



Health Capsules

Metropolitan Washington Council of Governments

Region Hosts Obesity Summit: Healthy Eating & Active Living

On January 11, 2005, the Metropolitan Washington Council of Governments co-hosted the Washington Regional Healthy Eating & Active Living Summit. This summit, funded by Kaiser Permanente and Consumer Health Foundation, included panel discussions on healthy eating and active living, question and answer sessions and a COG health officers discussion.

The Summit included a range of prominent speakers including health officers, Dr. Gloria Addo-Ayensu, Health Director from Fairfax County, Dr. Frederick Corder, Director of Prince George's County Health Department, and Dr. Gregg A. Pane, Interim Director of the District of Columbia Department of Health. With the Washington metropolitan region's population of 4.2 million swelling to 4.5 million daily with commuters and visitors, CDC estimates the state-level costs of obesity in the COG member districts to be \$3.5 billion.

Obesity is a growing health issue in the United States. In the last 20 years, the rate of obesity has risen substantially. The 1999-2002 National Health and Nutrition Examination Survey found that 16 percent of children and adolescents are overweight. Factors that contribute to this problem include poor lifestyle choices (i.e. lack of physical activity and unhealthy diet) as well as genetics. In addition, our society has become more sedentary as a product of advanced technology.

Although obesity is present across all income levels, poverty is correlated with higher levels of obesity. Low-income individuals and families have more difficulty obtaining healthy food and adequate exercise, and certain areas in the region are host to more of these households. Single mothers were a group of interest for obesity programs because they headed nearly half of the low-income households in the metropolitan region.

School lunch and breakfast programs are a major source of nutrition, especially for children from low-income households. All school districts have these programs; however, it is challenging to find data about their impact on obesity (see Report Card below).

In addition, Women Infants and Children (WIC) programs are available across the region. These nutrition programs help mothers purchase healthy food and provide nutrition education. The data from this program is one of the few sources of data on childhood obesity.

For more information on local obesity initiatives in the Metropolitan area, see Page 4. Also, to learn more about obesity in our region, please see view the **Regional Obesity Issue Brief** at <http://www.mwcog.org/publications>.

FAIRFAX COUNTY PUBLIC SCHOOL DISTRICT: B		PRINCE GEORGE'S COUNTY PUBLIC SCHOOL DISTRICT: C-		MONTGOMERY COUNTY PUBLIC SCHOOL DISTRICT: C-	
Obesity and Chronic Disease Prevention	28.0	Obesity and Chronic Disease Prevention	25.0	Obesity and Chronic Disease Prevention	31.0
Health Promotion and Nutrition Adequacy	36.7	Health Promotion and Nutrition Adequacy	38.7	Health Promotion and Nutrition Adequacy	25.4
Nutrition Initiatives	20.0	Nutrition Initiatives	8.0	Nutrition Initiatives	14.0
TOTAL	84.7	TOTAL	71.0	TOTAL	70.4

Source: Physician's Committee for Responsible Medicine: 2004 Report Card for school district's participating in the USDA's National School Lunch Program (NSLP).

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Special Points of Interest:

- The 2004 Regional Gang Summit was an overwhelming success!

Check out the details of the summit held on September 29th at www.mwcog.org/services/health/regionalgang



Access to Healthcare Trends in District of Columbia vs. Nationwide

Year	District of Columbia % Lacking Access, no. people	Nationwide Median %, no. states
1999	13.1 152,000	12.4 52
2000	11.5 188,000	11.8 52
2001	12.3 188,000	13.3 54
2002	10.8 209,000	14.1 54

Source: BRFSS, www.cdc.gov

Hispanics' Experience with Health Care in the District

Kaiser Family Foundation produced a new issue brief which summarizes the experiences of Hispanics and their opinions related to access to healthcare in the District of Columbia. It examines how Hispanics' ages 18-64 manage with access to healthcare in comparison to non-Hispanic African Americans and whites in D.C. within the same age group.

