

HEALTHY CITY THRIVING FAMILIES



A Quarterly Update from the City of Minneapolis Department of Health and Family Support

July - September 2007

Family Assistance Center – Response to the I-35W Bridge collapse

Immediately upon news of the I-35W Bridge collapse, the Minneapolis Department of Health and Family Support's (MDHFS) Management and Emergency Preparedness staff began coordinating the Family Assistance Center. The center operated from Aug. 1 until Aug. 11, supporting families who had relatives missing in the collapse. The center also hosted regular briefings on the recovery efforts from the Minneapolis Police Department, Hennepin County Sheriff's Office and the National Transportation Safety Board.

The Department of Health and Family Support was responsible for the overall coordination of the center and facilitating partner agencies' activities:

- The American Red Cross registered everyone who entered the site and provided the families with food, beverages and referrals to resources to meet the families' needs.
- The Minneapolis Police Department Chaplain Corps established relationships with all family members who visited the site, and they notified the next of kin when a victim's identity was confirmed.
- Hennepin County Behavioral Health provided licensed counselors for all family members.
- Officers from the Minneapolis Police Department and other jurisdictions secured the site to protect the families' privacy.

- A Hennepin County Sheriff's Office liaison provided a direct contact from the Sheriff's Office to give family members information and answer their questions.
- Medical Reserve Corps physicians and nurses were on-site in case of medical emergencies and to attend to minor medical issues.
- Public information officers from the Minnesota Department of Public Safety and Hennepin County worked with the news media to provide information and answer questions.
- The University of Minnesota Crisis Intervention Stress Management team supported staff as needed.

This complex and united effort went smoothly and was made possible by the thousands of combined hours of training for City departments and their partners.

MDHFS was also linked to the bridge tragedy as a funder of the Waite House Youth Program field trip. MDHFS sponsored the "Flava of Phillips Healthy Youth" program which included planting and maintaining a vegetable garden, cooking classes, nutrition classes and field trips. The school bus was returning from one of the weekly swimming field trips when the incident on 35W occurred. For more information about MDHFS' involvement in the bridge tragedy, contact Becky McIntosh at (612) 673-2884.

Youth violence prevention is a matter of public health

Responding to an upswing in injuries and death caused by juvenile crime over the last few years, the Department of Health and Family Support helped establish the 32-member Youth Violence Prevention Steering Committee to use a public health approach for preventing youth violence.

The committee's goal is to prevent youth violence by providing comprehensive solutions that address the complex issues causing youth violence. Reaching this goal requires broad collaboration among the community, policymakers and stakeholders. The steering committee is co-chaired by Mayor Rybak, Karen Kelly Ariwoola of the Minneapolis Foundation, and Ellen Lugar of the General Mills Foundation.

Continued on page 2

INSIDE HCTF

**SURVEY SHOWS NEED FOR BETTER
HEALTH CARE ACCESS FOR ASIANS AND
PACIFIC ISLANDERS**

PAGE TWO

**SEEN ON DA STREETS RECEIVES TWO
AWARDS**

PAGE THREE

**URBAN HEALTH AGENDA: COMPARING
MINNEAPOLIS WITH OTHER LARGE U.S.
CITIES**

PAGE THREE

HEALTHY CITY UPDATES

PAGE FOUR

Youth violence prevention from page 1

Since April 2007, the committee has been developing an action plan that addresses youth employment, out-of-school activities, school support, family support and criminal justice. The committee also identifies gaps in City and county community services, as well as policies and funding that affect youth crime. The action plan will include measures to evaluate progress.

Committee members have visited community-based programs working with youth, observing juvenile court proceedings, visiting incarcerated youth and hosting community forums and panels featuring input from young people. Youth voices have been heard and taken to heart.

The steering committee expects to present its Blueprint for Action to the City Council and Youth Coordinating Board in September 2007. For more information, contact Jan Fondell at (612) 673-5527.

The Minneapolis Department of Health and Family Support (MDHFS)

VISION:

Healthy residents, communities and environments.



MISSION: to provide leadership in meeting the unique needs of our urban population by engaging partners in promoting individual, community and environmental health and eliminating disparities.

Gretchen Musicant, Commissioner

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Survey shows need for better health care access for Asians and Pacific Islanders

The Asian and Pacific Islander (API) Community Health Center Planning Collaborative has completed a health needs assessment of the Twin Cities' API population. The results show a need to increase access to preventive health opportunities (e.g., nutrition education and physical activity) and health care for the diverse API community.

The assessment included 661 individual surveys, six focus groups and an analysis of the supply-to-demand ratio of licensed API primary care providers to the API population in Minneapolis and Saint Paul.

Respondents cited several barriers: difficulty accessing Western care, inconvenient clinic hours and appointment times, lengthy clinic waiting periods and cultural insensitivity.

