

# HENOD NEWS

VOLUME 1, ISSUE 2

JUNE 2000

## Health Fund Advisory Committee Makes Recommendation For Tobacco Prevention and Control

By Deb Brown

Over the next 25 years, the state is expected to receive an estimated \$775 million from the national tobacco settlement reached last November between the tobacco companies and the attorneys general. In Delaware, all tobacco settlement funds go into a Health Fund created by legislation. The Fund provides specific areas that funding for Delaware citizens can be expended. A 12 person Health Fund Advisory Committee was established to gather information, review the information and make recommendations to the Joint Finance Committee for final approval by the Delaware General Assembly. Each year the Committee will receive and review information and make a new set of recommendations.

After a series of public hearings and meetings, the Delaware Health Fund Advisory Committee recommended the following disbursement of tobacco settlement funds to the Joint Finance Committee of the Delaware General Assembly.

➤ Strategic Reserve	\$17,439,300.00
➤ Prescription Assistance Program	\$7,472,800.00
➤ Tobacco Prevention & Control	\$3,000,000.00
➤ Medical Coverage-Persons who lose SSI benefits due to unearned income	\$1,485,000.00
➤ Uninsured Action Plan	\$1,000,000.00
➤ Public Access Defibrillation	\$752,900.00
➤ Chronic Disease: Diabetes Pilot Project	\$500,000.00
➤ Substance Abuse: Transitional Housing	\$200,000.00
➤ Lesser Known Illnesses: Testing Regimens	\$150,000.00

The proposed recommendations are focused on the health of the people of Delaware and the needs that they have.

### HENOD ON THE WEB! By Fred Breukelman

We're now on the Internet at [www.henod.org](http://www.henod.org). Please check it out, and give us your input. The site includes a description of HENOD and its member benefits, and an opportunity to join online. It also includes a list of coming events and meetings, organizational officers, and an online version of the newsletter. The HENOD website is more than just a description of the organization, however. We hope it will be used regularly as your link to health promotion and health education on the Internet. You can click on "Health News" and receive daily health news updates from a variety of services, like Reuters, HealthScout and the Mayo Clinic. There are numerous links to health promotion services and information sites.

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### HENOD LEADERS:

**PRESIDENT**  
ROB SIMMONS

**TREASURER**  
FRED BREUKELMAN

**SECRETARY**  
MEL ANDERSON

**MEMBERSHIP**  
CHRIS MANNING

**PROGRAM**  
LUCILLE PULLIAM  
DEB PFAFFENHAUSER  
DEB CEBENKA  
DEB BROWN

**CONTINUING ED.**  
CAROL SOHA  
MARIAN HAY

**NEWSLETTER**  
ROMIE LUTZ  
DONNA LLOYD-KOLKIN

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## *A message from the President*

*By Rob Simmons*

HENOD has shown tremendous growth in its short history since Delaware's health education membership organization was formed last fall. To date, we have over 50 members, four working committees and six special interest groups (SIGs). We have held two successful membership meetings in New Castle and Kent Counties with presentations on the health status of Delawareans, the Delaware Health Fund, Youth Health Risk Behavior Data, and Intergenerational Health education Programs. Future health education meeting topic will include Healthy Delaware 2010 objective, social marketing, group process, and health literacy among others. We have developed our newsletter and established a HENOD website ([www.henod.org](http://www.henod.org)). Over 20 HENOD members have volunteered to serve as committee or SIG co-chairs. This newsletter contains the current HENOD officers and committee and SIG chairs. Feel free to contact any of our HENOD leaders to get involved in current and future HENOD projects.

As HENOD grows, we hope and expect that health education will play an increasing role in the fabric of health policy and services throughout Delaware. Future opportunities include:

- Planning, marketing and implementation of Healthy DE 2010 process.
- Advocacy for health promotion and disease prevention resources from the Delaware Health Fund (tobacco settlement moneys) and other funding sources
- Support for comprehensive school health education
- Expanded health education services in health care settings
- Collaborative partnership (and future grants) for health promotion across public and private organizations.
- Increase linkages with businesses, faith-based organizations and neighborhood associations to promote healthy lifestyles and health education

The opportunities are endless for promoting health education in DE through HENOD. We have a great future in front of us.

Finally, I would like to thank Fred Breukelman, the Director of Health Education from the DE Division of Public Health and HENOD's Treasurer for his ongoing support of HENOD and particularly for his volunteer work to develop our web site. Great job Fred. I also would like to recognize Lucille Pulliam of the University of DE and one of our Program Committee Co-Chairs. Lucille is retiring and moving to Western Canada. We will miss her greatly for her long service to Delaware and particularly its seniors and her support for health education.

