

CONFERENCE PROGRAM



6th Annual

State
of the
Public's
Health

conference

Tuesday, October 17, 2017

University of Georgia Center for Continuing Education & Hotel



College of Public Health

Office of Outreach and Engagement

UNIVERSITY OF GEORGIA

WELCOME LETTER

From the College of Public Health

AGENDA

7:30 - 9:00 Registration, Refreshments, & Poster Viewing
Hill Atrium

9:00 - 10:00 Welcome Address
Mahler Hall

Marsha Davis, PhD

Associate Dean, Office of Outreach and Engagement, College of Public Health, University of Georgia

Phillip L. Williams, PhD

Dean, College of Public Health, University of Georgia

Emerging Public Health Opportunities in the New Administration: Perspectives from NACCHO Leaders

Claude Jacob, MPH

Chief Public Health Officer, Cambridge Public Health Department

Immediate-Past President, National Association of County & City Health Officials

Laura Hanen, MPP

Interim Executive Director and Chief of Government Affairs

10:30 - 11:00 Networking & Refreshment Break
Hill Atrium

11:00 - 12:15 Morning Workshops

Mahler Hall Stronger Together: Innovations to Improve the Health of Rural Georgia Communities

The Two Georgias Initiative: Addressing Health Equity in Rural Georgia

Gary D. Nelson, PhD | Executive Director, Healthcare Georgia Foundation

Samantha Bourque Tucker, MPH | Evaluation Manager, Healthcare Georgia Foundation

Lisa Medellin, MSW | Senior Program Officer, Healthcare Georgia Foundation

Telemedicine and Rural Health: 2017 Update

William Boling, JD | Boling & Company

Mason Reid, JD | Boling & Company

Room YZ Using Systems Thinking & Health in All Policies to Promote Wellbeing & Health Equity

Jane Branscomb, MPH | Georgia Health Policy Center

Leigh Alderman, MPH, JD | Georgia Health Policy Center

Room R Health Literacy and the Opioid Crisis in Georgia

Henry N. Young, PhD | Kroger Associate Professor, UGA Clinical and Administrative Pharmacy

Room Q Engaging Community Partners for Health

Hilary Merlin | Rollins School of Public Health, Emory University

Moki Macias | Principal, Participant Consulting, LCC

Leveraging University-Community Partnerships to Improve the Culture of Health:
The Athens Wellbeing Project

Grace Bagwell Adams, PhD | Assistant Professor, College of Public Health, University of Georgia

Room TU Building Expertise in Administration and Management (BEAM)

Roderick King, MD, MPH | Director, Miller School of Medicine MD/MPH Program, University of Miami

12:30 - 1:45 Magnolia Ballroom	<p>Lunch</p> <p>Georgia Department of Public Health is Built to Last J. Patrick O’Neal, MD Commissioner, Georgia Department of Public Health</p> <p>Public Health Leadership Academy: Building Georgia’s Culture of Health</p> <p>Marsha Davis, PhD Associate Dean, Office of Outreach and Engagement, UGA’s College of Public Health Matt Bishop Director, J.W. Fanning Institute of Leadership, University of Georgia</p>
Hill Atrium	Poster Viewing
1:45 - 2:45 Mahler Hall	<p>Building Capacity to Achieve Health Equity: Lessons Learned from the Jefferson County Model Gregory Townsend, MPPM Health Service Administrator, Jefferson County Department of Health</p>
3:00 - 4:15	Afternoon Workshops
Room TU	<p>What’s Next For Tobacco Control in Georgia? Onjewel Smith Southern States Regional Consultant, Americans for Nonsmokers’ Rights</p>
Mahler Hall	<p>Understanding the Opioid Epidemic in Georgia: Building a Prevention Agenda Jim Langford Director, Georgia Prevention Project Amanda Abraham, PhD UGA School of Public & International Affairs Aaron Johnson, PhD Augusta University Lawrence Bryant, PhD, MPH Georgia Department of Public Health</p>
Room Q	<p>Advancing Health in All Policies Throughout Georgia</p> <p>Planners4Health</p> <p>Whitney Shepard, PE, LEED AP Transport Studio, LLC, Health Policy for a Healthy Savannah Katie Perumbeti, MCRP, BS Chem E Lifelong Communities Active Living Coordinator, Atlanta Regional Commission</p> <p>Preparing for Policy, Systems, & Environmental Change: Community Engagement & Coalition Development</p> <p>Courtney Still, PhD Program Coordinator, UGA College of Public Health Andrea Scarrow, MAL UGA</p>
Room R	<p>Promoting a Healthy Start for Georgia’s Children</p> <p>Tough Talks: Supporting Physician and Patient Conversations about HIV Testing Marcie McClellan, MA JBS International</p> <p>Georgia Safe to Sleep Program Evaluation: Parent Survey Data Phaedra Corso, PhD Professor, UGA College of Public Health</p> <p>Evaluating the Effectiveness of Tools to Teach Language Nutrition Skills in WIC Clinics Kimberly Ross Early Brain Development & Language Acquisition Program Manager, Georgia Department of Public Health</p>
Room YZ	<p>Communicating Across Cultures</p> <p>Hilary Merlin Rollins School of Public Health, Emory University Berthine West Westbridge Solutions</p>
4:15 - 5:00 Hill Atrium	Networking Reception

SPEAKERS



Claude Jacob, MPH

Chief Public Health Officer, Cambridge Public Health Department
Immediate-Past President, National Association of County & City Health Officials

Claude Jacob is a long-standing and dedicated member of NACCHO having served on a variety of different advisory groups including the Health Equity and Social Justice Committee and the Survive and Thrive Workgroup. He has served on NACCHO's Board of Directors since 2010. Jacob is currently the local health officer in Cambridge, MA, and has served in this capacity since April 2007.

Jacob earned a Master's in Public Health from the University of Illinois at Chicago School of Public Health. He began his career at the Sinai Health System located on the West Side of Chicago where he ran community outreach programs that included a high school health careers program, youth violence prevention and education initiative, and a senior wellness program. Later, Jacob moved to Baltimore where he served as a senior staffer at the Baltimore City Health Department and was eventually promoted to Bureau Chief, where he oversaw communicable disease programming that included HIV education and testing, as well as the operations of the city's TB and STD clinics.

Prior to his arrival in Cambridge, Jacob served as the Deputy Director of the Office of Health Promotion at the Illinois Department of Public Health, where he was responsible for chronic disease programming, oral health initiatives, injury prevention efforts, and the state's newborn screening programs.



Laura Hanen, MPP

Interim Executive Director and Chief of Government Affairs

NACCHO is the voice of the approximately 2,800 local health departments across the country. These city, county, metropolitan, district, and tribal departments work every day to protect and promote health and well-being for all people in their communities. For Government Affairs, Ms. Hanen's primary responsibilities are to oversee policy development, federal advocacy, and the Big Cities Health Coalition. Ms. Hanen joined NACCHO in March of 2011.

