



Welcome from the State Health Commissioner



*State Health Commissioner
Jerome Adams, M.D., M.P.H.*

Hello to all my fellow Hoosiers! Hope you all are staying warm and healthy during this winter season.

As you may be aware, we have been hit hard with the flu this year in Indiana. Sadly, we have lost more than 120 Hoosiers due to flu and its complications. Read page 2 for more information about the flu.

Also in the news is measles. There is a widespread outbreak of measles across the nation and several surrounding states have had cases. Indiana does not have any cases of measles at this time. However, measles is an extremely contagious disease so check with your healthcare provider to make sure you and your family are up-to-date on your vaccinations. Check out page 4 for the Ask the Expert article with Dr. Joan Duwve, the Indiana State Department of Health Chief Medical Consultant, as she answers questions regarding measles.

Last month, the State Health Department, along with First Lady of Indiana Karen Pence, announced the launch of Labor of Love, a public education initiative to reduce infant death in the state. Indiana has one of the highest rates of infant death in the country. This campaign works to address this issue by providing education and awareness to specific populations, such as all women, including pregnant women and new and

expectant parents. More information about the campaign is on page 3.

Indiana also has a high rate of tobacco use among pregnant women. An innovative program, Baby and Me Tobacco Free, is now available at 12 locations throughout the state. Read page 6 for how the program works and its incredible success rate.

In January, Governor Pence announced that the Healthy Indiana Plan (HIP) 2.0 was approved by the federal government to offer access to quality health care to 350,000 uninsured Hoosiers. Learn more about this exciting development on page 2.

Make sure to read the article on page 7 as it is a first-hand account of a public health professional working in West Africa during the Ebola crisis. Michelle Sandoval, the Centers for Disease Control and Prevention (CDC) Chronic Disease Epidemiology Assignee, was in West Africa for over four weeks in November and December.

Regards,

Jerome Adams, M.D., M.P.H.,
State Health Commissioner

Stay Connected with the State Health Department...



Indiana Flu Season Proving to be Severe

In the midst of the deadliest flu season in 10 years, State health officials are hoping more Hoosiers will get vaccinated against influenza in the future.

In Indiana, 124 flu-related deaths have been reported for the 2014/2015 flu season, an increase from 70 deaths during the 2013/2014 season and the highest number of flu-related deaths in at least 10 years.

The Centers for Disease Control and Prevention (CDC) announced recently that the current flu vaccine will reduce an individual's risk of getting the flu by about 23 percent, lower than in years past. However, State health officials say that getting vaccinated can not only help prevent flu, but help reduce the length and severity of the illness for those who do get sick. Hoosiers who get vaccinated now will have some protection for the remainder of the flu season, ending in April, and into the next flu season, beginning in October. Everyone over six months of age should receive a flu vaccine annually.

Although anyone can get the flu, some people are at higher risk of complications related to the flu, sometimes leading to hospitalization and even death. High risk individuals include pregnant women, young children (especially those younger than two years), people older than 65 and people with chronic illnesses and/or compromised immune systems.



Symptoms of the flu include:

- Fever of 100 degrees Fahrenheit or greater
- Headache
- Fatigue
- Cough
- Muscle aches
- Sore throat

Call a health care provider right away if you have flu symptoms. If it is flu, starting on antiviral medications early can help reduce the severity and length of illness.

For more information on the flu, visit www.StateHealth.in.gov.

Healthy Indiana Plan (HIP) 2.0

Governor Mike Pence announced in late January that the State has received approval from the federal government to use an updated version of the consumer-driven Healthy Indiana Plan known as HIP 2.0 to offer access to quality health care to an additional 350,000 uninsured Hoosiers.

“Since the beginning of my administration, we have worked hard to ensure that low-income Hoosiers have access to a health care plan that empowers them to take charge of their health and prepares them to move to private insurance as they improve their lives,” said Governor Pence. “This has been a long process, but real reform takes work.”

With this approval, Indiana will end traditional Medicaid for all non-disabled Hoosiers between 19 and 64 and will continue

to offer the first-ever consumer-driven health care plan for a low-income population. In addition, the State will reform its traditional Medicaid program by increasing reimbursement for healthcare providers, which will improve access to care.



The State negotiated the rate increase as part of its agreement with the Indiana Hospital Association, which will help fund the Healthy Indiana Plan so it can be offered at no additional cost to taxpayers.

