

Nebraska Office of *Women's* Health

ANNUAL REPORT 2005-2006



IN FULFILLMENT OF THE REQUIREMENTS OF
WOMEN'S HEALTH INITIATIVE STATUTE
LAWS 2000, LB 480, §7 AND LAWS 2005, LB 301 §34

Regulation and Licensure

NEBRASKA HEALTH AND HUMAN SERVICES SYSTEM



STATUS OF WOMEN'S HEALTH IN NEBRASKA

Office of Women's Health Annual Report 2005-2006

Nebraska Health & Human Services System

Regulation & Licensure
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INTRODUCTION

September 1, 2006

The vision of the Nebraska Office of Women's Health is "*Healthy Women Throughout Nebraska.*" Relative to the United States as a whole, Nebraska women have long life spans and generally good health.

In the first Nebraska *Women's Health Report Card*, the Governor's Women's Health Advisory Council pointed out risk factors for chronic disease that could be improved to make Nebraska women even healthier. While Nebraska's rising level of overweight and obesity threaten to reverse gains in life expectancy, improvements in physical activity and nutrition are the antidotes.

Although there are many factors that prevent women from exercising and eating properly, stress is a major concern. Dr. Wanda Jones, Deputy Assistant Secretary for Health and Director of the U.S. Office on Women's Health, identified stress as the most frequently mentioned health problem by women throughout the country.

The 2006 Women's Health Symposium theme was "*Healthy Living & Stress: Keeping the Balance.*" It is obvious that we chose a popular topic. Symposium registrations exceeded capacity long before the event. Symposium speakers helped participants understand how to reverse the cycle of stress causing poor health practices and poor health practices creating additional stress.

The Women's Health Advisory Council and the Office of Women's Health seem to be on the right track with their emphases on physical activity, access to care, and self-care. A sample of accomplishments for 2005-2006 includes:

- ✚ Preventive services for over 9,000 low-income women through breast, cervical, cardiovascular, and diabetes screening and healthy lifestyle interventions.
- ✚ A major addition to services with the new Colorectal Cancer Demonstration grant, one of only five in the nation awarded by the Centers for Disease Control and Prevention.
- ✚ Professional education on the metabolic syndrome to 490 clinical staff through statewide provider trainings and to 700 Every Woman Matters providers through a program newsletter.
- ✚ A new community-based initiative entitled "*Bright Futures for Nebraska Women and Girls*" to develop physical activity partnerships between preteen girls and adult women.
- ✚ Distribution of over 1,200 gift packages promoting walking and over 500 pedometers through partnerships with Blue Cross/Blue Shield and Region VII of the Public Health Service.
- ✚ Distribution of 5,000 Daybooks with education on self-care, stress reduction, physical activity, and nutrition.

All people in Nebraska benefit from the good health of women. We are grateful to the Governor and the Legislature for all their support. The Governor's Women's Health Advisory Council deserves much appreciation for their contributions to Nebraska women and their families.

Submitted by,



Kathy Ward, Administrator of the Office of Women's Health

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DEMOGRAPHICS

Gender & Age. According to the United States Census Bureau (2005), women represent 51% of Nebraska's population. Women represent 58% of Nebraska's 65 and older population. These percentages reflect current U.S. population trends. *The following table summarizes overall population:*¹

Population Estimates		2005	
Total Population		1,758,787	
Women		889,033	
Men		869,754	
By Age	Women	Men	
Under 18 years	210,653	220,976	
18 to 44	325,613	338,402	
45 to 64	216,656	212,937	
65 and older	136,111	97,439	

Race & Ethnicity. In Nebraska, white, Hispanic, and African American populations grew by small percentages in 2004-05. The Asian and Native American population saw a small percentage decrease in its female population.¹

The following table summarizes race demographics:

Population By Race		2005	
	Women	Men	
White	817,955	800,749	
Hispanic or Latino	56,973	67,692	
Black or African American	38,202	37,396	
Asian/Pacific Islander	14,480	13,959	
Native American	8,446	8,197	
Percent of Population	2004	2005	
Nebraska Women	%	%	
White	86.6	92.0	
Hispanic or Latino	5.3	6.4	
Black or African American	4.0	4.3	
Asian/Pacific Islander	1.8	1.6	
Native American	1.3	.95	

Residence. As of 2004, 70.3% of Nebraska women reside in urban areas, and 29.7% live in rural areas, according to the National Women’s law center.²

Demographics continued...

Education. The National Women’s Law Center reports educational attainment for Nebraska women as follows: Nebraska’s high school graduation rates rank 4th in the nation.²
The following table summarizes high school graduation rates:

Education Status		2004	
High School Completion	Women	U.S.	
All Women, All Races	91.2%	84.8%	
White-Non-Hispanic	93.3%		
Asian or Pacific Islander	90.3%		
Black or African American	77.7%		
Hispanic or Latina	56.8%		

Marital Status. Of the 687,456 households in Nebraska, 366,636 (53.3%) are married couples. The U.S. Census Bureau (2004) estimates that 56.4% of Nebraska women are married. Marriage rates for women and men are highest among 35 to 54 year olds.³ The following table summarizes marital status:

Marital Status		2004	
	Women	Men	
Total Population 15+ Years	681,806	657,233	
Married	56.4%	58.3%	
Never Married	22.8%	29.0%	
Divorced	9.5%	8.8%	
Separated	1.75%	1.3%	
Widowed	9.56%	2.5%	

ECONOMIC STATUS

Households. Of Nebraska’s estimated 449,933 families, 38,238 (8.0%) are run by single women, with children under the age of 18. According to the U.S. Census Bureau (2004), 38.6% of female run families with children under the age of 18 are below the income poverty line, and 58.4% of female run families with children under the age of 5, are below the poverty line.³



Economic Status continued...

Poverty. The Kaiser Family Foundation (2004-05) reports that 13% of all Nebraska women had incomes at or below federal poverty guidelines, compared to 11% of Nebraska men. In the United States, 18 % of women and 16% of men had incomes at or below federal poverty guidelines. Poverty levels for women, 65 and under have slightly increased since 2003.⁴ *The following table reflects distribution of poverty levels for Nebraska women by racial/ethnic background and age:*

Poverty Status for Nebraska Women	2003	2005
Race/Ethnicity	%	%
White	8.3	9.0
Hispanic or Latino	22.7	25.0
Black or African American	36.5	39.0
Asian/Pacific Islander	9.2	10.0
Distribution by Age		
18 & under	12.8	13.1
18-64	8.7	10.8
65+ years	12	7.7

Earnings. The National Women's Law Center reports that median annual earnings for Nebraska women in 2004 were \$25,000, compared to \$29,200 on average for women in the United States. Nationwide, women earn 72.7% of what men earn, compared to 70.2% in Nebraska.²

Uninsured. The rate of nonelderly uninsured women in Nebraska was 15% in 2003-04, compared to 17% of Nebraska men, and 19% for U.S. women. The rate of nonelderly uninsured women has increased since 2002 in Nebraska.²

MATERNAL HEALTH

Total Births: According to the Nebraska Vital Statistics Report, there were 26,324 live births in 2004. This number is the highest annual live birth rate recorded in Nebraska since 1982.⁵

Age of Mother. Although Nebraska women today are having children later than earlier generations, the vast majority of all births still occur among women in their twenties. In 2004, women 20-29 accounted for 56.5% of all live births, compared to 32.7% for women 30-39, 8.7% for teenaged women, and 2.0% for women 40 and older.⁵

Birthweight. Nebraska's low birth weight (babies weighing less than 5 ½ pounds) rate for 2004 was 70.7 per 1,000 live births which is an increase from 69.3 in 2003. Nebraska's annual low birth weight has increased steadily since declining to an all-time low of 52.8 in 1990.⁵ **Very Low Birth**

Weight (babies weighing less than 3.3 pounds) slightly increased in 2004, from 12.2 per 1,000 babies in 2003, to 12.5 in 2004.⁵

Unmarried Rates. In 2004 a total of 7,954 live births were recorded in Nebraska among unmarried women, up from 7,680 in 2003. The increase reflects a long-standing trend which has doubled in the last 20 years.

[Office of Women's Health Annual Report 2005-2006](#)

Maternal Health Continued...

Maternal Health. The following table reflects 2004 birth rates by race, age and prenatal care.

Live Births by Race ⁵		2004
	Number	Percent
White	23,320	88.5
Black	1,543	5.9
Native American	438	1.7
Unknown	1,023	3.9
Hispanic Origin (may be any race)		
Mexican	2,714	13.0
All Other	733	
Age of Mother ⁵		
All Races		Percent
Under 20		8.7
20-24		25.5
25-29		31.1
30 and Over		34.8
Prenatal Care by First Trimester (of live births) ⁵		2004
Race/Ethnicity	NE%	US%
White	86.9	89.0
Black	72.8	75.9
Hispanic	69.8	77.5
Total	82.7	84.1

MORTALITY

Life expectancies for Nebraska women and in the United States are described in the following table:

Life Expectancy for Women ⁵	2004
United States, all races	78.8
White Women in Nebraska	81
Non-White Women in Nebraska	74.5
Leading Causes of Death for Nebraska Women ⁵	Number of Deaths
Heart Disease	1,920
Cancer	1,578
Cerebrovascular	589

Chronic Lung Disease	311
Alzheimer's	322
Pneumonia	203
Diabetes	201

WOMEN'S HEALTH REPORT CARD—Focus on Chronic Diseases



Some of the most important health status indicators for women relate to chronic diseases and their risk factors. Chronic diseases affect both genders but throughout the life span have a disproportionate impact on women. Living with chronic diseases can significantly reduce the quality of women's lives.