Prior to coming to NACCHO, Ms. Hanen was the Director of Government Relations for the National Alliance of State and Territorial AIDS Directors for eleven years. Ms. Hanen was the Senior Lobbyist for the American Congress of Obstetricians and Gynecologists. Ms. Hanen was a legislative assistant for Congressman Rick Boucher of the Ninth District of Virginia. Ms. Hanen was also a legislative assistant in the Government Relations Department of the Biotechnology Innovation Organization.

Ms. Hanen received her Bachelor's degree from Earlham College in Richmond, Indiana and a Master's degree in Public Policy from Georgetown University in Washington, D.C.

EMERGING PUBLIC HEALTH OPPOTUNITIES IN THE NEW ADMINISTRATION: Perspectives from NACCHO Leaders

As we enter the final quarter of 2017, from hurricanes to opioid deaths, public health threats continue to present policy makers and practitioners with daunting challenges. During this session, national public health experts Laura Hanen and Claude Jacob will share their perspectives on emerging trends afoot with our current administration as well as cutting edge innovations underway in local public health agencies. Join us for an interactive dialogue on the future directions of and opportunities for local public health strategies.



J. Patrick O’Neal, MD

Commissioner, Georgia Department of Public Health

In addition to his role of Commissioner, Dr. O’Neal serves as the director of Health Protection for the Georgia Department of Public Health (DPH), where he has oversight responsibility for Emergency Medical Services (EMS), Trauma, Emergency Preparedness, Epidemiology, Infectious Disease, Immunizations and Environmental Health.

Since 2002, Dr. O’Neal has served as the medical director for the Office of EMS/Trauma in the Georgia Division of Public Health under the Department of Community Health. For 29 years prior, he practiced emergency medicine at DeKalb Medical Center in Decatur. In his final seven years at DeKalb Medical Center, he served as the regional medical director for EMS throughout the Greater Atlanta area. Dr. O’Neal formerly served as director of the Outpatient Clinic at the Medical Center of Central Georgia for two years before his work at DeKalb.

He completed an undergraduate program at Davidson College in North Carolina and received his medical education at the Tulane University School of Medicine in New Orleans, Louisiana. Following medical school, he completed a rotating internship at Providence Hospital, Portland, Oregon, before entering the United States Air Force for training in flight medicine. Dr. O’Neal served as a flight surgeon in Viet Nam in 1970-71.

GEORGIA DEPARTMENT OF HEALTH IS BUILDING TO LAST

Each day some of the same concepts used to transform companies into global successes are being integrated into DPH’s mission to inform, prevent and protect the lives of Georgians. Now it’s time to institutionalize these concepts to ensure the good work that’s begun is sustained for future generations of public health professionals.



Greg Townsend, MPPM

Health Service Administrator, Jefferson County Department of Health

Born and raised in Birmingham, Gregory Townsend has served as the Health Service Administrator for the Jefferson County Department of Health in Birmingham, Alabama, for over 23 years. Townsend is a participant in the Robert Wood Johnson Foundation Culture of Health Leaders program, which provides cross-sector leadership development based on evidence, informed by experience, and grounded in principles of equity and social justice. He is also a 2016 Fellow in Human Impact Partners’ inaugural

Public Health Equity Cohort.

Townsend holds a a Master of Arts in Public and Private Management (MPPM) from Birmingham Southern College and a Public Health Leadership Certificate from the MidSouth Program for Public Health Practice from the University of Alabama Birmingham. He is also a graduate of the South Central Public Health Leadership Institute at Tulane University. In addition to his role with the health department, Townsend is active in the Greater Birmingham area serving on numerous boards and often volunteer with many groups—empowering both adults and youth.

BUIDING CAPACITY TO ACHIEVE HEALTH EQUITY: Lessons Learned from the Jefferson County Model

In recent years, health equity has become a focus of discussion among many state and local health department in public health systems throughout the United States. Much of the dialogue is used to form a new narrative for reducing the underlying social issues that are at the root of health inequities-emphasizing the need to reduce risk factors for preventable illness and death in low-income communities, which are disproportionately communities of color. This presentation will give you a basic understanding of what health equity is and what key elements comprise it. You will also gain an understanding of ways the Health Action Partnership is effectively advance health equity and making a healthier Jefferson County, Alabama.

WORKSHOPS

Stronger Together: Innovations to Improve the Health of Rural Georgia Communities

The Two Georgias Initiative: Addressing Health Equity in Rural Georgia

Presenters: Gary D. Nelson, PhD, Executive Director, Healthcare Georgia Foundation
Samantha Bourque Tucker, MPH, Evaluation Manager
Lisa Medellin, MSW, Senior Program Officer

Some years ago, in reference to our state's economy, the claim was made of the existence of two Georgias: one, the vibrant metropolitan areas of our state; the other, rural Georgia – its poor economic cousin. Today, this two Georgias distinction applies to the growing disparities in health and healthcare between our metropolitan areas and our rural communities, home to nearly two million Georgians. Among the lowest ranked 120-159 counties, 34 rural counties reported the worst health outcomes; furthermore, rural counties comprised 9 of the bottom 10 counties on measures of length and quality of life (County Health Rankings and Roadmaps, 2016). To address this, Healthcare Georgia Foundation created and launched The Two Georgias Initiative, a place-based grantmaking program designed to foster healthcare innovation by supporting local partnerships seeking to improve health and expand access to quality healthcare services in Georgia's rural communities. The Initiative aims to achieve greater health equity, improve health and healthcare, build healthier communities, improve social conditions that impact health, and build community, organizational, and individual leadership capacity in rural Georgia. After two years of strategic planning, data mining, commissioned papers and presentations, three statewide listening tours, and engagement across all sectors, the Foundation successfully funded 11 Community Health Partnerships in June 2017. Join the Healthcare Georgia Foundation in understanding the rationale, process utilized, and launch of The Two Georgias Initiative.

Telemedicine and Rural Health – 2017 Update

Presenters: William Boling, JD, Boling & Company
Mason Reid, JD Boling & Company

This presentation will offer a yearly update of a topic presented before at the State of Public Health Conference: rural health challenges and the promise of telehealth. Rural healthcare issues are not remedied overnight – another hospital has closed in Georgia since the 2016 Conference, and national health reform threatens even more. At the same time, rural health providers continue to find inventive ways of treating their populations via telehealth – with tele-ICUs, tele-nephrology, and other trends gaining steam. The confluence of these topics makes for an annual discussion of continuing importance.

