

# dhh EmployeeUPDATE

*Our Mission: To serve the people of North Carolina by enabling individuals, families and communities to be healthy and secure, and to achieve social and economic well-being.*

A monthly publication for employees of the North Carolina Department of Health and Human Services

## Refugee Day Celebration Brings the World to Raleigh

Unable to return to their home countries, more than 1,000 refugees settle in North Carolina each year. An event in downtown Raleigh on June 20 celebrated the state's involuntary arrivals and the enrichment of their adopted home.

The World Refugee Day Celebration at the N.C. Museum of History combined seriousness with spectacle. Speeches and a round-table discussion provided insight into the daily struggles refugees face. Dance, costumes, music and art depicted the cultures that refugees bring to their new land — and that they were forced to leave behind.

The daylong event was part of the U.N. High Commissioner for Refugees (UNHCR) declaration of June 20 as World Refugee Day. War, ethnic cleansing and political persecution drive millions of people worldwide from their homes each year. The UNCHR estimates the current worldwide refugee population at nine million. The United States allows up to 70,000 refugees to resettle



Youths of the Montagnard and Hmong peoples of Southeast Asia join in a dance.

each year, although tightened immigration restrictions limited the total in 2004 to just over 32,000.

North Carolina absorbs increasingly more refugees, said Marlene Myers, coordinator of the N.C. State Refugee Office, a part of the state Division of Social Services. Two years ago,

1,400 refugees from 37 nations made North Carolina their new home. Just since October, 818 refugees from 32 countries have settled in the state.

The conditions and homelands they fled range from civil war (Liberia) to genocide (Sudan) to ruthless political

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systems (Cuba and Myanmar, formerly known as Burma). Many of North Carolina's refugee population were American allies during the Vietnam War (the Hmong of Laos and the Montagnards of Vietnam).

Mecklenburg and Guilford counties took in the most refugees last year, 348 and 319, respectively, followed by Wake (122) and Buncombe (118).

Most refugees pursue naturalized U.S. citizenship, Myers said. More than 1,000 refugees in North Carolina took English-language classes last year. Those courses, as well as short-term cash assistance, health screenings and help finding a job and housing, are funded by federal money and by private organizations, many of them faith-based. ■



Refugees from Vietnam, Laos and Congo demonstrate their new English skills by leading the Pledge of Allegiance during World Refugee Day celebrations.



Montagnards forced to flee Vietnam perform traditional music.



Young women from the Montagnard culture perform a traditional dance.

# Dr. Devlin announces leadership changes in the Division of Public Health

State Health Director Leah Devlin has announced five key personnel changes in the N.C. Division of Public Health.

**Dr. Steve Cline** assumed the role of Deputy State Health Director on June 21. Dr. Cline, a dentist with a master's degree in public health, has more than 23 years of experience in state and local public health in N.C. He has been chief of the division's Epidemiology Section for the past six years and is known statewide and nationally for his leadership in preparedness. In his new role, Dr. Cline has direct responsibility for integrating the public health efforts of all of the programmatic sections of Public Health, including Women and Children's Health, Chronic Disease and Injury, Vital Records and Oral Health.

**Dr. Jeffrey Engel**, State Epidemiologist, is assuming the role of chief of the Epidemiology Section, which includes the HIV/STD, Occupational and Environmental Epidemiology, and General Communicable Disease branches. Dr. Devlin commended Dr. Engel for his outstanding job as State Epidemiologist over the past four years. Dr. Engel came to Raleigh in 2002 from Pitt County, where he was the leader in infection control at Pitt County Memorial Hospital and acting head of the Section of Immunologic Diseases at the Brody School of Medicine. An internist with a specialty in infectious diseases, Dr. Engel is Board Certified in Infectious Diseases and Internal Medicine.

**Dr. Lou Turner** will head up a new Public Health section, "Preparedness, Medical Examiner and Laboratory." As the former director of the State Laboratory of Public Health, she brings a wealth of knowledge and experience to this new position. She also served over the past year as acting director for Public Health Preparedness and Response, earning praise for her outstanding contributions to preparedness. Dr. Turner has a DrPH in Laboratory Practice and has worked in public health in North Carolina for 26 years.