### *The HENOD WEB* (continued from Page 1)

If you have suggestions for additional links, please email us from the site.

We also have a "Message Board," where you can share questions, ideas and information with other HENOD members. The more you post on the bulletin board, the more it will be used by all of us. Soon we will be adding information from the Chairs of the HENOD Special Interest Groups (SIGs) about their activities and plans.

The site will be updated regularly, so visit often. Site development was provided by Steven Breukelman (son of our treasurer, Fred).

### **Upcoming HENOD Meeting Schedule**

**August 4**– Christiana Care's Preventive Medicine and Rehab. Institute, Kennett Pike, Wilmington. 9-11AM. Topics are "Healthy People & Healthy Delaware 2010" presented by Terry Zimmerman, PhD, and "Patient Rights".

**Nov. 3** – American Heart Association, Old Churchman's Road, Newark  
Tentative topics are "Social Marketing" and "Group Process".

## *May Meeting Highlights*

May 5, 2000 9-11AM  
 Bayhealth Medical Center, Dover

*Delaware School Health Survey* - Steve Martin from the Center for Drug and Alcohol Studies at the University of Delaware presented up-to-date information about tobacco and other drug use among 5th, 8th and 11th grade Delaware students from the 1999 Youth Risk Behavior Survey. Steve reported that there has been a slight reduction in tobacco use since the 1995 and 1997 surveys but that Delaware remains above the national average in youth tobacco use. Other areas of concern include binge drinking (5 or more drinks at one setting), lack of seat belt use and high sexual activity compared to other states.

*Intergenerational Health Promotion* - Lucille Pulliam from the University of Delaware, Carol Boyer, administrator of Joining Generations at DHSS, Betsy Wheeler from Central Delaware Health Partnerships and Bob Hall from the Delaware Ecumenical Council reviewed the definition, barriers and goals of intergenerational health

needs and program examples. Program information and materials were distributed (materials are on file). Rob thanked the panel and encouraged health educators to consider intergenerational health education opportunities in our daily work.

*HENOD Organizational Issues* - HENOD Committee and Special Interest Group(SIG) Chairs reported on their activities. These included the HENOD newsletter, program planning, advocacy, among others. HENOD members are encouraged to contact HENOD leaders of committees and SIGs to get involved in at least one HENOD initiative. Deadline for submission of articles for the next HENOD newsletter is May 15.

*Networking* - HENOD members shared information about future health promotion program meetings and conferences.

## **YEAR 2000 OFFICERS/COMMITTEE CHAIRS**

### **Officers**

<b>President</b>	Rob Simmons 428-4277	<b>Treasurer</b>	Fred Breukelman 739-4724
<b>Secretary</b>	Mel Anderson 777-1212	<b>Membership</b>	Chris Manning 633-0200
<b>Program</b>	Deb Pfaffenhauser 674-7099 Deb Cebenka 428-2988		Deb Brown 655-7258
<b>Newsletter</b>	Romie Lutz 475-8100 Donna Loyd-Kolkin 215-862-5480		
<b>Continuing Education</b>	Carol Soha 234-3258 Marian Hay 661-3421	<b>Advocacy</b>	Phyllis Hazel 323-8712

### **SPECIAL INTEREST GROUPS**

<b>Community Health Promotion</b>	Michelle Sobczyk 656-0030, Jim Lafferty 765-9740 Penny West 629-6615, ext. 2609
<b>Worksite Wellness</b>	Marian Hay 661-3421
<b>Children and School Health</b>	Carlye Gerhard 428-6582, Janet Arns 739-4885 Leonard Young 652-8338
<b>Health and Aging</b>	Chris Oakes 577-4791, Norine Watson 733-5339
<b>Faith Communities</b>	Bob Hall 225-1040 Lavaida Owens-white 428-2653
<b>Health Care Settings</b>	Priscilla Jones 678-2000 Linda Brittingham 733-2364

## Meeting with National SOPHE President and Educators from PA and NJ proves successful!

Representatives from HENOD met with the National Society of Public Health Education Inc. (SOPHE) President, Dr. Kathleen Roe, and leaders from the PA and NJ SOPHE Chapters on March 31 as an aftermath to the 10th Annual Health Education Institute organized by PA SOPHE.

After delivering the closing session, Dr. Roe participated in an informal meeting with health education leaders in the region. She discussed national SOPHE initiatives in such areas as professional development, practice standards, advocacy, the CHES credential, academic initiatives, chapter and affiliate mentoring, development and organizational issues, and regional collaboration.