As background, the development of remote healthcare technologies (many falling within the ambit of “telehealth” or “telemedicine”) have long had potential to cure access shortages in healthcare, and that potential is increasingly coming to fruition. Provider partnerships have for years taken advantage of telemedicine in the areas of stroke care and behavioral health, but this technology is being applied to a widening variety of service areas, each allowing patients to stay closer to home and receive exceptional healthcare.

This presentation will examine the most up-to-date telemedicine developments in rural healthcare and attempt to forecast the next year's progress. Traditional telemedicine models mentioned above will be discussed, as well as more disruptive models like direct-to-consumer mobile health and artificial intelligence. As attorneys and consultants in the telemedicine space, the presenters have observed these trends firsthand.

Using Systems Thinking and Health in All Policies to Promote Wellbeing and Health Equity

Presenters: Jane Branscomb, MPH, Georgia Health Policy Center
Leigh Alderman, MPH, JD, Georgia Health Policy Center

Systems thinking is a valuable skill for those seeking to solve today's toughest population health problems. Expanding the boundaries of our mental models, examining issues from multiple perspectives and considering a range of potential leverage points can bring powerful and creative solutions to light. Health in All Policies (HiAP) is an approach to population health improvement that does just that – expands the boundaries of mental models to expose levers for more systemic and sustainable change in up-stream determinants of health and health equity. Over the past several years, the Georgia Health Policy Center has developed both research and practical expertise in systems thinking and HiAP. This session will introduce the overlapping components of our approach, emphasize how this approach promotes health equity, and provide concrete examples from our ongoing work to improve health through affordable housing policy in Georgia. The session will include presentations on key concepts and examples, but much of the 90 minutes will be reserved for interactive discussions and experiential activities to practice and apply learnings.

Health Literacy and the Opioid Crisis in Georgia

Presenter: Henry N. Young, Ph.D.
Kroger Associate Professor, UGA Clinical and Administrative Pharmacy

The opioid crisis is affecting communities throughout Georgia. Health literacy best practices could help mitigate the problem. Currently, most initiatives focus on more conservative prescribing, prescription drug monitoring programs, and overdose prevention strategies. Few efforts focus directly on improving patients' use of prescription opioids, even though 80% of heroin users start with prescription opioids. Patients often are unaware of the addictive and abusive potential of prescription opioids. Furthermore, many do not know about the dangers of sharing medications, about proper storage or disposal methods, or signs of opioid overdose. Learn how health literacy principles can be used to bolster patients' safe and appropriate use of prescription opioid medications in an effort to stem opioid issues in Georgia. This session will include a brief introduction to health literacy for those who wish to re-familiarize themselves with this approach to health communication, an overview of the opioid epidemic in Georgia, and a discussion of the potential role health literacy can play in the effort to combat the opioid epidemic.

WORKSHOPS

Engaging Community Partners for Public Health

Community Engagement for Public Health Planning

Presenters: Hilary Merlin, Rollins School of Public Health, Emory University
Moki Macias, Principal, Participant Consulting LLC

Public Health 3.0 calls upon public health departments to engage community stakeholders and build cross-sector partnerships to collaborate on public health initiatives, but careful planning is necessary. Research in effective partnerships and community engagement provide the public health profession with tools needed to plan, implement, evaluate, and sustain meaningful partnerships that prevent disease and create healthy communities, but professionals need training on how to effectively use such tools. The mission of the Region IV Public Health Training Center (R-IV PHTC), headquartered at the Rollins School of Public Health at Emory University is to develop and implement training for the PH workforce in HHS Region IV. The R-IV PHTC offers a series of skill-based trainings called Public Health Practice Academies (PHPA). One of the newest PHPAs offered is called “Nothing About Us, Without Us, Is For Us”: Community Engagement for Public Health Planning. The training targets both health department and community partners from a range of sectors and is designed to cover practical strategies to identify and engage diverse stakeholders and gather community input from people most impacted by the health issue being addressed. It also includes participatory planning techniques; and organizational models for collaborative decision-making.

This interactive session will include an overview of the R-IV PHTC and a description of the new Community Engagement course. Participants will consider the role of stakeholders from multiple sectors in creating healthier communities and will develop a draft stakeholder analysis plan for an actual community program or policy.

Leveraging University-Community Partnerships to Improve the Culture of Health: The Athens Wellbeing Project

Presenter: Grace Bagwell-Adams, PhD, UGA College of Public Health

Building a culture of health requires community commitment, in addition to an intentional expansion of our collective conceptualization and understanding of “public health.” The Athens Wellbeing Project (AWP) is an unprecedented collaboration among the Athens-Clarke County Unified Government, Clarke County Police Department, Clarke County School District, Athens Area Community Foundation, Family Connection-Communities in Schools, United Way of Northeast Georgia, the Athens Housing Authority and the University of Georgia. The mission of the AWP is to empower the Athens community with meaningful data that will lead to more informed decision-making, improvements in service delivery, and greater quality of life for our citizens. The AWP is accomplishing this mission through the collection and analysis of: 1) A representative dataset of Athens-Clarke County households surveyed at the neighborhood-level in Fall 2016; 2) Secondary data collected and analyzed at varying levels of geographic specification, (for example: U.S. Census American Community Survey, ACCPD crime statistics, Clarke County School District Data). These data are currently being utilized in a variety of settings by local policy makers and stakeholders to shape the next iteration of strategic planning for partner organizations. In addition, the development of an online platform and social mapping tool to make AWP available to all community members is underway to improve access to timely information needed to foster a culture of health in Athens-Clarke County. The AWP is an approach that could be replicated in other communities across the state.

Building Expertise in Administration and Management (BEAM)

Presenters: Kaitlin Grosgebauer, University of Miami, Miller School of Medicine

Findings from the national 2014 Public Health Workforce Interests and Needs Survey indicated that public health practitioners report low self-efficacy in basic business skills. The landscape for educational opportunities in management, accounting, and budgeting specific to public health are limited. With funding from the de Beaumont Foundation and guidance from a national advisory team, The University of Miami School of Medicine and Business Administration to develop a unique online tailored business skills curriculum and certificate training program for working public health professionals. The Building Expertise in Administration and Management (BEAM) Certificate Program provides 20-hours of asynchronous instructional training on budget, finance, and management. This session will (1) discuss the design and development of the online certificate framework and curriculum and (2) highlight modules that use real-world scenarios on funding sources, budget monitoring, problem solving, and strategic thinking.

What's Next for Tobacco Control in Georgia?

