



# Arkansas Tobacco Settlement Commission

Quarterly Report

April - June 2007

## COMMISSIONERS:

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Chairman, Arkansas Tobacco Settlement Commission  
Major General USA (RET)

**Omar Atiq, MD, FACP**  
Vice Chairman, Arkansas Tobacco Settlement Commission  
Director, Arkansas Cancer Institute

**John W. Ahlen, PhD**  
President, Arkansas Science & Technology Authority

**Anthony Fletcher, MD**  
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**Kenneth James, EdD**  
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**Andrew Kumpuris, MD**  
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**John Selig**  
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## COMMISSION STAFF:

**Aaron Black, JD, MPA**  
Executive Director

**Karen Elrod**  
Executive Assistant

## Commission Overview

The Arkansas Tobacco Settlement Commission (ATSC) was created under the Arkansas Tobacco Settlement Proceeds Act of 2000, along with seven funded programs including the Arkansas Aging Initiative, Arkansas Biosciences Institute, College of Public Health, Delta Area Health Education Center, Department of Health's Tobacco Prevention and Cessation Programs, Department of Human Service's Medicaid Expansion Initiatives, and the Minority Health Initiative. The ATSC is charged with monitoring and evaluating the programs created through the Act. Quarterly reports from each of the programs assist the ATSC in regularly reviewing program activities, short and long-term goals, and program finances.

The following quarterly reports are submitted by each of the funded programs to the ATSC for the period of January 1, 2007 through March 31, 2007.

## TABLE OF CONTENTS

|   |    |
|---|----|
| <i>Commission Overview</i>                | 1  |
| <i>Arkansas Aging Initiative</i>          | 2  |
| <i>Arkansas Biosciences Institute</i>     | 5  |
| <i>College of Public Health</i>           | 7  |
| <i>Delta Area Health Education Center</i> | 13 |
| <i>Tobacco Prevention &amp; Cessation</i> | 19 |
| <i>Medicaid Expansion Initiatives</i>     | 26 |
| <i>Minority Health Initiatives</i>        | 28 |
| <i>Program Expenditures</i>               | 33 |



## Arkansas Aging Initiative (AAI)

The Arkansas Aging Initiative seeks to improve the health of older Arkansans through interdisciplinary geriatric care and innovative education programs and to influence health policy affecting older adults

### Program Progress

- On 4/13/2007 the first meeting of the managers from the Senior Health Clinics (SHC) was held. This was an all day meeting which included the directors of each clinic from across the state plus the Education Directors. Brainstorming, networking and sharing regarding all aspects of operating a SHC filled the agenda. This group stated they learned a lot from each other and decided to continue meeting with the next meeting scheduled for August via a conference call.
- The Schmieding Center for Senior Health and Education was given a \$100,000 in April from the Care Foundation of Springdale to develop a certificate program in geriatric nursing for Northwest Arkansas RNs and LPNs. This program will provide geriatric specific nursing curriculum for nurses. RNs who complete this program will be able to sit for the American Nurses Credentialing Center Certification Examination in gerontological nursing.
- The AAI semi-annual retreat was held at Petit Jean State Park on June 4<sup>th</sup> and 5<sup>th</sup>.
  - Dr. David Lipschitz was present for the first afternoon and presented some of his ideas for the future direction of the AAI.
  - Dr. Fred Taylor updated the group on Community Advisory and Legislative Issues
  - Dr. Beverly gave an update on the national Campaign for Advancing Excellence in America's Nursing Homes, and discussed how the Centers will become involved and receive funding.
  - Updates on collaborative activities were made
    - will include meeting with the new Minority Health Commission Director, Dr. Wynona Bryant Williams.
    - Announcements for the Tobacco Commission Grantees were made, where 6 of our 7 sites received funds totaling \$34,000 where over \$25,000 of that will be spent for diabetic education
    - Dr. Beverly has recently been named to the *National Governors Association Policy Academy on Civic Engagement* where AR was one of 8 states that received grant monies funded by Atlantic Philanthropy for one year. The purpose of the group is "Engaging Seniors in Volunteering and Employment". The group briefly talked about how the AAI will become involved.
  - The 2 major evidenced-based education programs for FY 08 were discussed and planned: diabetes and exercise
- Various media formats were used over 65 times this quarter as a means of informing the older adult population regarding educational events or educational formats themselves. The formats included: newsletters, flyers, Public Service Announcements, newspaper articles and interviews, public announcements,

advertisements, radio broadcasts, TV appearances, and local TV stations interviews, and magazine articles.

- The regional COAs were involved in 18 local health fairs with 4145 contacts and 2989 screenings during April, May and June.

**Development**

- Mrs. Jo Ellen Ford chaired meeting of the Rural Outreach sub-committee of the Donald W. Reynolds Institute on Aging Community Advisory Board on April 20th. Members in attendance included Chairs of the regional centers on aging community advisory committees, directors of the regional centers as well as education directors. Tom Butler, UAMS Vice Chancellor for Administration and Governmental Affairs shared with the group that the Arkansas Aging Initiative will be receiving \$200,000 each year of the new biennium. This monetary support will be coming from the General Improvement Funds of the State of Arkansas. Most of the discussion focused on developing a regional community advisory committee including the roles and responsibilities.
- The Arkansas Aging Initiative has established a goal of \$500,000 to be raised during the Imagine Campaign. A decision has been made to place the responsibility for raising these funds with the Regional Centers on Aging Advisory Committees.
- The Regional Advisory Committees are planning to start meetings in early September to develop prospective donor lists. Each committee will identify at least one special prospect for which assistance will be sought from UAMS representatives.

**Leveraging Activity - Total leveraged dollars for the quarter: \$185,451**

| SACOA    | Delta    | COA-NE   | SCCOA    | WCCOA    | TRCOA   | Schmieding |
|----------|----------|----------|----------|----------|---------|------------|
| \$11,327 | \$12,911 | \$21,220 | \$10,072 | \$11,664 | \$9,082 | \$109,175  |

**Collaborative Efforts**

- SACOA and South Arkansas Symphony partnered to present a patriotic concert honoring veterans and the armed forces on Memorial Day Afternoon. Over 500 people attended. That evening, the SACOA was a sponsor with the South Arkansas Symphony to present the Senior Symphony. Over 300 seniors and their families participated and enjoyed music from the big band era.
- SCCOA worked with Jefferson Sr. Coalition group for May 8<sup>th</sup> Silver Day Event. Agencies represented: Oak View Nursing Home, Pine Bluff Housing Authority, Arkansas Convalescent Center, Area Agency on Aging, and Jefferson County Health Unit
- AARP selected Delta Center on Aging for 10 week walking program. Initial meeting held on 4/16/2007 with local and state members & staff attending. Kickoff planned for August.
- 4/27/2007 Center on Aging-Northeast partnered with the East Arkansas Area Agency on Aging in providing entertainment for the Volunteers Luncheon. The COA provided "The New Orleans Jazz Ramblers," a musical group.

- WCCOA worked with Sparks Health System and the Healthy Congregation Ministry on a Stroke Seminar that took place June 9.
- TRCOA, and SACOA partnered with Foster Grandparents, to provide health screenings at their statewide meeting on June 5th and 6th. Over the two day health fair, 140 individuals were screened for blood pressure as well as blood sugar and memory.

### Major Challenges

- Sustainability of programs due to the instability of Tobacco Funding: attempts to expand financial base with alternate modes of funding
- Funding for research and evaluation associated with AAI outcomes.

### Evaluation

- Rand representatives, Drs. Shannah Tharp-Taylor and John Enberg, came April 11, 2007 for their annual site visit. Dr. Tharp-Taylor is the new representative assigned to the AAI. The last year's accomplishments and the upcoming year's strategic plan were reviewed. The group made a site visit to the SCCOA in Pine Bluff and held a conference call with all COA directors and Education directors. The AAI received excellent comments from the Rand evaluators.

### Minority Population Initiatives

- On June 7<sup>th</sup> a free health seminar presented by WCCOA in partnership with Healthy Congregations and Sparks Medical Center entitled "Energizing the African American Community Toward Becoming a People of Wellness" was given. This event featured as it's main speaker, Wiley Mullins founder of Wiley's Healthy Seasonings and Spices (marketed and sold at Wal-Mart). G. Orosz, MD and M. Tremwel, MD also spoke on the benefits of eating right and exercise. There were 86 attendees with 35 older adults being screened for BP's and 37 for Blood Sugars. Five people signed up for the walking program and 30 signed up for the "Power to End Stroke Program."
- WCCOA provided 100 fans and other give-away items for a community fund raiser in the local African-American community.
- 21% of the attendees to the AAI Education programs this quarter were minorities. 19.25% were African American, 0.25% Hispanic, 0.5% Asian, and 1% other.

**Goal 1: *Interdisciplinary geriatric healthcare will positively impact health outcomes of older Arkansans.*** Total Senior Health Clinic visits for this quarter is: **9540**

|       |       |        |       |       |       |            |                           |
|-------|-------|--------|-------|-------|-------|------------|---------------------------|
| SACOA | Delta | COA-NE | SCCOA | WCCOA | TRCOA | Schmieding | Schmieding<br>Bella Vista |
| 957   | 87    | 1744   | 632   | 812   | 989   | 3282       | 1037                      |

**Goal 2: *Geriatric education will positively impact behaviors to improve health outcomes.*** Total Education Encounters for this quarter was 13,282 with 21% of those to minorities.

| AAI Site                   | Health Professionals | Inservices | Para Professionals | Community-  | Exercise    | Students   | Totals        |
|----------------------------|----------------------|------------|--------------------|-------------|-------------|------------|---------------|
| SACOA                      | 129                  | 46         | 0                  | 1154        | 151         | 36         | 1516          |
| Minorities                 | 24                   | 5          | 0                  | 189         | 9           | 11         | 238           |
| DCOA                       | 140                  | 0          | 83                 | 167         | 528         | 9          | 927           |
| Minorities                 | 39                   | 0          | 64                 | 128         | 294         | 3          | 528           |
| DCOA-Helena                | 78                   | 447        | 6                  | 242         | 653         | 0          | 1426          |
| Minorities                 | 20                   | 408        | 6                  | 131         | 286         | 0          | 851           |
| COA-NE                     | 220                  | 0          | 0                  | 1317        | 1466        | 801        | 3804          |
| Minorities                 | 3                    | 0          | 0                  | 52          | 23          | 0          | 78            |
| TRCOA                      | 541                  | 64         | 0                  | 379         | 728         | 3          | 1715          |
| Minorities                 | 147                  | 10         |                    | 75          | 60          | 0          | 292           |
| Schmieding                 | 80                   | 28         | 234                | 277         | 22          | 0          | 641           |
| Minorities                 | 9                    | 0          | 33                 | 0           | 0           | 0          | 42            |
| SCSHE-Bella Vista          | 0                    | 0          | 0                  | 164         | 26          | 0          | 190           |
| Minorities                 |                      |            |                    | 2           | 0           | 0          | 2             |
| SCSHE-Mtn. Home            | 19                   | 0          | 116                | 238         | 0           | 54         | 427           |
| Minorities                 | 0                    |            | 4                  | 6           | 0           | 0          | 10            |
| SCSHE-Harrison             |                      | 0          | 13                 | 117         | 0           | 0          | 130           |
| Minorities                 |                      |            | 0                  | 0           |             |            |               |
| SCCOA                      | 108                  | 177        | 0                  | 504         | 193         | 19         | 1001          |
| Minorities                 | 44                   | 154        |                    | 272         | 52          | 11         | 533           |
| WCCOA                      | 93                   | 31         | 0                  | 846         | 535         | 0          | 1505          |
| Minorities                 | 15                   | 3          |                    | 83          | 4           |            | 105           |
| <b>Total Ed Encounters</b> | <b>1408</b>          | <b>793</b> | <b>452</b>         | <b>5405</b> | <b>4302</b> | <b>922</b> | <b>13,282</b> |