In recognition of the significance of chronic disease, the Women's Health Advisory Council made it the focus of their first Nebraska *Women's Health Report Card*. A copy of the report card is provided on the following pages of this health status section.

The report card's purpose is to call attention to the needs and opportunities for improving women's health in Nebraska. It describes graphically the challenges in addressing risk factors that will determine whether chronic diseases will increase or decline in the future.

The report card was released to the public by Dr. JoAnn Schaefer, Director of Nebraska Health and Health Services Regulation and Licensure Agency and Chief Medical Officer. The release was accomplished at the Women's Health Symposium on May 19. Dr. Schaefer gave interviews on the report card to several print and broadcast media outlets.

In future years, the *Women's Health Report Card* will focus on other topic areas that affect the health of women in our state. Particular thanks are given to the Women's Health Report Card Task Force for their work and expertise in data development and presentation.





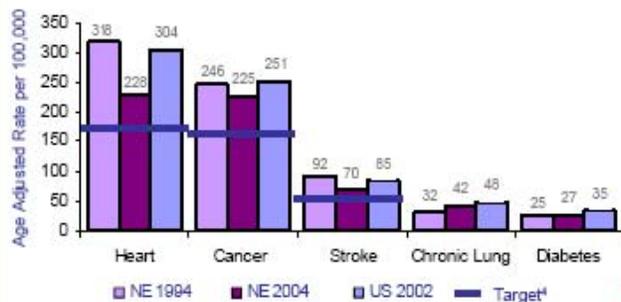
Nebraska's Women's Health Report Card--2006 Focus on Preventing Chronic Disease

Who are the women of Nebraska?

Fifty-one percent of the 1.7 million people who live in Nebraska are women and girls.¹ Nebraska ranks third in the nation for the percentage of women in the work force.² Nebraska women's lives are productive and busy, whether they work inside or outside the home. Nebraska women live an average of 81 years³, but spend many of those years dealing with chronic disease such as diabetes, heart disease, and cancer.

How healthy are the women of Nebraska?

Leading Chronic Disease Deaths Among Women 25 and Older
Nebraska, 1994, 2004 and US, 2002

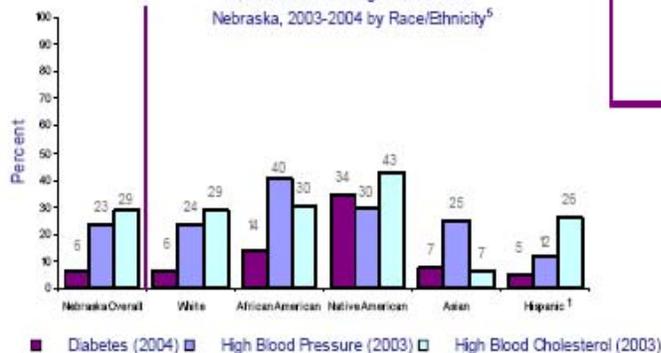


Source: NE Vital Records, National Center for Health Statistics Compressed Mortality File, and US Census Bureau

Nebraska women die from chronic diseases over all the age spans. Overall, heart disease is the number one killer of women both in Nebraska and the United States, while cancer is a close second. Between 1994 and 2004 heart disease deaths among Nebraska women decreased significantly with a smaller decrease in cancer and stroke deaths. There was a slight increase in deaths from chronic lung disease and diabetes.

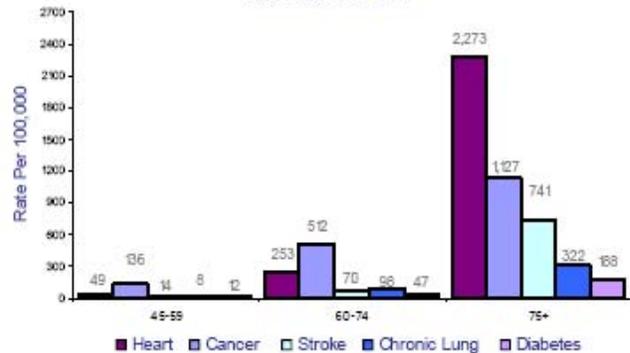
In Nebraska cancer is the major cause of death due to chronic illness until age 75 (although, accidents cause more deaths to women age 20-44). At age 75, heart disease skyrockets as a cause of mortality.

Selected Self-Reported Health Status of
Nebraska Women Age 18 and Older
Nebraska, 2003-2004 by Race/Ethnicity⁵



Source: Behavioral Risk Factor Surveillance System, Centers for Disease Control and Prevention

Leading Chronic Disease Deaths Among Women
45 and Older, by Age Groups
Nebraska, 2002-2004



Source: NE Vital Records and US Census Bureau 2002-2004

Diabetes is a major contributor to heart disease and stroke mortality, as are high blood pressure and high cholesterol. In 2003, just over 6% of Nebraska women reported having diabetes. Heart disease, stroke, and diabetes take an especially high toll on Nebraska women of color.

¹ U.S. Census Bureau, American FactFinder, 2000

² Institute for Women's Policy Research, *The Status of Women in the States*, 2004

³ Nebraska Health and Human Services System: Vital Statistics Report, 2003.

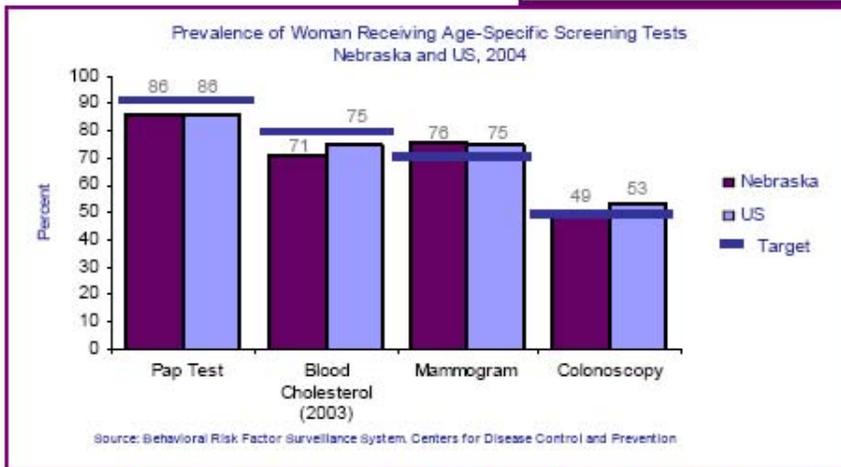
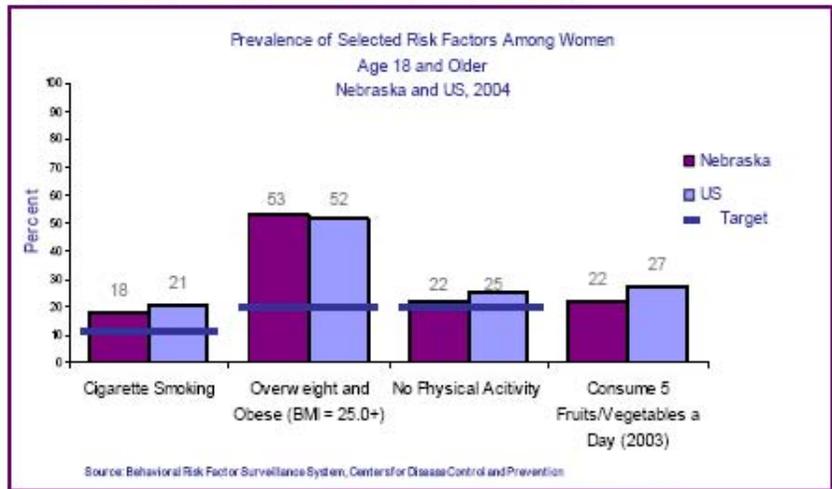
⁴ Healthy People 2010 Objectives for the Nation; see www.healthypeople.gov for further explanation

⁵ Hispanic ethnicity can be of any race.

⁶ Behavioral Risk Factor Surveillance System, Centers for Disease Control and Prevention, 2004

What practices can help Nebraska women live longer, healthier lives?

Smoking, obesity, and overweight increase the likelihood of chronic diseases and shortened life spans. Since 1994 Nebraska women had a 27% increase in overweight and obesity, with the increase primarily in the obese population. Good nutrition, physical activity, and maintenance of recommended weight contribute to longer, healthier lives.



There are set screening tests for women of all ages. All adult women should follow screening guidelines for Pap tests, and women in their 20's should begin discussing cholesterol screening with their health care provider. Screening for breast and colon cancer should start in the middle years.

What more do women in Nebraska need to be healthy?

Optimal health for Nebraska women requires action at three levels:

- 1) Individual women and their families—Following good health habits is easier when women receive encouragement from family and friends.
- 2) Medical providers and the health care system—Studies show that women are more likely to engage in good prevention practices when their doctors or other health professionals encourage them. In order to have that support, women also need access to quality health services at times that are convenient to their lives.
- 3) Communities and society—Health insurance is important to assuring access; 12% of Nebraska women (age 18-64) have no health insurance.⁶ Nebraska ranks 16th in the nation for women with health insurance. Smoke-free environments are also important to good health. In addition, women are much more likely to engage in physical activity if communities provide safe and convenient places to exercise.

Additional chronic diseases not included in the Women's Health Report Card.