Presenter: Onjewel Smith, Southern States Regional Consultant, Americans for Nonsmokers' Rights

Since passing the Georgia Smoke-free Air Act of 2005 there have been continued challenges limiting progress in tobacco control work at the state and local level. Onjewel Smith, Southern States Regional Consultant for Americans for Nonsmokers' Rights (ANR), will present this session with updates from ANR and their partner organizations. The session will include a brief overview of the current environment for tobacco control in Georgia; updates on current active campaigns; and tobacco control strategies that have worked in states with similar populations and political landscapes with an emphasis on opportunities for innovation.

Understanding the Opioid Epidemic in GA: Building a Prevention Agenda

Presenters: Jim Langford, Director, Georgia Prevention Project
Amanda Abraham, PhD, UGA School of Public & International Affairs
Aaron Johnson, PhD, Augusta University
Lawrence Bryant, PhD, MPH, Georgia Department of Public Health

Georgia's prescription opioid and heroin problem threatens the well-being of every Georgian at every socio-economic level and in every geographic region of the state. This session will take a broad look at the scope of the problem in Georgia and introduce the organizations and professionals who are working to prevent the spread of the opioid epidemic in our state. The Georgia Prevention Project is a statewide prevention program aimed at reducing the use of dangerous drugs among teens and young adults. The Substance Abuse Research Alliance (SARA) is a program of the Georgia Prevention Project, and it initiated a study in April 2016 as the organization's first collaborative project with a primary goal to assist the Georgia State Senate Study Committee on Opioids and Heroin in its work. With more than 60 participants, SARA includes researchers and practitioners with a wide spectrum of experience in substance misuse work. The resulting white paper offers guidance for state policymakers to adopt into legislation in 2018. Finally, the session will discuss the Georgia Department of Public Health's plans to lead the effort to development and implement a Strategic Plan for the Opioid and Heroin Epidemic in Georgia.

WORKSHOPS

Advancing Health in All Policies Throughout Georgia

Planners4Health

Presenters: Whitney Shephard, PE, LEED AP, Transport Studio, LLC, Healthy Policy for a Healthy Savannah
Katie Perumbeti, MCRP, BS Chem E, Lifelong Communities Active Living Coordinator, Atlanta Regional
Commission, AICP

Greater coordination between planners and public health professionals can address many determinants of chronic disease – including lack of physical activity and lack of access to healthy food. Planners4Health is a partnership between the American Planning Association and APHA to increase local capacity for creating stronger, healthier communities. Strategies for local, regional, and statewide collaboration between planners and health professionals will be discussed with the audience. The session will review how to include health in public plans and policies, as well as effective policy, systems, and environment change.

The City of Savannah partnered with Healthy Savannah to implement Health in All Policies. A cross-sector team including the planning commission, schools, health care, police, and health department developed recommendations to promote equitable access to physical activity and healthy affordable food. The session will include lessons learned from this powerful case study of cross-sector partnership, engaging citizens and multiple agencies in policy-making. Specifically, zoning ordinance language to promote walkable mixed use neighborhoods that are dense and diverse enough to attract community services like healthy food retail and pharmacies will be discussed. Attendees will learn about the health in all policies approach and how it applies to zoning, infrastructure investments, related public policy, and organizational strategies. Finally, the presenters will discuss case studies that demonstrate how organizations across the Atlanta region are working to address the social determinants that impact public health. Case studies include a Bike Share program, complete streets workshops and infrastructure inventory, housing policy, and tobacco-free parks regulations.

Preparing for Policy, Systems, and Environmental Change: Community Engagement and Coalition Development

Presenters: Courtney Still, PhD, RDN
Andrea Scarrow, MAL

Solutions to the obesity epidemic must come from multiple sources, involve multiple levels and sectors in the community, and build on the synergy of multiple strategies. The purpose of the Healthier Together initiative is to implement environmental change strategies for obesity prevention through Extension at the community level in Calhoun and Taliaferro Counties, where the CDC determined over 40% of adults are obese. Community coalitions are working together with other partners to choose, direct, and support the environmental changes most appropriate for their community. These changes are supported by Extension-led education and promotion efforts. This session will describe the process of engaging the community to develop the Healthier Together Coalitions and how the coalitions prioritized and planned interventions.

Promoting a Healthy Start for Georgia's Children

Tough Talks: Supporting Physician and Patient Conversations about HIV Testing

Presenter: Marcie McClellan, MA, JBS International

With advances in HIV testing and medicine, the numbers of HIV prevention options have expanded. When the recommended antiretroviral and obstetric interventions are used early in pregnancy, a woman infected with HIV now has a 1% or less chance of delivering an HIV-infected infant. However, perinatal HIV transmission is still the most common route of HIV infection in children. Identifying new HIV cases is critical to stopping the spread of HIV infection from HIV-positive mothers to newborns. Several organizations, including CDC, WHO, and ACOG, recommend universal HIV testing. However, in the United States, HIV testing remains voluntary and reliant on the person's willingness to be tested. Thus, obstetricians-gynecologists should encourage all pregnant patients to take a HIV test as early as possible. Physicians are often reluctant to talk to their pregnant patients about HIV testing. However, research indicates that a provider's strong endorsement of HIV testing is a major predictor of whether a pregnant patient receives an HIV test. In 2007, CDC launched the One Test. Two Lives.™ (OTTL) campaign to increase awareness and implementation of CDC's revised HIV testing recommendations and to encourage discussions between obstetric providers and pregnant patients about the importance of early prenatal HIV testing. Research indicates that OTTL is a useful resource for promoting HIV testing recommendations to obstetricians-gynecologists with the goal of ultimately decreasing perinatal HIV transmission.² This session highlights the campaigns' new materials and tools developed to support physician and patient conversations about HIV testing.

Georgia Safe to Sleep Hospital Initiative: Parent Survey Results

Presenters: Phaedra Corso, PhD, UGA College of Public Health
Rebecca Walcott, MPH, UGA College of Public Health
Trina Salm Ward, PhD, UGA College of Public Health
Nicole La Tournous, MPH, UGA College of Public Health
Terri Miller
Lisa Dawson

In early 2016, the Georgia Department of Public Health (DPH) announced the Georgia Safe to Sleep Hospital Initiative as part of a multi-pronged statewide safe infant sleep campaign. DPH provided partner hospitals with Safe Sleep information and educational materials to be distributed to families and newborns. In this session, we will explain how we evaluated the safe sleep information and materials received by parents from the hospitals and assessed parental knowledge and behaviors regarding infant safe sleep. We invited parents of all infants born August-October 2016 to participate in an online or phone survey, resulting in a sample of 420 respondents. Survey topic areas included: characteristics of the respondents, information and materials received from the hospital, self-reported safe sleep knowledge and behaviors, and opportunities for parents to provide additional comments and information on their infant sleep practices. We analyzed the types of safe sleep materials and recommendations received in the hospital, as well as the information delivery methods and the time spent discussing safe sleep with hospital personnel. We also identified the family characteristics and Safe to Sleep Hospital Initiative components most closely associated with safe infant sleep knowledge and behaviors. The results indicated a high level of safe infant sleep knowledge and behavior among respondents. Receiving knowledge about room sharing in the hospital was strongly correlated with both knowledge and behaviors regarding safe infant sleep location. Additionally, receiving the bassinet was significantly correlated with room sharing in the sample population and with avoiding bed sharing in the Medicaid population.

