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Arthritis Exercise Program for Seniors Wins Award

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An exercise and health education program for seniors with arthritis was recognized for innovation and quality in health care and aging by the American Society on Aging, in collaboration with Pfizer Medical Humanities Initiative, at its annual meeting in Washington March 29.

The program was one of six to be awarded the recognition, which includes a \$2,500 check.

Fit and Strong! was developed by IPRC researcher Sue Hughes, professor of community health sciences and co-director of the Center for Research on Health and Aging in the UIC School of Public Health.

Dr. Hughes, a lifelong educator and researcher on aging issues, has seen several exercise programs come and go over the years. But she said few have been designed to reinforce long-term adherence to regular physical activity.

Fit and Strong! includes a 60-minute physical activity component three times a week in its eight-week regimen. But Dr. Hughes said what sets it apart from other programs is what happens next.

"The last 30 minutes are devoted to group discussion and problem-solving to enhance disease management and improve confidence that these seniors can maintain physical activity over time," Hughes said.

Approximately 20 million people over age 65 are affected by arthritis in the United States, and it is estimated that 40 million

will suffer arthritis by 2030. Sufferers experience regular and often severe pain that restricts their movement and discourages exercise.

Painful lower extremity joints, in particular, can lead to a sedentary lifestyle that is associated with reduced aerobic capacity and muscle strength and increased risk of coronary artery disease and stroke.

A randomized trial of Fit and Strong! funded by the National Institute on Aging found that participants experienced significant improvements in ability to maintain their exercise program and decreased extremity stiffness at two months, when the formal program ends. These improvements were sustained at six and 12 months.

Dr. Hughes said Fit and Strong! has been recommended by the Administration on Aging of the Department of Health and Human Services and the National Council on the Aging as an effective program that senior centers can adopt nationally.

With funding from the Centers for Disease Control and Prevention (CDC), Dr. Hughes and her staff are now working with the National Arthritis Foundation to train instructors to conduct Fit and Strong! in five Arthritis Foundation chapters in the next two years. Dr. Hughes also has received a grant from the CDC to bring Fit and Strong! to 1,200 participants in Illinois and North Carolina through a collaboration with local aging agencies and local service providers.

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Meet the new IPRC Project Director: Emily Anderson, MPH, PhD



IPRC is pleased to welcome back Emily E. Anderson, MPH, PhD, as the new project director.

Dr. Anderson joins IPRC from the American Medical Association, where she was a senior fellow in the Institute for Ethics and a research associate.

Dr. Anderson earned her Master of Public Health at UIC and served as the IPRC center coordinator from 2000-03. She then completed a PhD in health care ethics at St. Louis University.

As project director, she will oversee the Community Advisory Board and coordinate events such as the annual wellness fair.

Study to Examine Mental Health and Chronic Disease Among Immigrants

An IPRC researcher has been awarded funding to study the potential effects of acculturation on mental health conditions and chronic disease among Latino immigrants living in rural Illinois.

Four rural communities growing Latino populations have been selected for the community-based study. Researchers will work with community members from Beardstown, the Carbondale-Cobden area, DeKalb, and Monmouth, located in four different regions of Illinois.

Through surveys and focus groups of 100 immigrant participants, the teams will collect detailed information on acculturation, mental health conditions such as stress and depression, and chronic disease among the community members.

“Despite the growth in the Latino immigrant population in Illinois and nationwide, relatively little is known about the mental health of this population and how acculturation impacts both the mental and physical health of this often hard-to-reach group,” said Karen Peters, the study’s lead

researcher and assistant professor of health policy and administration.

Peters and her colleagues have worked with Latinos in rural Illinois for the past five years. “Our previous work with this population shows a need for programs addressing both mental and physical health issues,” said Dr. Peters.

“Relatively little is known about the mental health of recent Latino immigrants.”

“We also noticed dramatic differences in mental and physical health status depending on how long immigrants have lived in the United States.,” she said. “The ultimate aim is to create programs and strategies that incorporate Latino culture and language.”

Following the initial information collection, the researchers will award “mini-

grant” funding for the communities to develop and test health education strategies to increase awareness about acculturation, mental health and physical health. Using these grants, each community will create materials and programs tailored to fit the needs of their populations.