**Dr. Leslie Wolf** was named Director of the State Laboratory for Public Health. "Dr. Wolf has done an incredible job in the past year as the Acting Director of the Lab and is well prepared to continue in this leadership role," Dr. Devlin said. Dr. Wolf has seven years of experience in public health and holds a Ph.D in Immunology and Microbiology.

New to the Division is **Dr. Julie Casani**, who assumed the role of the Preparedness Director and Branch Head with the new Preparedness, Medical Examiner and Laboratory Section on June 26. Dr. Casani, whose background is in Emergency Medicine, came from the Maryland Department of Health, where she has been a key leader in that state's preparedness work.



Dr. Steve Cline



Dr. Jeffrey Engel



Dr. Lou Turner



Dr. Leslie Wolf



Dr. Julie Casani

"We are grateful for these leaders' willingness to accept these new challenges," Dr. Devlin said. "These changes will restore lost capacity to the Division of Public Health and will greatly improve our ability to work in a more integrated way on critical and complex public health issues so we can become even more effective in improving and protecting the health of all North Carolinians." ■

# Leading by Example:

## Heart Disease and Stroke Prevention Task Force dedicates new Automated External Defibrillator in N.C. Legislative Building

When a person has a sudden heart attack resulting in cardiac arrest, quick action can mean the difference between life and death. A defibrillator, in the hands of a trained person, can correct a chaotically beating heart and help keep a person alive until emergency medical help gets there. Yet, most public buildings do not have that equipment or people trained to use it.

Heart disease is the leading cause of death in North Carolina. So, in an effort to raise awareness of the need for such equipment and training, North Carolina's Justus-Warren Heart Disease and Stroke Prevention Task Force dedicated a publicly accessible Automated External Defibrillator (AED) in May for use in the N.C. Legislative Building, which attracts thousands of visitors a year. The Task Force partners with the Heart Disease and Stroke Prevention Branch of the N.C. Division of Public Health to combat cardiovascular disease.

By making this AED available and visible, the Task Force wanted to set an example for private industry, county and state-level worksites and other facilities that have large numbers of employees and visitors. The hope is that the number of publicly accessible AEDs will increase in public buildings and workplaces, and that more people will become trained in the use of the AED to restore normal heartbeat and in cardiopulmonary resuscitation (CPR) to keep oxygen going to a victim's brain until help arrives.



1. Dignitaries participating in the ribbon-cutting ceremony at the Legislative Building included (L-R) Task Force member Rep. Jennifer Weiss; Rep. Carolyn K. Justus; Sen. Austin M. Allran; Sen. William R. Purcell, chair of the Task Force; and Dr. Brent Myers of Wake County EMS.

2. Senator Austin M. Allran and Representative Carolyn K. Justus get an introduction to the AED from Dr. Brent Myers, medical director for the Wake County Emergency Medical Services (EMS). To the far right is Senator William R. Purcell. Justus is the widow of Rep. Larry Justus, one of the two late legislators for whom the Justus-Warren Heart Disease Stroke Prevention Task Force is named.

It is a good policy for all able employees to be trained in CPR and AED use. AED and CPR training certifications are good for two years, and then re-certification is required. The training is usually done by instructors certified by the American Heart Association or the American Red Cross.

Senator William Purcell, chair of the Justus-Warren Heart Disease and Stroke Prevention Task Force, said, "To reduce the burden of heart disease in our state, we have to approach the problem in a multifaceted way. One approach is to increase emergency response capacity. Integration of three components—public AEDs, trained

volunteer responders in public places, and a county's EMS response plan—is one strategy to help reduce death and disability resulting from heart disease."

For more information on cardiovascular disease and prevention, visit the Heart Disease and Stroke Prevention Branch's Start With Your Heart website at [www.startwithyourheart.com](http://www.startwithyourheart.com). ■



## Jalil Isa

# *iSalud y Saludos!*

## Making the Right Choice

By now, you may have heard of a new project the Hispanic advocacy organization, El Pueblo, is leading. With funding and support from the Governor's Highway Safety Program and the State Highway Patrol, the organization is hoping a \$250,000 campaign emphasizing the repercussions of drunk driving will make a dent on the sobering statistics.

According to a survey conducted by the organization, 83 percent of the 900 Hispanic men polled didn't know the penalty for a DWI; 50 percent didn't know the state's legal blood-alcohol limit, which is .08; while 44 percent had been arrested for a DWI after drinking and driving.