Session Description Continues...

WORKSHOPS

Evaluating the Effectiveness of Tools to Teach Language Nutrition Skills in WIC clinics

Presenters: Kimberly Ross, Early Brain Development and Language Acquisition Program Manager, Georgia Department of Health
Errol Spence, Policy Analyst, Governor's Office of Planning and Budget, Georgia Southern University
David Bayne, Director of Government Relations, Georgia Department of Health

Research shows that children's vocabulary at an early age is linked to their reading skills and overall academic performance during the school years. Specifically, children who acquire more words as infants and toddlers tend to do better in school than children with lower vocabulary. How many words a child learns in early childhood has been found to be directly related to parents' education and socioeconomic status. Children of parents with lower education and SES have significantly lower vocabulary than children of more affluent and educated parents. Overwhelmingly, the difference between SES groups is attributed simply to the frequency with which parents talk to their children. The more parents talk to their infants and toddlers, the faster their vocabularies grow. In Georgia, over half of children under the age of 3 live in low-income families. A significant number of families receive WIC benefits. The Commissioner of the Georgia Department of Public Health (DPH) started a language initiative to bridge the vocabulary gap between children from low SES and moderate/high SES families. We collected survey data from parents during the baseline and after each phase of the intervention to determine whether the parent's behavior changed as a result of the use of the tools with WIC staff. We hypothesize that parents who reports remembering an encounter with the tools will show a change in behavior around talking with their children. We expect this change to be greater than the change in parents who reported only seeing the video.

Communicating Across Cultures: Cultural Competence and the Role of Medical Interpreters in Public Health Agencies

Presenters: Hilary Merlin, Rollins School of Public Health, Emory University
Berthine West, Westbridge Solutions

National standards (from U.S. Department of Health and Human Services and Public Health Accreditation Board) call for public health agencies to provide culturally and linguistically appropriate services. In a country where over 300 languages are spoken, meeting this need can present a challenge to financially-strapped public health departments. Nonetheless, providing this quality of public health programs and services is critical to advancing health equity and eliminating health disparities.

To help public health agencies meet the needs of culturally and linguistically diverse populations, the Region IV Public Health Training Center (R-IV PHTC) has developed a skill-based training for the public health workforce. This training is designed to help agencies and professionals adopt policies and behaviors that support cultural and linguistic competence. The training is one course in a series of skill-based trainings called Public Health Practice Academies (PHPA) that R-IV PHTC offers throughout Georgia and the Southeast.

In this 90-minute interactive session, we will provide a brief overview of the R-IV PHTC and a description of the training. The majority of the session will be used to learn and practice two strategies for working with persons with limited English proficiency. The first strategy is the LEARN model for cross-cultural healthcare, which can be used to overcome language barriers with patients and program participants. The second strategy is a set of guidelines to use when working with medical interpreters. These learning activities will be facilitated by a Commission for Healthcare Interpreters certified medical interpreter.

PUBLIC HEALTH LEADERSHIP ACADEMY

Starting in January 2018

Applications due
November 17, 2017

The College of Public Health, with support from Georgia Power, has partnered with the J.W. Fanning Institute for Leadership Development at the University of Georgia, to offer the 2018 Public Health Leadership Academy (PHLA). PHLA provides training for individuals from across the state with the goal of advancing leadership skills to foster a culture of health in their communities.

The mission of the Public Health Leadership Academy is to improve the health of Georgians by increasing the capacity of leaders to transcend boundaries and work collaboratively, while transforming the health of their communities. The economic vitality of a community is directly impacted by the health and healthcare costs of its children, families, workforce, and seniors.

Program Design: This program offers an array of experiential learning activities that include five face-to-face two day sessions, discussions with subject matter experts and national public health leaders, as well as support and peer networking.

The five sessions will focus on leadership themes that have been identified as critical to building a culture of health in community based partnerships. A strong emphasis on collaborative leadership will guide the program content. A collaborative leader is able to assist in building a culture of health by 1) clarifying roles, responsibilities, and relationships in the community; (2) designing mechanisms for ensuring community accountability; (3) increasing community involvement and ownership; and (4) creating and sustaining collaborations.

Sessions: Sessions will be held in Athens on the University of Georgia campus. Each session will begin at 1:00 pm on the first day and conclude by 3:00 pm on the second day. Sessions are February 27-28, April 24-25, June 26-27, August 21-22, and October 17-18 (concluding with recognition and examples presented at the 2018 State of the Public's Health Conference).

Participants: The participant pool may include, but is not limited to, business, non-profit, and public leaders; professionals from multiple sectors including health, social work, psychology, ministry, and education; as well as other community-based entities that have an impact on factors that affect public health.

Tuition: Tuition for the program is \$500 per participant. Participants will be responsible for their travel expenses including lodging and meals.

Application Process: Twenty participants will be chosen for the 2018 cohort. Application forms can be found at [\(link\)](#). Applications are due November 17. Participants will be notified of their acceptance by December 15.

POSTERS

1 **Breast Cancer Partnerships: Reducing Disparities in Screening, Genetic Services and Clinical Trials for Minority Women**

Authors: Alice S. Kerber, MN, APRN, ACNS-BC, AOCN, AGN-BC; Aprille N. Belgrave, MPH; Elizabeth R. Fullerton, MPH; Nancy M. Paris, MS, FACHE - Georgia Center for Oncology Research and Education

Three Georgia-based strategies are discussed that follow the Community Preventive Services Task Force recommendations for multicomponent interventions to increase screening by reducing barriers and out of pocket costs. As suggested, the interventions are coordinated through health care systems and delivered in community settings.

2 **Kaolin in Georgia - Contributions and Effects on Rural Populations**

Author: Anarag Singh, Fort Valley State University, Student

Kaolin, a white, alumina-silica clay is considered one of Georgia's most important minerals. Mined by several companies both international and domestic, kaolin contributes to the economic prosperity of the state via jobs as well as being a much-sought after mineral in the production of products from toothpaste to porcelain. It may however also have a negative health impact on the people who mine it as well as those living in close proximity to mining operations; such impacts may include benign pneumoconiosis (i.e. kaolinosis), silicosis, lung cancer, and gastrointestinal distress in those practicing geophagia. A descriptive study is being carried out to ascertain the historical as well as current impacts of kaolin mining in Georgia.