One of the main strategies to address these health care barriers is to establish an API community health center to ensure culturally appropriate care with easier access. Other strategies include establishing a state standard for medical

interpretation and certification, and increasing the number of bilingual/bicultural Asians and Pacific Islanders in the health care workforce.

On June 19, 2007, the Minnesota Asian/American Health Coalition and its community partners hosted the Minnesota Asian Health Data Summit IV, inviting policymakers to discuss the results of the assessment and ways to ensure health care access for the API community. MDHFS co-sponsored this event and Commissioner Gretchen Musicant facilitated the policy panel.

The Department of Health and Family Support is a partner in the collaborative. The assessment was funded by Blue Cross and Blue Shield of Minnesota Foundation's Healthy Together: Creating Community with New Americans, with additional support provided by the Association of Asian Pacific Community Health Organizations.

For more information on this initiative, please contact Emily Wang at (612) 673-2144.



More than 200 people attended the Twin Cities Healthy Start Healthy Family Fair in July at Como Park in Saint Paul. Families enjoyed food, education booths and health screenings. Twin Cities Healthy Start, working to reduce infant mortality and improve birth outcomes, is a collaborative among community-based agencies and the public health departments of Minneapolis and Saint Paul.

Seen on da Streets receives two awards

Seen on da Streets, which works to reduce teen pregnancies and sexually transmitted diseases through education to young men, received the Minnesota Organization on Adolescent Pregnancy Prevention and Parenting (MOAPPP) 2007 Program of the Year Award. Seen on da Streets was recognized for its innovative approach of employing outreach workers directly from the communities served. The program was also recognized by the National Association of City and County Health Officials as a 2007 Promising Practice for its community collaboration, innovation, responsiveness and evidence that it improves health outcomes. Thank you to our teams at Fremont Clinic and Teen Age Medical Service! For more information, contact Dave Johnson at (612) 673-3948.



Seen on da Streets partners: (back) James Brown, Chaquita Thomas, Darrius Armstrong, Desmond Grady, David Johnson, Fred Evans, Emily Scribner O'Pray and Pat Harrison (front) Sandra Levine, Tremayne Williams, James Everett, Alysha Price and Starla Johnson

Urban Health Agenda: Comparing Minneapolis with Other Large U.S. Cities

A recently published analysis of data from more than 50 major U.S. cities reveals that Minneapolis death rates from heart disease and breast cancer are among the lowest of the U.S. cities in the comparison. Minneapolis also ranks among the 10 best cities in pneumonia rate, motor vehicle deaths and infant mortality rate.

The Big Cities Health Inventory 2007: The Health of Urban USA is the fifth edition of a report published periodically to present health data specific to large cities. The comparison has been valuable in increasing our understanding of how health concerns affect large cities and how local health departments can best focus their efforts to address their unique needs.

This report also found that the incidence rate of tuberculosis ranked 30 out of the 33 cities that provided data for that indicator. Minneapolis continues to rank low in this area despite substantial improvement between 2001 and 2005. The majority of tuberculosis cases in Minneapolis occur among individuals who emigrated from areas of the world where the disease is prevalent.

For several indicators of sexual health, such as the prevalence of HIV

and AIDS, and incidence rates of syphilis, gonorrhea, and chlamydia, Minneapolis ranked below average. However, it is important to recognize that reported rates may not be an accurate reflection of actual rates. When diseases do not have obvious symptoms, they are often identified only with aggressive outreach, education, and testing activities. Because addressing the sexual health of teens and young adults is one of the major Department of Health and Family Support goals, efforts have intensified in Minneapolis to find and treat sexually transmitted diseases.

Another area of concern highlighted in the report is disparities in health status by race and ethnicity. The report looked at data for whites, African Americans, and Latinos, and found that differences in health status indicators persisted across the country. In most cases, African Americans and Latinos fare worse than Whites. Such differences were evident in Minneapolis as well, with racial disparities evident for heart disease mortality, infant mortality, teen birth, sexually transmitted diseases, and other conditions.

For more information, contact Gretchen Musicant at (612) 673-3955.

Health Indicator	Ranking from Lowest to Highest Rates*
Top 5	
Heart Disease Mortality	1 of 53
Female Breast Cancer Mortality	2 of 53
Pneumonia	4 of 53
Top 10	
Motor Vehicle Injury Mortality	6 of 53
Overall Mortality	7 of 53
Infant Mortality	10 of 52
Top 20	
Diabetes	11 of 53
Suicide	11 of 53
Lung Cancer Mortality	13 of 53
Firearm-related Mortality	14 of 52
Mothers Under Age 20	14 of 53
Homicide	17 of 48
Cancer Mortality	17 of 53
Mothers Who Smoke	19 of 43
Syphilis (primary & secondary) Incidence	19 of 30
Lower than 20	
AIDS Prevalence	22 of 46
HIV Prevalence	24 of 40
Gonorrhea Incidence	25 of 41
Chlamydia Incidence	29 of 41
Tuberculosis Incidence	30 of 33
*While 53 cities were surveyed, not all cities have data available for each indicator.	
Source: <i>Big Cities Health Inventory: The Health of Urban America</i> , 2007, National Association of County and City Health Officials, Benbow, N., editor. Washington, D.C. 2007.	