CHRONIC DISEASE

HIV and AIDS. In 2004 the rate of AIDS for Nebraska women was 1.5 per 100,000 women, compared to 9.1 per 100,000 women in the United States. *The following table reflects reported cases of AIDS & HIV for the last 6 years.*⁶

HIV/AIDS in Nebraska 1998-2004	
HIV	Totals
Women	55
Men	190
AIDS	Totals
Women	99
Men	372

STDs. In 2003, the rate of sexually transmitted diseases for women in Nebraska was as follows:⁷

Sexually Transmitted Diseases, Nebraska Women, 2003		
	Rate	Number
Chlamydia	398.4 per 100,000	3,489 cases
Gonorrhea	108.6 per 100,000	951 cases
Syphilis	.1 per 100,000	1 case

Arthritis. Women in both Nebraska and the United States are more likely to be diagnosed with arthritis than men. In Nebraska, 31% of women report having arthritis, compared to 23% of men.⁸

Asthma. Similarly, a higher percentage of Nebraska women report that they have ever been told they have asthma (10.9%), compared to Nebraska men (9.6%).⁸

Hypertension. In 2003, the Behavioral Risk Factor Surveillance System reported that 23.3% of Nebraska women have been told that they have high blood pressure (hypertension)⁸

Mental Health. Women in Nebraska and in the United States are more likely than men to report having poor mental health in the last 30 days. The percentages of both Nebraska women and men who report poor mental health are lower than comparable national figures.⁸

Poor Mental Health, 2003		
	Nebraska	United States
Women reporting poor mental health in last 30 days	33.8%	38.3%
Men reporting poor mental health in last 30 days	24.4%	29.1%



Chronic Disease Continued...

Alcohol. Alcohol abuse and binge drinking are less common for Nebraska women than for Nebraska men.⁸ The following table indicates results from the Behavioral Risk Factor Surveillance System for 2004.

Alcohol Consumption, 2004	
	Percentages
Women having 5+ drinks on one occasion	9.1
Men having 5+ drinks on one occasion	26.5
Women having >1 drink per day	3.6
Men having >2 drinks per day	5.7

PREVENTION

Mammography. Health screenings can prevent disease or detect it in its earliest possible stages, but many times Nebraska has had very low screening rates in relationship to the rest of the nation. That was the case for mammography in the early 1990s when Nebraska ranked second to the bottom of all states in percentage of women screened. In 2004, only 16 states ranked higher than Nebraska in the percentage of women over 40 years of age who have had a mammogram within the past two years.⁸

Cholesterol Screening. Nebraska has low rates and rankings for cholesterol screening. According to the Women's Health and Mortality Chartbook, Nebraska women rank 51st in cholesterol screening in the past five years.⁸

Colorectal Cancer Screening. Rates for colorectal cancer screening in Nebraska are low as well. Women in Nebraska are more likely than men to have been screened for colorectal cancer.

Rates shown in the following table:⁸

Nebraska Colorectal Cancer Screening	2004	
	Women	Men
Adults 50+ who had blood stool test within the past 2 years	31.3%	27.5%
Adults 50+ who have ever had sigmoidoscopy/colonoscopy	48.8%	43.1%

State-by-state comparisons for both genders show that for 2004, only one state had a lower percentage than Nebraska of persons 50 years of age and older who had ever been screened for colorectal cancer by sigmoidoscopy or colonoscopy. Another colorectal cancer screening option is blood stool tests, which must be repeated annually to be effective. Nebraska fares much better in this category in comparison to other states, ranking 18th of all states in the percentage of adults age 50+ who have had a blood stool test within the past two years.⁸

Pap Smears. Another important screening test is Pap smears. Nebraska ranks almost exactly in the middle, 26th, of all states in the percentage of women over 18 who have had Pap smears within the past three years. Nebraska's percentage is 85.8.⁸

Prevention Continued...

Oral Health. A final important measure of good health is oral health care. A higher percentage of Nebraska women have visited a dentist or oral health clinic within the past year than Nebraska men.⁸ As shown in the following table

Oral Health in Nebraska	2004	
	Women	Men
Visited dentist or clinic with past year	77.6%	72.7%



Programs, Activities, Partnerships, & Successes

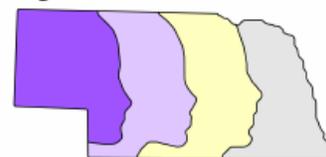
EVERY WOMAN MATTERS

Every Woman Matters (EWM) is a federally funded program for breast and cervical cancer, and cardiovascular and diabetes screening. The program is in its 15th year, and provides screening services to medically underserved women ages 40 through 64. The funding agency is the U.S. Centers for Disease Control and Prevention (CDC). Program functions include screening and diagnostic tests, public education, professional education, surveillance, evaluation and quality assurance. Over seven hundred health care clinics/office, mammography facilities, and laboratories provide services for Every Woman Matters.

Every Woman Matters started in 1992, and Nebraska was one of the first twelve participating states in the Early Detection of Breast and Cervical Cancer Program. Today, all 50 states, 9 tribal organizations and several U.S. territories are funded for breast and cervical cancer screening through CDC.

Since its inception, EWM has screened 42,429 women and diagnosed 529 breast cancers and 43 invasive cervical cancers.

Every Woman Matters



NEBRASKA OFFICE OF WOMEN'S HEALTH

Every Woman Matters continued...

The EWM Program continues to grow and to add services as it enters its 14th year. The program has expanded to the point that new priorities for client services must be set to deal with the limitations of federal funds.

Program Highlights

- The program during this fiscal period has screened 9,192 women, of which 45% are at or below 100% of the Federal poverty guidelines. Seventy percent report having no insurance coverage (up 5% from last year) with 84% of new enrollees having no insurance. Approximately 72% have a high school diploma or less.
- During this fiscal year, the program provided 7,097 mammograms, 5,549 pap smears and 7,066 clinical breast exams.
- Nebraska's EWM program has the highest breast and cervical re-screening rates in the country.

WISEWOMAN. Since the addition of the WISEWOMAN (Well-Integrated Screening and Evaluation for Women Across the Nation) grant in 2001, the EWM Program has been providing clients with a comprehensive array of prevention and screening services. These services address chronic disease risk factors such as, elevated cholesterol, high blood pressure, obesity, sedentary lifestyle, diabetes, and smoking. The WISEWOMAN program provides screening for cardiovascular disease and diabetes and provides intervention, referral and follow-up as appropriate. Like the Breast and Cervical Cancer Early Detection Program, it is aimed at low-income uninsured or underinsured women from ages 40 through 64. Special attention is given to populations of women at higher risk for cardiovascular disease—Black, Hispanic, and Native American women. Nebraska is one of only 14 states and tribal organizations to receive a WISEWOMAN grant.

Program Highlights

- The *WISEWOMAN* grant has screened 11,757 women since 2002, and diagnosed 1,268 new cases of hypertension, 1,260 new cases of high cholesterol, and 292 new cases of diabetes.
- Nebraska's program has screened and re-screened more women than any other WISEWOMAN program in the nation, including those with much larger populations, and those who have been funded longer.
- From April through June nearly 1,700 "Be A WiseWoman-Get Heart Smart" self-study lifestyle intervention materials were distributed to eligible clients. Nebraska also continues to partner with the University of Nebraska Cooperative Extension. Cooperative Extension Educators across the State make it possible for the program to offer the ABCs For Good Health classes, a four-week series of lifestyle intervention sessions aimed at nutrition and physical activity.



Outreach & Public Education

Outreach staff work on behalf of the EWM Program to recruit and enroll women, and ensure they see their provider for screening exams. This year, Every Woman Matters changed the structure of its outreach agreements from sub-grants to contracts. Eight contractual agreements were negotiated with community level agencies who serve as the local face of the Every Woman Matters Program.

Each year the Public Education staff arranges a EWM training designed to enhance the skills of outreach workers, case managers, and state staff. The 2006 Training Workshop was held on June 14 -15 on the topic of Motivational Interviewing. Motivational Interviewing (MI) is a state-of-the-art, evidence-based counseling style to motivate positive health behavior change in brief clinical encounters. The workshop focused primarily on the application of Motivational Interviewing to health promotion and wellness. Steven Berg-Smith with A.I.M. for Change based in San Francisco facilitated the training.

In January a Cervical Cancer Campaign was targeted at Vietnamese women, which has a population with one of the highest rates of cervical cancer. Community outreach workers in Douglas, Adams, Sarpy, Dakota, Hall, Lancaster, and Saline counties (those with Vietnamese populations of more than 100) were recruited to assist, and a direct mail campaign was initiated. The campaign utilized population profile information from the Cancer Information Service. An advocate from the Vietnamese community in Lincoln assisted in putting information on a Vietnamese radio program, making contacts in Omaha and Hastings, and disseminating information in Vietnamese New Year celebrations. Other activities included radio and TV coverage, public service announcements, workplace education, and mailings to current Vietnamese Every Woman Matters clients. Evaluation of the campaign showed a 30% increase in enrollment and screening rates.

Program Highlights

- Three editions of the EWM Client Newsletter, "Healthy Ways...Healthy Days" were printed, and sent out to approximately 17,000 clients.
- The 2005 May Campaign "Roadmap for Life" took place during the month of May. Materials developed included bulletin announcements, press releases, and healthy education booklets. Evaluations are currently being received and will be compiled during the summer months to evaluate the effectiveness of the campaign.
- Two awards for never or rarely screened clients were granted to Elkhorn Logan Valley Public Health Department and Nebraska Urban Indian Medical Center. The two agencies have collaborated and will produce an educational video on program services. The video will feature a client going through enrollment and screening. It is expected to be completed and available in the fall of 2006 and will be available in English, Spanish, Vietnamese, and Somali.