3 **Syphilis Rates and Trends in the Central Savannah River Area of Georgia**

Authors: Becky B. Stone, DrPH; Yunmi Chung, MPH; Benjamin Ansa, MD, MSCR – Augusta University

There has been an alarming resurgence of early syphilis since 2000, especially in the Southeast, which has one of the highest rates of primary and secondary syphilis. Although the Central Savannah River Area (CSRA) is the second most populous area in Georgia with a large presence of health care facilities, its counties have one of the lowest overall rankings in health outcomes. This study examined the syphilis rates and trends in the CSRA. Between 2010 and 2014, the incidence rate of primary and secondary syphilis increased from 5.9 to 8.7 cases per 100,000 population in the CSRA. The relevance of preventive measures has been widely communicated, yet it is clear that risk-taking sexual behavior is on the rise. Greater effort is warranted to reduce risky behaviors that promote the transmission of syphilis.

4 **Physicians for Rural Georgia Program: A First Look.**

Authors: Chris Scoggins, M.P.H., Laura Bland, M.P.H., Susan Lumsden; Brad Lian, Ph.D. - Mercer University School of Medicine

In 2016, Mercer's President, in conjunction with the MUSM Dean, established a sustainable and innovative scholarship program, the Physicians of Rural Georgia Program, targeted specifically at meeting the healthcare needs of rural Georgia. This unique program provides both financial support for medical students pursuing careers in rural Georgia and a holistic support system to help them achieve this goal. The Physicians for Rural Georgia Program is currently the only scholarship program of its kind in the nation. Here, we provide preliminary data on the cohort, program goals and objectives, as well as plans for program assessment going forward.

5 **Public Health Nurses Impacting Early Language Development for Healthier Lives**

Authors: Laura Layne and Diane Durrence, Georgia Department of Health

Talk With Me Baby (TWMB) is the first initiative of its kind to use Public Health Nurses (PHNs) to bridge the 30-million word gap between low and higher income children statewide. PHNs are uniquely positioned to use the TWMB Curriculum to coach parents and caregivers to deliver language that is rich in quality and quantity to nourish infants and children neurologically, socially, and linguistically. This is Georgia's Language Nutrition solution to address the existing disparity. PHNs use naturally occurring contacts they have with expectant women, parents and caregivers of young children to lead by example, coaching, modeling and empowering them to develop the habit of talking to their baby early and often to shape educational and health outcomes.

6 **Impact of Participation in a Telestroke Network on Clinical Outcomes in Georgia**

Authors: Donglan Zhang, PhD, University of Georgia; Moges S. Ido, PhD; Lu Shi, PhD; Dale E. Green, MD, MHA; David Hess, MD

A telestroke program, known as the Remote Evaluation for Acute Ischemic Stroke (REACH) program, has been implemented in Georgia since 2003. Till 2016, the REACH program has connected with 30 partnering hospitals. This study examined if participation in a telestroke network is associated with a change in clinical outcomes and quality indicators.

7 Neonatal Abstinence Syndrome in Georgia – The first year of surveillance

Grace Kang, RN, Perinatal Health Manager, Georgia DPH

Neonatal abstinence syndrome (NAS) is a drug withdrawal syndrome that results from the abrupt discontinuation of chronic fetal exposure to substances that were used by the mother during pregnancy. It has primarily been studied in opioid-exposed infants; however it has been shown to be present in infants exposed to other substances. In an effort to more closely monitor NAS within Georgia, NAS was made a reportable condition as of January 1, 2016, through the web-based State Electronic Notifiable Surveillance System (SendSS). The reporting results provide additional support to the concern for the increasing public health significance of NAS and the opioid epidemic. Efforts are underway to continually improve quality and completeness of data reported, including education and outreach activities.

8 Food and housing insecurity, coercion, and intimate partner violence

Author: J. Aaron Johnson, Interim Director, Institute of Public and Preventive Health, Augusta University

Intimate partner violence (IPV) is a persistent issue in the United States. Two aspects of economic insecurity, food and housing insecurity, have been shown to increase the likelihood of experiencing IPV. IPV may be a coercive tactic in contexts where availability of critical resources such as food and housing is insecure. Though aspects of economic insecurity as well as coercive tactics independently predict IPV, the degree to which coercion predicts IPV in the presence of food and housing insecurity is unclear. The purpose of the current study is to perform a secondary data analysis of the 2010 National Intimate Partner and Sexual Violence Survey to address this research question.

9 A Survey of the Mosquito Population in North Georgia

Author: Amy Grice, Environmental Health Specialist, North Georgia Health District

Mosquito surveillance is a critical component in arboviral disease reduction, and such surveillance has been historically sparse in much of the State. The need for surveillance became urgent in 2016 as cases of travel-related Zika virus began to occur in Georgia. Surveillance was also expanded to include all district counties. Collected mosquito species were identified and classified as risk or non-risk based on their potential to transmit arboviral disease to humans. Biodiversity measures indicated moderate diversity of species. *Aedes albopictus* and *Culex quinquefasciatus* species were the dominant risk species.

10 Georgia Adult's Weight Status and association with Nutrition and Physical Activity

Authors: Trang Nguyen, MPH Student; Elizabeth Anne Pullekines, MPH; Zhang Donglan, PhD; Janani R. Thapa, PhD – UGA College of Public Health

Obesity, classified as having a body mass index (BMI) of over 30, is associated with higher risks of several adverse health outcomes. The prevalence of self-reported obesity among adults in Georgia was 30.7% in 2015. This study utilized data from the 2015 Behavioral Risk Factor Surveillance System to examine the association between weight status (BMI) and nutrition and physical activity levels. This was measured using a linear regression, controlling for socio-demographic variables. The sample consisted of 3,543 adult respondents. Vegetable consumption was found to be negatively associated with BMI ($p=0.039$).

11 Over the Counter Medication Education through Farm Worker Family Health Program

Authors: By: Kajal Jain, Student, UGA, and Dr. Trina von Waldner, PhD, UGA College of Pharmacy

Our research describes the role that pharmacy students play in over the counter medication education through Farm Worker Family Health Program (FWFHP) in Moultrie, GA. FWFHP concentrates on providing accessible healthcare to migrant farm workers who have limited access to healthcare. Through the program, professional students from pharmacy, nursing, nurse practitioner, physical therapy, and dental hygiene schools and colleges travel to Moultrie, Georgia to provide services on health issues that the farm workers may have. In addition to proper use of the medication, we stress that medications dispensed are also available without a prescription at many local discount stores. This helps ensure that farm workers know that products are available to treat common conditions as well as how to safely use them.