IPRC will partner with the Northern Illinois Area Health Education Center (NILAHEC) and the Rural Hispanic Health Alliance (Alianza) on the project, which is based out of the National Center for Rural Health Professions (NCRHP) at the College of Medicine in Rockford.

The study is supported by the National Association of Chronic Disease Directors and Centers for Disease Control and Prevention.

Working with Dr. Peters are Benjamin Mueller, director of the NILAHEC, Sergio Cristancho, research assistant professor at the College of Medicine at Rockford, and Marcela Garces, director of community outreach of the NCRHP.

Special Focus on Oral Health

What is oral health?

The World Health Organization defines oral health as “being free of chronic mouth and facial pain, oral and throat cancer, oral sores, birth defects such as cleft lip and palate, periodontal (gum) disease, tooth decay and tooth loss, and other diseases and disorders that affect the mouth and oral cavity.”

The most common oral diseases are tooth decay and gum disease, and most oral health problems are preventable. The elderly, low-income, and minority populations are especially affected by oral health problems.

What is the IPRC doing about oral health?

IPRC researcher Karen Peters is evaluating the implementation of the second Illinois Oral Health Plan. Dr. Peters is working with the Illinois Department of Public Health Division of Oral Health, the IFLOSS Coalition, the UIC College of Dentistry, and other statewide partners to collect information about how the plan, which was released in 2007, is being used throughout the state.

What is the Illinois Oral Health Plan?

The plan identifies state oral health needs and articulates goals, priorities and strategies to improve the oral health of people living in Illinois. Many different groups – public, private, and nonprofit – throughout the state use the plan as a guide for program and policy planning. The plan encourages collaboration among these groups to achieve the goals.

The plan was developed by a steering committee, with input from community residents, dentists, dental hygienists, public health workers,

school officials, advocates, policy makers and others from all over Illinois. The first Illinois Oral Health Plan was created in 2001 in response to a U.S. Surgeon General report on oral health that identified oral disease as a “silent epidemic.”

Oral Health in Illinois

Last Dental Visit

Illinois residents who saw a dentist at least once during the past year: 67.1%

Workforce

Number of dentists per 100,000 people: 68.1

Illinois state rank for dentists per capita: 13

Tooth Loss

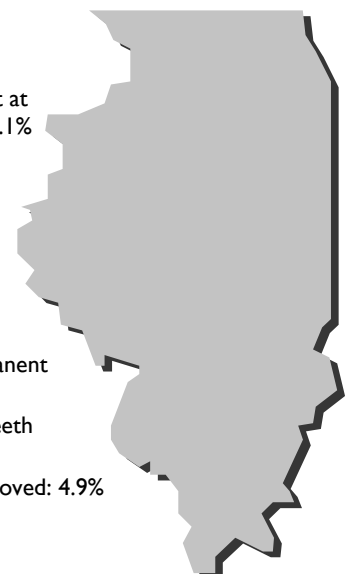
Adults who have had 1 — 5 permanent teeth removed: 29.9%

Adults who have had 6 or more teeth removed, but not all: 10.5%

Adults who have had all teeth removed: 4.9%

Oral Cancer

Men: 16.4%, Women: 6.1%



Community Conversation

Meet Nancy LePain, MSN, APN, of the National Kidney Foundation of Illinois



KidneyMobile Director Nancy LePain helps identify community members who are eligible for Making the Connection Healthy Living Program.

For more than a year, IPRC has partnered with the National Kidney Foundation of Illinois (NKFI) to provide 19 free diabetes and kidney screenings to more than 1,100 community members in the Southwest Chicago neighborhoods of West Lawn, Chicago Lawn, and Gage Park. Through this partnership, IPRC recruited participants for its diabetes prevention study, Making the Connection Healthy Living Program. NKFI uses its KidneyMobile to screen potential participants and other community members. HealthLines talked with KidneyMobile manager and NKFI nurse, Nancy LePain, about the partnership.

the Connection Healthy Living Program. Diabetes is the leading cause of kidney disease, so it's important for us to be involved with programs like Making the Connection.

What do you enjoy about partnering with IPRC on this project?