PROFESSIONAL EDUCATION

Professional Education. The Professional Education component of Every Woman Matters continued to be active in providing educational opportunities to clinical providers throughout the state in Fiscal Year 2005. The following were offered:

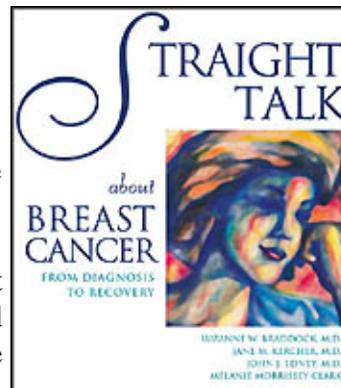
Program Highlights

- Every Woman Matters coordinated a Clinical Breast Examination (CBE) workshop at both the Nebraska Nurse Practitioners Association state conference in February and at the Nebraska Physician Assistants state conference in April. Fourteen nurse practitioners participated in their session, and eight physician assistants attended their workshop. The three-hour trainings included practice on silicone and live models as well as CBE risk management. The preliminary results of the follow-up surveys returned by participants indicate a significant percent of these clinicians reported making changes or improvements in their CBE technique and have increased confidence in their CBE skills since taking the workshop.
- Thirty mammography technologists attended the Nebraska Society of Radiologic Technologists annual state mammography symposium in April held in North Platte. The program sponsored Jeanette Joyce, B.F.A., R.T., Chicago, Illinois who offered six hours of continuing education. Among the topics presented were 1) Positioning of the Difficult/Different Patient, 2) Special Procedures in Breast Imaging, 3) Breast Pathology, A Correlation with Imaging, and 4) MQSA Overview. The participants rated the presenter and conference information as very good on their evaluations.
- An Every Woman Matters newsletter with professional/continuing education information was published for the 700 providers and the clinicians participating in the program. The article, "Human Papilloma Virus (HPV) Update for 2006", written by Sonja Kinney, MD, OB/GYN, was highlighted in the publication. Dr. Kinney is a member of the program's medical advisory committee. Another article highlighted in the publication was "Metabolic Syndrome: Guidance for Prevention and Treatment".
- Biannual provider trainings were completed in the spring with twelve regional continuing education conferences offered in six cities. The target audience was clinic nurses and office staff. Among the sessions presented for the 490 participants was a "Poignant Portrayal of a Woman Diagnosed with Breast Cancer" and the "Skyrocketing Sick Care Cost & the Value of Prevention" by David Hunnicutt, PhD. Four continuing education hours were offered. The participants rated the speakers and information as excellent and very helpful in improving patient outcomes.
- The presentation "Providing Effective Healthcare for a Diverse Population" by Valda Ford, MPH, MS, RN and funded by Every Woman Matters continues to be offered on the University of Nebraska Medical Center Olson Center for Women's Health web site video library. Due to various Internet connections, it has not been conducive for some providers to view the lecture on the Internet. This spring the project expanded so the same information is available by videotape and DVD. Continuing education credit is offered at no cost, after clinic nurses and

Professional Education continued...

mammography technologists from facilities that participate in EWM, view the lecture via the Internet, videotape or DVD.

- Every Woman Matters provided a copy of the new cytology educational book, "The Pap Test", written by Richard Mac DeMay, MD to each laboratory that offers cytology services for the program. A follow-up survey has been sent to all cytologists to self report the value of the book.
- EWM continues to distribute the book, "Straight Talk About Breast Cancer" with partners, the Nebraska Medical Association and CIMRO of Nebraska. This valuable treatment guide is available free of charge to women diagnosed with breast cancer, and to medical clinics who treat breast cancer.



MEDICAL ADVISORY COMMITTEE

Every Woman Matters Medical Advisory Committee. The Every Woman Matters Program receives consultation from a distinguished group of medical care providers. Specialties include cytology, radiology, general surgery, family practice, bone metabolism, obstetrics/gynecology, oncology, pathology, cardiology, endocrinology, internal medicine, rheumatology, gastroenterology, and colorectal surgery. Representation is provided for the following health professions: physicians, physician assistants, nurse practitioners, dietitians, pharmacists, biostatisticians and epidemiologists, clinic nurses, radiological technicians, cytotechnologists, and social workers.

The Medical Advisory Committee, consisting of 44 members, meets annually, and utilizes listservs and conference calls to communicate between meetings and among subgroups. Subgroups were formed around the following topics: Cervical Cancer Issues, Cardiovascular Disease and Diabetes, Colorectal Cancer Issues, and Breast Cancer Issues. Members of the Medical Advisory Committee are listed in Appendix 1.

SURVEILLANCE/EVALUATION

- An annual survey was mailed to 83 Nebraska mammography facilities in Nebraska to determine mammography utilization during the calendar year of 2005, as well as the training needs of mammography technologists. Sixty-two questionnaires were completed and returned from these facilities, for a response rate of 74.7%.
- Data from the 2004 Behavioral Risk Factor Surveillance System (BRFSS) reported that 24% of women 40 and older have not had a mammogram within the past two years. This is a significant improvement from the 2002 BRFSS data which indicated that 34% of women 40 and older reported not having had a mammogram in the preceding two years.

CASE MANAGEMENT

Every Woman Matters Case Management. Case managers provide case management services on a full-time basis within an assigned geographical area. Five case management contracts have been signed for the new fiscal year starting 07/01/2006.

- A Case Management Summit was held in March in conjunction with the Outreach Summit. All case managers were in attendance.

NATIONAL ACTIVITIES

Every Woman Matters National Activities. The Every Woman Matters program manager, Melissa Leypoldt, continues to be actively involved in the National Breast and Cervical Cancer Program Director's Council. This year she served on its executive committee as the past chair, and she is active in various committees. She served on the Planning Committee for the Centers for Disease Control and Prevention Cancer Partners Summit.

COLON CANCER SCREENING PROGRAM

As of September 2005 an additional service was added when Nebraska was chosen as one of five CDC demonstration programs to offer Colorectal Cancer Screening. The Nebraska's Office of Women's Health and Comprehensive Cancer Control Program successfully competed for that grant because of experience gained with a pilot project funded by a Tobacco Settlement Grant. The grant amount is \$550,000 per year, for at least three years. Nebraska's Colon Cancer Screening Program is designed to address Nebraska's high colorectal cancer incidence and mortality rates and low rate of screening. The Centers for Disease Control and Prevention (CDC) grant program that provides the funding is a new venture for that federal agency. Only five demonstration grants were funded across the nation, and Nebraska's program is the only one that is statewide.

Nebraska has the challenge of proving the effectiveness of a statewide screening program, and the Office of Women's Health is moving into new territory with a program that serves men. The infrastructure of the Every Woman Matters Program provides an efficient mechanism for reaching Every Woman Matters clients throughout the state and recruiting their assistance in enrolling men for screening.

Persons over 50 years of age in households with incomes under 225% of the Federal Poverty Level may be eligible for the Program. CDC requires history to determine screened by fecal occult colonoscopy, referral to education, and/or referral care practitioner.



Colon Cancer Screening completion of a health whether clients are best blood testing kits, genetic counseling or to the person's primary

Colorectal Screening continued...

A competitive Request for Proposal process was conducted to obtain a contractor for fecal occult blood testing lab work. Physicians Laboratory of Omaha and Lincoln won the bid. Bids for a similar Request for Proposal are now being reviewed for a contractor to perform follow up on persons not following through to screening and on persons with positive test results, requiring colonoscopy. Approval to begin screening was given by CDC on April 1, subsequent to a March 2 site visit. All of Nebraska's forms and procedures were reviewed and approved. CDC made a site visit on March 2 for the new Colorectal Cancer Screening Demonstration Grant. They reviewed all of Nebraska's forms and procedures and approved initiation of screening.

To date 600 women and men have been enrolled into the Nebraska Colon Cancer Screening Program, and 300 have received fecal occult blood testing kits, and 63 completed their tests. Four people who completed fecal occult blood tests have had positive results, making them eligible for colonoscopies paid through the program.

The purpose of the Colon Cancer grant is both to screen income-eligible persons and to create awareness of the need for screening for all persons over 50 years of age. In order to determine motivational factors and barriers to screening, the Office of Women's Health and Comprehensive Cancer Control Program have conducted 18 focus groups across the state. Separate focus groups were held for males, females, rural populations, African Americans, Native Americans, and persons of Hispanic origin. Focus group leaders were trained by Dr. Richard Kruger, author of *Focus Groups: A Practical Guide for Applied Research*, and other books on focus group interviewing.

To increase screening for Health and Human Service System employees, a "Go Boldly Blue" event on colorectal cancer screening was held in the State Office Building on March 23. Dr. Robert Rhodes gave a presentation, and the Lancaster Crusade Against Cancer provided a screening opportunity. A total of 45 Health and Human Services employees participated.

Melissa Leypoldt, Jane Green, and Kathy Ward gave presentations on the new colon cancer screening grant at the first annual Nebraska Cancer Conference on October 13.

INTEGRATED COMPREHENSIVE WOMEN'S HEALTH SERVICES IN STATE MCH PROGRAMS

In 2002, Nebraska received a three-year grant entitled "Integrated Comprehensive Women's Health Services in State MCH Programs," from the Health Resources and Services Administration (HRSA). The work of that grant ends this year with completion of a no-cost extension. Nebraska's grant was a collaboration of the Offices of Family Health, Minority Health, and Women's Health, and we were one of only twelve states to receive it. The grant focuses on coordinating healthcare services for women of all ages. It also addresses Nebraska's increasing diversity and incorporates the recently established local health departments.

Through this grant a group of more than 70 HHSS programs and external organizations were brought together to form the New Dimensions of Health for Nebraska Women Partnership. The Partnership met to discuss and determine women's health priorities and strategies to address the priorities. From this work, and from the needs assessment also completed as part of this grant, the first Nebraska Women's Health Strategic Plan was developed. The Plan was released in November

MCH Programs continued...

2004, and Partnership members and the Women's Health Advisory Council are involved in implementation of the plan's action steps.

