HEALTHY CITY THRIVING FAMILIES

A Quarterly Update from the City of Minneapolis Department of Health and Family Support

April - June 2004

Blue Ribbon Panel Issues Recommendations

The Minneapolis Department of Health and Family Support is a critical component of local government and should be retained, according to a report issued in March by the Blue Ribbon Panel on Public Health in Minneapolis, composed of community leaders and residents. The panel, facilitated by Michael Scandrett from Halleland Health Consulting, met 5 times from September –December 2003, and was co-chaired by Minneapolis Council Member Natalie Johnson Lee, Minneapolis Health and Human Services Committee Chair, and Hennepin County Commissioner Gail Dorfman, Community Health and MHP Committee Chair.

The report issues four recommendations:

- 1) The City and County health departments should not be merged.
- 2) Establish accountability for a shared urban health agenda.
- Set public health priorities based on expected outcomes in relation to the amount invested.
- 4) Improve and formalize working relationships between the City and County public health departments.

The panel also focused on building a more effective working relationship between the City and Hennepin County. In particular, the panel urged city and county officials to establish a vigorous urban health agenda to address the health disparities that disproportionately affect city residents. In making its recommendations,

the panel said, "The Minneapolis Department of Health and Family Support enjoys a hard won reputation for minimal bureau cracy and maximum personal connection with community leaders and projects over time."

The panel was formed last summer after state budget pressures to create greater efficiencies in local government precipitated a discussion about the potential merger of Hennepin County Community Health Department and the Minneapolis Department of Health and Family Support. As a result, Mayor Rybak, the Minneapolis City Council and the Hennepin County Board convened and selected the Blue Ribbon panel members of community leaders and residents to assess and make recommendations about the most effective and efficient ways to deliver public health in Minneapolis.

The panel found that the MDHFS is able to leverage \$2.61 for every \$1 invested by the City. Additionally the panel concluded that the MDHFS is of value to other City departments and to elected officials because it maintains close ties to community groups, communities of color, and new immigrant populations, among many others. The full 52 page report and executive summary are posted on the MDHFS website: www.ci.minneapolis.mn.us/dhfs

For more information, contact Michael Scandrett at Halleland Health Consulting at 612/573-2923.

"Together, create an Urban Health Agenda. Tackle the greatest public health issues in Minneapolis - those of the health disparities experienced by some ethnic and racial people and those that exist because of poverty. Central to this agenda will be linking the greater community to City and County governments. In order to put this plan of action into place, public health services need restructuring to magnify their effectiveness."

Dr. Chris Reif, Blue Ribbon Panel member

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Snowball II

The last week in February was designated as a metrowide emergency scenario called Snowball II. During this week, MDHFS and other City staff battled an imaginary airplane crash, cyber terrorism, a possible anthrax case, a chlorine gas leak and the pneumonic plague. Staff also learned about how the incident command system can be improved in emergency situations. A secondary goal of the scenario was to test MDHFS' capacity to shift out of normal routines and re-prioritize work to respond to emergencies. For more information on emergency preparedness, contact Pam Blixt at 612/673-3933.

The Minneapolis
Department of
Health and
Family Support
(MDHFS) works
to ensure that all
families are healthy and fully share
in the social and economic opportunities of the City of Minneapolis.
The MDHFS reaches residents by
working in partnership with
community organizations, other
units of government, schools, and
health and human service agencies.

Ken Dahl, Interim Director

Council Member Natalie Johnson Lee, Chair Health & Human Services Committee

612/673-2301 www.ci.minneapolis.mn.us/dhfs

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2004 Legislative Priorities

MDHFS actively participates in advocacy at the State Legislature, both in partnership with other agencies on common priorities, and as part of the City of Minneapolis process. Below are the 4 main priorities and 3 secondary priorities identified for this session:

Key priorities

- 1. Maintain the Eliminating Health Disparities
 Grants: In 2001, the legislature allocated \$13
 million for the biennium to reduce racial and ethnic health disparities in 10 targeted categories.
 The Minnesota Department of Health has issued grants to 31 community-based organizations working in Minneapolis to reduce health disparities, representing an investment of approximately \$6 million in our community. Protecting this funding is paramount to reducing these long-standing disparities.
- 2. Lead poisoning prevention: In partnership with the Environmental Health Division of Regulatory Services, MDHFS supports continued efforts to promote universal lead screening for urban children and to specifically hold managed care plans and health care providers accountable for lead screening for children on medical assistance. Currently, only 26% of children under six enrolled in prepaid medical assistance programs are screened for lead poisoning statewide. In addition, significant state funding is needed for lead control activities. Support policies that promote early intervention to remove lead hazards in homes before children are poisoned.
- 3. Sustaining the Minor Consent Law: Minor consent laws which allow adolescents to see medical providers for reproductive health, mental health and chemical dependency issues without informing a parent or guardian are often challenged at the state legislature. These laws must be protected so that teens will seek the health services they need, and to insure that these services will be available through MDHFS' and other school-based clinics.
- 4. Protect funding for and the integrity of General Assistance Medical Care, MinnesotaCare and Medical Assistance safety net programs. With additional cuts to health and human services on the horizon, these publicly funded health care

programs may be targeted and should be protected. These programs provide medical insurance coverage to many low-income Minneapolis residents. Health care coverage and access enables residents to work and children to attend school.