These kinds of statistics may be what have caused Latinos to account for 19 percent of DWI charges last year, even though they make up only about 7 percent of the state's population, according to published reports of the state's Administrative Office of the Courts.

The multi-pronged approach to curbing these numbers will involve a media campaign, with special focus on trying to educate the Latino public about the consequences of drinking and driving. Soon, the logo "*Manejar Borracho? No Seas Tonto Muchacho!*" (Drive drunk? Don't be a fool, man!) will be visible

throughout the community. In addition, efforts to crack down on drunk drivers through DWI checkpoints will also be stepped up.

Much of this work is necessary to try and modify the cultural aspects that undoubtedly play a role in the higher numbers of Hispanic drunk drivers. For starters, immigrants coming from Latin American countries are often subjected to abuses by state police. In many cases, the police are incredibly corrupt. When I lived in Costa Rica for a while, my father would always carry what he called "*dinero para un café.*" Basically, he carried with him enough money to buy a cop a decent cup of coffee. He knew that could get police off his back if they stopped him for something minor. This was, by no means, seen as a grave offense in that culture. It was completely routine; it was just part of the game. And the population accepted it simply as a way of life. Mind you, we're talking about a country which is recognized to be among one of the more developed Latin nations. But even here, this was a way of life.

It should then come as no surprise that police officers and troopers sometimes face the possibility of Latinos trying to bribe them. If you're coming from a country where this is openly accepted—and you haven't been here long enough to learn ALL the many

ins and outs of the laws of the new culture—issues like this will arise. Luckily, the State Highway Patrol has recently recruited a full-time Hispanic liaison who is traveling the state teaching other fellow troopers what kinds of cultural differences may surface during encounters with this community. This same trooper is also trying to teach Latinos that the laws are very different in this country...and the enforcement of those laws is also a far stricter matter.

Meanwhile, El Pueblo's campaign will come at a good time to help in the acculturation process. By continuing to get the word out to the people who are committing these mistakes and, of course, breaking the law in the process, the organization hopes their messages will hit home. By emphasizing the particular laws, along with the deluge of penalties and negative outcomes, as well as dispelling any notions that it may be macho to understate your inebriation...these organizations hope to teach Latinos and others to make the right choice. Leave the car behind. And find a ride! ■

## DHHS has new Transportation Coordinator

DHHS Secretary Carmen Hooker Odom has announced the hiring of Patricia (Diane) Cox as the department's Transportation Program Administrator. Diane replaces Kathy McGehee, who retired on July 1.

In her capacity as Transportation Program Administrator, Diane will serve as the department's transportation program and policy liaison with the N.C. Department of Transportation. She will work extensively with DHHS divisions, DOT, local transit systems and local human service agencies to provide planning, administrative and



Patricia (Diane) Cox

operations assistance in overcoming transportation-related barriers for the people we serve.

Before joining DHHS, Diane worked for more than five years as the executive director of the Kerr Area Transportation Authority in Henderson, N.C. She has also served as executive director of Granville County United Way and director of development for the Alice Aycock Poe Center for Health Education.

Diane is a native of South Hill, Virginia and a graduate of Old Dominion University. ■

## Forensic Tests for Alcohol to oversee training for sobriety testing across N.C.

The Director of the Governor's Highway Safety Program (GHSP) has designated the Forensic Tests for Alcohol (FTA) Branch of the Division of Public Health as the state agency to provide the National Highway Traffic Safety Administration (NHTSA) Standardized Field Sobriety Testing (SFST) to law enforcement officers statewide.

While you may not remember hearing about the FTA Branch, you have probably seen their BATMobile at fairs or at sobriety/DWI checkpoints—the Mobile Breath Alcohol Testing unit. Responsible for education and public awareness about drinking and driving, FTA also participates in the state's "Booze It and Lose It" campaign against drunk driving. They are also

responsible for ensuring the reliability of Breathalyzer testing.

FTA will work with the existing training system to ensure that all sobriety training is uniform and up-to-date across the state. Under FTA's leadership, current SFST instructors will get refresher and update courses, along with the latest version of the training manual, before they can train law enforcement officers to perform sobriety testing. FTA will also start a tracking system of SFST instructors and officers statewide. Agencies such as community and technical colleges and police academies that provide SFST training to law enforcement officers will have to show that their



instructors are current with NHTSA / FTA SFST refresher courses.