Sue Lachenmayr, NJ SOPHE member and national SOPHE advocacy chair discussed practice standards and impact on employment of health educators, obtaining Chapter project grants, and the importance of maintaining a current member database. NJ SOPHE will host its annual meeting on December 7th and invited PA and DE groups to attend.

Valerie Hamaday, PA SOPHE President and Gina Bitett, President-elect, discussed the PA SOPHE Chapter. They highlighted their excellent annual conference organization and their struggles with membership recruitment. Members are encouraged to join both national and PA SOPHE via one membership form which has helped to obtain both national and State members. They are developing a

brochure on the value of health educators to position ourselves better in the workplace.

HENOD representatives included Rob Simmon (President) Carol Soha (Professional Development), Carlye Gerhard (School Health SIG), Chris Manning (Membership Chair), Mary Ellen Berley, and Connie Green-Johnson. The group discussed the current status of HENOD membership (over 50+ members!), current leadership roles, challenges with leadership recruitment, current SOPHE affiliate status and the prospect of becoming a SOPHE Chapter next year. Suggestions made to HENOD members included obtaining 501 c3 status, connecting with other small area chapters such as Rhode Island, seeking stronger university and student ties, creating a scholarship program for CHES, partnerships with other organizations such as pharmaceutical and linking the HENOD web site with the SOPHE web site.

The three states agreed to expand its communication amongst one another to lead to increased collaboration. The 10th Annual Health Education Institute was a huge success with some excellent presentations. Those include, keynote presentations by Mike Samuelson, Co-Founder of the National Center for Health Promotion on "Future Trends in Health Promotion" and Kathleen Roe on "Four Key Health Education Lessons From the Past Twenty Years."

### So What is SOPHE Anyway?

The Society for Public Health Education (SOPHE) was founded in 1950 to provide leadership to the profession of health education and to contribute to the health of all people through advances in health education theory and research, excellence in health education practice, and the promotion of public policies conducive to health. SOPHE is an independent association comprised of a diverse membership of health education professionals and students. With its primary focus on public health education, SOPHE provides leadership by promoting a code of ethics, standards for professional prepara-



tion, research and practice, professional development and public outreach.

The SOPHE national office is headquartered in Wash. DC. There are currently 20 local and regional SOPHE Chapters. Membership includes:

- \* Annual subscription to Health Promotion Practice (qtrly).
- \* Annual subscription to Health Education & Behavior (bimthly).
- \* "News & Views" newsletter (bimonthly)
- \* Special interest groups for networking and peer exchange
- \* *Membership Directory and Buyer's Guide*
- \* Reduced fees for national SOPHE meetings
- \* Video teleconferences and distance learning opportunities in health education.....and much more!!!

HENOD members are encouraged to become a member of national SOPHE. Further information can be obtained on the SOPHE website at [www.sophe.org](http://www.sophe.org) or by contacting the national office at (202) 408-9804.

## **REACHING THE FAITH COMMUNITIES**

**By Robert P. Hall, Mdiv, DAPA  
Chair, Faith Communities Special Interest Group**

Over the past decade, there has been an emerging awareness of the relationship between the faith and health, especially public health, communities. This relationship has manifested itself in a number of forms, ranging from local projects such as Interfaith Volunteer Caregivers and parish nurses to broad, systems-changing initiatives such as cross training of medical students and seminarians and community organization for health service improvement.

Faith communities--churches, synagogues and mosques--are natural partners in the promotion of health and prevention of disease. In his landmark book *Deeply Woven Roots*, the Reverend Gary Gunderson, Director of the Interfaith Health Program of the Carter Center, lists eight strengths of faith communities that qualify them for community-changing partnerships with health agencies. These are, the strength to accompany, the strength to convene, the strength to connect, the strength to tell stories, the strength to try, the strength to bless, the strength to pray, and the strength to endure.

In a series of community meetings about health matters held in 1998 and 1999, local lay persons reported a desire to receive accurate health information through their faith communities. They said that they wanted their clergy persons to speak out on health issues, including criticizing popular but possibly destructive lifestyles. This is because the faith communities still have the moral authority to promote health and wellness in our society.

One response to these interests began in 1997 when the Delaware Ecumenical Council on Children and Families, in collaboration with the leading voluntary health agencies, produced an initial set of brochures and pamphlets on the critical health status problems of breast cancer and heart disease. These sets consisted of resources for clergy and other congregational leaders on the health status problem and reproducible fliers for the laity summarizing the problem, its incidence and strategies for prevention and/or early intervention, e.g., screenings. This series now includes materials on issues ranging from alcoholism to family violence to other forms of cancer to vaccine-preventable diseases.