## Arkansas Biosciences Institute (ABI)

Arkansas Biosciences Institute, the agricultural and biomedical research program of the Tobacco Settlement Proceeds Act, is a **partnership of scientists** from Arkansas Children's Hospital Research Institute, Arkansas State University, the University of Arkansas-Division of Agriculture, the University of Arkansas, Fayetteville, and the University of Arkansas for Medical Sciences.

In accordance with the Tobacco Settlement Proceeds Act, the purpose of the Arkansas Biosciences Institute is to conduct:

- **Agricultural research** with medical implications;
- **Bioengineering research** that expands genetic knowledge and creates new potential applications in the agricultural-medical fields;
- **Tobacco-related research** that identifies and applies behavioral, diagnostic, and therapeutic knowledge to address the high level of tobacco-related illnesses in Arkansas;
- **Nutritional and other research** that is aimed at preventing and treating cancer, congenital and hereditary conditions, or other related conditions; and

- **Other areas of developing research** that are related or complementary to primary ABI-supported programs.

**Program Progress**

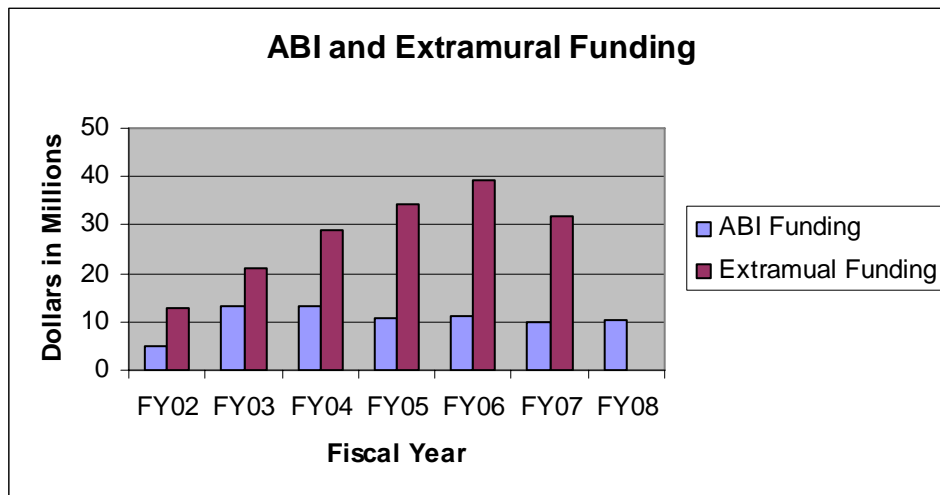
**New Director for Arkansas Biosciences Institute** In June, Dr. Robert E. McGehee, Jr., was named the Director of ABI by the board. Dr. McGehee replaces Dr. Larry Cornett, who was named Vice Chancellor for Research at UAMS. Dr. McGehee is Dean of the UAMS Graduate School and Professor of Pediatrics at UAMS and Arkansas Children’s Hospital. Having worked with ABI researchers since its inception, Dr. McGehee has experience with the research areas supported by ABI.

**Leveraged Funding for Agricultural and Biomedical Research**

Researchers use funding from ABI to help secure additional extramural funding from federal agencies, such as the National Institutes of Health and the National Science Foundation, and foundations. In June, ABI member institutions were asked to compile all extramural funding for the 2007 fiscal year. While the final revenues will not be available until August 1, the preliminary summary shows that ABI-supported researchers at the five member institutions received approximately \$32 million in extramural funding from agencies and foundations for FY07.

In April, the Department of Finance and Administration announced projected funding for tobacco settlement programs for the coming fiscal year. Funding for ABI was projected to be \$10.3 million for FY08, an increase of approximately 4% from the previous year. Final projections are expected to be released in July.

The chart below shows funding from the tobacco settlement plan along with related extramural funding. (The extramural funding for FY07 is an estimated amount).



**Program Evaluation** The RAND Project Team met with the ABI Board on April 12 and provided an evaluation update and discussed future evaluation activities. Dr. John Engberg, RAND Principal Investigator, outlined three strengths of ABI, as found in their ongoing program evaluation:

- Success and progress in attracting extramural funding;

- Increase of collaborative research projects; and
- Promoting ABI-supported research.

Dr. Engberg reported on RAND's plan to move from annual to bi-annual reports to the Arkansas Tobacco Settlement Commission. The RAND team also had a meeting with two representatives from the ABI Science and Industry Advisory Committees, Dr. Mary Good, UALR, and Dr. Rick Roop, Tyson Foods, Inc.

**ABI Science and Industry Advisory Committees** In April, the ABI Board invited Don McCaskill, Vice President for Research at Riceland Foods, Inc. to serve on the ABI Industry Advisory Committee. Mr. McCaskill, who has been at Riceland since 1981, served on the ASU-ABI Executive Director Search Committee and is a member of the Arkansas Biotechnology Association. The ABI Science and Industry Advisory Committees will hold their annual meeting on October 23 in Little Rock, in conjunction with the ABI Fall Research Symposium.

## Fay W. Boozman College of Public Health (COPH)

The mission of the Fay W. Boozman College of Public Health (COPH) at UAMS is to improve health and promote well-being of individuals, families, and communities in Arkansas through **education, research, and service**. The COPH has elected to address this mandate through a community-based health education model.

The COPH will improve health and well-being of Arkansans by:

- Training and re-training a professional public health workforce capable of further disseminating effective community and other public health programs.
- Training healthcare and public health practitioners in prevention methods through offering continuing education programs and through partnerships in the delivery of model programs;
- Contributing to the development of linkages among graduating students, state agencies, local organizations, healthcare practitioners, and communities to help align, coordinate, and implement effective prevention programs; and
- Conducting community-based and other public health research that is Arkansas focused and based on Arkansas needs.

*In July 2006, the Fay W. Boozman College of Public Health celebrated five years of working to improve the health and well-being of all Arkansans. Thank you for your continued support!*

### **PROGRESS OF PROGRAM (April 1, 2007 - June 30, 2007)**

**Education Goal:** *Increase the number of communities in which citizens receive public health training (Initiation)*

- **Student Expansion:** 256 students registered for the Spring 2006 - 2007 semester; 17 of these students are enrolled in doctoral programs - 15 in the DrPH program and 2 in the newly established PhD in Health Systems Research. Student demographics follow: 182 (71%) of the students are female; 105 (41%) of the students are part-time; 61 (23%)

are African-American; 16 (6%) Asian; 173 (68%) Caucasian; 5 (2%) Hispanic; and 1 (1%) Native American. Student age range is wide: 36% are 20 – 29 years old; 29% are 30 – 39 years old; 19% are 40 – 49 years old; 13% are 50 – 59 years old and 3% are 60 and above. A total of 30% of the students are from the Central AHEC region; 4% are from the Northwest; 5% are from the Northeast; 2% are from the Southwest; 2% are from the South; 3% are from the Delta; 14% are from South Central (Pine Bluff); 7% are from North Central (Fort Smith); 24% are from out of state; and 9% are from foreign countries. Although some students are from out of state and foreign countries, they were all residents of Arkansas at the time of their admission. A total of 40 (16%) of the students are DHHS Division of Health employees.

- 78 students registered for summer classes, 11 of these students are enrolled in the DrPH doctoral program.
- Student demographics follow: 58 (74%) of the students are female; 68 (87%) of the students are part-time; 18 (23%) are African American; 6 (8%) Asian; 53 (68%) Caucasian; and 1 (1%) Hispanic.
- Student age range remained consistently wide: 34 (44%) are 20-29 years old; 23 (30%) are 30 – 39 years old; 12 (15%) are 40 – 49 years old; 8 (10%) are 50 – 59 years old; and 1 (1%) is 60 and above.
- **Faculty Development:** As of March 31, 2007, COPH has 53 full-time and part-time salary supported faculty; 42 of these are 100% supported in the College.
- **Program Development:** The COPH offered 47 courses this Spring ; (including preceptorships, integration projects and directed studies), all on the UAMS campus.
- **Degree Programs** now include:
  - Post-Baccalaureate Certificate
  - MPH (generalist and specialist in each of the five departments)
  - MD/MPH; JD/MPH; PharmD/MPH
  - Doctor of Public Health in Public Health Leadership (DrPH)
  - PhD in Health Systems Research (with students enrolled in fall 2006)
  - PhD in Health Promotion and Prevention Research (to enroll students in fall 2007)
- **Monthly magazine column:** No column was provided by COPH faculty to the Arkansas Municipal League magazine “City and Town” this quarter. The monthly columns offer useful advice on how municipal officials and administrators can promote better health.
- **The Health Policy/Prevention Conference** is held each Tuesday from 4 pm – 5 pm (except during the months of July and August and when other activities conflict). The DHHS Division of Health (DOH) is a conference co-sponsor. COPH faculty/guests provide relevant information related to public health policy and prevention. Conferences on the first Tuesday of each month focus on Obesity issues. One-hour Continuing Education Units (CEUs) are available to Physicians, Nurses, Pharmacists, Nutritionist/Dieticians, Health Educators, CHES/CPHE, EMT’s, Sanitarian and Social Workers who attend.
- **Public Health Grand Rounds** are also held each Thursday from 8 am – 9 am in the Division of Health Auditorium. The College participates as a co-sponsor of these

grand rounds. One-hour CEUs (same as listed above) are available to those who attend.