Forty-three percent of adult Hispanics aged 18-64 did not have health insurance in 2003. Of these, 32% did not have health insurance at all and

11% were enrolled in the D.C. Healthcare Alliance, a locally funded public/private partnership intended to help those uninsured. Uninsured Hispanic adults tripled the number of uninsured adults in D.C.

Although most adult Hispanics are employed, many have low-wage jobs which do not provide health benefits. Only 43% of Hispanic workers have insurance provided by their employers compared to 61% of non-Hispanic African Americans and 91% of non-Hispanic whites.

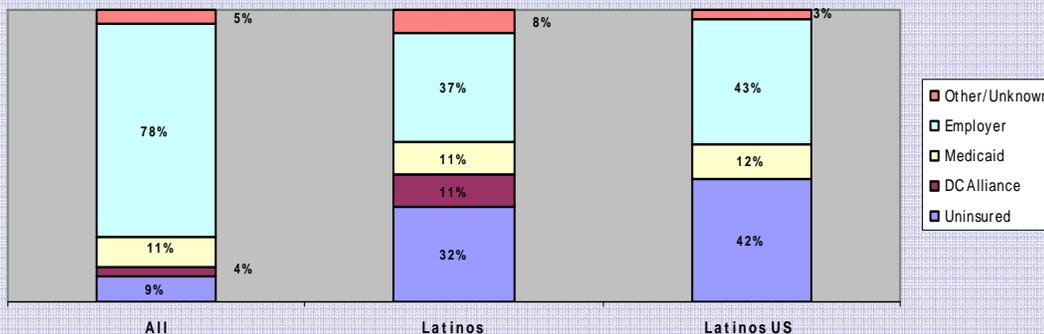
In 1996, legislation passed by the federal government limited immigrant access to various benefit programs including Medicaid. This proves difficult for newly arrived and undocumented immigrants.

In comparison to non-Hispanic African Americans and whites, Hispanics have the most barriers to health care. Approximately 40% of Hispanics have noted that they did not seek medical care within the past 12 months. The majority do not have primary care physicians and therefore do not get preventative care and early diagnosis. These barriers stem from factors such as: language and racial barriers, lack of routine care, and a reliance on clinics and emergency room visits.

Policymakers and community leaders need to focus on these issues facing the Hispanic population. As a growing group in the District, challenges in health care access will increase as well.

The full issue brief can be found at: www.kff.org/minorityhealth/7229.cfm.

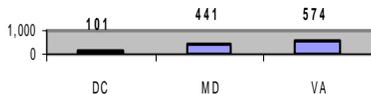
Health Insurance Coverage of Adults 18-64 in the District of Columbia, by Race/Ethnicity, 2003



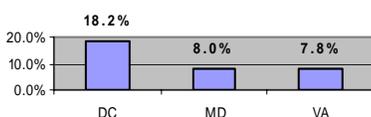
Note: Data may not total 100% due to rounding. "Other/Unknown" category includes other, unknown and Medicare.

Source: Kaiser Family Foundation. D.C. Health Care Access Survey, October 2003; Kaiser Commission on Medicaid and Uninsured/Urban Institute Analysis of the March Current Population Survey.

Number of People Covered by Medicaid (in thousands)



Percent of People Covered by Medicaid



Medicaid Coverage in the District, Maryland, and Virginia

Medicaid Enrollment and Expenditures 2003

Area	Enrollment/ % Pop.	Total Expenditures	Federal Participation	% Federal Money
DC	101,000/ 18.2%	233,808,943	167,220,227	70%
MD	441,000/ 8.0%	1,217,251,945	633,445,192	50%
VA	574,000 /7.8%	753,457,326	400,779,419	50%

Source: www.census.gov

President Bush's proposed cuts to Medicaid may be significant for the Washington Area. The table above shows the coverage of Medicaid within the District of Columbia, Maryland, and Virginia and federal participation within the total expenditures. In D.C., 18.2% of people depend on Medicaid while a smaller percentage of people, 8% and 7.8% depend on it Maryland and Virginia, respectively. If federal funds are reduced, state options will be to cut services or find other funds to maintain current levels.