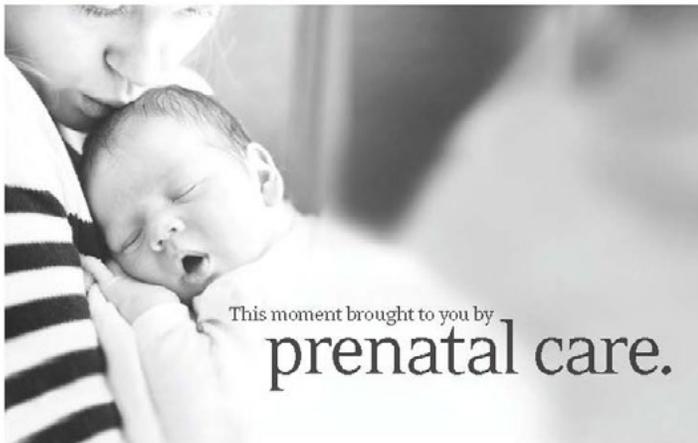
For information on how to enroll in the Healthy Indiana Plan, visit www.HIP.IN.gov or call 1-877-GET-HIP-9.



Labor of Love Campaign Focuses on Saving Infants

In January, First Lady of Indiana Karen Pence and the State Health Department announced the launch of a new infant mortality public awareness campaign called Labor of Love—Helping Indiana Reduce Infant Death. Indiana consistently ranks as one of the states with the highest rates of infant mortality, which is defined as the death of a baby before his or her first birthday.

“It is a privilege to be able to partner with the Indiana State Department of Health, Indiana hospitals, and health care workers all over our state to promote the new initiative, Labor of Love,” said Mrs. Pence. “Labor of Love gives all pregnant women in Indiana the support they need to give birth to healthy babies. The initiative also focuses on education to ensure more Hoosier babies survive their first year of life by promoting simple measures such as safe sleep and calling the help line by dialing 211. Together we can make a real difference in reducing infant mortality in Indiana.”

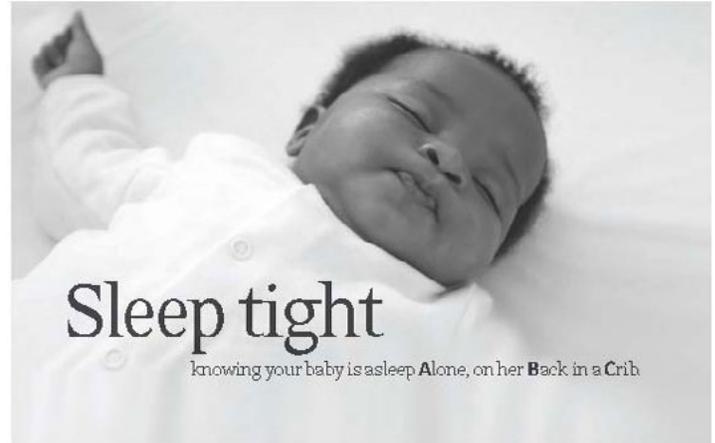


In 2011, according to America’s Health Rankings, Indiana ranked 46th nationally for infant mortality with a rate of 7.7 infant deaths for every 1,000 live births. The national infant mortality rate for the same year was 6.1. In 2012, the state ranked 39th, with an infant mortality rate of 6.7. From 2003 through 2012, an average of 654 infants died each year in Indiana.

The goal of the Labor of Love campaign is to connect women and new parents with the resources they need to give their babies the best chance at life.

The campaign focuses on the importance of:

- Early and regular prenatal care;
- Safe sleep practices;
- Avoiding tobacco, drugs and alcohol before, during and after pregnancy; and
- Breastfeeding

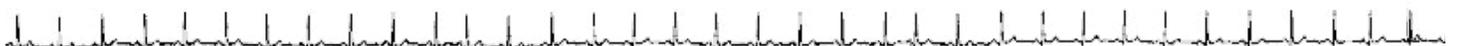


The messages encourage women who are pregnant or planning to get pregnant, and all expectant parents, to call 2-1-1 or visit www.LaborofLove.in.gov to find resources, including tips for a health pregnancy, a physician search, breastfeeding resources and more.

The results of the [Indiana Data Analytics Report on Infant Mortality](#) were used to help guide the campaign. For example, the study identified lack of prenatal care as the top indicator for infant mortality in the state. As a result, the importance of prenatal care was the exclusive focus for the television and radio announcements.

The Labor of Love campaign was developed by the Indiana State Department of Health with the support of Riley Hospital at IU Health, March of Dimes Indiana Chapter, Help2Connect 2-1-1, Hirons & Company and others.

To learn more about Labor of Love, visit www.LaborofLove.in.gov and follow on Twitter at [@INLaborofLove](https://twitter.com/INLaborofLove).