- **Accreditation:** The College of Public Health has been fully accredited for a 7-year period with no requirements for interim reports by the Council on Education in Public Health (CEPH).

### **Research Goal 1: *Obtain federal and philanthropic funding***

During this quarter, COPH faculty submitted 15 proposals seeking over \$6 million in funding; all are pending.

### **Research Goal 2: *A significant portion of research conducted shall be relevant to the health issues within Arkansas and/or community-based in nature***

With coronary heart disease (CHD), cancer, and stroke being the three leading sources of mortality and morbidity among all gender and race groups nationally and in Arkansas, the COPH has focused on research relevant to smoking and obesity prevention and control, the two leading preventable causes of all three of these diseases. Additionally, because many ethnic and racial minority groups, including our state's African-American and rapidly growing Latino populations, experience a disproportionate disease burden, the COPH has also identified eliminating these racial and ethnic health disparities as an additional research focus relevant to the health issues within Arkansas.

#### *COPH contracted programs addressing tobacco cessation*

- Christine Sheffer, PhD, Assistant Professor, Department of Health Behavior and Health Education, has received funding for six tobacco cessation programs - each of which incorporates community-based public health approaches. They are the "Arkansas Tobacco Cessation Network (ATCN)", "SOSWorks" Fax-back Referral Program, the Provider Education Program, the Smoke-free Workplace Assistance Program, YouCanQuit\_ AR.net, and the Arkansas SOSQuitline. Together these programs provide intensive evidence-based treatment in 16 sites (AHECs, AHEC hospital affiliates and a few other selected locations across the state) and over the telephone. These programs also work to integrate evidence-based cessation services into the health care and workplace communities across the state. Arkansas residents can be linked to cessation services through proactive calls made by specially trained staff in response to faxed requests or by calling the toll-free number. Medication assistance is provided as well as self-help motivational materials. A Spanish-speaking counselor is available, and translation services are available for virtually every other language. Under the direction of Dr. Sheffer, these programs provide treatment to a record number of Arkansans in a comprehensive and coordinated manner.

#### *COPH funded programs addressing ethnic minority health disparities*

- Improving racial and ethnic minority health disparities in Arkansas is being addressed by several funded and pending research projects. For example, continuation funding of a contract with the Minority Health Commission supports COPH faculty Dr. Creshelle Nash and Dr. Eddie Ochoa in extending their work on the "Arkansas Racial and Health Disparities Research Study." Recommendations for both short-and long-term interventions to reduce and even eliminate racial and ethnic health disparities in Arkansas have been developed from focus groups and secondary data analysis.
- Under the leadership of M. Kate Stewart, M.D., MPH, the COPH responded to a Kellogg solicitation to accredited schools and programs of public health to complete an

assessment of their school and program activities to eliminate racial and ethnic health disparities and the College was one of 12 schools and programs selected to participate in this planning effort to reduce/eliminate health disparities. *No funding was directly available*; however, Kellogg is providing expert technical assistance and consultation to the COPH. Kellogg Consultants, Dr. Larry Green and Ms. Ella Greene-Moton, addressed COPH faculty and administration at the COPH retreat in September 2006. In May 2007, a retreat is scheduled that will address health disparity issues specifically. Consultants for this retreat are Dr. Thomas LaVeist and Ms. Vickie Ybarra – both are nationally recognized in this field.

- Several COPH faculty members are working with the Minority Health Commissions' Hypertension Program through Technical Service Agreements.
- Finally, Dr. Leavonne Pulley also continues to be funded as a subcontractor on an NIH grant to study the etiology of geographic and racial differences in stroke.

*COPH funded programs addressing obesity*

- Obesity is a major targeted area for on-going and planned research projects. Two substantial grants have been awarded to faculty addressing obesity: the Web-based Weight Loss Grant for which Dr. Delia Smith West serves as principal investigator, and the Evaluation of Act 1220 for which Dean Raczynski serves as principal investigator. The former grant is designed to determine the benefit of a web-based counseling approach to weight loss versus delivery through group, in-person methods. If web-based approaches are found to be effective for helping people lose weight and maintain losses, then a highly cost-effective approach to weight loss and maintenance will be added to what can be done in Arkansas to counteract the obesity epidemic. The first two waves of recruitment for this project have been completed recently and 143 participants are now enrolled and randomized (out of a goal of 244 to be accrued over a 24 month period). Behavioral weight control intervention using the different delivery channels have begun and will follow these individuals for 18 months to determine the best ways to produce sustainable lifestyle changes.
- The latter project, evaluating Act 1220 of 2003, will provide information for legislators, those involved in implementing the Act and those in other states who are trying to combat childhood obesity, about how the components of the Act have been implemented and how they are working. Baseline and second-year data have already been collected; the baseline data were presented to the House and Senate Public Health Committee in January 2005, and the second-year data was presented in January 2006. COPH faculty presented the third year data to the Senate and House Public Health Committee's in January 2007. Reports are also sent to all school superintendents and principals, and they are posted on the web for easy access.

**Service Goal 1: *COPH shall act as a resource to the General Assembly, the Governor, state agencies, and communities***

- COPH faculty and staff actively participated in policy discussion/information briefings with members of the General Assembly and other public health agencies/organizations on a daily basis during the legislative session of the 86<sup>th</sup> Arkansas General Assembly that convened January 8, 2007.
- COPH faculty was designated to serve on the following task forces formed through legislation:

- Act 125 of 2007 – An Act to establish the AR Legislative Task Force on Traumatic Brain Injury.
- Act 695 of 2007 – An Act to create the newborn umbilical cord blood bank for postnatal tissue and fluid.
- Act 842 of 2007 – An Act to create an Arkansas HIV-AIDS Minority Task Force and to coordinate statewide efforts to combat the debilitating effects of HIV-AIDS on Minority Arkansans.
- COPH faculty/staff is participating in the “Step Up” Coalition which consists of a variety of health care organizations formed to get legislative support for increasing the excise tax on cigarettes which would decrease the number of smokers in our state.

**Service Goal 2:** *COPH shall collaborate and partner with other agencies, organizations, etc. on health-related issues when feasible. (Consultation and Analysis/Collaboration and leveraging)*

- COPH faculty and staff serve in a leadership capacity and are visible partners with the AR Cancer Coalition, AR Oral Health Coalition, AR Minority Health Commission, DHHS Division of Health, and the American Cancer Society.
- COPH students have over 35 agency/organization choices for their integration projects and preceptorships.
- Three COPH faculty/staff serve on an Advisory Committee of the Philander Smith College – Kendall Health Science Institute. Collaboration, research, and addressing the public health needs of the students of Philander Smith College are the primary foci of the Advisory Committee.
- COPH faculty/staff are ongoing participants in the Clinton School of Public Service educational activities.

**RAND Recommendation Focus Areas Based on December 2004 Annual Report:**

**RAND Recommendation 1:** *The COPH should maintain the discount for ADH employees*

It was agreed that the COPH had no direct control over this recommendation. This decision must be agreed to by the UA Board of Trustees, the President of the UA System, and the Chancellor of UAMS. The 70% discount was discontinued in 2005; however, over 10% of the COPH student body continues to come from the DHHS Division of Health employee pool.

**RAND Recommendation 2:** *The COPH should provide scholarships and discounts for distance learning students; and*

**RAND Recommendation 3:** *The COPH should provide scholarships to students to help support the cost of obtaining a degree*

Even though the COPH has no direct control over appropriations and cannot guarantee allocation of additional funds to the COPH for scholarships and assistantships, it should be noted that over 80% of the COPH students are part-time, non-traditional students who are working at a full-time job as they pursue their degrees. Nonetheless, a number of students are being supported as research assistants with extramural funding. A system has also been established in the Office of Student Services to compile student funding opportunities from outside the College and distribute this information to students. In addition, the Department of Environmental and Occupational Health has been able to

secure contributions to establish tuition scholarships for students pursuing specialized MPH degrees in the department.

In consultation with the family of the late Dr. Fay Boozman, the College has also established the Fay W. Boozman Public Health and Community Service Scholarship fund to help support a deserving MPH student(s) each year. Sufficient funds have now accumulated so that a Scholarship Award of approximately \$1,000 can be made at Convocation in May 2007 to one or more continuing students. Additional donations may be sent to the *UAMS Foundation, Fay W. Boozman Public Health and Community Service Scholarship, 4301 W. Markham, Slot 716, Little Rock, AR 72205.*

Finally, funds were donated by Governor Huckabee's cabinet, with matching funds from the UAMS Chancellors Office, to establish the Boozman Textbook Fund award at the COPH. A small award is given to a student (standardized criteria has been established) to help cover the cost of textbooks.

**Rand Recommendation 4: *Continue to hire more faculty; particularly diverse faculty***

The COPH remains committed to maintaining a diverse faculty. As of March 2007, COPH had 10 (19%) minority faculty. Eight of the 42 (19%) of the COPH full-time faculty members are from racial and/or ethnic minority groups; five of the eight (12%) are from the underrepresented minority classification.

**Rand Recommendation 5: *Provide evaluation expertise to the COPH community partners to assess the impact of the work they are doing in the community***

The COPH's Office of Community-based Public Health (OCBPH) is involved in many different activities which address this need. The OCBPH has four formally recognized community partners: (1) Boys, Girls, Adults Community Development Center in Marvel, (2) Walnut Street Works in Helena/West Helena, (3) We Care in Pulaski County, and (4) La Casa in Pulaski County. Dr. Kate Stewart, Director of the OCBPH is working with other staff and faculty to assist the Tri-County Rural Health Network, which includes Walnut Street Works, in evaluating their Community Connector Program. Dr. Martha Phillips, Assistant Professor of Epidemiology, is overseeing the analysis of data from a community tobacco usage survey conducted by We Care as part of their tobacco prevention grant program. The OCBPH has also been asked to assist the USDA Delta Nutrition Intervention Research Initiative (NIRI) in providing training to their Arkansas community partners in community-based participatory research. This project will directly benefit the Boys, Girls, Adults Community Development Center (BGACDC) in Marvel, and lessons learned will also subsequently be shared with the other three formally recognized COPH community partners.

**RAND Recommendation Focus Areas Based on 2005 Interim Report**

**Recommendation 1: *Increase grant funding and leveraging activities from other sources***

As of March 2007, the COPH has over 50 active grants/contracts amounting to over \$14 million in total funding. The COPH has pending grants/contracts in excess of \$10 million dollars. The COPH has significantly increased grant funding in a very short period of time

and has now been awarded more extramural funding than it has received in all years from tobacco funding.