Unsafe driving among teenagers within the region spirals out of control

Since the start of the school year in September, there have been at least 19 youth fatalities from reckless driving in the COG region.

In Maryland, 4 billion dollars is spent annually on highway crashes with a large percentage due to teen driving accidents. Five bills were passed by the Maryland House of Delegates on March 17th to curb this problem. The bills stated that teenagers with provisional licenses will not be able to use cell phones

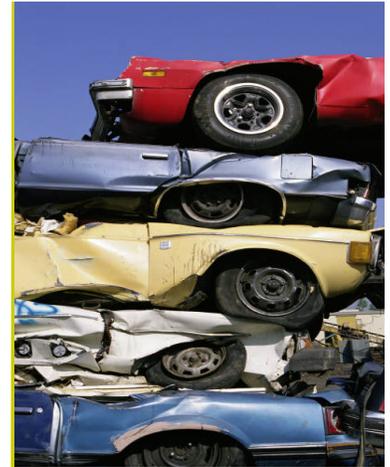
except in emergencies and will not be able to carry non-family teenage passengers during the first five months of the 18-month provisional period.

In addition, provisional drivers face increases in penalties for violating seat belt laws or nighttime curfews. Training requirements will also increase before teenagers receive full driving privileges.

Highway safety experts say distraction is the leading cause of teenage traffic accidents.

The controversial bills remain an important topic in Maryland. Some parents say the measures are not strict enough while others are concerned with carpooling restrictions and the impact on rural and poor students who rely on their friends for transportation.

The Senate has passed a similar bill on passenger restriction and although versions of the cell phone ban and the training requirements have not come to vote, supporters expect them to pass in chamber.



There have been at least 19 youth fatalities in the Washington area since the start of the 2004-2005 school year.

Research Conducted on Driver Distraction in Fairfax

A study at the George Mason University in Fairfax, Virginia tested the mechanisms of underlying interrupted task performance - similar to when a driver shifts attention between focusing on the road and to an in-vehicle task such as talking on a cellular phone. The research showed that the interruptions had a significant impact on task resumption times, indicating that the worst

time to interrupt task performance is during the middle of a task. This effect was also associated with age where performance decreased with increase in age.

Applications of this research include the design of in-vehicle device user interface, the timing of in-vehicle messages, and current metrics for assessing driver distraction.

Source: *Journal of Human Factors*, 2004 Winter; 46(4): 650-63

Evaluation of Mosquito Trapping Systems in MD

Five types of mosquito trapping systems were evaluated in Beltsville, MD at the Agricultural Research Center containing extensive and diverse mosquito-breeding habitat.

Parameters recorded for each species were total catch, percent males, total females, and likelihood of blood-fed/gravid (pregnant) female entrapment.

The results showed that the gravid traps caught fewer mosquitoes, but caught a higher percentage of gravid females. The most productive trap was the open cages because it caught a substantial number of species and an eclectic mixture of males,

Source: *J American Control Assoc.* 2004 Sept; 20(3): 254-60



Mosquito Traps Evaluated: CDC's New Standard Miniature Light Traps with and without CO₂, CDC gravid traps, partially open 1.8-m³ cages, and Fay-Prince traps.

Outreach on Wheels: Bringing Health Information and Technology to D.C. Communities

There is a distinct connection between health disparities and literacy rates. To focus on this problem, in the Fall of 2003, several partners in Washington D.C. launched *Outreach on Wheels*, a program providing communities with access to online health resources as well as training on how to use and evaluate the resources.

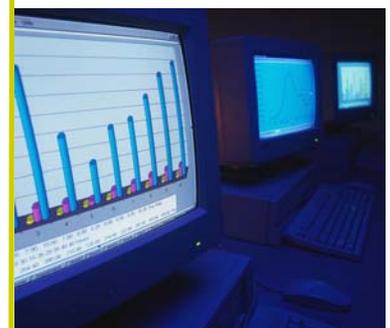
Washington D.C. has one of

the lowest rates of literacy and one of the fastest growing immigrant populations in the U.S. Simultaneously, the metro area has one of the worst health status indicators for obesity, diabetes prevalence, and HIV/AIDS.

