

Web Site Developed – Check it Out!

The Maine Center for Public Health is pleased to announce the MCPH web site is now online: www.mcph.org. The web site will include information about MCPH including mission, goals and objectives, board members and current activities. The website is also available to any public health related organization to post trainings, conferences, resources or other issues that are relevant to the larger public health community. We urge everyone to use this web site as a resource, and let us know what you would like added. We plan to be continually updating and re-designing this web site to make it increasingly valuable to people working in public health, at both state and community levels. We are also pleased to host the Maine Public Health Association’s website. This will include the MPHA newsletter, a list of legislative issues as well as general information about programs and goals of MPHA.



From the President:

Right now we need to be focusing attention on communities across Maine as they organize to respond to the opportunities presented by the Tobacco Settlement. We would like to see an active health department or community coalition working in every community in the state. They in turn need to be drawing hospitals, health centers and medical practices, schools, law enforcement agencies and many other organizations into our struggles to overcome preventable chronic disease in Maine. We can reduce tobacco use, improve nutrition and increase physical activity across the state, leaving no stone unturned.

Beyond the activities described in this newsletter the Center has been working on extensive plans for both research and educational programs that we hope to begin in Maine in the fall of this year. They should complement the community work, increasing our cost-effectiveness. Our chief collaborators are the state Bureau of Health, the Centers for Disease Control and Prevention and the Harvard School of Public Health. We have strong supporters in all of these organizations.

As an increasing number of persons and organizations are drawn into public health efforts we will need to be more conscious of the need for effective and diverse methods of communications. We are fortunate to have the opportunities as well as the frustrations of the computer age in a rural state. We will be using both print and electronic means to reach you over the succeeding months and years. Become familiar with our web site (www.mcph.org), make it work for you and your organization by including your events on our calendar and training listings, and let us know if someone including yourself needs to be included on our mailing list.

Paul Campbell, MPA, ScD



New Board Members Welcomed:

The Board of Directors of the Maine Center for Public Health was pleased to welcome three new Board members at the May 25 meeting. The new members include Christine Gianopoulos, Edward Miller and Bart Wechsler. Christine Gianopoulos is Director of the Bureau of Elder and Adult Services in the Maine Department of Human Services. Ed Miller is Executive Director of the American Lung Association of Maine. Barton Wechsler is Dean of the Edmund S. Muskie School of Public Service at the University of Southern Maine



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