**Recommendation 2:** *Develop Curricula for the new doctoral programs*

**Recommendation 3:** *Develop two new doctoral programs that are required to maintain accreditation; recruit new students for them*

Two new doctoral programs were developed in August 2005; one in Health Systems Research (HSR) and the other in Health Promotion and Prevention Research (HPPR). The board of trustees approved these courses in January 2006. Both programs have been approved by the Arkansas Department of Higher Education (ADHE). Two students are presently enrolled in HSR program and one student has been accepted thus far in the HPPR program scheduled to begin in the fall 2007 semester.

**RAND Recommendation focus area based on 2006 report:**

**RAND Recommendation:** **The COPH should continue its efforts to meet the new accreditation requirements by December 2007, to expand full-time faculty for doctoral and masters programs and recruit students for the new doctoral programs, and to obtain funding to support the additional salaries**

The COPH has been fully accredited for a 7-year period with no requirements for interim reports by the Council on Education for Public Health (CEPH).

**Major Challenges this quarter/Assistance needed by RAND:**

The COPH is not experiencing any major challenges at this point although space is extremely limited for further program expansion. If any pending grants or contracts are funded requiring hiring any additional staff, we do not have current space to house these individuals. In addition, financial resources do not exist to expand programs further.

## **Delta Area Health Education Center**

The Delta Area Health Education Center (Delta AHEC) was established by the Tobacco Settlement Proceeds Act (July 1, 2001). It is the intent of the Act that "the University of Arkansas for Medical Sciences (UAMS) establish a new Delta Area Health Education Center to serve the following counties: Chicot, Crittenden, Desha, Lee, Monroe, Phillips, and St. Francis. The new Delta AHEC shall be operated in the same fashion as other facilities in the UAMS-AHEC program including training students in the fields of medicine, nursing, pharmacy, and various allied health professions, and offering medical residents specializing in family practice. The training shall emphasize primary care, covering general health education and basic medical care for the whole family. The program shall be headquartered in Helena with offices in Lake Village and West Memphis."

### **Primary Goals**

(1) To serve Chicot, Crittenden, Desha, Lee, Monroe, Phillips, and St. Francis counties by increasing access to quality healthcare through the composition, distribution, and appropriate preparation of a culturally competent health professional workforce; and, (2)

to further serve the citizens by increasing the capacity of participation in culturally sensitive health promotion and health education programs.

## **Program Progress**

### **Indicator 1 targets increases in the number of communities and clients served.**

On April 13th & 14th, the UAMS/Delta AHEC Sickle Cell Program, Sickle Cell Foundation, and Sickle Cell Support Services sponsored the **1<sup>st</sup> Biker's Sickle Cell Poker Run** in conjunction with the Little Rock Blues Festival on the River. The run started at Blue Cross/Blue Shield with stations in Lonoke, England, Scott, Altheimer, and Pine Bluff. Each station had an education booth and a poker card for each motorcycle club that participated in the run. At the last stop, the club with the best hand won a prize. Six motorcycle clubs (62 individuals) participated in the run. Through the education booths, we distributed approximately 1,500 sickle cell pamphlets and screened at least 300 individuals. The money raised (\$687) will be used to purchase more education materials and assist with camping supplies for families.

**Delta PROMISE** (Positive Reinforcement of Minors to Increase Self Esteem), a new project to provide substance abuse treatment services in Phillips and Lee counties was funded and now, in a part of the state where no such services exist, about 180 teenagers with substance abuse problems will now be able to get help. A team at the UAMS Psychiatric Research Institute (PRI) received the award, and Delta AHEC will be a collaborating partner.

The **Prescription Assistance Program** continues to serve our community and help our citizens in one of the most critical areas of health maintenance, proper use of their medicines. With assistance from pharmaceutical companies, local drugstores, and Helena Health Foundation emergency medicine vouchers, we are helping patients with diabetes, heart disease, COPD, high blood pressure, hormone imbalance, Lupus, and varied psychiatric ailments, as well as patients dealing with amputations. As a result, these patients maintain healthier lives, put less strain on our health care system and saves money which helps the local economy. Savings by month this quarter were \$14,373.56 in April, \$12,803.39 in May, and \$21,387.90 in June.

**Breastfeeding support services** included distribution of more than 25 electric breast pumps, hospital visits after delivery, and follow-up visits in the home. Two moms continued to breastfeed past six months. One mom said, "I don't know what I would have done without Ms. Dupree. I was so nervous and she calmed all my fears!"

For the 7<sup>th</sup> year, the Delta AHEC North partnered with the Arkansas Division of Health to offer the **Community Baby Shower**, providing fun, gifts, and educational information to pregnant women in their last trimester. In West Memphis, four showers were attended by approximately 120 expectant moms and dads, as well as a few grandparents and siblings in a one-year period.

More than 30 junior and senior high students and their parents participated in the West Memphis School District's initiative to improve family interactions. The program uses a nationally recognized curriculum to demonstrate appropriate parenting skills.

The Delta AHEC has hired Keisha Grigsby as a Tobacco Interventionist. Ms. Grigsby has visited physicians' offices, met with Hometown Health Improvement, and talked to faith based entities and local businesses to inform them about our program. She has received many referrals from our Fitness Center and Diabetes Clinic. As a result she currently has 45 active clients with 10 on the waiting list. She will also be working with prevention youth programs.

Attendance/encounters at the public education activities which were available during the quarter were as follows:

|  |   |
|--|---|
| <i>To increase the capacity of participation in culturally sensitive health promotion and health education programs:</i> |   |
| 105  | CPR/First Aid                                   |
| 25   | Health education for adults                     |
| 547  | Health fairs/screenings                         |
| 182  | How Healthy is your Faculty?                    |
| 331  | How Healthy is your Industry?                   |
| 4000   | Kids for Health                                 |
| 126  | Prescription assistance                         |
| 211  | Seniors CLASSICS                                |
| 45   | Tobacco cessation                               |
| 42   | Tobacco prevention                              |
| 270  | Sexually transmitted infections                 |
| 336  | Health education for adolescents (includes YES) |
| <i>To improve health behaviors related to chronic health problems:</i>   |   |
| 124  | Diabetes Clinic                                 |
| 29   | Diabetes Outreach                               |
| 113  | Diabetes Support Group                          |
| 297  | Sickle cell                                     |
| <i>To improve health behaviors in regards to physical activity and nutrition:</i>  |   |
| 8,197  | Fitness Center                                  |
| 30   | Nutrition Group                                 |
| 36   | Nutrition Counseling                            |
| 191  | Tai Chi   |
| <i>To improve health behaviors related to teen pregnancy prevention and parenting skills:</i>                            |   |
| 491  | Prenatal/Parenting                              |
| 317  | Teen Pregnancy Prevention                       |

**Indicator 2 targets increases in the number of training sessions for health professionals.** Continuing education on **Cardiovascular Disease and Stroke** was provided to 62 healthcare professionals (RNs) through the AGECE (Arkansas Geriatric Education Center) and Delta Center on Aging. These professionals responded positively regarding both the method and content of continuing education materials.

The **Delta AHEC Library** received more than 40 new visual aide models this quarter. Most pertain to exercise and nutrition, since that is what seems to be what people are most focused on.

Training session encounters that occurred for health care students and professionals in Delta AHEC facilities in order to assess their compliance with the Act’s intent regarding health care training were as follows:

|  |  |
|--|--|
| <i>To provide support services and continuing education for area health professionals and health professions students:</i> |  |
| 89   | Continuing education programs (includes compressed video)  |
| 13   | CPR for health professionals                               |
| 108  | Health professionals were provided with library services   |
| 78   | Health professions students were provided library services |

**Indicator 3 targets increases in access to a primary care providers in underserved communities.**

**M\*A\*S\*H** (Medical Application of Science for Health) was held in Helena June 4-15. Delta AHEC staff coordinated and lead this 2-week summer program for students who are interested in pursuing a health related career. In Helena, 11 students attended the program, representing 2 Delta counties and 4 different schools. Of these, most (10) were female; the racial breakdown was 4 Caucasian and 7 African American students. The students shadowed health care professionals throughout the community and at the Helena Regional Medical Center, and they participated in hands-on activities. They learned to suture pigs’ feet and were certified in CPR and First Aid skills. This year, 2 former M\*A\*S\*H students who are now UAMS medical students helped lead the program.

Delta AHEC’s Ollie White served as an adjunct instructor for Phillips Community College of the University of Arkansas (PCCUA), teaching “**Introduction to Medical Professions**” (Fall 2006) and “Introduction to Medical Procedures” (Spring 2007) to 21 Central High School students. These students received 3 hours of college credit for each course as well as high school elective credit for each course. Upon completion of these two courses and an additional course in “Medical Terminology,” students may sit for an examination to become Certified Nursing Assistants.

|   |  |
|---|--|
| <i>To increase the number of health professionals practicing in underserved areas in the Delta:</i> |  |
| 8   | BSN nurses are receiving instruction for a Masters of Science in Nursing |
| 7   | RNs are preparing for a BSN  |
| 3   | UAMS medical students doing preceptorship (2 Helena, 1 Lake Village)     |
| 21  | Students preparing to be Certified Nursing Assistants                    |
| <i>To acquaint minority and/or disadvantaged youth with health careers:</i>                         |  |
| 11  | Health Careers (11 M*A*S*H ; CHAMPS)                                     |

**Important Events**

The **Delta AHEC South** officially reopened in Lake Village on June 1<sup>st</sup> to provide health promotion and prevention work in Chicot and Desha counties. A director has been hired

and recruitment is underway for a health educator and Kids for Health instructor. The Delta AHEC and Chicot Memorial Hospital have a long-standing collaborative partnership which will enable local staff, with support of the Delta AHEC staff, to plan, implement, and evaluate programs targeted to the needs of the community.

The Delta Regional Authority awarded a **\$533,000** grant to the Delta AHEC to expand the services of the existing **Diabetes Education Clinic**. A multidisciplinary approach is used in group and individual settings. Previously the diabetes team consisted of an on-site registered dietitian and advanced practice nurse. New staff was hired, an administrative assistant and a registered nurse, and teaching materials were purchased. A local social worker and a local pharmacist each lead bi-monthly support groups, and a local licensed counselor leads a monthly mental health group. A registered dietitian presents weekly to small groups at the AHEC over interactive video from UAMS. A local dietitian is presenting monthly in coordination with Cooperative Extension Services to groups at the AHEC on the topic of "Diabetes Prevention." Changes in client behaviors and A1Cs levels are monitored for client scheduling and quality improvement.