In a recent *Outreach on Wheels* program, students displayed their knowledge through presentations and displays. Not only

were they informed about the health information they learned, they taught others as well. Positive feedback has been received about the program which suggests that integrating health content and literary skills development is not only feasible, but also meet adult learners needs.

For more information, go to <http://www.lacyn.org/resources/publications/harvest/>



Outreach on Wheels is a joint partnership between SEA, Partners, Upper Cardozo, and Family and Medical Counseling Service, Inc.



Reports and Resources of Interest

Community Emergency Exercises in D.C.'s Ward One through Six

January 8, 2005-March 12, 2005

(http://dcema.dc.gov/dcema/cwp/view.a.11.q.621547.dcemaNav_GID.1535.asp)

The District of Columbia Emergency Management Agency (DCEMA) has conducted a series of community exercises for people in Wards 1-6 on selected Saturdays, which gave residents the opportunity to practice their response to an emergency using the plans developed for their community.

Virginia Supreme Court in Fairfax County Fire & Rescue Dept. v. Mottram

A firefighter/paramedic who developed chronic, disabling post-traumatic stress disorder (PTSD) after responding to a fatal fire was denied benefits because he had previously reported symptoms of the disorder and the statute only recognized a single traumatic incident.

The court held that PTSD resulting from multiple traumatic stressors may be considered a compensable occupation disease. This decision provides benefits for treatments and encourages earlier treatment of traumatic stress in this group.

Child Trends DataBank Posts New Indicator on Steroid Use Among Male High School Athletes

In the 2002-2003 school year, five percent of twelfth-grade male athletes used steroids compared with two percent who did not compete in athletics.

For the full report go to: www.childtrendsdatbank.org

State and Local Childhood Obesity Initiatives (from page 1):

Virginia

* Alexandria Health Dept. partners with Alexandria Schools to promote better nutrition and increase physical activity, lowering risk for obesity and chronic disease.

http://ci.alexandria.va.us/city/health/medical_services.html#nutrition

**Streamline*— a new child and adolescent

Maryland

* Suburban Center for Eating Disorders and Adolescent Obesity in Bethesda, MD began a fitness program for children and adolescents who are overweight.

http://www.suburbanhospital.org/eating_disorders/default.htm

* Prince George's County Center for Healthy Lifestyles Initiatives (CHLI) promotes the adoption of healthy lifestyles.

District of Columbia

* Children's Hospital piloted Healthy Schools initiative.

*Center for Science in the Public Interest completed a project on improving the quality of snack foods in vending machines in schools.

<http://www.cspinet.org/>

obesity program run by Columbia Associates.

*Loudoun County Health Dept. WIC program

<http://www.loudoun.gov/services/health/nutri.htm>

*Arlington County's WIC program and Child Health Clinic

<http://www.arlingtonva.us/>

For more information, contact 301-883-7847

* Center for Preventive Health Services Nutrition and Physical Activity Program

<http://www.fha.state.md.us/wic/>

* Montgomery County Public Schools made policy changes in types of foods allowed in vending machines and when students are allowed access.

*Project Health-Girls Fitness and Nutrition program focuses on girls aged 10-14.

*Special Supplemental Nutrition Program for WIC to improve lifelong health and nutrition of pregnant women, new mothers, infants, and children.

<http://dchealth.dc.gov/services/wic/index.shtm>

The Metropolitan Washington Council of Governments is the association of 19 local governments working together for a better metropolitan region. COG provides a focus for action and develops sound regional responses to such issues as the environment, affordable housing, economic development, health and family concerns, human services, population growth, public safety and transportation.

To subscribe to *Health Capsules* or to share information on regional health issues, please contact Sandra Adomako-Bempong at 202-962-3275 or sabempong@mwkog.org.



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