Healthy City Updates

Lead-safe work practices ordinance

A City ordinance that goes into effect Jan. 1, 2008, aims to reduce lead exposure from rehabilitation work in older rental properties. The ordinance requires that individuals doing work to address chipping and peeling paint citations in pre-1978 rental properties be certified in lead-safe work practices. The ordinance is part of the City's plan to eliminate childhood lead poisoning in Minneapolis by 2010.

Get Fit Twin Cities a success

Thousands of metro area residents answered the call to make this region the fittest in the nation by joining Get Fit Twin Cities, a team-based fitness campaign. Collectively, participants lost 8,960 pounds (four-and-a-half tons!) and logged 250,549 hours of physical activity in just four months.

The top winners were honored at a June 2nd celebration event at Minnehaha Park. The Da'Folwell team won first place in both divisions: minutes of activity and weight loss. The team lost a total of 140 pounds (13.58 percent of the team's total body weight) and logged 77,925 minutes of activity, which equals 325 hours per person.

Whether people made significant lifestyle changes or minor workout adjustments, Get Fit got them motivated. Stay tuned for your opportunity to join this fitness movement this winter. For more information, contact Lara Tiede at (612) 673-3815.

Health Commissioner Wins Paul and Sheila Wellstone Public Health Achievement Award

The Minnesota Public Health Association awarded Minneapolis Health Commissioner Gretchen Musicant the 2007 Paul and Sheila Wellstone Public Health Achievement Award. The award recognizes Musicant for her public health leadership and work as an advocate for the urban poor, uninsured and disadvantaged.



Margot Imdieke Cross, chairperson of the Minneapolis Advisory Committee on People with Disabilities, describes to Parliament members of Uganda how the committee provides technical assistance to the City of Minneapolis.

Minneapolis Advisory Committee on People with Disabilities

On June 12, 2007, the Minneapolis Advisory Committee on People with Disabilities hosted a special meeting for members of Parliament from the Republic of Uganda. The delegation visited United States municipalities to learn how local governments implement and ensure compliance with the Americans with Disabilities Act.

Public Health Laboratory

• Testing beach water to ensure public safety

Beach water testing was in full swing this summer with seven local agencies submitting about 250 samples per week. The Minneapolis Public Health Laboratory provided a 24-hour turnaround for E.coli testing so that agencies could close beaches if necessary and warn people to avoid contaminated bodies of water. Approximately 2,500 test samples were taken this summer.

• Partnerships with Hennepin County Clinic expand

Minneapolis Public Health Laboratory staff now assists the Hennepin County Public Health Clinic and Hennepin County's on-site laboratory. With this increased demand, the City is adding a full-time medical technologist to the staff.

Special thanks

MDHFS would like to thank Ed Petsche for temporarily joining the department to help move administration of the

childcare loan renovation program from the Greater Minneapolis Day Care Association to the City of Minneapolis. Petsche's relationships and knowledge of the program proved invaluable in smoothing the transition for participating Minneapolis childcare providers.

Funding Awards

Twin Cities Healthy Start funding renewed

Twin Cities Healthy Start is receiving its ninth year of funding (June 1, 2007 to May 31, 2008) to reduce infant mortality and improve infant health. The program targets African American and American Indian women and infants and other at-risk families living in Minneapolis and Saint Paul neighborhoods that have high infant mortality rates. The grant is from the U.S. Health Resources Services Administration for \$925,000. Although a causal relationship cannot be made between Healthy Start and a decline in infant death; between 1999 and 2005, the overall infant mortality rate for Minneapolis-St. Paul has declined from 7.89 to 5.69 deaths per 1000 births. For this same period, the infant mortality rate for African Americans has declined from 13.10 to 9.75.

New Staff

Pa Nhia Xiong joined MDHFS as an intern with the City's Step-Up Youth Employment Program and is working at the Medica Skyway Senior Center. A 2007 graduate of Edison High School, she is enrolled in the University of Minnesota's nursing program and will start her studies at the end of August when her internship ends.

Stacye Ballard joined the Research and Program Development Division in April as a research assistant for the Pregnancy Risk Screening Study. Stacye will collect data and interview patients at two prenatal care clinics. Stacye's previous work experience includes working at the Employment Action Center, the Minneapolis Public Schools, the African American Learning Resource Center and the Minneapolis Curfew Center. Stacye has a Bachelor of Arts degree in psychology from the University of Minnesota.