Ask THE EXPERT



with Joan Duwve, M.D.
Chief Medical Consultant
Indiana State Department of Health

There is currently a multi-state measles outbreak linked to an amusement park in California. Indiana does not have any cases of measles.

What is measles?

Measles is a rash illness caused by a virus that spreads very easily from person to person.

What are the symptoms of measles?

People with measles often appear very ill. Early symptoms of measles include: runny nose, cough, sleepiness, loss of appe-

tite, fever, white spots inside the mouth on the cheek sides of the mouth (Koplik spots), sensitivity to light and conjunctivitis (pink eye). Around the fourth day of illness, the fever often goes up (often to over 101°F) and a blotchy red rash appears on the face or near the hair line and spreads downward and outward to the rest of the body.

How is measles spread?

Measles is spread in the air, or by contact with the nose or throat droplets of an infected person. This can happen when someone coughs or sneezes near someone else or when someone touches objects with nose or throat droplets on them, or when someone is in the same room as a person with measles. Measles is very contagious, and the virus can remain in the air for up to two hours. People with measles can spread the disease approximately four days before they even get a rash, and up to four days after the rash starts.

Who is at risk for measles?

Anyone who has not had two doses of measles vaccine given at the appropriate ages and intervals is at risk for measles. All people should have two age-appropriate doses of measles vaccine (usually MMR, the measles-mumps-rubella vaccine) by age six. Contact your healthcare provider if you are unsure if you have been vaccinated and/or if you have symptoms of measles. For more information about measles, visit www.state-health.in.gov.

Employees Lose Weight in Holiday Challenge

by Meganne Bunce, Chief of Staff Administrative Assistant

Beginning in November, the State Health Department Health and Wellness Council led the second annual State Health Department Holiday Challenge, which encouraged employees to maintain rather than gain weight during the holiday season. The challenge promoted a healthy lifestyle by asking participants to keep a log of fruits and vegetables consumed, as well as water consumption, during a six-week period. Participants were also encouraged to attend “lunch and learns” and participate in walking groups.

Employees who turned in all six weeks of food logs received an extra casual wear day at work. The Center for Deaf and Hard of Hearing won the challenge for the most participants and Erika Chapman, HIV Surveillance Coordinator, won the overall challenge. She chose the Nature Conservancy charity as the recipient of the enrollment fees from the challenge, which totaled approximately \$250.

The challenge had 42 people who participated and an overwhelming 95 percent were able to maintain and even lose weight during the holiday season. These statistics prove that maintaining weight can be a reasonable feat with only a few



important tips and tricks, such as keeping a food diary or chart, tracking fruits and vegetables consumed and participating in exercise programs.

Losing weight and maintaining weight can be far more difficult than people imagine. However, this Holiday Challenge was a step in the right direction and the Health and Wellness Council continues to encourage health and fitness through out the year with other activities, such as weekly yoga classes.

For tips on maintaining or losing weight, visit www.INshapeIndiana.org.





Spotlight on...

Indiana Rural and Critical Access Hospitals provide care for 1.89 million people. The Indiana State Office of Rural Health works to enhance the growth of public health services, funding sources and education opportunities for every Indiana rural resident.

The Office of Rural Health is a part of the State Health Department and works with local partners to create innovative models of care. They strive to reduce health disparities in rural communities by:

- Serving as a clearinghouse for information and innovative approaches to rural health services delivery.
- Coordinating state activities related to rural health in order to avoid duplication of efforts and resources.
- Identifying federal, state and nongovernmental rural health programs and providing technical assistance to public and private, nonprofit entities serving rural populations.
- Strengthening federal, state and local partnerships in rural health.
- Promoting recruitment and retention of a competent health care workforce.

As part of National Rural Health Day in November, the Office of Rural Health held a social media photo contest encouraging residents and public health professionals to post about and celebrate “The Power of Rural Indiana.”

Congratulations to the winner, Indiana University Health Tipton Hospital! When asked what “rural health” meant to them, they responded with the following:

Indiana State Office of Rural Health



Indiana University Health Tipton Hospital is the winner of the Rural Health Social Media Contest. Thanks to all who participated!

“When we think of ‘rural health’ in Tipton, we think of our strong community. Our photo captures just a percentage of our area businesses, healthcare workers, emergency responders, community members and local celebrities. Tipton is a strong community and it’s not just one organization or hero, it’s the entire community! #TiptonCommunityStrong #INRuralHealth”

For more information about rural health in Indiana, visit www.StateHealth.in.gov.