"This new system should ensure the most current SFST courses are being taught with SFST instructors and that current SFST manuals are uniformly used across the state," said Al Eisele, head of the Forensic Tests for Alcohol Branch. "It is a very positive step." ■

# One-day conference to address the challenge of diabetes

**2<sup>nd</sup> Annual**  
NORTH CAROLINA  
**Clinical Laboratory Day**

**The Diabetes Challenge:**  
*Diagnosis, Education and Management*

Friday,  
August 4<sup>th</sup>, 2006  
Wake Technical  
Community College  
Raleigh, N.C.

cosponsored by:

Diabetes has become a major public health threat and one of the leading causes of death and disability in North Carolina and the country as a whole. Complications of diabetes are serious and may include blindness, renal damage, heart disease, stroke amputation and problems during pregnancy.

Learn more about the diagnosis and management of diabetes and proven educational tools at a one-day conference sponsored by the N.C. State Laboratory of Public Health and the N.C. Diabetes Prevention and Control Branch. The event, Clinical Laboratory Day: The Diabetes Challenge, will kick off at 9 a.m. on Aug. 4 at Wake Technical Community College with guest speaker Beverly Robertson.

Ms. Robertson, Point-of-Care Coordinator at the University of North Carolina Medical Center, will discuss methods to monitor the control of diabetes. Dietician and diabetes educator Beth Silvers will describe techniques to best educate the diabetic patient. In the afternoon session, Dr. Joseph Konen, chair of the N.C. Diabetes Advisory Council, will explore new technologies, treatments and promising practices in diabetes prevention and control.

Although the event is designed for healthcare professionals, anyone affected by the disease or caring for others with the disease may attend and can benefit from the conference. The \$30 registration fee includes lunch, refreshments and educational materials.

The registration deadline is July 17. For a brochure, registration form and more information, visit the Public Health Lab website at <http://slph.state.nc.us/LabImprovement> or call 919-733-7186. ■

## DHHS WELLNESS AT WORK

**Suzanna Young, DHHS Wellness Director**

Brian and Donna, staff at the DHHS Wright School in Durham, received wellness points for roller-skating. Clarissa gave up fried foods to earn points. They and other staff discovered that wellness activities can be a lot of fun when 65 percent of the school's employees joined in a wellness competition called "The Biggest Winner." Teams competed for wellness points by making positive changes in their diet and exercise levels. Medals for wellness achievements were presented at assemblies each month, with students cheering for their teacher counselors. Results demonstrated how support for wellness in the workplace makes a huge difference in helping people achieve their personal health goals. In less than a year, 68 percent of staff participating stopped eating sweet snacks and adopted healthy serving sizes; 50 percent ate more fruit; 43 percent chose healthier snacks; and 37 percent ate more fruits and vegetables.

The "Biggest Winner" competition is just one example of the many successful wellness programs implemented in DHHS since the department's Wellness Initiative began in fall 2005. This cooperative effort between the Department and the N.C. State Plan established wellness committees in every agency and facility in the department. Wellness representatives from each committee are on the DHHS Wellness Council, which meets quarterly to develop recommendations for the Department on policy and work environment changes that will improve support for employee health and wellness.

Most of the wellness committees in the department have already implemented activities to help employees become more physically active. These include walking clubs, team sports, the creation of exercise areas, stairwell initiatives, and exercise classes. Some committees promoted the Be Active Challenge (March 6-June 16). This statewide program, organized by N.C. Amateur Sports, encourages all North Carolinians to develop healthy lifestyles. The Challenge increases participants' physical activity using team competitions and small

prizes. This year, 1,430 North Carolinians of all ages participated. The Division of Aging and Adult Services found it an effective way to add some fun competition to Dix Campus walking clubs. Be Active team member Lea Slaton says, "The Challenge has been a great way to get to know people, to learn about each other's work and to blow off a little steam. The friendly peer pressure has motivated me to sneak in a little exercise during the workday, which makes me a happier and healthier employee." Employees from the Division of Public Health and the Division of Services for the Deaf and Hard of Hearing also participated in the challenge.

Next month we will talk about promoting healthy eating among employees. Until then, try the following tips for dining out.

