



NEBRASKA

The **Preventive Health and Health Services (PHHS) Block Grant** allows Nebraska the flexibility to focus on several high-priority health issues all aimed at improving the health of the residents of Nebraska.

PHHS Block Grant funds allow Nebraska to use dollars **where** we need them, **when** we need them to protect the public's health. This flexibility is critical to assuring our public's health and serves Nebraska's unique health needs. The following data is from our PHHS Block Grant Fiscal Year 2005 Annual Report:



Reducing Health Disparities Among Minority Populations in Nebraska

- We taught asthma self-management to 84 children and family members. We obtained 1,991 pledges to maintain smoke-free homes and vehicles among the high-risk racially and ethnically diverse populations of east and northeast Douglas County.
- We used trained peer health educators (promotoras) to provide health services to 722 minority persons in Madison and Cuming Counties.
- We helped assure 68 pregnant Hispanic women received education and the medical care they needed to deliver healthy babies.



Diabetes: Helping People Take Control

- In Platte and Colfax Counties we provided weight management classes to 127 persons. We enrolled 55 diabetics in a 10-week Diabetes Self-Management and Empowerment class resulting in a significant overall reduction in body weight and improvement in fitness level.
- We taught self-management skills to 469 diabetics in Scottsbluff County that resulted in a substantial increase in the use of a control indicator test.
- We provided diabetes and cardiovascular disease education to 98 Hispanic persons with diabetes in Douglas County. We carried out care assessments among 372 persons with diabetes in a 25 county service area in southeast Nebraska.
- We provided healthy snacks and encouraged more physical activity among 135 Santee Sioux school children to help prevent them from developing diabetes.



Preventing Injury—Children and Elderly Most Affected

- At community events across the state, we checked over 9,000 child restraint seats for proper installation and distributed 3,858 free seats through collaboration with other funding sources. More than 150 Child Passenger Safety Technicians were educated. The project staff taught 4-day certification classes that reached 25 people.
- We completed a fall injury report and issued eight mini-grants to local Safe Kids Coalitions across the state.

Nebraska Health and Human Services System

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Minorities in Rural Nebraska Take Charge of Their Diabetes

Issue:

Diabetes costs Nebraskans dearly, even those who have not been diagnosed with the disease. Diabetes-related spending in Nebraska was estimated at \$792 million in 2002, including \$552 million in direct costs and \$240 million in indirect costs.

- Diabetes can cause a person to lose his or her eyesight, kidneys, feet (through amputation), or even his or her life.
- Lifelong disability, caused by diabetes, can make it difficult to hold a job or support one's own children.
- Compared to the white population, Hispanics are 1.6 times, African Americans are 2.5 times, and Native Americans are 3.8 times more likely to die from diabetes.
- A simple blood test for Hemoglobin A1c shows how well diabetes has been controlled, over the previous two or three months, using diet, exercise, and careful management of blood glucose (or blood sugar) levels.
- In 1999, the average A1c test value of clients with diabetes served at Panhandle Community Services (PCS) in Scotts Bluff County was 8.5%.
- In general, every percentage point drop in the A1c blood test results equals a more than one-third reduction in the risk of eye, kidney, or nerve disease.

Intervention:

Nebraska invests \$12,000 per year of Preventive Health and Health Services Block Grant funds to enable Panhandle Community Services to improve the diabetes self-management skills of minority clients in Scotts Bluff County.

- PCS educates minority clients through culturally and linguistically appropriate presentations, one-on-one sessions, small group sessions, monthly and quarterly classes, and quarterly outreach support group sessions.
- The services complement and augment the quality clinical care the clients receive from trained medical professionals. Clients also receive medication, monitors and test strips.



Photo by Robert Holsinger

PCS used A1c test results as a way to encourage their clients to regularly test their blood sugar, eat properly, and exercise .

Impact:

During 2005, PCS served 469 diabetes clients at the clinic and 297 through community screening, 63% of whom were Hispanic or Native American.

- There were four times more clients in the PCS diabetes registry than in 1999 when the county served just 115 persons with diabetes. Despite this large increase in patient load, clients still received quality care, with 89.7% of clients receiving one A1c test and 70.2% receiving two tests per year.
- A1c test values continue to decline, now averaging 7.4%.
- With proper patient education, care, and support, up to 90% of diabetes blindness can be prevented, diabetes-related kidney failure can be reduced by 50%, and up to 50% of lower limb amputations can be avoided each year.

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