12 Determinants of adherence to physical activity guidelines among adults with and without diabetes

Author: Katherine Covington, IPPH Summer Program Scholar, Augusta University

Diabetes affects 29.1 million people in the United States (U.S). Engaging in physical activity (PA) prevents and also improves the outcomes of chronic diseases, including diabetes. The 2008 U.S. Department of Health and Human Services Physical Activity Guidelines for Americans recommends that adults should do at least 150 minutes a week of moderate-intensity, or 75 minutes a week of vigorous-intensity aerobic PA, or an equivalent combination of both. This study examined the BRFSS 2015 dataset for sociodemographic and health-related factors associated with adherence to PA guidelines among adults with and without diabetes.

POSTERS

- 13 Pedestrian Fatalities in Georgia: Emerging Trends, Current Initiatives, and Opportunities for Public Health**
Author: McKinley Thomas, PhD, Armstrong University
In 2014 accidents and unintentional injuries (AUI) ranked fourth as a leading cause of mortality in the United States with pedestrian fatalities accounting for 3.8% of all unintentional injury deaths that year. More problematic are estimates reported in Georgia; 2016 data indicate a 40% increase in pedestrian fatalities over the previous two years. The purpose of this presentation is to discuss the epidemiology of pedestrian fatalities in Georgia in light of global and national estimates, and to outline initiatives underway to prevent injury and improve safety.
- 14 The Strong4Life Wellness Blueprint Program: A Pediatric Hospital & Community Partnership to Support a Culture of Wellness in Youth Organizations**
Author: Monica Griffin, MS, RDN, LD, Senior Wellness Program Coordinator, Children's Healthcare of Atlanta
Youth organizations and out-of-school time programming present an untapped opportunity for promoting a culture of health. This presentation will explain how Children's Healthcare of Atlanta is partnering with local youth organizations to develop and implement wellness policies, which we call, a "Wellness Blueprint." The Strong4Life Wellness Blueprint Program addresses obesity prevention at the community level by engaging decision makers to make real, sustainable changes to their program's environment.
- 15 Psychological aggression in romantic relationships: Norms & personal factors important for prevention**
Authors: Ruth W. Leemis, MPH, CHES, Doctoral Student, UGA College of Public Health; Pamela Orpinas, PhD, MPH, UGA College of Public Health
This study compares relevant cognitions and behaviors among adolescents who experience Low, Increasing, and High trajectories of psychological dating aggression perpetration from middle to high school. This poster presentation will specifically discuss a sample of 550 students who participated in the Healthy Teens Longitudinal Study from Grade 6 (2002) to Grade 12 (2009). Using data from tenth graders, descriptive information about the students within each psychological dating aggression trajectory will be presented as well as differences in mean scale scores of dating violence norms, positive relationships, self-efficacy for alternatives to aggression, and conflict resolution styles.
- 16 Relationship Between Sexually Transmitted Infections and Preterm Birth in Georgia**
Authors: Stephanie Eick, MPH, Rachel Mercaldo, Michael Welton, PhD, MA; José F. Cordero, MD, MPH – UGA College of Public Health
Preterm birth (PTB) is a serious public health challenge in Georgia. The March of Dimes 2020 goal for PTB in the U.S. is 8.1%. The PTB rate in Georgia was 10.8%, a "D" rating in 2015, and needs to improve. There are many established risk factors for PTB, such as smoking and preeclampsia, but other factors, such as sexually transmitted infections (STIs), are not well studied. The aim of this study is to examine associations between county rates of STIs and PTB in Georgia in order to identify areas that may be targeted for intervention.
- 17 Ambient Air Emissions of Polycyclic Aromatic Hydrocarbons & Female Breast Cancer Incidence in US**
Author: William Parker Stults, PhD, MD Program, Mercer University School of Medicine
Breast cancer is among the most commonly diagnosed cancers as 1 in 8 women in the US will develop invasive breast cancer during her lifetime. The pathogenesis of breast cancer is complex involving both genetic and environmental aspects. Multiple studies have proposed environmental pollutants as a factor and provided evidence for the association. Specifically, traffic-related air pollution has been shown to be associated with breast cancer as a key factor in the incidence difference between rural and metropolitan areas. Recent studies have demonstrated that PAH exposure may be a risk factor and suggested potential mechanisms for its association in breast cancer development.
- 18 Evaluating Impact of Public Health Spending: Does Population Change Matter?**
Author: Zhuo (Adam) Chen, Associate Professor, Department of Health Policy and Management, College of Public Health, University of Georgia
Objectives: to examine the study design of a recent research concluding increasing public health spending is associated with worse health outcomes in the state of Georgia; Methods: Spearman rank correlation coefficients between population share change and health outcomes at the county-level were calculated; Results: Strong rank correlation between population change and health outcomes were found; Conclusions: Use of an inappropriate instrument variable has contributed to the observed association between public health spending and worse health outcome.

19 Zika Virus Response in Puerto Rico and Implications for Public Health Preparedness in Georgia

Author: Michael Welton, Postdoctoral Fellow, UGA College of Public Health; Presenter: Ariella Perry Dale, MPH

The Zika Virus (ZIKV) epidemic that begun in late 2015 quickly spread throughout South and Central America, infected hundreds of thousands of individuals by the end of 2016, and presented unique challenges that were not present in other public health emergencies. Response to ZIKV required a cohesive response that involve strategies including communicable and non-communicable diseases, vector controls, public health policies, and community engagement. This comprehensive response to ZIKV presents opportunities to examine and critique emerging disease response to be better prepared nationally and in Georgia to respond to or predict future outbreaks.

20 The Georgia Apex Program: Model Implications for Expanding School-based Mental Health Services & Heightening School and Community Partnerships

Authors: Rachel Campos, MPH, Dimple Desai, MSW, Deana Farmer, BA, Lucy Rabinowitz, MPH, and Ashley Singleton, MPH -- Georgia Health Policy Center; Dante' McKay, JD, MPA, Georgia Department of Behavioral Health and Developmental Disabilities

The Georgia Department of Behavioral Health and Developmental Disabilities, Office of Children, Young Adults, and Families, provided seed and annualized funding to 29 community mental health providers statewide to build capacity for school-based mental health (SBMH) services, referred to as the Georgia Apex Program (GAP). This session will outline implementation of the GAP and share key findings. Lessons learned from Georgia's investment in SBMH can be applied by providers with aspirations to implement a SBMH program.

21 The Impact of Mercy Health Center on Healthcare Utilization and Costs

Authors: Rebecca Walcott, MPH, Justin Ingels, PhD Candidate, Phaedra Corso, PhD, Samantha Elliott, UGA College of Public Health; Lauren Delmerico, Tracy Thompson, Mercy Health Center

Mercy Health Center (MHC) is a faith-based health resource center in Athens, Georgia, whose mission is to provide "quality, whole-person healthcare" to the underserved population of Clarke and five surrounding counties. In this session, we will explain how we analyzed the impact that MHC has on the healthcare utilization and costs of its patients over time. Though net benefits were not realized within the first 18 months at Mercy for this cohort, we would expect cumulative net benefits to begin to accrue after a patient's second year at MHC.