Delta AHEC staff has been involved in planning and preparation for several upcoming events:

Aug. 14 - AARP Kickoff

Aug. 18 - Delta AHEC Foundation Gala

Aug. 21 - Healthy Woman Health Fair (with Helena Regional Medical Center)

Aug. 27 & 28 - Joint Committee on Public Health, Welfare & Labor & Joint Committee on Agricultural Forestry & Economic Development will be meeting at Delta AHEC

Sep. 8 - Delta AHEC 2<sup>nd</sup> Annual Sickle Cell Walk-A-Thon (Central High School)

### **Advisory Board Activities**

The Advisory Board met on June 11<sup>th</sup> with 25 members attending. Board members received a report on the "Imagine GALA" to be held on August 18<sup>th</sup> and Karan Cox, APN announced that the Delta AHEC had been awarded a DRA grant. . Members received training on the policies and procedures for board membership and terms for board members were established.

### **Continuous Quality Improvement**

The **USDA Rural Development Project** selected the Delta AHEC as a successful project showcasing the facilities and programs in recent tours of partners from across the United States.

During the quarter, 4 new employees joined the Delta AHEC.

Melanie Green, RN - Diabetes Education Clinic

Laura Jill Richmond - Administrative Assistant, Diabetes Education Clinic

Keisha Grigsby - Tobacco Cessation

Calvin Woodridge - Prescription Assistance

The Delta AHEC staff participated in a strategic planning session during this quarter.

## **Collaboration/Coordination**

The **Phillips County Adolescent Health Promotion Coalition**, with representation from DHHS, DOH, local and county government officials, school teachers and administrators, youth, the faith community, parents, and many youth-serving agencies, focuses on prevention of alcohol, tobacco, and other drug abuse, as well as prevention of births to unmarried teens. The Delta AHEC provides meeting space and office space as in-kind funds. CSEA trains community volunteers speaking on behalf of the best interests of abused and neglected children in court. The program is growing in size to meet the need. In May, the coalition submitted a Systems of Care proposal for a State Incentive Grant (\$150K per year for a total of four years). At the completion of the four years - if they are granted - they will apply to SAMHSA for their grant which amounts to \$100K per year for five years with the ability to reapply for an additional five years. Counseling Services of Eastern Arkansas (CSEA) will act as the fiscal agent for the coalition and will pay 40% of Ollie White's salary as the coalition leader.

A grant request for \$17,000 was submitted in May to the Arkansas Tobacco Settlement Commission Community Health Grants for **Total Fitness of the Mind** in collaboration with Delta Center on Aging, East Arkansas Area Agency on Aging, and Mid Delta Community Services, Inc. Funding for a portion of the request, \$8,620, was awarded.

The Delta AHEC entered into a collaborative agreement with **Beautiful Zion Baptist Church** to provide its church members with health education/wellness programs and services. The partnership began on June 14<sup>th</sup> when Delta AHEC staff presented Nutrition 101 and Exercise to more than 50 youth and adult church members. This is not the first of this type of faith based initiatives for the Delta AHEC but is the first with this congregation. Delta AHEC staff provide programs on topics such as safety, diabetes, cardiovascular disease, adolescent health, and smoking cessation. Plans are to provide church members with free health screenings including blood pressure, blood sugar, and cholesterol testing.

The Arkansas Division of Health funded a program designed to improve the health of a West Memphis industry, kicking off the effort with a company wide health fair that included baseline blood work and flu shots for employees and spouses. Slightly more than 50% of the employees completed a health risk appraisal. Those with abnormal lab results, elevated blood pressure, or high risk factors were encouraged to participate in follow-up teaching sessions to address the health issues. The plant manager states, "This has been great for our company. We look forward to continuing this relationship."

Dr. Ann Bynum of the Rural Hospital Program requested Delta AHEC participation in Consumer Health Support Group programs to speak to statewide parties on the benefits of interactive instruction. Our participants were from the Aging programs, and we received accolades from Dr. Bynum and Betty Cohen regarding our participation.

The Delta AHEC Outreach Program benefited from the contributions of 3 Americorp workers and 2 summer interns this quarter.

## **Major Challenges**

There were no new challenges this quarter.

## **Minority Participation**

The Delta AHEC continues its tradition of service to a diverse population. Attendance at public educational activities during the quarter was 45% Caucasian and 55% minority.

## **Tobacco Prevention and Cessation Programs**

The Tobacco Prevention and Cessation Program (TPCP) introduced the Stamp Out Smoking (SOS) Campaign to educate Arkansans about the dangers of tobacco use. Using the Center for Disease Control and Prevention's (CDC) Best Practice Guidelines, a plan was developed to reduce disease, disability, and death related to tobacco by preventing the initiation of tobacco use among young people; promoting quitting among young people and adults; eliminating exposure to second-hand smoke; and identifying and eliminating the disparities related to tobacco use and its effects on population groups.

### **Advisory Committee**

According to law, the tobacco prevention and cessation advisory committee is made up of eighteen members: one member appointed by the President Pro Tempore of the Senate, one member appointed by the Speaker of the House of Representatives, and sixteen members appointed by the Governor. The organizations represented on the committee include the Arkansas Medical Society, Arkansas Hospital Association, American Cancer Society, American Heart Association, American Lung Association, Coalition for a Tobacco-Free Arkansas, Arkansans for Drug Free Youth, Arkansas Department of Education, Arkansas Minority Health Commission, Arkansas Center for Health Improvement, Arkansas Association of Area Agencies on Aging, Arkansas Nurses Association, Arkansas Cooperative Extension Service, University of Pine Bluff, League of United Latin American Citizens, and Arkansas Medical, Dental and Pharmaceutical Association. The Advisory Committee meets on a quarterly basis. During the first several meetings, the committee reviewed and approved the program's strategic plan. During subsequent meetings, the committee will review program activities, progress toward program goals, and give advice on program improvement.

### **Program Progress**

The TPCP currently funds thirty community coalitions throughout the Arkansas. The coalitions utilize funding to educate the citizens of Arkansas on the dangers and ill effects of tobacco use. The coalitions use the CDC's Best Practices for Comprehensive Tobacco Control Programs. They also report all activities to TPCP and are monitored on a quarterly basis.

During the past quarter many of our coalitions began to focus their efforts on educating the public on cessation options as well as the effects of tobacco on minors. Here are a few of the highlights for the quarter:

- Tobacco advocates in Faulkner County worked diligently to educate local tobacco merchants on laws pertaining to tobacco sales to minors. An advertisement was placed in the Log Cabin Democrat thanking the twenty-six tobacco merchants in Faulkner County who took action regarding all suggestions made during Operation Storefront. The twenty-six merchants posted signs stating "No sales to minors" both inside and outside the stores

as well as at the point of purchase. Each of the locations removed all tobacco and tobacco advertisements located near candy and removed all tobacco advertising at or below three feet, which is considered child's eye view.

- The Northwest Tobacco Free Coalition identified the regional cessation program(s) provided in their region and worked to make these programs more accessible to disparate populations (those of low socio-economic status and who speak English as a second language). The Coalition requested the cessation program offered by the University of Arkansas to consider providing individual counseling in addition to the group counseling they already provide.
- The Marion County Hometown Health Coalition worked to formalize a policy with the Bull Shoals Arts in the Park committee to disallow tobacco industry sponsorships for any future events. Also, a committee was formed to develop a plan for a smoke-free parks policy to present to the city council later this year.

### **School & Youth Programs - School-based Programs**

The TPCP currently funds nineteen school programs. Many of the schools provide training for staff, students, and faculty on implementing tobacco-free campuses. Many of the schools are currently working to implement the Coordinated School Health Model which includes tobacco prevention curricula. Listed below are a few highlights that occurred during the third quarter:

- The Texarkana School District held the Southwest Arkansas Stomp-Out Conference. The purpose of this conference was to educate and empower students and staff to make strides toward healthier lifestyles. This conference allowed many schools that are without tobacco funding to receive exposure to a wealth of information. Over 800 students and staff attended.
- Over thirty students and adults from the El Dorado PRIDE team attended the 30th World PRIDE Conference in Charleston, West Virginia. Participants attended workshops on tobacco prevention. Members of the team presented two drug/tobacco prevention programs while at the conference and won several awards. El Dorado's PRIDE was one of five teams nominated for Team of the Year. Carlaskio Smith, an El Dorado PRIDE member, was presented the 2007 Community Service Pillar Award, and the Chris McKnight Family, El Dorado PRIDE volunteers, were presented the 2007 Family of the Year Award. El Dorado also had two members, Brandon Bibby and Camilla Harris, on the National PRIDE Team.
- The Heber Springs school district held an educational seminar for middle school students. The school also changed the bulletin board at the Heber Springs Middle School to help promote the Youth Extinguishing Smoking (YES) team and increase involvement by both students and staff.

### **Family Service Agency - Youth Leadership Initiative**

The Tobacco Control Youth Board (TCYB) is currently made up of fifty-six board members, and YES recruited new members during the months of April - June 2007 and is currently made up of 876 members. Listed are some of this quarter's activities:

- Participated with the City of Little Rock KICK BUTTS Day at Pennick Boys and Girls Club.
- Partnered with the Texas Teen Ambassadors for the support of the Say YES Conference, which took place at the Little Rock Hilton. Over 100 youth attended.
- Protested against Altria at the Annual Share Holder in New Jersey and New York in conjunction with 100 other youth advocates from around the country. During this share

holder meeting, the five TCYB members present conducted the ice breaker on the opening day and were also the chant workshop leaders.

### **Enforcement**

The Arkansas Tobacco Control Board (ATCB) enforces state laws prohibiting the sale of tobacco products to minors. The last quarter of Fiscal Year (FY) 2007 ended on a positive note as the ATCB saw a decline in the violation rate in both May and June. ATCB continued to have a strong presence around the state, and that presence resulted in a reduction in youth access to tobacco.

During the fourth quarter, ATCB conducted 1,288 checks with 100 violations for a violation rate of 7.76% compared to 7.52% last quarter. In addition to the 1,288 compliance checks, there were 590 routine inspections conducted throughout the state. During this quarter ATCB issued fifty-seven warnings and ninety-one fines totaling \$56,900. Also, there were twenty-four suspensions issued. Seventeen complaints were received regarding retailers selling to minors – three were founded, nine were unfounded, and five were pending. There were six regional trainings held during this quarter which resulted in 175 employees being trained during this quarter, compared to 370 the previous quarter.

As mentioned last quarter, the ATCB is working with the Health Department and Cranford Johnson Robinson Woods (CJRW), a marketing firm in Little Rock, to finalize an interactive, web-based training for retailers and their employees. The training will include video and PowerPoint presentation similar to the regional trainings that we currently conduct monthly. This will enable ATCB to reach more employees and ultimately reduce illegal sales to minors. The ATCB anticipate this online training will be available in August.

In August, the ATCB plans to kick off the web-based merchant training program. They will continue to market their regional trainings but will also add this venue to allow retail employees to be better trained in recognizing underage customers as well as being better prepared to read and understand the underage markings on the state-issued identification card or driver's license.