Faith communities have responded positively to the series. They indicate a need to deliver health education and information consistently to their congregants. Presently, the Delaware Ecumenical Council, in partnership with the Screening for Life Program of the Division of Public Health, is surveying the State's 450+ faith communities to determine the best formats in which to deliver health promotion and disease prevention information.

A caucus on faith communities and public health is rapidly rising in status within the American Public Health Association. Locally, the role of the faith communities in health promotion and disease prevention is the subject of a Special Interest Group within HENOD. For more information or to become involved, please contact the Chair.

## **TOOLS OF THE TRADE: Assessing Individual and Community Needs for Health Education**

*The purpose of this regular feature is to educate the reader about the several competency-based health education responsibilities of the Society of Public Health Education. Each edition will highlight one these responsibilities and give practical examples of application. This edition, our guest author is **Chris Manning, CHES, Membership Chair.***

The primary purpose of needs assessment is to gather information to determine which, if any, health education activities are appropriate in a given setting. Needs may be basic (essential to the comfort and well being of every human) or indicators of a gap between conditions as they are and as

they ought to be. Although the term "problem" is frequently used interchangeably in health education with "need", strictly speaking they are different.

A health prob-

lem is defined as a potential or real threat to physical or emotional well being, a melioration or removal of which is a need.

*"Needs assessment is the systematic, planned collection of information about the health knowledge, perceptions, attitudes, motivation, and health practices of individuals or groups..."*

Needs assessment is the systematic, planned collection of information about the health knowledge, perceptions, attitudes, motivation, and health practices of individuals or groups and the quality of the socioeconomic environment in which they live. Assessing needs logically precedes program planning. It provides data that determine whether a health education program is justified, and if so, what its nature and emphasis ought to be.

*(continued on page 6)*

## Tools of the Trade (continued from page 5)

In a community setting, the health educator has a variety of data sources available – public health departments, community organizations, census reports, etc. This data information about perceived health needs. If specific behaviors or health practices are causally linked to the incidence of major health problems, then a health education program may be planned to motivate and facilitate voluntary, desirable changes in behavior.

In a medical setting, data pulled from patient records, billing information and diagnosis codes provide significant background from which to gauge

“need”. Input from providers regarding frequency of illness, observed patient education levels, and other ancillary information may also provide insight on potential health program needs. In this setting, health education focuses both internally (medical staff) and externally (patients and their families).

Health education in school settings varies significantly from that of community or medical. Often needs assessments result in curriculum changes and not in tailored behavior change programs. Often the data required for this type of assessment comes from national and state agencies in

the form of standards and benchmarks. However, assessing the health knowledge, attitudes, and behaviors of both students and staff certainly complements this information.

Finally, for those practicing in worksite settings, an assessment is vital to program planning. Sources of information include insurance claims, absenteeism records, accidents reports, and surveys of perceived employee health needs and interests. Analyzing all this data together provides an excellent framework upon which to develop a comprehensive worksite program.

## Healthy Delaware 2010

Healthy Delaware 2010 is the people of Delaware’s prevention agenda and the community health guide for the decade. This unique private-public health initiative represents a shared responsibility and opportunity to improve the health and quality of life for all Delawareans.

Healthy Delaware 2010 Goals:

- To mobilize every sector in Delaware in our shared responsibility to ensure healthy communities.
- To eliminate health disparities among all groups by ensuring that all people in Delaware have access to the services, information, and support they need to be healthy.
- To emphasize prevention in the focus of health efforts, policy, and resources in Delaware.

- To establish Delaware as the “First State in Health”.

A number of working committees have been organized to develop, market and implement the Healthy Delaware 2010 initiative including Development, Marketing, Sustaining and Evaluation. All HENOD members are encouraged to take an active role in this important decade-long, state-wide, health promotion initiative. The August HENOD meeting will discuss HD 2010 and welcome Terry Zimmerman, HD 2010 Coordinator to speak about it. *Be sure to attend!*

For further information, contact Terry Zimmerman, at (302) 739-3034 or send an email to Terry at [tzimmerman@state.de.us](mailto:tzimmerman@state.de.us). Visit the Healthy Delaware website at [www.healthydelaware.com](http://www.healthydelaware.com).