22 Improving breastfeeding in Georgia-reducing barriers in rural communities

Authors: Joanne Chopak-Foss, PhD; Felicia Yeboah, MHA, Georgia Southern University

The presentation will discuss barriers to breastfeeding unique to rural communities, how to encourage younger women, specifically those who are uninsured, underinsured and/or receiving WIC benefits. The context will focus on assisting rural healthcare providers, employers and hospitals with reducing barriers to encourage longer duration and exclusivity of breastfeeding for women. The presenters will also share results from a pilot study on increasing duration and exclusivity, as well as future research on rural women's intention to breastfeed.

23 Tobacco Point of Sale (POS) Marketing and Promotions among Youth in Georgia

Presenter: Alina Chung, MPH, Anne Coleman, MPH, PhD, Kenneth Ray, MPH, Jean O'Connor, JD, DrPH, FACHE, Georgia DPH

Background: The Georgia Department of Public Health partners with local schools to conduct the Youth Tobacco Survey (YTS) the findings are used to implement counter tobacco marketing education campaigns. Methodology: The YTS provides comprehensive data on various tobacco related topics for high school students in the state. In 2015, 35 Georgia public high schools participated in the survey. Results: Only 46% (230,000) of Georgia's High School (HS) students believed that tobacco companies promote tobacco products to youth. Conclusion: The results of the YTS notes this public health issue in Georgia and will be used to plan, implement and evaluate counter tobacco marketing education campaigns.

24 Preventive Dental Checkups and its Association with Access to Usual Source of Care among Rural and Urban Adult Residents

Authors: Aishah Khan, Student, Janani R. Thapa, PhD, Donglan (Stacy) Zhang, PhD, UGA College of Public Health

Our study found that rural-urban disparities existed in the utilization of preventive dental care services. Adults living in rural regions were less likely to obtain a dental checkup. Individuals with a usual source of care were more likely to obtain a preventive dental visit, with similar effects in rural and urban settings. We attributed the lower odds of having a checkup in rural regions to the lower density of health care workers in these areas. Encouraging integration of rural oral health care into primary care may help address some of the challenges due to a shortage of such physicians.

POSTERS

25 Examination of Health Aging: Quality of Life in Olympic-Style Weightlifters Across the Lifespan

Authors: Lesley Clack, ScD, UGA College of Public Health, Bryan Riemann, PhD, Armstrong University

Quality of life as we age is an important aspect of maintaining independent living. There have been numerous studies that focused on the benefits of aerobic exercise on quality of life. However, there have been fewer studies regarding the impact of resistance training on quality of life and little to no studies examining quality of life in competitive weightlifters. The purpose of this study was to look at the quality of life demonstrated by Olympic-style weightlifters across the lifespan. This poster will discuss the results of the study and its implication on healthy aging.

26 A Public Health Approach to the Early Identification of Autism and other Developmental Disabilities

Author: Jyll Walsh, Health Communications ORISE Fellow, CDC

This poster highlights innovative strategies and promising research-based practices developed through a public health awareness campaign using developmental milestones in the areas of social/emotional, cognitive, and language development in young children to teach parents and providers to recognize and respond to early warning signs of autism or other developmental disabilities.

27 Retrospective Study of Lead Exposure on Children less than 5 years old over 3 decades from the Woolfolk Chemical Work Site in Fort Valley Community

Author: Kingsley Kalu, Fort Valley State University, Student

The Woolfolk Chemical Works facility produced pesticides and fertilizer products supporting the surrounding agricultural operations. These products contained lead, polychlorinated biphenyl, dioxin, arsenic, and other toxic by-products which ultimately found their way into the soil and water surrounding the site as a result of chemical dumping, a practice which eventually led to its closure. There is still a growing concern by the community members as to the environmental impact of these residual toxins, specifically arsenic and lead in the soil and surface water run-offs and their possible toxic effects on humans, especially children less than five years living in the area. A retrospective study will be carried out to ascertain if there is historical evidence of reported lead toxicity in children less than five years living around the site over the past thirty years.

28 Improving Workplace Culture of Health Among Worksites in Georgia

Authors: Davon Washington, BS, Oluwayomi Fabayo, MPH, Ray Kenneth, MPH and Jean O'Connor, JD, DrPH, Georgia DPH

Background: The use of tobacco products at worksites contributes significantly to the risk of tobacco-related illnesses and diseases among the workforce negatively impacting the health of employees and productivity. Method: Georgia Department of Public Health Worksite Wellness Tobacco Project was implemented to provide technical assistance and resources to worksites on the adoption, implementation and enforcement of tobacco-free policy. Results: Qualitative interview results showed variation across the worksites on the strategies used to adopt and enforce policies. Conclusion: Tobacco use is the leading cause of illnesses and diseases among Georgians. Workplace tobacco-free policy will eliminate secondhand smoke exposure at worksites.

29 Location Based Active Smartphone Games, such as Pokémon Go, and their Relationship to Physical Activity

Author: Jared Jashinsky, Graduate Student, UGA College of Public Health

Active video games can elicit physical activity in users, and if adopted into certain populations, could lead to more Americans meeting health promoting physical activity guidelines. Location-based active smartphone games are a new type of game that require users to visit physical locations outside the home to accomplish gameplay tasks. Pokémon Go and Ingress are two of the most commonly played examples and have millions of active users. The present study sampled UGA students who self-reported their physical activity levels and their time spent playing a collection of location-based active smart phone games. Participants who played more of the games participated in more moderate intensity physical activity, showing the potential for them to promote physical activity in college-aged populations.

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The College of Public Health was established in 2005 in response to the compelling need to address important health concerns in Georgia. During its first decade, the College has experienced the establishment of a highly productive research culture with significant extramural funding, the continuous creation of new academic programs, and a dramatic increase in enrollment and credit hour production. Originally housed in seven separate buildings on and off the main UGA campus, the College is now the largest program located at the new UGA Health Sciences Campus (HSC) in terms of enrollment, funding for research and actual space occupied by its faculty and students. In addition to the Dean's Office at Rhodes Hall, the Department of Epidemiology and Biostatistics was the first program at the HSC in Miller Hall and the Center for Global Health is in the Wright Hall Annex. The Department of Health Promotion and Behavior and the Department of Health Policy and Management are both located in the completely renovated Wright Hall. The Gerontology Institute and the Institute for Disaster Management occupy two newly renovated buildings. A new facility planned for the future will house the laboratory-based programs of the Department of Environmental Health Science.