Priority goals and objectives identified by the New Dimensions partnership are:

- o Access to Quality Health Care
- o Education and Community-Based Programs
- o Mental Health and Mental Disorders
- o Nutrition and Overweight
- o Physical Activity and Fitness



Strategies developed to address the priorities include:

- o Reduce isolation within the overall health services system
- o Increase access to culturally and linguistically appropriate health services
- o Increase women's mutual support systems
- o Reduce stigma, fear, and taboos around certain health issues
- o Improve funding

The Women's Health Advisory Council has played a large role in this grant, as sponsor and convener of the planning, partnership building, and implementation activities. One of the objectives developed through this grant is to develop a campaign to help women understand how to advocate for high quality health care for themselves. The Women's Health Advisory Council named a task force to implement this objective, and developed screening guidelines for dissemination to women.

In June of 2004, three Community Pilot projects were funded through this grant to develop a similar data-based planning and implementation process at the local level. The Community Pilot Projects have just completed their two-year projects. All of the pilots completed a women's health needs assessment, and used the results for strategic planning. The pilot projects and a summary of their accomplishments are listed as follows:

- **Northeast Health Care Partnership (NHCP)** and Elkhorn Logan Valley Public Health Department (ELVHD): This project covers Cedar, Dixon, Thurston, Burt, Madison, Stanton, Wayne, Dakota, and Cuming County. NHCP/ELVHD worked with partners such as Wayne State College, Native American tribes, healthcare providers, local health departments, clinics, hospitals, and the federally qualified health care center in their area to evaluate the data and determine priorities.

Through this project, NHCP and ELVHD conducted focus groups of minority populations to learn more about health knowledge and practices, as well as barriers to care. As a result of what they learned from the focus groups about problems with access to care, the project developed DVD's on insurance and Medicaid for new immigrants. These were recorded in English and Spanish, as well as in languages for Laotian and Somali populations.

- **North Central District Health Department (NCDHD)**, O'Neill: This project covers Antelope, Boyd, Brown, Cherry, Holt, Knox, Keya Paha, Pierce, and Rock County. NCDHD has involved community action agencies, Wayne State College, the North Central Community Care Partnership, hospitals, pharmacies, mental health providers, dentists, and nursing homes in the

MCH Programs continued...

planning group. This project compiled and disseminated a nine-county *North Central Nebraska Service Providers' Handbook*, as well as putting it on a website.

NCDHD also did a worksite survey on wellness activities, promoted women's health through various community events, developed and disseminated a women's health DVD, organized a Latina health event, and disseminated information to the medical community on Culturally and Linguistically Appropriate Standards (CLAS).

- **Public Health Solutions District Health Department (PHS), Crete:** This project involves the counties of Gage, Fillmore, Jefferson, Saline, and Thayer. The steering group includes hospitals, clinics, family planning agencies, WIC, Head Start, community action agencies, aging services, dental health providers, behavioral health, and youth treatment services. PHS and the planning group chose obesity, depression, and maternal and child health as priorities. PHS focused activities on workplace wellness and awarded worksite mini-grants. They developed partnership websites with links to other partners, established a steering committee of 10-12 providers, and conducted a community survey.

BRIGHT FUTURES FOR NEBRASKA WOMEN AND GIRLS (Formerly Called VERB™)

Based on the well-documented need to increase physical activity and prevent obesity and overweight among women and girls, the Office of Women's Health continued its focus on intergenerational physical activity partnerships. That work started with a 2004 conference for preteen girls and the adults who influence them.

In June of 2004 the Office of Women's Health, several other Health and Human Services System Programs, the Women's Health Advisory Council, the University of Nebraska's Olson Center for Women's Health, and a number of other state and community partners held an intergenerational conference for girls ages 9-13 and the adults (mothers, grandmothers, teachers, coaches, etc.) who influence them. The purpose of the conference was to encourage the girls and the adults to adopt new physical activities. The VERB theme was based on a successful campaign from the Centers for Disease Control and Prevention, designed to motivate preteens to find a new VERB (such as run, skate, dance, etc.) to become more physically active.



Nearly 400 girls and adults of diverse racial/ethnic and urban/rural backgrounds attended Nebraska's conference. Post conference evaluations showed the following effects:

- Motivation to do physical activity increased significantly for African American and Hispanic youth from pre to post conference, and confidence in ability to do physical activity increased significantly for African American, Hispanic, and White youth.
- The six-month post conference evaluation showed that those who completed the survey increased the days on which they did strengthening exercises by nearly one day a week.

Bright Futures continued...

- Motivation to do physical activity and confidence in their ability to do physical activity increased significantly from pre to post conference for the adults who attended the conference.
- Over half of conference participants said that they had done something after the conference to motivate family, friends, and others to be physically active.

In order to build a more sustained, community-based initiative to increase physical activity for preteen girls and women, a Request for Applications was issued to local health departments for "Bright Futures for Nebraska Women" minigrants to promote participation in physical activity among women and girls. These grants provide funds to organize a scorecard campaign to promote physical activity partnerships among girls and adult women in their lives. The scorecard campaign is to make communities "physical activity friendly" by offering a variety of free and reduced price physical activity opportunities. Participants keep track of their activities and turn in scorecards for incentives.

The local health departments funded are: Panhandle Public Health District (partnering with Scottsbluff County Health Department); Lincoln-Lancaster County Health Department; and Loup Basin Public Health Department (partnering with North Central District Health Department.)

A "kick-off conference" for the local health departments and their partners was held on June 8 to provide background and tools for successful projects. Anita Courtney, organizer of the VERB scorecard campaign in Lexington Kentucky and consultant for a number of other scorecard



campaigns, provided training for participants. She introduced the newly funded projects to a new Scorecard manual developed by the Centers for Disease Control and Prevention and helped them design their campaigns. Dr. JoAnne Owens-Nauslar, a local and national expert on physical activity provided background on physical activity initiatives in Nebraska and the nation. Melonie Thomas, from the Centers for Disease Control and Prevention, gave a presentation on the VERB Program.

The University of South Florida Prevention Research Center has helped develop an evaluation plan to be used by all the projects, including baseline and post intervention questionnaires to be completed by both preteen and adult participants. The assistance of the University of South Florida was made possible through a contract from the Centers for Disease Control and Prevention.

The CDC is producing a supplement on the VERB program for a major journal and Nebraska's programs will be included.

WOMEN'S HEALTH WEEK

For the third year, the Office of Women's Health and Blue Cross Blue Shield of Nebraska collaborated on a walking campaign for Mother's Day and Women's Health Week. Blue Cross Blue Shield provided 500 pedometers. The Office of Women's Health produced a Mother's Day gift package that included the pedometers, a Mother's Day card, a walking journal, and several other items promoting walking. The Office received and filled requests for 1,227 gift packages from across the state. Articles in the Nebraska Hospital Association newsletter, the Lancaster County Medical Society newsletter, and the Nebraska Medical Association newsletter about the project stimulated much of the demand for the packets.

Packets were sent to organizations or individuals in Ansley, Auburn, Bertrand, Columbus, Dunning, Fairbury, Fremont, Gordon, Grand Island, Hastings, Holdrege, Irving, Lexington, Lincoln, Loomis, McCook, O'Neill, Osceola, Papillion, Seward, and Wayne. The organizations receiving packets were either health departments or medical offices/clinics.

THE HEART TRUTH

The *Heart Truth* is a program from the National Heart, Lung, and Blood Institute (NHLBI), designed to raise awareness of heart disease in women. A major component of the *Heart Truth* program is the *Red Dress* campaign. NHLBI worked with 19 fashion designers to create red dresses for the campaign and has produced a wealth of materials, including Red Dress pins and a number of downloadable educational products on their web site. NHLBI has given Nebraska permission to utilize all their materials with tag lines for the Nebraska Department of Health and Human Services.

The American Heart Association has a complementary program entitled "*Go Red for Women.*" Both organizations sponsor national "*Wear Red for Women Day*" in February. For the second year the Office of Women's Health sponsored "*Wear Outrageous Red Day*" for HHSS employees. A total of 122 people participated. Dr. Joann Schaefer gave a video presentation on heart disease in women. Brook Matthews, Communications director for the Heart Association of Nebraska and former Miss Nebraska also gave a presentation. Prizes were awarded for Classiest Red Outfit, Brightest Red Outfit, Best Red Hat, Most Red Items, and Sparkliest Red Outfit.



Also during February, the Office of Women's Health participated in the "Light the Capitol Red" event of the American Heart Association and collaborated with the Nebraska Pharmacy Association on their Screening Day at the Capitol. The OWH's contribution was a *Heart Truth* display and red dress pins.