State Health Department Administrative Updates



Joey Fox became the Legislative Affairs Director in November. Prior to this position, he served as Special Assistant to Lt. Governor Sue Ellspermann, where he had the opportunity to travel to all 92 counties and coordinate the briefing process for Lt. Governor Ellspermann. Joey has also worked in policy work in code enforcement for the City of Indianapolis and he served as Chief of Staff for the City of Beech Grove. He is married, with a daughter named Maddie Jo and lives in Beech Grove.



J. David Hopper became the Local Health Department Outreach Division Director in December. He has extensive government experience as he currently serves as president of the Greenwood Common Council. He previously worked as assistant general counsel for Indiana’s lieutenant governor and has also served as an enforcement attorney with the Indiana Secretary of State.

He is an Indiana University law school graduate who will soon receive a Master of Health Administration from Indiana University.





Baby and Me Tobacco Free

by Carolyn Runge, Maternal Health Administrator

Indiana has consistently had one of the worst infant mortality rates in the nation and also a high tobacco use among pregnant women. In 2012, 16.5 percent of women in Indiana reported smoking during pregnancy, nearly two times the national average. Prenatal smoking leads to negative health outcomes for mothers and their babies; including an increased risk for premature births, low birth rates and sudden infant death syndrome (SIDS), all of which can lead to increased infant mortality and morbidity.

Beginning in October 2013, the State Health Department Maternal and Child Health Division piloted eight Baby and Me Tobacco Free program sites throughout Indiana, motivating pregnant women who smoke to quit during pregnancy.

The core program components include four prenatal sessions, monthly postpartum visits for up to one year, carbon monoxide (CO) testing at every visit and free diaper vouchers. Here is how it works: Pregnant women who smoke are referred to their local Baby and Me Tobacco Free program site and vol-

untarily enroll in the program. Each participant then attends four prenatal cessation counseling sessions, where they receive support to quit smoking as well as CO testing to verify that they have abstained from smoking. The mothers must have completely quit smoking by the third session in order to stay enrolled in the program. Following the birth of the baby, the mother continues to receive CO breath tests at monthly visits and if she remains tobacco free, qualifies to receive a \$25 voucher for diapers each month for up to 12 months postpartum. This voucher can be used to purchase any brand or size of diapers at Walmart or participating CVS locations.

The Baby and Me Tobacco Free program is an evidence-based program that has received national acclaim for its effectiveness. Results of the program nationally indicate a 60 percent quit rate among women enrolled at six-months postpartum. Thanks to the partnership with Anthem and CVS, the Baby and Me Tobacco Free program expanded in November 2014 and is currently offered at 12 Indiana locations. Only nine months into the program, more than 300 women were enrolled and results indicate almost a 70 percent quit rate to date. In addition to incorporating all national program standards, Indiana is piloting the inclusion of support partners as well. Each pregnant woman may choose one qualifying support person who also smokes to enroll in the program. This doubles the incentive for both parents to quit smoking, creating a healthy, smoke free home for the new family.

For questions about the Baby and Me Tobacco Free program in Indiana or to learn more, email crunge@isdh.in.gov



Ebola Response Journey in Sierra Leone and Guinea

by Michelle Sandoval, CDC Chronic Disease Epidemiology Assignee

The Ebola crisis in West Africa has been very personal to me. In July 2013, I worked in Liberia for three months on polio eradication activities. Liberia was a place with faith, hope, extreme poverty and visible wounds left from the civil war – burned down buildings, young men without hands or feet, a lack of basic services such as electricity, running water and no reliable health care system. As I was preparing to travel back to West Africa just a year after returning from Liberia, I found myself in the midst of chaos in a country with the worst Ebola outbreak in history. How was I going to prepare myself for this?

Immediately upon arriving in Sierra Leone, I knew I was in an Ebola infected country. As we disembarked the plane, we were directed to wash our hands with chlorine solution, handed health declaration forms and had our temperature checked. Sierra Leone was not the West Africa I had visited a year ago. I no longer saw the crowded streets filled with children and women with smiles across their faces, running up to sell merchandise to anyone who crossed their path. I saw fear, sadness and hopelessness. I saw signs bombarded all over the streets and on vehicles with Ebola messages that read, “Ebola is real” and “No touching.” What did “no touching” exactly mean? Soon after I arrived, I clearly understood that phrase.