Secondary Priorities

- 5. Early Childhood Programs. Restore and/or maintain funding for early childhood programs like child care assistance, ECFE, school readiness initiatives and Head Start. Quality early childhood experiences have been shown to improve school performance. According to the Federal Reserve Bank of Minneapolis report, Early Childhood Development: Economic Development with a High Public Return, "the return on investment from early childhood development is extraordinary, resulting in better working public schools, more educated workers and less crime....ensuring that children from low-income families are ready to learn by the time they reach kindergarten."
- 6. Youth Development Programs. Restore/maintain funding for out-of-school time youth enrichment programs and health related programs (youth risk behavior grants) formally funded by the tobacco endowment and TANF. Quality after school enrichment programs and summer youth programs are a proven strategy for impacting a wide range of youth risk behaviors including violence prevention, teen pregnancy prevention and increased school achievement. A number of these programs were drastically cut during the last legislative session and may result in increased youth violence or teen pregnancy.
- 7. Improve dental health care for children and low-income adults. Recent budget cuts and changes in eligibility for publicly funded dental health programs have decreased accessibility for dental health care for Minneapolis residents. By 2007, 4,000 fewer Minneapolis residents will have health and dental coverage. Newly enacted coverage caps could drastically reduce dental care for low-income Minneapolis residents including nursing home clients.

For more information on MDHFS' advocacy and legislative efforts, contact Patty Bowler at 612/673-3009.



Marnie Wells, co-chair of the Public Health Advisory Committee (PHAC), speaks to the City Council's Health and Human Services Committee on March 22nd. Since assuming a leadership role of the PHAC in November 2002, Ms. Wells has been a catalyst for the group by thoughtfully encouraging members to provide meaningful direction. She has also championed a revisioning process for the PHAC to take a more active role in public policy. Ms. Wells lives in Minneapolis, holds a master's degree in human development, and is the Chief Program Officer for Camp Fire USA-MN Council.

Youth Jam against Gangs, Guns, and Drugs

On March 13th, a cold rainy Saturday, over 260 youth were keeping it warm at the Zurah Shrine Center in South Minneapolis. The Phillips Neighborhood Weed and Seed collaborated with radio station B96 to hold the event, along with many other community partners. Mayor RT Rybak, Council Members Gary Schiff, Natalie Johnson Lee, and Natalie Collins from Council Member Dean Zimmerman's office, along with many member of the Minneapolis Police Department all participated in the Summit. US Attorney Tom Heffelfinger and County Commissioner Peter McLaughlin also spoke to the youth gathering. Pictured at right are 3 youth summit participants with Tone E Fly from B96, second from left, and VJ Smith, from MAD DADS third from left.



Urban Health Agenda Health Disparities: From Statistics to Solutions

National Public Health Week was celebrated the first week of April under the theme: Eliminating Health Disparities: Communities Moving from Statistics to Solutions. Health disparities are also a significant issue for Minneapolis, which has led MDHFS to focus intensely on creating community-based solutions. Council Member Natalie Johnson Lee, chair of the City's Health and Human Services Committee, states that "while significant health disparities exist between racial and ethnic groups, Minneapolis is beginning to see signs of improvement in several key areas."

Pregnant Women & Infant Mortality

The percent of women receiving prenatal care in the first trimester has improved for all races over the last five years in Minneapolis. Yet while eight out of ten White women receive early prenatal care, only slightly more than half of American Indian women receive timely prenatal care. Asian and Latino women fare only slightly better. African

American women are closest to the percent for Whites of all the groups, yet only two out of three mothers receive care in the first trimester.

During the last decade, infant mortality (per 1,000 live births) in Minneapolis has decreased significantly for all racial groups (from 20 to 12 for African Americans, from 28 to 10 for American Indians and from 7 to 4 for whites). And yet the rate of African American infant mortality continues to be three times greater than that of Whites.

Approximately five years ago, MDHFS received a major federal Healthy Start grant to address infant mortality among African American and American Indian families. Participants in the Healthy Start program have had a lower infant mortality rate, fewer preterm births and more first trimester prenatal care than the community at large.