The ATCB also plans to conduct some organized task force operations at various locations around the state. These task force operations will concentrate on retailers purchasing untaxed tobacco products and buying from unlicensed dealers. Purchasing untaxed tobacco products illegally allows retailers to sell tobacco products at a lower cost and therefore can entice minors to purchase from them.

### **Cessation**

The Arkansas Statewide Tobacco Programs and Services (AR Stops) programs include the SOSQuitline, SOSWorks Fax-back Referral Program, the Provider Education Program (PEP), the Arkansas Tobacco Cessation Network, and the Smoke-free Workplace Assistance Program (SWAP). According to the AR Stops 2006-2007 Annual Report, during FY 07:

- The SOSQuitline served 6,764 unique callers, of which 3,771 callers were seeking treatment and 2,993 callers were seeking information only. Of the 3,771 seeking treatment, 622 were referred to Arkansas Tobacco Cessation Network (ATCN) for treatment and the rest received treatment over the telephone. The twelve-month quit rate is 15.21%.
- The SOSWorks Fax-back Referral Program in FY 07 received 4,545 referrals.
- The Provider Education Program (PEP) trained 1,331 providers.

- The Arkansas-Tobacco Cessation Network (ATCN) treated 1,498 participants. The twelve-month quit rate is 14.29%.
- The Smoke-Free Workplace Assistance Program (SWAP) has visited ninety-five facilities and affected the work environments of 46,150 employees.

### **Media & Public Relations**

The TPCP's statewide tobacco counter-marketing campaign, conducted by CJRW, is known as Stamp Out Smoking (SOS). Through a contract, CJRW effectively implements the SOS media campaign which emphasizes preventing youth initiation, tobacco cessation, and eliminating second-hand smoke. These messages are strategically designed to target specific demographics through grassroots efforts as well as various media types such as print, television, radio, and internet. SOS has been instrumental in building favorable outcomes through its effective tobacco counter-marketing campaign. Some of this quarter's activities and grassroots efforts included:

- Recording of a voiceover for the ATCB Interactive Training Tool. The tool will be used to help business owners identify underage consumers and discern the best course of action to deal with the sale and distribution of tobacco products.
- Production of certificates with frames for the winners of the SOS Drama Contest. The winning concept was selected for inclusion in the 2007-2008 SOS advertising campaign, but it had to be reproduced. The students from Conway High School were invited to the video shoot, and they assisted in the creative direction of the spot. The students also received the opportunity of learning the steps in the professional production of a television spot.
- Production of a celebrity thirty-second TV spot for the Hispanic campaign. The spot featured Padre Alberto who reaches millions of homes throughout the world each day with his television and radio talk shows, newspaper advice columns, and his self-help book. He is also the General Director of Pax Catholic Communications (home of Radio Peace in Miami), which is a media organization dedicated to using the latest technologies in bringing a message of faith, hope, and love to today's world. Padre Alberto has universal Hispanic appeal.
- Sponsorship of Juneteenth in Little Rock. The sponsorship included promotional advertisements on area radio stations, signage at the event, and logo inclusion on Juneteenth program booklets and the back of event tickets.
- Sponsorship of Cinco de Mayo in DeQueen, Little Rock, and Russellville. In Little Rock, SOS had two booths where collateral materials and literature were distributed. Also, a rock-climbing wall was set up as a gift from SOS to the community. Papa Rap performed at the event, singing his famous Think Before You Stink rap. In Springdale, SOS had one booth and a performance by Papa Rap. Finally, DeQueen and Russellville had booths where literature and collateral materials were distributed.
- Sponsorship of Riverfest in Little Rock. The sponsorship included considerable SOS brand inclusion in Riverfest brochures and promotional items, as well as tents where event attendees could visualize the effort and receive information about tobacco cessation.

Also, in partnership with the Arkansas Travelers and the ADH Oral Health Branch, SOS implemented the following radio rotation at the Traveler's home games and in radio outlets:

- Once per game during all 70 Traveler home games at Dickey-Stephens Park in 2007, SOS presented a thirty-second (:30) Public Service Announcement via videotape on the new outfield scoreboard's video screen located in the middle of the scoreboard.

- Two weeks of radio spots were placed for Stamp Out Spit in the counties of Pope, Van Buren, Conway, Garland, Polk, Howard, Sevier, Hempstead, Ouachita, Bradley and Drew.

### **Minority Initiatives**

The TPCP has continued its efforts in eliminating tobacco related health disparities throughout Arkansas. The TPCP has begun to revise its Strategic Plan for Eliminating Health Disparities; staff members have received training from the CDC and have begun to assemble a work group. This work group will attend a series of meetings that will allow members from the targeted disparities groups to offer insight as to how TPCP may better target the population they represent. The work group is compiled of representatives of populations often overlooked as TPCP implements its education efforts. A few of the populations the work group has targeted include: individuals with disabilities; rural communities; gay, lesbian, bisexual and trans-sexual (GLBT) citizens; incarcerated individuals; English as a second language (ESL) citizens; and military personnel.

During this quarter, TPCP completed the inaugural push to educate college students across the state with its Collegiate Tobacco Prevention Initiative through the Oxygen Project Campaign. The Oxygen Project campaign is designed to target college-aged students ages eighteen to twenty-four for the purpose of reducing and eliminating tobacco usage among this population. The Oxygen Project Campaign visited thirteen campuses throughout the year. The visits for this quarter have included John Brown University (Siloam Springs), University of Arkansas at Monticello (Monticello), Arkansas State University-Main campus (Jonesboro), and University of Arkansas at Pine Bluff (Pine Bluff). The TPCP plans to collaborate with the community coalitions to both continue and expand the mission and outreach of the Oxygen Project.

The TPCP continued to educate ministerial alliances regarding Act 13 as well as Act 8. TPCP has begun to do more work through the African American churches and views this method as a viable means to educate many citizens of the community that may otherwise be inaccessible. During this quarter, the coalitions collaborated with local churches to disseminate information on the Clean Indoor Air Act as well as cessation services, such as the SOSQuitline and the SOSWorks Fax-back referral program. Participants were also educated on the complain process for establishments not in compliance with the Clean Indoor Air Act and empowered to be champions on behalf of the act.

The University of Arkansas at Pine Bluff (UAPB), Minority Initiative Sub-Recipient Grant Office (MISRGO) funded eighteen community coalitions during the past fiscal year. These eighteen coalitions were given the task of working with minority populations to educate them on reducing youth access; the ill effects of tobacco and the harm caused by second-hand-smoke; decreasing advertising and promotion of tobacco products; and promoting the utilization of cessation resources. During this quarter the MISRGO office collaborated with TPCP staff in preparation for the new fiscal year. Members of the offices met to discuss both the similarities and differences of the programs and their needs.

The MISRGO also has continued its collaborative efforts with the UAPB Addiction Studies program to match students with coalitions. The Addiction Studies program offers its students a Master's Degree in Addiction Studies. The collaboration of the two matches the students with coalitions in an effort to increase the capacity and knowledge of both, through data collection, evaluation, and practical experience.

## Surveillance & Evaluation - Adults

Midyear data collected for the 2007 Arkansas Behavioral Risk Factor Surveillance System (BRFSS) shows a decrease in the number of adults who were current smokers compared to 2006 (Figure 1). BRFSS, the world's largest continuously-conducted telephone survey, is a major source of prevalence of chronic disease risk-behaviors among adults aged eighteen years or older in the United States. Results of the first six monthly samples collected in 2007 and processed by the CDC's Behavioral Surveillance Branch (BSB) indicates the percentage of current adult smokers in Arkansas has reached a low of 21.5%, as compared to 23.7% in 2006, a decline of 9%. Although these results are preliminary and only represent data collected for the first half of 2007, both the direction and magnitude of change are promising.