Michelle Sandoval evaluates the temperature process at the Sierra Leone International Airport in Lungi

When I arrived at the hotel and was greeted by my colleagues, I naturally reached out to shake hands and they immediately looked at me very strange, like I had done something wrong. In a country where hugging, kissing and shaking hands is so important and culturally accepted, how were we going to comfort those who had lost a family member or a child who had lost a parent? Sierra Leone and Guinea had banned all physical contact and Christmas celebrations. For me this was very hard, as I was accustomed to greeting others with a handshake or a pat on one’s shoulder for comfort during a very difficult time. It was tough to see hospitals closed and abandoned because people are frightened about catching Ebola from other infected patients. Routine treatments and vaccines for other killer diseases such as malaria, typhoid, measles and cholera have stopped, as everyone is focused on Ebola.

(L-R): Centers for Disease Control and Prevention (CDC) Director Dr. Tom Frieden and Michelle Sandoval



As part of the CDC Ebola Response efforts, I spent three weeks in Sierra Leone and two weeks in Guinea on the Border Health Measures Team to provide technical support and guidance on exit and entry health measurements. Most of my days started at 5:30 a.m. and consisted of meetings, trainings, providing capacity around surveillance and data management and working with the Ministry of Health to enhance and straighten health screening measures at the airport and at other ports of entry. I snacked on protein bars for lunch and drank as much water as I could, because taking a food break was not always an option. My days ranged anywhere from 15 to 20 hours a day, often times, finding myself working well after midnight. Even though this was a tough assignment, the courage and hope of the people made me want to do more. It made me work harder and as efficient as I could. The people I worked with were incredibly welcoming and grateful that we were there to help.

I often felt like we were not getting anywhere and was frustrated because I couldn’t do more. Every day, I heard of a health care worker or a loved one who had lost the fight to Ebola and watched my in-country colleagues break down into tears. I saw health care workers seriously impacted and stigmatized. Nurses and physicians have been turfed out of their communities because of the widespread fear that after treating Ebola victims, they would carry the disease home. While visiting an Ebola Treatment Center in Guinea, I watched an ambulance pull up to remove two Guineans who had lost their fight to Ebola, and noticed a lonely toddler crying for his parents as a health care worker in full personal protective equipment bathed him. A memory now etched into stone because I witnessed him learning that his parents are the ones who died.

Despite all of the challenges, I am grateful for the opportunity and for the partnerships and relationships I have made in Sierra Leone and Guinea that will forever remain in my heart. I hope to return very soon and I am confident that together, we will win the fight against Ebola.





Awards

Karen Gordon and **Dr. Jennifer Brown**, Epidemiology Resource Center, have been nominated for a Food and Drug Administration group award for actively participating with the Kentucky Department of Health in the investigation and response to an exposure of lymphocytic choriomeningitis during May to June, 2014.

In December, **Amy Reel**, Public Affairs, received the National Public Health Information Coalition Dedicated Service Award for the Indiana MERS-CoV (Middle East Respiratory Syndrome Coronavirus) communication response.

Michelle Sandoval was selected as the 2014 recipient of the United States Public Health Service VADM Antonia C. Novello Award for her accomplishments to identify needs and improve access to health care among Hispanic and underserved populations and advance the mission of the Hispanic Officers Advisory Committee and the U.S. Public Health Service.

March

- 6 Northern Indiana Phlebotomy Training
jmadlem@isdh.in.gov
- 10 Indiana Long Term Care Leadership Conference
twhitson@isdh.in.gov
- 11 State Health Department Executive Board Meeting, tbarrett@isdh.in.gov
- 12 Central Indiana Phlebotomy Training, jmadlem@isdh.in.gov
- 16 Epidemiology Open House, araftery@isdh.in.gov
- 18 Spring Local Public Health Leadership Symposium, tbarrett@isdh.in.gov

Public Health
Happenings

(For more information about a specific event, please use the specific email address listed).

April

- 24 Southern Indiana Phlebotomy Training, jmadlem@isdh.in.gov
- 28-29 Public Health Nurse Conference, hsintek@isdh.in.gov
- 30 Biothreats 101 Hands On Workshop, jmadlem@isdh.in.gov

For more information on these and other state events, visit the State of Indiana events calendar at <http://www.in.gov/core/calendar.html>

The Indiana State Department of Health promotes and provides essential public health services.



Indiana State
Department of Health

Public Health Matters is a free publication that is published electronically every quarter by the State Health Department Office of Public Affairs. For questions, to submit an article or topic, contact Amanda Turney at aturney@isdh.in.gov.

To subscribe or unsubscribe to the newsletter, visit <http://bit.ly/publichealthmatters>. For more information about the State Health Department, visit www.statehealth.in.gov.