### TIPS WHEN YOU DINE OUT

Choose broiled or baked meats and foods low in fat and sugar and try the following

- *Avoid buffets – most people tend to overeat at buffets.*
- *Split a meal – most portions in restaurants today have more than doubled. Save money and calories by sharing or box half before eating to have lunch the next day.*
- *At fast-food restaurants order a kid's meal or order the regular rather than the super or jumbo sizes.*
- *Order soup as a first course or as your entrée.*
- *Skip the bread and rolls.*
- *Drink water with your meal.*
- *Eat slowly – it takes 20 minutes for your brain to get the signal you are full.*

## N.C. Disability Determination contributes to “Cool for Wake”

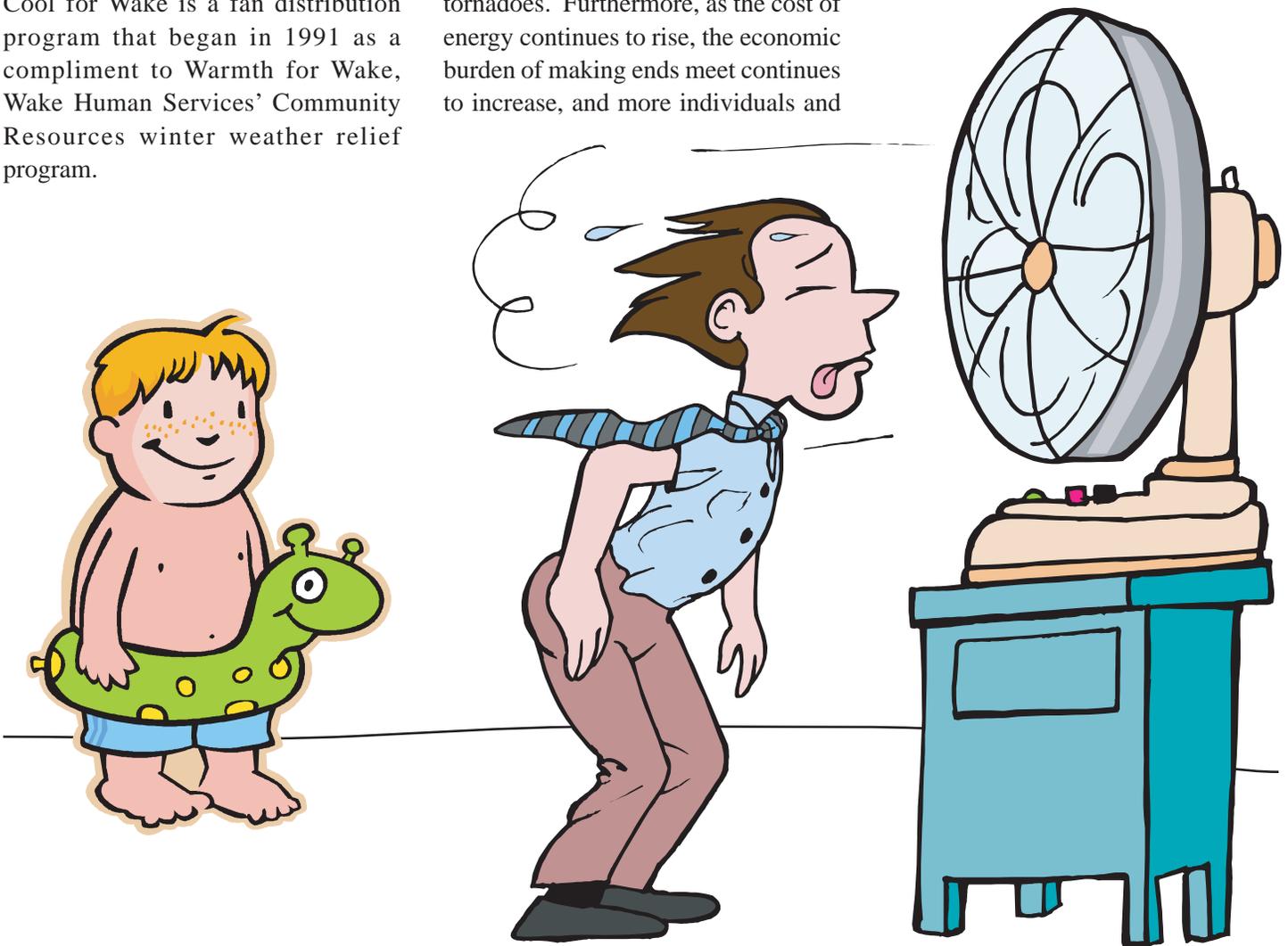
The Tar Heel Association of Disability Examiners (THADE) recently sponsored a successful community service project involving the North Carolina Disability Determination Services staff from the Division of Vocational Rehabilitation. Thirteen 20-inch box fans and \$589 (the equivalent of 51 more fans) were collected, for a total of 64 fans that were donated to Wake County Human Services as part of the Cool for Wake program.