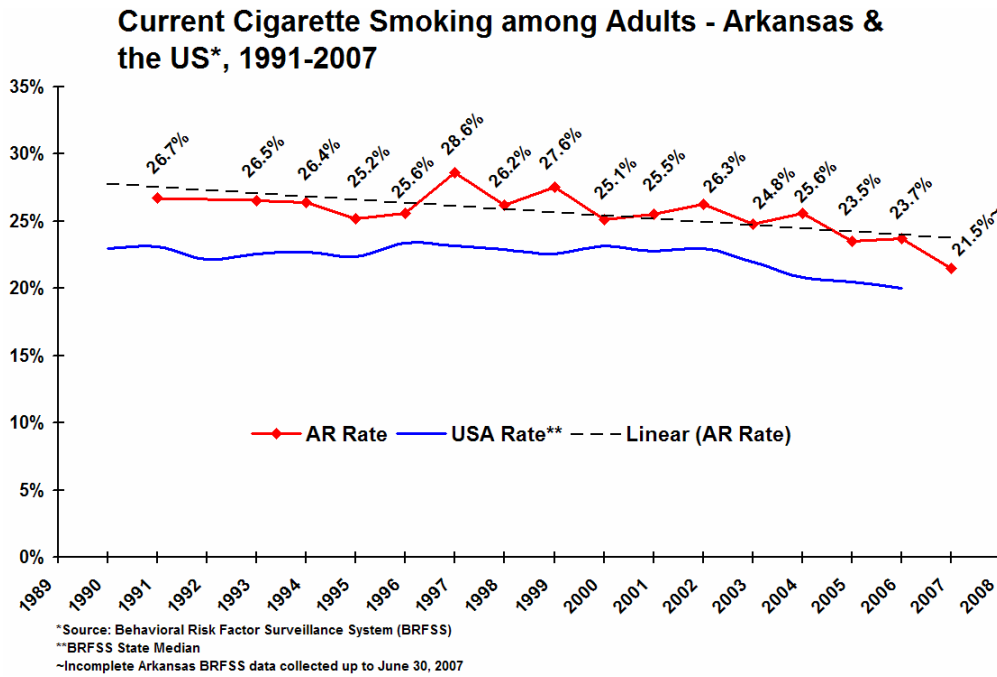


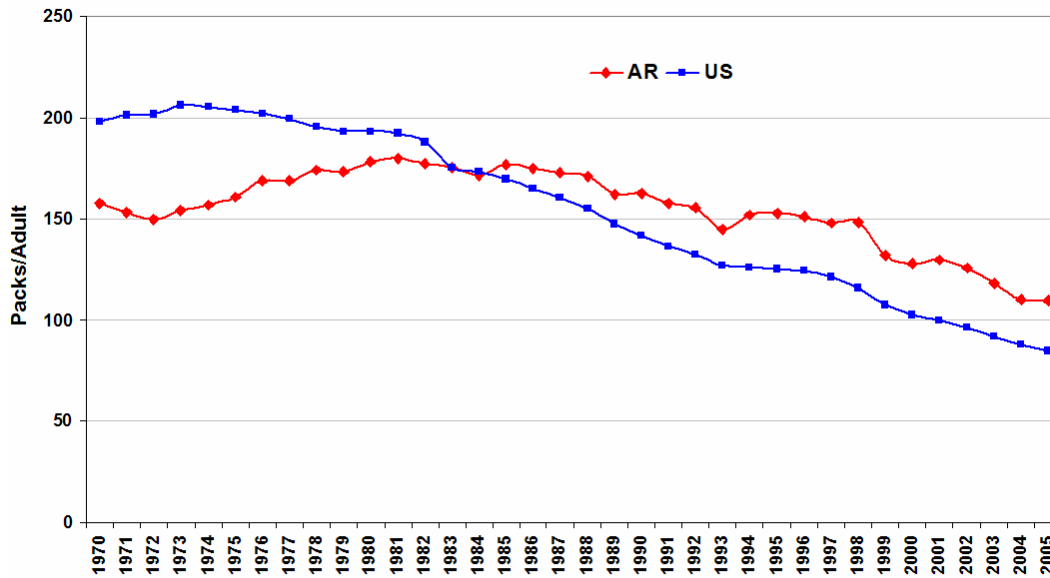
Figure 1

## Cigarette and Smokeless Tobacco (SLT) Sales and Consumption

Although cigarettes are the most prevalent type of tobacco product consumed, there has been a consistent downward trend in cigarette consumption statewide and nationally over the past several years (Figure 2). Meanwhile, consumption of SLT products has been increasing nationwide over the last decade (USDA, 2004).

In order to examine SLT sales and trends in Arkansas, the program is in the process of purchasing SLT sales data for 2004, 2005, and 2006 from AC Nielsen's Scantrack Information System, which collects point-of-sale data based on the scanning of product UPC codes. AC Nielsen receives information weekly on a category basis from different types of outlets, including supermarkets (with sales that gross over 2 million dollars, accounting for 96% of food stores), drug stores (with sales that gross over 1 million dollars, accounting for 95% of drug stores), convenience stores (100% of convenience stores as defined by the National Association of Convenience Stores), as well as sales data from Wal-Mart and other mass merchandisers. Results are expected to be released in the 1st quarter of FY 2008.

**Trends in annual per capita adult cigarette consumption in Arkansas\* and the United States\*\*, 1970–2005**



\* 1970-2000: Orzechowski & Walker. The Tax Burden on Tobacco. Historical Compilation, Vol. 37, 2002. Arlington, VA: Orzechowski & Walker; 2003. 2001-2005: Arkansas Department of Finance and Administration, Division of Special Taxes.  
 \*\* United States Department of Agriculture (USA), Economics, Statistics and Market Information System. Available at: <http://usda.mannlib.cornell.edu/MannUsda/viewDocumentInfo.do?documentID=1389>

Figure 2

### Youth

The Arkansas Comprehensive Tobacco Control program has completed data collection for the 2007 statewide school-based Youth Tobacco Survey (YTS). As is the case in all population-based surveillance systems, scientific integrity of the YTS is dependent on school participation. The program has achieved satisfactory school participation rates - above CDC's minimum - in both middle and high school samples (Table 1). A comprehensive youth tobacco surveillance summary report based on data collected in 2007 Arkansas YTS will be released in the fall of 2008.

**Table 1. 2007 Arkansas YTS - Final School Participation Status**

| Frame          | Selected | Participated | Refused | School Response Rate |
|----------------|----------|--------------|---------|----------------------|
| Middle Schools | 55       | 42           | 13      | 76.4%                |
| High Schools   | 55       | 43           | 12      | 78.2%                |

### Quality Management

TPCP has designed and implemented a new Quality Management (QM) process as recommended by RAND Corporation in 2006. TPCP set a goal to have the plan in place before the beginning of the new fiscal year. The program worked with the Center of Health Advancement's, Quality Management Section and formed an internal team to develop a method of evaluating the success of its various contractors as well as grantees. During the fourth quarter, refinements were done to the QM tools that were created by using the deliverables listed in the agreement and/or work plan that each contractor or grantee submitted to TPCP. A summary report of the fourth quarter QM results will be forwarded to the Advisory Committee once it is completed.

## Medicaid Expansion Program

The goal of the Medicaid Expansion program is to create a separate and distinct component of the Arkansas Medicaid Program that improves the health of Arkansans by expanding health care coverage and benefits to specific populations.

### Program Progress

#### Pregnant Women Expansion

- Increased the income eligibility limit from 133% to 200% of the federal poverty level
- Program implemented November 1, 2001
- Cumulative number of program eligibles – 

|                  |                                |
|------------------|--------------------------------|
| <b>July</b>      | <b>10,970</b>                  |
| <b>August</b>    | <b>11,133</b>                  |
| <b>September</b> | <b>11,290 (2,868 minority)</b> |

#### Hospital Benefit Coverage

- Increased the number of benefit days from 20 to 24 and decreased the co-pay on the first day of hospitalization from 22% to 10%.
- Program implemented November 1, 2001

#### 65 and Over Expansion (AR Senior)

- Incrementally increase coverage to the 65 and over population
- Implemented November 1, 2002 at 75% of QMB Level
- Increased to 80% of QMB Level effective January 1, 2003
- Current program participants – 

|                  |                                 |
|------------------|---------------------------------|
| <b>July</b>      | <b>4,493</b>                    |
| <b>August</b>    | <b>4,564</b>                    |
| <b>September</b> | <b>4,584 (1,324 minorities)</b> |

#### Age 19 to 64 Expansion (ARHealthNet)

- This population will be covered through a federal waiver program which provides eligible small employers with health coverage for employees.
- The ARHealthNet Program was implemented in January 2007.

#### Program Description

Every 12 months ARHealthNet will cover the following:

- *7 Inpatient Days Per Year*
- *2 Major Outpatient Services per Year, including emergency room and major services performed in the office.*
- *6 Physician Office Visits Per Year*
- *Two Prescriptions Per Month*
- *Maximum Annual Benefit of \$100,000*
- *Renewable each 12 months*

Deductible and Co-Insurance for ARHealthNet

- \$100 annual deductible (does not apply to office visits & Rx)
- After deductible, 15% co-insurance will be required
- \$1,000 maximum out of pocket annually, including deductible
- NovaSys Health providers must be used for benefits to be paid (including ER)
- Ongoing discounts apply after benefits are exhausted

#### Pharmacy Benefits for ARHealthNet

- Two Monthly Prescriptions
- Subject to Co-pay (but not deductible)
- \$5 Generic
- \$10 Brand Formulary
- \$30 Brand Non Formulary
- Program administered by Express Scripts
- Wide choice of pharmacies (no mail order)

|                               |                  |              |
|-------------------------------|------------------|--------------|
| • Current program enrollees - | <b>July</b>      | <b>598</b>   |
|                               | <b>August</b>    | <b>736</b>   |
|                               | <b>September</b> | <b>1,468</b> |

#### Expenditures for July 1, 2007 through September 30, 2007 and Proportion of Leveraged Medicaid Dollars

|                            | <b>Total</b>       | <b>Tobacco</b>     | <b>Federal</b>     |
|----------------------------|--------------------|--------------------|--------------------|
| <b>Pregnant Women</b>      | \$1,159,724        | \$ 308,834         | \$ 850,890         |
| <b>In-Patient Hospital</b> | \$1,915,013        | \$ 509,968         | \$1,405,045        |
| <b>ARSeniors</b>           | \$1,487,550        | \$ 396,135         | \$1,091,415        |
| <b>ARHealthNet</b>         | <u>\$ 229,945</u>  | <u>\$ 60,627</u>   | <u>\$ 169,318</u>  |
| Sub-Total Program          | \$4,792,232        | \$1,275,564        | \$3,516,668        |
| <b>Administration</b>      | <u>\$ 236,312</u>  | <u>\$ 118,156</u>  | <u>\$ 118,156</u>  |
| <b>Total</b>               | <b>\$5,028,544</b> | <b>\$1,393,720</b> | <b>\$3,634,824</b> |

#### Important Events that have Impacted the Program this Quarter:

- Enrollment in the *ARHealthNet Program* has increased following the outreach campaign last quarter. NovaSys Health, the plan administrator, and the Department of Human Services will continue efforts to inform eligible employers about the benefits of this new program.
- The ARSenior Program continued to experience caseload increases each of the three months in this quarter.
- It should be noted that the decrease in Inpatient Hospital expenditures from Quarter 4 of 2007 to Quarter 1 of 2008 is due to a rate increase that was implemented at the end of last fiscal year. Retroactive payments for 2007 were paid in the last quarter of the year resulting in the high expenditure level.

#### Steps for Continuous Quality Improvement:

Outreach activities continue to focus on the promotion of the new *ARHealthNet Program*.

## Arkansas Minority Health Commission (AMHC)

The Arkansas Minority Health Initiative mandates that the Arkansas Minority Health Commission (AMHC) establishes and administer screening, monitoring and treatment of hypertension, strokes and other disorders that disproportionately affect the minority groups of Arkansas.

The goals of the Arkansas Minority Health Commission are:

- To increase awareness of hypertension, strokes and other disorders that are disproportionately critical to minorities by utilizing different approaches that include but are not limited to the following: advertisements, distribution of educational materials and providing medication assistance materials for high risk minority populations.
- To provide screening or access to screening for hypertension, strokes and other disorders that are disproportionately critical to minorities and to provide this service to any citizen within this state regardless of racial/ethnic background.
- To develop intervention strategies to decrease hypertension, stroke and other disorders and their complications that disproportionately target minority populations including but are not limited to the following: smoking cessation, health education programs, weight loss, promoting a healthy lifestyle and treatment of hypertension with cost-effective medications as well as case management for patients in these programs.

### Program Progress

*Goal 1: To increase awareness of hypertension, strokes and other disorders.*

The AMHC is in the process of redefining and eventually restructuring our Initiated Act related programs, with emphasis on promoting increased access to care, rather than spending the majority of funds to directly assure participant treatment. These programs will focus on connecting individuals to already existing health resources, facilitating the development of policy to increase access to treatment, increasing prevention activities in the state, and facilitating the development and translation of research that can inform the development of public health programs.