We have developed a good collegial relationship with IPRC. We all work well together. We have a common goal: improved education and healthcare for minority populations who are at risk for high blood pressure, diabetes and kidney disease.

What effect does this partnership have on NKFI?

The partnership has helped us to gain access to neighborhoods where there are high rates of diabetes and hypertension. Working with IPRC employees fluent in Spanish makes the screening experience more comfortable for the community members.

Tell us more about the KidneyMobile and its successes.

The KidneyMobile has travelled more than 25,000 miles throughout Illinois to bring free health screenings and education to diverse communities. Since it launched in 2005, the KidneyMobile has screened more than 9,000 people for diabetes, high blood pressure, and kidney disease.

We partner with hospitals, churches and federally-qualified health centers, and we have an extensive follow-up program so that patients get the necessary care regardless of their ability to pay.

Why did NKFI decide to partner with IPRC?

Partnering with IPRC is a win-win. We help to identify people who are at risk for developing kidney disease, particularly African Americans and Latinos, and the study gets to enroll participants in Making

Making the Connection Healthy Living Program: Community Voices

HealthLines visited Hurley Elementary School on Thursday, March 20, to ask Making the Connection Healthy Living Program study participants about their impressions after six months in the IPRC core study. Healthy Life Coach Adriana Morales translated their comments from Spanish.

What has been the most valuable part of the Making the Connection Healthy Living Program for you?



Irma Carabez

"My favorite part of the program is the information about how to eat and stay healthy. The coaches are very supportive."

María Carmen García

"The most important part of the program is learning about staying healthy through physical activity. My favorite activity is walking outside or riding a bike when the weather is nice."

Sylvia Peña

"The most valuable part of the program is learning how to feed my children healthy food and keep my family active. I like to exercise with my daughters. We walk a lot in the park."

Rocio Aguilar

"This program has helped a lot with my self-esteem. The support from the coaches is valuable: they help keep me working to reach my goals."

IPRC Researcher to Study Smoking-Related Television Ads



Sherry Emery wants to know what makes smoking-related TV ads effective.

The Centers for Disease Control and Prevention (CDC) is funding an IPRC-affiliated researcher to extend her study on smoking-related television advertising to include an examination of specific ad characteristics.

With funding from the National Cancer Institute, the researchers purchased and analyzed ad ratings data from Nielsen Media Research to study how exposure to smoking-related television ads is related to smoking behavior.

This new grant from the CDC will allow the researchers to further describe the volume and type of smoking-related ads in the United States and examine how certain characteristics moderate the effectiveness of such ads on smoking behavior. They will analyze ads sponsored by the tobacco

industry and anti-smoking ads created by state health departments and the American Legacy Foundation.

“Research shows that tobacco ads appear to influence smoking behavior, but now we want to know why,” said Sherry Emery, the study’s lead researcher and senior scientist at the Institute for Health Research and Policy, also home to the IPRC.

Cataloging characteristics such as the primary messages, target audience, and overall production value of the ads may lead to a better understanding of what makes these effective, Dr. Emery said.

“Right now there is great variability in state-sponsored anti-smoking ads,” said Dr. Emery. “Eventually, we would like have a

library available for states to find effective ads based on characteristics, such as ads that target pregnant women, or ads that focus on environmental tobacco smoke,” she said.

Register for 9th Annual SHAPE Walk

Senior Health Alliance
Promoting Exercise
(SHAPE) Walk

Wednesday, May 28, 2008
Soldier Field

Registration at 9 a.m.
Event: 10 a.m. to 1 p.m.

<http://www.shapechicago.com>

UIC UNIVERSITY OF ILLINOIS AT CHICAGO

Our Mission

To reduce disparities in health by studying approaches to promote healthful behaviors and prevent disease across the lifespan; to conduct this research in partnership with communities across Illinois; to share findings and best practices locally and nationally; and to improve the practice of public health through training and education.

Illinois Prevention Research Center

UIC Institute for Health Research and Policy
Westside Research Office Building, Rm. 558
1747 West Roosevelt Road, M/C 275
Chicago, IL 60608

Visit us online at:
<http://ihrp-uic.org/iprc>