Cool for Wake is a fan distribution program that began in 1991 as a compliment to Warmth for Wake, Wake Human Services’ Community Resources winter weather relief program.

During the summer months, elderly people, small children, those with chronic respiratory ailments such as asthma, and people on certain types of medications are highly susceptible to the negative health effects of prolonged exposure to extreme heat. In fact, the EPA estimates that in an average summer more than 1,500 people nationwide will die as a result of heat exposure. This is more than the combined number of deaths from other summer weather events including hurricanes, lightning and tornadoes. Furthermore, as the cost of energy continues to rise, the economic burden of making ends meet continues to increase, and more individuals and

families are at risk of being caught unprepared for heat waves.

The goal of Cool for Wake is to reach out to vulnerable people within the community to reduce the risks that this seemingly innocent and often forgotten factor brings into the households of many low-income families in Wake County. In a typical summer, Cool for Wake assists 300-500 households. Similar heat assistance programs exist in most counties across the state. ■



New!  
Improved!  
Easier than ever!

*DHHS has a new website address!*

[www.ncdhhs.gov](http://www.ncdhhs.gov)



# HEALTH FACTS



## the bad news

Treatment for chronic diseases accounts for almost 70% of health care costs for N.C. State Health Plan members under 65, and the number of employees with chronic diseases is rapidly increasing. At present rates, the number of state employees with diabetes alone will almost double between 2001 and 2009.

## the good news

Most chronic diseases can be prevented or effectively managed. Physical inactivity, poor eating habits, tobacco use, and unmanaged stress – the major chronic disease risk factors – can be reduced by lifestyle changes.

# Adoption Profile

## Introducing Shamor

Shamor is intrigued by nature and thinks he'd like to be an anthropologist. He is an energetic boy who likes to roller skate, swim, play volleyball, badminton, basketball, and soccer. He has the gift of music with abilities in piano, hand bells, choir, and most recently, the bass. Shamor loves any activity with a dramatic flair, especially school plays where he has the opportunity to perform. He enjoys learning to cook and other creative activities like arts and crafts, drawing, and writing.

Shamor is intelligent and articulate with an incredible vocabulary for his age. He embraces opportunities to excel. Shamor is capable of doing better in school where challenging assignments and situations stimulate



Shamor  
b. Dec. 10, 1989

him. He has set high goals for himself, both educationally and career-wise. Shamor has also worked through a lot of issues that caused him stress and his attitude has improved tremendously. Birthday: Dec. 10, 1989

## A Family for Shamor

Shamor wants a forever family, but his adoptive family must understand that because of his fears, Shamor can revert to some old coping mechanisms. He needs a family that can provide him with a nurturing firmness and solid structure, which have proven to be very positive for Shamor. They will need to continue his therapy and be willing to allow Shamor contact with a brother, if he decides he wants to further that relationship in the future.

(NC #018-122) ■

## Have you taken your HRA yet?

DHHS encourages all NC State Health Plan members to take the Health Risk Assessment provided by NC HealthSmart. Taking the HRA yearly will help you set and achieve your personal health goals.

**The on-line HRA takes only fifteen minutes and you will receive the following information immediately:**

- An individual assessment of your health risks.
- A personal health plan.
- Information on resources to help you meet the goals of your personal health plan.

Go to [www.statehealthplan.state.nc.us](http://www.statehealthplan.state.nc.us) and click on the NC HealthSmart tab, then click on register now. If you do not have internet access, call 1-800-817-7044.

**Individual survey information is strictly confidential  
and not shared with the NC State Health Plan or anyone in state government.**