The Office of Women's Health issued a Request for Application to promote education and awareness of risk factors and prevention of cardiovascular disease in women; specifically cholesterol awareness, physical activity, and the *Heart Truth* campaign. A total of \$52,000 was awarded to five mini-grant projects for an amount of \$10,400 each. Funding was made available from the Centers

The Heart Truth continued...

for Disease Control and Prevention. A brief snapshot of activities conducted under each minigrant awarded under this program follows:

- Omaha Tribe of Nebraska- With collaboration occurring between the Four Hills of Life Adults Wellness Center and the minigrant staff, nearly 130 participants walked 340 miles during what the project called "The Last Buffalo Hunt" walking campaign. The "Hunt" required walkers to have a team of four and participants were given pedometers and walking logs to track their steps for a period of time. Other activities such as biking, water exercise, powwow dancing and aerobic exercise were also converted to steps for their logs. Health screenings for "The Last Buffalo Hunt" participants included before and after random health screenings related to cardiovascular disease and diabetes.
- Two Rivers Public Health Department- The Kearney County walkabout was held for six weeks with over 140 women participating in this opportunity to walk designated paths in Kearney County and track their steps. A wrap up event was held where walkers were eligible for door prizes and a grand prize to the participant who had the greatest increase in steps. The grand prize winner had an increase of 383% from week one to week six in her steps. This project also conducted blood pressure and Body Mass Index checks in conjunction with their activities.
- Goldenrod Hills- A multicultural women's health conference was held titled "Rhythm of Health" earlier this spring. Over 50 people attended this conference held in Norfolk which offered health screenings, cooking demonstrations, and education on women's health issues. In addition to the conference, Goldenrod Hills conducted a spring walking campaign for women in Stanton and Madison counties. Over 100 women participated in the kick-off event and 60 attendees completed a voluntary screening for weight, blood pressure, cholesterol and body fat analysis. The walking campaign was held for six weeks.
- West Central District Health Department- Conducted a six month competitive walking campaign with a "Community Olympics" grand finale in June. The campaign included health screenings and educational activities conducted by dieticians from the Great Plains Regional Medical Center. This project reached 962 participants who logged a total of 254,208 miles and completed 777 Nutrition Olympic quizzes focusing on the new food pyramid and healthy nutritional habits. Cholesterol improvement points totaled 917 and averaged 10.91 for the 84 participants who re-drew their cholesterol levels. One point is equivalent to a 1% improvement for each participant.
- Three Rivers Public Health Department- "Take Care of Your Heart" was the name given to the cardiovascular disease prevention program promoted by Three Rivers under this project. Their efforts included a 10,000 Steps walking campaign, on-going education, promotion of the Heart Truth Campaign, and cholesterol screenings. The kick-off event, held in Fremont attracted 67 participants who received a free YMCA pass to the indoor walking track and the first 50 participants received a free pedometer. The event also offered education on the Heart Truth Campaign. Throughout the project period, Three Rivers partnered with the Fremont Area Medical Center to conduct 42 health screenings, held a "Wear Red Day" on February 3rd and hosted a lunch and learn event called "Food for Thought". A total of 17 out of the 42 initial health screening participants returned for post-health programming screenings.

WEB SITE

In an effort to connect with the public and with providers, the Office of Women's Health continues to strive for a user-friendly and informative website. The site now includes a variety of pages including:

- Every Woman Matters
- Funding Opportunities
- Folic Acid
- National Health Observances
- the *Heart Truth*
- the VERB Initiative
- Pick Your Path to Health



- Women's Health Advisory Council
- Statewide Walking Campaign
- Women's Health Symposium
- Health Resources and Links
- Women's Health Statistics
- New Dimensions of Health for Nebraska Women Partnership
- National Women's Health Week

Additional Changes

- The OWH website address has changed to www.hhss.ne.gov/womenshealth
- The new Colon Cancer Screening website is at: www.hhss.ne.gov/crc
- HHSS Media FAQs can be found at: www.hhss.ne.gov/newsroom/presskits.htm
- EWM Provider Page: <http://www.hhss.ne.gov/womenshealth/ewm/ewmproviders.htm>

The web site has helped increase productivity and cost savings for the Office by allowing us to refer partners and the general public to information on the site, rather than mailing materials. The Community Outreach Education Kit (described earlier) is available online in English and Spanish, as are marketing materials for EWM, handouts and posters for the *Heart Truth*, walking logs and daily journals, the [Nebraska Women's Health Strategic Plan](#) and supporting documents, and other materials.

ARTHRITIS

Collaborative efforts continue with the Nebraska Arthritis Partnership. The 2005 Nebraska Arthritis Report has been completed and distributed through various public health partners. The report is intended to create an awareness of arthritis and provide useful information to individuals regarding what they can do and where they can go to receive further information and services.

In addition to the Arthritis Report, the Every Woman Matters Program offers education related to keeping active despite arthritis. Program participants answer questions during their screening visit related to joint pain, ease of mobility, and activity level. Women are then connected with educational and information about opportunities to participate in a Nebraska Arthritis Partnership recommended intervention. To-date, over 4000 women have been identified who would benefit from this information.

FOUNDATION

The Every Woman Matters Foundation, which has been in existence for several years, was established to raise funds for diagnosis and treatment for Every Woman Matters clients who had no other source of payment. Fundraising for the EWM Foundation is accomplished by the Breast &

 Foundation continued...

Cervical Cancer Advisory Committee (listing provided in Appendix 2). The fundraising project for this year is called "Any Day in October." More information on this project will be available soon. The Women's Health Advisory Council has established a subfund under the Every Woman Matters Foundation. Both the fund and the subfund are administered by the Nebraska Community Foundation, providing 501(c) (3) status. The nonprofit status serves as a greater attraction for prospective donors. The Council has adopted policies modeled after those of the Centers for Disease Control and Prevention Foundation on accepting donations.

The Women's Health Advisory Council has established a goal of raising \$200,000 to assist Every Woman Matters in maintaining its current level of services and continuing to reach out to never or rarely screened women. The primary strategy for raising funds is to submit proposals to foundations and corporations. Individual Council members have also made personal financial contributions.

GENERAL EDUCATIONAL ACTIVITIES

The Office of Women's Health responds to numerous requests for materials and information from organizations and individuals across the state. Materials are frequently provided for health fairs, exhibits, Heart Truth events, waiting rooms, client outreach, walking groups, and employee wellness groups, among others. The Office also responds to requests for speakers as time permits and takes exhibits to various conferences.

Over the last year, materials have been provided to individuals and organizations across the state, including community action agencies, local health departments, clinics, hospitals, Friendship Home, banks, Native American tribes, family planning clinics, faith-based organizations, community centers, pharmacies, and the Department of Corrections. Approximately 8,400 Heart Truth flyers and handouts were provided. Nearly 9,000 Women Lead the Way walking journals were provided – 8,000 in English, and 1,000 in Spanish. The Nebraska Women's Health Strategic Plan was provided to numerous organizations across the state, and to other states and federal agencies. Other materials include Folic Acid pamphlets (6,000), Daybooks (400), walking logs (10,000), and Pick Your Path to Health materials (500).

With funding from Region VII of the Public Health Service, a focus group of Chinese Immigrant women was held on May 19 to assess health care concerns. The major issue for participants was the difficulty of understanding and accessing health insurance.

The Office of Women's Health assisted the Guiding Star Girl Scout Council with a project named "Uniquely Me". Events will be held in Scottsbluff and North Platte to promote healthy lifestyles and self esteem for girls. The Office of Women's Health is reproducing *True You* materials from the Campaign for Real Beauty (www.campaignforrealbeauty.com).

Five thousand Office of Women's Health 2006 daybooks with health information and tips on positive ways to deal with stress were distributed throughout the state. Evaluation form ratings were overwhelmingly positive, with many requests for 2007 daybooks when they become available.

The Office of Women's Health is working on establishing a volunteer program to better leverage our resources and to effectively respond to persons in express interest in helping. A lunch and learn

General Educational Activities continued...

session was held on October 4 featuring Dr. JoAnn Schaefer's presentation on "Multitasking and Stress." It attracted 185 participants. During October's Breast Cancer Awareness Month, the Office of Women's Health participated as volunteers in the *Race for the Cure*®, held a "Wear Pink" event to raise awareness and contributions for the American Cancer Society, and participated in the American Cancer Society's *Making Strides Against Breast Cancer* walk.

A new logo was created by Artisan Creed for the Office of Women's Health and the Woman's Health Advisory Council. Council and staff members voted on proposed designs.

COLLABORATIONS WITH OTHER HHSS PROGRAMS

Kathy Ward, Office of Women's Health Administrator, participated on subcommittees or planning groups for the Office of Family Health's Perinatal Depression Program, the Office of Minority Health's Minority Health Conference, the Office on Aging's Conference on Aging, and the Office of Public Health's Turning Point Public Health Steering Committee. She also serves on an internal Health and Human Services System workgroup, Language Assistance Implementation in Persons with Limited English Proficiency.

The Office of Women's Health and Comprehensive Cancer Control Program meet at least monthly to provide integration and collaboration of statewide partners on the Colon Cancer Screening Program, as well as Breast and Cervical Cancer Screening.

WOMEN'S HEALTH SYMPOSIUM

The Office of Women's Health again took the lead in organizing the Women's Health Symposium, collaboration with many HHSS programs and external partners. The Symposium was held on May 19 at the Embassy Suites Hotel with "sell-out" attendance of 382 people. Conference participants included health care professionals, educators, policy makers, and individual community members. Continuing education units were provided to health professionals, and scholarships were given to persons for whom cost was a barrier.

The theme of this year's symposium was "Healthy Living and Stress: Keeping the Balance". Speakers and topics included:

- Barbara McFarland, Ed.D, originator of the Four Quadrant Work/Life Balance Model, provided valuable information regarding the need to self-nurture. She also presented practical strategies about how to achieve a vibrant, balanced and healthy life.
- Dayle Hayes, M.S., R.D., an award-winning author, educator and nutrition coach from Billings Montana, spoke on how Americans can learn to choose their food wisely and find creative ways to make positive food and fitness choices. She also spoke on the new My Pyramid dietary plan from the U.S. Department of Agriculture.
- Robert Valente, M.D. from Lincoln spoke on arthritis.
- JoAnne Owens-Nauslar, Ed.D, explained the benefits of physical activity for coping with stress.

Women's Health Symposium continued...

- Elinor Ginzler, MS, from the national office of AARP, discussed caregiver stress and the importance of recognizing and dealing with stress as part of one's caregiver responsibilities.