## ***C.H.E.S....To Become a Certified Health Education Specialist***

*By Marian Hay, Co-Chair, Continuing Education*

The National Commission for Health Education Credentialing, Inc., or NCHEC (n-Check) is a non-profit organization whose major purposes are to: 1) develop and promote standards for professional education of health educators 2) develop and administer a national competency-based examination and 3) insure professional development through continuing education.

The CHES (chez) or Certified Health Education Specialist designation signifies that an individual has met the proper qualifications as required by NCHEC and has successfully passed a competency-based examination demonstrating skill and knowledge of the basic level standards or responsibilities upon which the credential is based.

Eligibility to sit for the CHES examination is based exclusively on academic qualifications. An individual is eligible to sit for the examination if she/he has a bachelor's, master's or doctoral degree from an accredited institution of higher education; AND 1) an official transcript (including course titles) that shows a major in health education, e.g., Health Education, Community Health Education, Public Health Education, School Health Education, etc. OR 2) an official transcript that reflects at least 25 semester hours or 37 quarter hours of course work with

specific preparation addressing the seven areas of responsibility.

The seven areas of responsibility that make up the standards of the credential are: 1) **assess** individual and community need for health education 2) **plan** effective health education programs 3) **implement** health education programs 4) **evaluate** health education programs 5) **coordinate** the provision of health education services 6) **act** as a resource person in health education and 7) **communicate** health and health education needs, concerns and resources.

The certification period for CHES is 5 years. During that time the CHES must accumulate 75 hours (60-minute hours) of continuing education credits. Currently, the Continuing Education Contact Hour (CECH) Program is based primarily on those events that have made application to and have been approved by NCHEC. These are referred to as CECH Category I and are offered by designated providers. CHES must acquire at least 45 of the 75 CECH necessary for recertification from Category I. However, all 75 CECH necessary for recertification can come from this category.

A CHES may attend an event that does not have CHES designation. These CECH events are identified as a NCHEC non-designated provider and referred to as Category II. CHES may accumulate a maximum of 30 CECH

for recertification from this category. A Category II CECH claim form can be found on the NCHEC website (see below).

CECH are those experiences that assist in the development or enhancement of the knowledge and skills directly related to the seven areas of responsibility and the individual's professional occupation. CECH can be obtained in a variety of ways: 1) conference sessions, workshops, seminars; 2) directed self-study (found in health education association journals and selected professional publications); 3) teleconferencing, video taped presentation, or Internet activity; 4) presentation at an NCHEC designated event (1 CECH for each hour presenting); 5) college level course work (usually these are Category II CECH, unless the individual school is an NCHEC designated provider; call the NCHEC office for confirmation); CHES are encouraged to accumulate a minimum of 15 CECH per year.

Do you want to know more about becoming a Certified Health Education Specialist? Log on to the NCHEC website at [www.nchec.org](http://www.nchec.org). NCHEC can also be contacted by calling (888) 673-5445 for CHES exam and test site information or (888) 624-3248 for general information and continuing education inquiries. NCHEC can also be reached at 944 Marcon Blvd., Suite 310 Allentown, PA 18103

### **MARK YOUR CALENDAR!**

*Friday, June 23rd – "Social Marketing and Health Promotion", Satellite Conference – University of DE, McDowell Hall, Rm 114. 8:30-3PM. Fee – \$30.00. For information, contact Rob Simmons, 428-4277.*

*Nov. 10-12th, 2000 – 51st SOPHE Annual Conference. "Taking Risks: Revitalizing the Revolutionary Spirit of the Profession." Boston, Mass. For registration, contact SOPHE at [www.sophe.org](http://www.sophe.org).*

THE HEALTH EDUCATION NETWORK  
OF DELAWARE

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**H.E.N.O.D.**

Looking to make new contacts outside your usual circle? Frustrated with your health education programs? Looking to share your successes? If you answered yes to any of these questions, the Health Education Network of Delaware might be for you. As health education moves into the 21st century we can be more effective in our public health efforts and ultimately make a difference right here in Delaware.

provide health and the sur- the profes- needed to challenging provides op- work with the State, de- expand your un- education issues personal safety.

Remember, HENOD is a professional organization for YOU, and not another Coalition, workgroup, or committee requiring more of your work time. For membership questions, or to find out more about HENOD's benefits contact Chris Manning @ 302-633-0200 (work) or 302-658-1583 (home) or email to: [cmanning@heart.org](mailto:cmanning@heart.org).

**Join HENOD!**

HENOD is designed to provide health educators in Delaware rounding areas with sional variety of skills be successful in this career. HENOD portunities to net- others from across velop new skills, and derstanding of health from infectious diseases to