Examples of the types of programs that are currently being implemented include:

- a) Health education media campaign to increase the lay communities' awareness of proper blood pressure measurement technique. We have supplemented a mini-grant from the Cardiovascular Health Program to develop a public service announcement radio ad about the 6 steps for being sure that your blood pressure is being measured correctly. This ad has now been developed with different voices representing the African American and the majority Caucasian communities, for simultaneous use on multiple radio stations that target minority and majority racial/ethnic group listeners.
- b) Promotion of exercise and nutrition lifestyle change in minority communities (Example: Eating and Moving for Life programs, and Train the Trainers for churches participating in the "Southern Ain't Fried Sundays" and the Active for Life physical activity programs)

c) Implementation of the population-based representative examination surveys

ARCHES: As part of our mandate to develop databases on hypertension, we have continued our support for the ARCHES Study, a state-wide representative examination survey partially funded by a grant from the CDC to the Arkansas Department of Health's Cardiovascular Health Program in July 2005. The AMHC provides in-kind salary support for Dr. Jones' participation in the study, and 25% salary support for Dr. Namvar Zohoori, the ARCHES study PI. The study is in the implementation phase now, and we have 473 completed surveys, representing 31% of our planned 1500 participants. There are addition 317 awaiting scheduling for an interviewer visit. This study is expected to provide critical information about the prevalence of cardiovascular disease risk factors throughout the state, with an emphasis on comparing prevalence rates between African Americans and Caucasians.

MESH: The Marianna Examination Survey on Hypertension (MESH) is a population based representative household examination survey of blood pressure and cardiovascular disease risk factors in adults in Marianna, AR. It was initiated in June 2005 and completed May 2007. MESH originated as an effort to assess the rate of hypertension, those at risk for cardiovascular disease, diabetes and stroke in the city population of Marianna focusing on diagnosed as well as undiagnosed cases.

The eligible subjects were randomly selected and asked to complete a household examination survey, as well as give blood and urine for testing related to hypertension, kidney disease and diabetes Repeat measurement of blood pressure, as well as measurement of height and weight was done at the central location. Blood tests included lipid panel, glucose, hemoglobin A1C, hematocrit, serum creatinine and serum cystatin C, CRP. Urine tests included urine dipstick, and urine albumin to creatinine ratio.

Enrollment of new participants in the study ended in October 2006. We have a total of 452 completed household questionnaires. Scheduling for labs ended May 2007; with a total of 262 collected.

d) School-based blood pressure screening for children. Development of a draft plan for a second round of blood pressure screening in children is ongoing with Dr. Ilyas at Arkansas Children's Hospital. We also continue to get requests for the laminated diagnostic charts for measurement of blood pressure in children.

AMHC has continued to sponsor the second annual "Southern Ain't Fried Sunday's" (SAFS) program which encourages healthy eating by offering healthy substitutions to traditional African American recipes and is being done in conjunction with the American Cancer Society's "Active for Life" program which encourages physical activity. The Arkansas Minority Health Commission (AMHC) is currently in the process of planning the 2007 "Southern Ain't Fried Sundays" program. We have received \$47,000 in sponsorships for 2007. The sponsors for this year are Pfizer, American Cancer Society, St. Vincent, Tyson and Eli Lilly.

### Southern Ain't Fried Sundays

|            | Churches | Participants | Counties |
|------------|----------|--------------|----------|
| 2005       | 133      | 9000         | 21       |
| 2006       | 164      | 11000        | 30       |
| % increase | 23.3     | 22.2         | 42.8     |

Since our last report the Governor has appointed a new Executive Director, Dr. Wynona Bryant-Williams, to head the Arkansas Minority Health Commission. To further increase the awareness of hypertension, strokes and other disorders that disproportionately affect the minority community the Executive Director, Dr. Wynona Bryant-Williams spoke at two invited events including the AMDPA Scientific Session in Little Rock on June 28, 2007 and at the African Women's Health Project in Hot Springs on June 30, 2007. A total of 110 participants attended the two events. The Executive Director also was invited to be interviewed on Power 92.3 radio station regarding her appointment to the Arkansas Minority Health Commission

Uncontrolled hypertension or high blood pressure and obesity are known factors leading to stroke and heart attack and the Arkansas Racial & Ethnic Health Disparity Study prioritized list documents that African Americans are more than 45% more likely to die from stroke than their Caucasian counterparts. The Arkansas Center for Health Improvement has documented the increasing rates of obesity among the children of Arkansas under the BMI Initiative passed by the Arkansas Legislature. To increase awareness Dr. Jones has gave the following presentations:

- a. Gave a training workshop on blood pressure measurement to new ARCHES interviewers (January 2007).
- b. Dr. Jones is an appointed member of the state-wide Acute Stroke Care Task Force established in November 2006, which meets monthly to make recommendations to the State Board of Health and to develop standards and policy recommendations to increase public awareness, improve professional development, and ensure that stroke treatment and rehabilitation services are available to Arkansas citizens.

Participates in the Heart Disease and Stroke Workgroup monthly meetings sponsored by the Cardiovascular Health Program of the Division of Health in the Arkansas DHHS. Other activities to increase awareness include the development of two new "Minority Health Today" shows for the months of January and March highlighting Cervical Cancer and Vitillgo.

Advertisements were purchased with KHLR Radio highlighting the "Minority Health Today" television show. The KHLR radio broadcasts out of Little Rock with statewide coverage and shares a common target population with AMHC, which are African Americans and Hispanics.

Full page ads were purchased with "The News Stand" and with the "J. Kelly Referral" directory for the months of January, February and March highlighting the Southern Ain't Fried Sunday's program and the "Minority Health Today" television program.

Presentations made during this quarter on behalf of the Arkansas Minority Health Commission include:

- Presentation by Dr. Ochoa to the 4th year medical students at UAMS in Little Rock on health disparities and cultural competencies.

***Goal 2: To provide screening or access to screening for hypertension, strokes and other disorders that disproportionately affect minorities we have:***

Participated in a total of 21 health fair events across the state including 6 events where AMHC acted as a major sponsor. The total attendance for all 21 health fairs was 2,433 participants and 1,676 screenings (411 Blood Pressure Checks, 348 Glucose Checks, 345 Cholesterol Checks, 55 Prostate Exams, 150 HIV, 23 Breast Exams, 150 Mammogram Registrations, 80 Dental Checks, 60 Immunizations, 24 Blood Donations and 30 Vision Screenings). Approximately 6,659 pieces of health related literature were handed out to attendees.

The Arkansas Minority Health Commission provided health related information to call-ins regarding but not limited to hypertension, strokes and other disabilities that disproportionately target the minority populations:

- 6 calls for health related literature
- 4 calls regarding collateral assistance for health related events
- 7 calls needing further referral to other agencies/organizations
- 5 calls regarding "Southern Ain't Fried Sunday's"

Keeping in mind that Arkansas is currently experiencing an increase in its minority populations, especially Hispanic and it is well known that nutrition plays a key role in the development of certain types of cancers and other disease and that. It is with these factors in mind that AMHC continues to fund the Eating and Moving for Life program in Mississippi and Sevier County. To date for this fiscal year 72 participants have been enrolled in Sevier and 59 have been enrolled in Mississippi County. Of the new enrollees 38% and 39% are overweight, 38% and 54% are obese, 19% and 58% have Hypertension, 24% and 19% have diabetes and 24% and 32% have elevated cholesterol in Sevier County and Mississippi County respectively.

***Goal 3: To develop intervention strategies to decrease hypertension, strokes and other disabilities that disproportionately affect minorities.***

Continued to provide in-kind salary support for Dr. Jones, the AMHC Hypertension Medical Director, and Dr. Namvar Zohoori, for activities directed towards the development of the Arkansas Cardiovascular Health Examination Survey (ARCHES), a state-wide representative examination survey funded by a grant from the CDC to the Arkansas Department of Health and Human Services, Division of Health's Cardiovascular Health Program in July 2005. Continued to provide in-kind salary support for Dr. Jones, the AMHC Hypertension Medical Director, and Dr. Namvar Zohoori, for activities directed towards the development of the Arkansas Cardiovascular Health Examination Survey (ARCHES), a state-wide representative examination survey funded by a grant from the CDC to the Arkansas Department of Health and Human Services, Division of Health's Cardiovascular Health Program in July 2005.

ARCHES consists of a questionnaire, a home examination (including height, weight, waist circumference and blood pressure measurements), and a battery of some 54 blood and urine tests, and will provide critical information about the prevalence of cardiovascular disease risk factors throughout the state, particularly for hypertension and cholesterol, with an emphasis on comparing prevalence rates between African Americans and Caucasians. Activities to date, include: 1) development and finalization of sampling plan; 2) development of survey instruments and other materials and laboratory elements for the study; 3) all protocols for the study; 4) all aspects of IRB review and approval, including development of the logistics plan; 5) two training sessions, one in June 2006 and one in January 2007, for a team of 15 interviewers; 6) start of field work in June 2006; 7) reformulation of recruitment plan in 12/06-01/07 for more rapid recruitment and interviewing. To date, some 512 subjects have been examined and interviewed and an additional 350 have been recruited pending appointments and interviews. The study will eventually enroll 1500 participants by June 2007.

As documented in the Arkansas Racial & Ethnic Health Disparity Study, African Americans in Arkansas are at a much higher risk of dying from various disease states, such as heart disease, stroke, and diabetes, than their Caucasian counterparts. The Executive Director, Judy Smith, has continued to be actively involved with various organizations and their efforts to eliminate health disparities in Arkansas, including the Arkansas Cervical Cancer Task Force, the Central Arkansas Partnership for Health Promotion, a member of SIG and the state cardiovascular workgroup.

## Program Quarterly Funding Summary

| Program Name        | Appropriation Amount | FY07 Available Funding | Expenditures 1st Quarter | Fund Balance |
|---------------------|----------------------|------------------------|--------------------------|--------------|
| AAI                 | \$2,329,781          | \$1,673,187            | \$356,596                | \$1,280,591  |
| ABI                 | \$6,260,008          | \$4,264,733            | \$1,402,774              | \$2,861,959  |
| COPH                | \$3,368,364          | \$2,415,281            | \$609,260                | \$1,806,021  |
| Delta AHEC          | \$2,574,143          | \$1,610,187            | \$432,671                | \$177,516    |
| TPEP                | \$15,156,056         | \$21,386,576           | \$3,414,901              | \$17,971,675 |
| Medicaid Expansion* | \$16,112,408         | \$51,131,135           | \$1,393,720              | 49,37,415    |
| Minority Health     | \$1,486,914          | \$1,486,914            | \$223,467                | \$796,150    |

\* The final Carry Forward of Tobacco Funds from SFY 2007 into SFY 2008 after closeout was \$37,326,750. The difference in Tobacco Fund expenditures from Quarter IV of 2007 to Quarter I of 2008 reflects the impact of a rate change for Inpatient Hospital charges. The rate was applied retroactively for SFY 2007 and paid in the last quarter of the year.



*The ATSC Quarterly Report is compiled by the  
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