Governor Dave Heineman welcomed attendees to the Symposium, and issued a proclamation on Women's Health Week. As mentioned earlier, Dr. Joann Schaefer released the first Nebraska Women's Health Report Card. Dr. Deb Mostek, Chair of the Women's Health Advisory Council, presented opening and closing remarks. Thirty-two organizations and programs sponsored exhibits

A number of screenings were offered at the Symposium, including:

- Alegent Health: Dermascans for facial sun damage, blood pressure checks, and heel scans for bone density
- Saint Elizabeth Regional Medical Center: Body composition testing
- Bryan/LGH: Health risk appraisal

The AARP contributed all costs for an appearance by author Elinor Ginzler. Lee Booksellers sold Ms. Ginzler's new book "Caring for Your Parents" at the Symposium.

Blue Cross/Blue Shield, Nebraska Medical Association, Region VII Office on Women's Health, Development Systems, the University of Nebraska Medical Center, March of Dimes, Nebraska Commission on the Status of Women and many other Health and Human Services System programs helped to sponsor the Symposium.

NATIONAL CONFERENCES PRESENTATIONS

Denver

- Melissa Leypoldt gave an invited presentation at the United International Cancer Congress as part of a Centers for Disease Control and Prevention panel entitled "Screening in a Disorganized World."
- Kathy Ward gave an invited presentation at the U.S. Office on Women's Health Conference. The title was "Exploring Funding Opportunities for Women's Health Programs."

BUDGET

The Nebraska Office of Women's Health has total funding of over 5 million dollars. The funding sources are as follows:

- | | |
|-----------------|-----|
| • General Funds | 5% |
| • Federal Funds | 91% |
| • Cash Funds | 4% |

Every Woman Matters received a Susan G. Komen grant (\$78,000) to provide ancillary services to women receiving breast biopsies and an award from the American Cancer Society for \$125,000 for mammography screening.

2005-2008 WOMEN'S HEALTH ADVISORY COUNCIL STRATEGIC PLANNING

The Women's Health Advisory Council developed new strategic planning objectives in March of 2005. These objectives are coordinated with those of the Nebraska Women's Health Strategic Plan and specify the activities that will be performed by the Council.

Major objectives in the strategic plan are:

- Increase awareness by consumers and providers of screening guidelines recommendations for medical, drug, alcohol, mental health, and domestic violence issues
- Increase compliance with screening guidelines recommendations by influencing insurers, employers, and legislators to cover the cost of screening for diabetes, cholesterol, and weight
- Reduce the incidence of chronic disease by disseminating approved body weight/BMI guidelines for practitioners, promoting proper nutrition for all ages, promoting breastfeeding, teaching parents proper nutrition and appropriate weight for children, and working with schools and employers to incorporate more physical activities
- Facilitate a statewide directory for community resources
- Develop a *Nebraska Women's Health Report Card* for publication

Progress on the Strategic Plan During 2006

- The *Women's Health Report Card* focusing on chronic diseases and risk factors was developed by the Council's task force, approved by the Council, and released to the media, participants of the Women's Health Symposium, and other members of the public.
- Screening guidelines have been developed, approved by the Women's Health Section of the Nebraska Medical Association, and disseminated widely through Women's Health Week packets, inclusion in the 2006 Daybook, the Women's Health Symposium, and posting on the Office of Women's Health web site.
- The Bright Futures initiative was developed to focus on physical activity for preteens and adult women, and three local health departments received funding to implement physical activity scorecard projects in their communities.
- The Women's Health Symposium featured nutrition education and guidelines for practitioners in presentations by Dayle Hayes, M.S., R.D.
- The Council decided that rather than developing a new directory, it would make use of existing directories. The 211 System, Partnership for Prescription Assistance Nebraska, and Answers for Families were incorporated into the 2006 Daybook and added as links on the Office of Women's Health web site.

A new goal established by the Council is to raise \$200,000 for Every Woman Matters so that the program can maintain existing levels of service and reach more women who are never or rarely screened.

Legislation Monitored by the Women's Health Council

The Legislative Task Force of the Women's Health Council recommended that the following bills in the 2006 regular legislative session be supported, monitored or opposed. A letter to members of the Legislature was signed by the Chair of the Council and distributed during the legislative session.

Support.

LB 864	Prohibit insurance related pre-existing condition exclusions related to pregnancy	Indefinitely postponed February 2006
LB 1219	Funding for local health departments	Indefinitely postponed February 2006
LB 1220	Adopt a rural behavioral health, training and placement program	Indefinitely postponed (Provisions/portions of LB 1220 amended into LB 994 by AM2537) April 2006
LB 1231	Establish Office of Minority Health	Indefinitely postponed April 2006

Monitor, but take no position:

LB 944	Pertains to the family size provisions under the welfare	Indefinitely postponed April 2006
LB 949	Immunization registry	Indefinitely postponed April 2006
LB 1028	Appropriations for Ryan White AIDS funding	Indefinitely postponed Provisions/portions of LB 1028 amended into LB 1060 by AM2731) April 2006
LB 1047	Increase penalties for stalking	Indefinitely postponed (Provisions/portions of LB 1047 amended into LB 1113 by Com AM2785) April 2006

Monitor, but take no position (continued):

LB	Sudden infant death and shaken baby syndrome awareness	Indefinitely
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1088		postponed (Provisions/portion s of LB 1088 amended into LB 994 by AM3034) April 2006
LB 1132	Family centered practice in state social services	Indefinitely postponed April 2006
LB 1242	Provide local public health departments certain tests and treatments	Indefinitely postponed April 2006
LB 1248	Medical assistance and Medicaid reform	Approved by the Governor April 13, 2006 (Provisions/portions of LB 1232 amended into LB 1248 by AM3007) April 2006

TECHNICAL ASSISTANCE

National

The National Women’s Health Information Center is a clearinghouse of information and resources. It is sponsored by the U.S. Department of Health and Human Services Office on Women’s Health. The national Office on Women’s Health has supplied promotional materials, resource books, statistical reports, and a wealth of information on women’s health issues.

Regional

There are ten regions in the U.S. Department of Health and Human Services; and Nebraska, Iowa, Kansas, and Missouri are in Region VII. Each region has a Regional Women’s Health Coordinator. Joyce Townser, Region VII’s Women’s Health Coordinator, is located in Kansas City, Missouri. Information on women’s health issues, national trends, policy changes, promotional materials, and technical assistance is provided to each state. One regional meeting of all the state representatives is held each year, along with quarterly conference calls.

WOMEN’S HEALTH INITIATIVE STATUTE 71-701 TO 71-707

“The Women’s Health Initiative of Nebraska is created within the Department of Health and Human Services. The Women’s Health Initiative of Nebraska shall strive to improve the health of women in Nebraska by fostering the development of a comprehensive system of coordinated services, policy development, advocacy, and education.”

Initiative Objectives:

- (1) Serve as a clearinghouse for information regarding women’s health issues;
- (2) Conduct department-wide policy analysis on specific issues related to women’s health;
- (3) Coordinate pilot projects and planning projects funded by the state that are related to women’s health; Communicate and disseminate information and perform liaison functions;

Health Initiative continued...

- (4) Provide technical assistance to communities, other public entities, and private entities;
- (5) Encourage innovative responses by private and public entities

“The Department of Health and Human Services shall issue an annual report to the Governor and the Legislature on September 1 for the preceding fiscal year’s activities of the Women’s Health Initiative of Nebraska. The report shall include progress reports on any programs, activities, or educational promotions that were undertaken by the initiative. The report shall also include a status report on women’s health in Nebraska and any results achieved by the initiative.”

DUTIES OF THE WOMEN’S HEALTH ADVISORY COUNCIL

The duties of the Nebraska Women’s Health Advisory Council are as follows:

- o Advise the Office of Women’s Health in carrying out its duties;
- o Explore other sources of funding which may be used to support the Office of Women’s Health and its initiatives to improve the health of the women of Nebraska;
- o Bring new information to the attention of the Council and the Administrator of the Office of Women’s Health;
- o Provide guidance and recommend action to the Administrator of the Office of Women’s Health and the Nebraska Health and Human Services System on issues pertaining to women’s health;
- o Interpret and apply scientific and/or technical information to issues pertaining to women’s health;
- o Disseminate information in accordance with the current communication plan;
- o Adhere to the Mission and Vision as the primary guidance in establishing direction through the Strategic Plan and in forming recommendations for action to the Administrator.

Officers, Council Members and Meetings

For 2005-2006, the officers of the Nebraska Women’s Health Advisory Council were as follows:

Chair	Debra Mostek, M.D.
Vice-Chair	Kathleen Kock
Treasurer	Mary Jo Gillespie

Meetings during 2005-2006 were held on the following dates and at the following locations:

September 30, 2005	Mahoney State Park, Ashland
January 27, 2006	Video/Teleconference
	<u>Locations:</u> Lincoln, Grand Island, Ainsworth, Omaha, Beatrice
May 1, 2006	Mahoney State Park, Ashland

Council Members: 2005-2006

Teresa Anderson

Executive Director Central District
Health Department
Hastings

Bich Chau, M.D.

Downtown Physicians Group, P.C.
Lincoln

Diana Doyle, MD

Anesthesiologist
Children's Hospital
Omaha

Raponzil Drake, D Min

Administrator
HHSS Office of Minority Health
Lincoln

Paula Eurek

Administrator
HHSS Office of Family Health
Lincoln

Mary Jo Gillespie

Assistant Director
Lancaster County Medical Society
Lincoln

Lisa Good

Executive Director
Nebraska Commission on the Status
of Women

Karen Higgins, MD

Grand Island Clinic
Grand Island

Rosalee Higgs

Nebraska AIDS Project
Omaha

Nancy Intermil

Owner
Accountable Solutions
Lincoln

Senator Jim Jensen

District 20
Lincoln

Octa Keen

Educator
Omaha

Kathleen Kock

Project Coordinator
CityMatCH
Omaha

Mary Kratoska, MD

Creighton University
Omaha

***Kate Kulesher, Associate
Director, State Government Affairs**
Wyeth-Ayerst Laboratories
Lincoln

Jeanne Laible

West Holt Medical Clinic, Atkinson

Council Members continued...