Sexually Transmitted Infections

Compared to other large cities in the U.S., Minneapolis has one of the highest rates of sexually transmitted infec-

tions (STIs) among African Americans ages 15-19. Gonorrhea rates among African American teens have fallen by 21 percent since 1998, but these young people still experience a rate of gonorrhea 27 times greater than that of whites.

MDHFS has worked with a coalition of organizations in north Minneapolis on a campaign to encourage sexually active teens to seek STI testing and to use condoms. In addition, MDHFS recently was awarded a federal grant, Reproductive Health Services for Young Men, to increase the use of health care, especially testing and treatment for sexually transmitted infections (STIs), among males ages 15 to 24 years.

"These are just a few of the many solutions being used in Minneapolis to help address health disparities," said Johnson Lee. "Ending racial and ethnic health disparities is a major challenge our community must continue to tackle together." For more information on MDHFS' efforts to eliminate health disparities, contact Gretchen Musicant at 612/673-2301.

Healthy City Updates

New Funding Awards

Skyway Senior Center: \$1,250 from Wells Fargo Bank, \$40,000 from the Downtown Minneapolis Neighborhood Association/Neighborhood Revitalization Program, and \$5,000 from the Minneapolis Public Housing Authority for general operating expenses. Ryan Companies recently announced a donation for utilities, tax and maintenance expenses for the remaining months of 2004, valued at over \$18,000. This donation was arranged through the Friends of the Skyway Senior Center, with Council Member Lisa Goodman playing a leading role. The Skyway Senior Center is still in need of significant funds for their 2004 operating budget. Contact Melinda Ludwiczak at 612/370-3869 for more information.

Weed and Seed: \$160,000 from MN Department of Public Safety Office of Justice programs over 2 years to support a fulltime sergeant level position of the Minneapolis Police Department for gang and narcotics suppression activities and gun trafficking reduction around the Little Earth area. The grant will be managed through the Weed and Seed program; contact Carrie Day-Aspinwall at 612/673-3548 for more information.

May is Minnesota's American Indian Month

Many community events are planned to celebrate American Indian Month. Contact Bill Carter, American Indian Community Advocate, at 612/673-3028 for more information, or visit www.maicnet.org and click on "community calendar" under Resources.

National Journal Publication

MDHFS is featured in the April 2004 issue of Contraceptive Technology Update, a national journal aimed for reproductive health clinicians. "Break down teen barriers with direct provision" highlights the dramatic increase of students receiving their requested contraceptives (from 41% to 99%), and quotes Donna Amidon, School-Based Clinics Manager, extensively. For a copy of the article, contact Ms. Amidon at 612/673-5305.

Limited English Proficiency Plan

MDHFS is helping spearhead a Citywide committee to address the needs of limited English speakers. Since almost 20% of Minneapolis residents speak a language other than English at home, the issue of how to serve people with limited English is critical for the City to address. The committee plans to complete a plan by August 2004, and training for City employees to be completed by the end of the year. For more information, contact Patty Bowler at 612/673-3009.

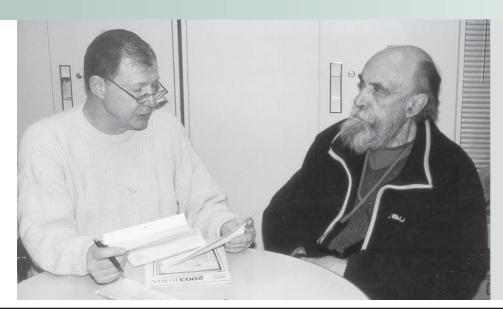
New Staff

Dan Dale, Medical Laboratory Assistant, Public Health Laboratory. Dan previously worked at Hennepin County Medical Center before starting at MDHFS in January. Dan is also a part time cook and is currently remodeling his home in south Minneapolis. He can be reached at 612/673-2610.

Roman Gonzalez, Health Navigator, New Families Center. Roman has been working as an interpreter for the Minnesota Visiting Nurse Agency and began working half time with the New Families Center in February. Roman brings a personal understanding of the challenges of being a U.S. immigrant to his role of helping more recent new arrivals understand and navigate the health care system. He can be reached at 612/668-3701.

Andy Gray, Emergency Preparedness Specialist. Previously, Andy worked for many work units with the City's Regulatory Services division over the past 3 years. He has a degree in Community and Public Health from Iowa State University. Andy can be reached at 612/673-3729.

Hattie Wiysel, Secretary. Hattie has 13 years' work experience, ranging from health care to newspaper publication. She is originally from the Big Sky Country (Montana), but has lived in the Minnesota for several years. She can be reached at 612/673-3557.



Tax Time

John Wise (left), volunteer tax coordinator, answers some questions for a client just days before the April 15th tax deadline. The Senior Ombudsman's Office coordinates tax assistance for low-income Minneapolis residents and seniors. In 2003, 10,500 clients were served by the year-around tax assistance program. For more information, call 612/673-3004.