***Kathleen Mallatt**

Omaha

Jane McGinnis

Epidemiologist
HHSS Public Health Assurance
Lincoln

***Debra Mostek, MD**

University of Nebraska Medical Center
Department of Geriatrics
Omaha

Joan Neuhaus

Alegent Health/Bergen Mercy Health
System, Omaha

Mary O'Gara

National Board of Directors
American Association of Retired Persons
Omaha

Magda Peck, PhD

University of Nebraska Medical Center
Pediatrics & Public Health Education
Omaha

Joann Schaefer, M.D.

Chief Medical Officer
Nebraska Health & Human Services System
Lincoln

Laura Redoutey

President
Nebraska Hospital Association
Lincoln

Mary Scherling

Beatrice

***Senator DiAnna Schimek**

District 27
Lincoln

***Sheryl Schrepf**

Substance Abuse & Mental Health
Services Administration, Lincoln

***Rhonda Seacrest**

Community Advocate
Lincoln

Francine Sparby

Vice President for Patient Care
Services
St. Francis Medical Center
Grand Island

Dr. Patricia Sullivan

Creighton University School of
Medicine
Omaha

Brandi Holys Tumbleson

Director of Program Services
March of Dimes, Nebraska Chapter
Omaha

***Judy Ueda**

Infection Control Specialist
Alegent Mercy Hospital
Omaha

***Member has left the Advisory
Council**

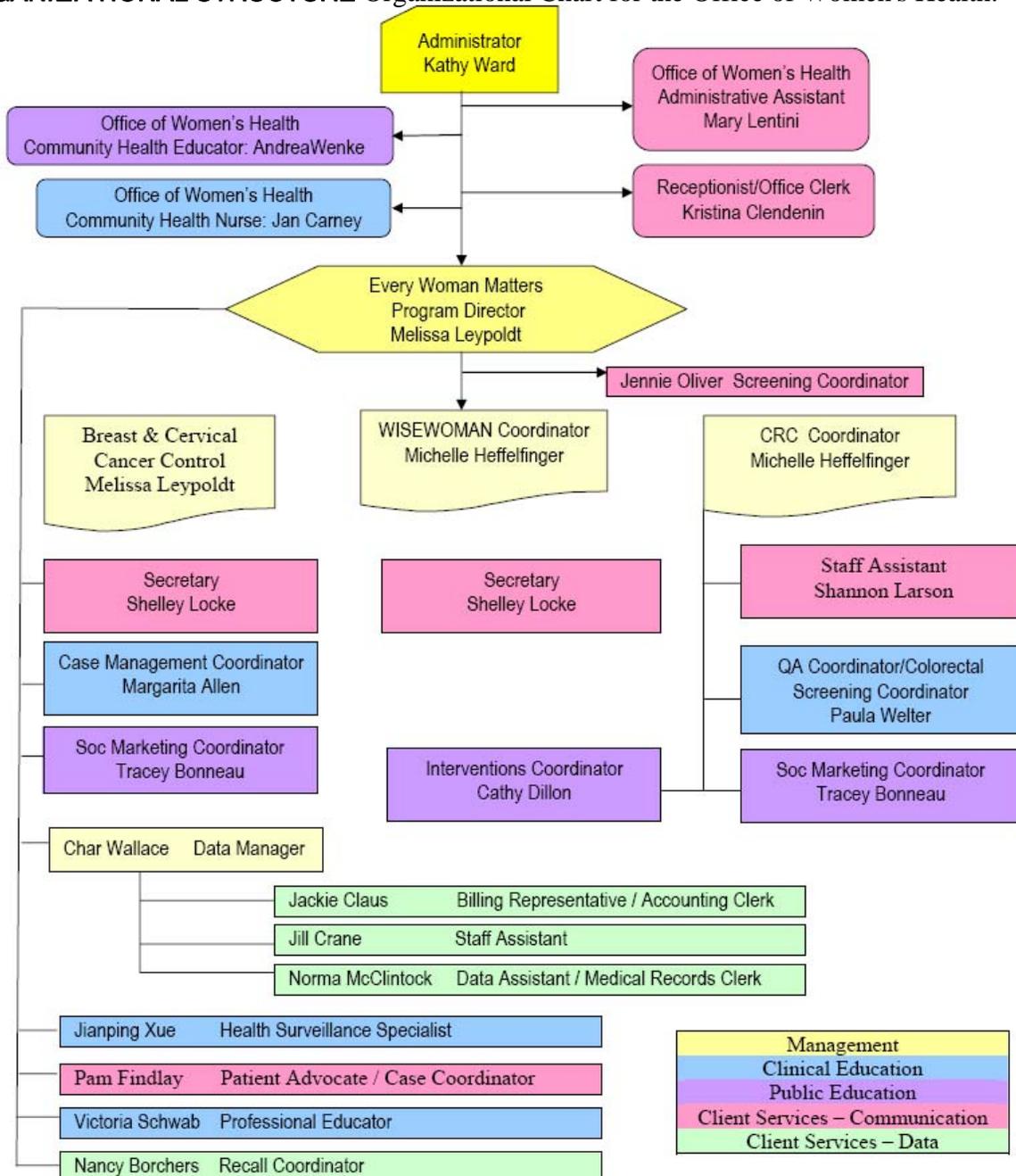
Vision, Mission, Priorities, & Organizational Structure

MISSION The mission of the Nebraska Health and Human Services System Office of Women's Health is to help women of all ages in Nebraska lead healthier lives.

VISION The vision for the Office of Women's Health is to work toward healthy women throughout Nebraska; supported by a comprehensive system of coordinated services, policy development, advocacy, & education.

PRIORITIES Priorities of the Office of Women's Health are Fitness and Access to Healthcare.

ORGANIZATIONAL STRUCTURE Organizational Chart for the Office of Women's Health:



REFERENCES

1. July 2005 Annual Census Estimates, U.S. Census Bureau.
<http://www.census.gov/popest/states>
2. Making the Grade on Women's Health 2004. National Women's Law Center.
<http://www.nwlc.org/>
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<http://factfinder.census.gov>
4. State Health Facts. Kaiser Family Foundation.
<http://statehealthfacts.kff.org>
5. Vital Statistics Report 2004. Nebraska Health & Human Services System.
www.hhs.state.ne.us/ced/vs.htm
6. 2004-2008 Comprehensive HIV Plan, Nebraska Health & Human Services System.
<http://www.hhss.ne.gov/dpc/comprehensiveHIVplan.htm>
7. STD Case and Incidence Rates 1999-2003. Nebraska Health & Human Services System.
<http://www.hhs.state.ne.us/std/alltypes5yr.htm>
8. Behavioral Risk Factor Surveillance System 2004. Centers for Disease Control and Prevention.
<http://apps.nccd.cdc.gov/brfss>

APPENDIX 1

Every Woman Matters Medical Advisory Committee

Karen Allen, SCT (ASCP)
Omaha

Clark Antonson, MD
Lincoln

Roberta Barber, RT
Lincoln

Larry E Bragg, MD
Kearney

Camille Brewer, APRN
Omaha

Sheryl Buss, LPN
Norfolk

Jodi Chewakin, PA-C
Lincoln

Carolyn Cody, MD
Lincoln

Priscilla Moran Correa, MD
Omaha

Mary Ann Curtis, MD
Lincoln

Katherine Davis, APRN
Aurora

Charlene Dorcey, RD, LMNT
CDE
York

James Edney, MD
Omaha

Heather Elton, BSN, RN
Columbus

Robert Faulk, MD
Omaha

Maureen Fisher, PA
Winnebago

J. Christopher Gallagher, MD
Omaha

Janet Grange, MD
Papillion

Caron Gray, MD
Omaha

Jean Grem, MD
Omaha

David Hoelting, MD
Pender

David Holdt, MD
Scottsbluff

Mark Hutchins, MD
Lincoln

Mia Hyde, PA-C
Grand Island

Stephanie Johnson, MD
Scottsbluff

Sonja Kinney, MD
Omaha

Monique Kusler, MD
Omaha

Sonja Kinney, MD
Omaha

Appendix 1 continued...

EWM Advisory Committee

Monique Kusler, MD
Omaha

Mary Petersen, RN
Omaha

Lynn R Mack-Shipman, MD
Omaha

Steven Remenga, MD
Omaha

Tim McGuire, PharmD, FCCP
Omaha

Aina Silenieks, MD
Lincoln

Kris McVea, MD
Omaha

Susan Stensland, LCSW
Omaha

Jane Meza, PhD
Omaha

Jo Swartz, RT
Lexington

Ted R. Mikuls, MD
Omaha

Alan Thorson, MD
Omaha

William Minier, MD
Omaha

Les Veskrna, MD
Lincoln

Anne K. Morse, MD
Grand Island

Marian Wehr, LPN
Lexington

APPENDIX 2

Breast & Cervical Cancer Advisory Committee

Janet Banks, LPN
Lincoln

Carna Pfeil, CCM
Lincoln

Jennifer Dreibelbis,
Omaha

Lucy M. Schwerdtfeger,
Lincoln

Jill Jeffrey,
Omaha

Kimberly Dent,
Saint Paul

Janice A. Larson,
Omaha

Donna Hunt,
Lincoln

Rita McClure, RN
Lincoln

Barb Larson,
Palmer

Lynne Olson,
Seward
