Chronic disease puts a tremendous burden on families and communities throughout the United States. According to the Centers for Disease Control and Prevention (CDC), chronic diseases are responsible for about 70 percent of all deaths nationally and lead to disabilities for nearly 10 percent of Americans. In fact, more than 133 million Americans, almost 1 out of every 2 adults – have at least one chronic illness.

Recognizing the vital public health interest in reducing and more effectively treating chronic illnesses, the Department of Health is investing its resources in programs to reduce the health impact that chronic illnesses have on New Jersey residents.

One new program is The New Jersey Coordinated Chronic Disease Prevention and Health Promotion Plan. The initiative will integrate the state’s heart disease, stroke, cancer, diabetes, arthritis, asthma, obesity prevention and tobacco control programs to concentrate their resources and address multiple chronic diseases simultaneously. Funded through a 3-year grant from the CDC, the program will work in partnership with organizations and communities across the state to implement effective disease prevention strategies that will help New Jerseyans live longer and reduce health care costs.

The Department’s signature effort to improve the health of New Jersey residents and reduce obesity is ShapingNJ, a statewide public/private partnership with more than 200 organizations working to promote physical activity, healthy eating, breastfeeding, avoiding sugary beverages, limiting high-calorie foods and limiting television viewing.

A recent national report underscores that obesity remains a significant public health challenge for all of us. The “F as in Fat” report by the Robert Wood Johnson Foundation and Trust for America’s Health projects that the state’s obesity rate could double from 24 percent to 48.6 percent by the year 2030. While our projected rate would be one of the lowest in the nation, our health care costs as a result would be higher than any other state.

Efforts to reduce obesity must start early in life and that’s why promoting breastfeeding is a key priority of the Department. Breastfeeding for the first nine months can reduce the risk of childhood obesity by 30 percent, according to the CDC.

Reducing obesity in preschoolers is the focus of a statewide after-school program funded by the Horizon Foundation for New Jersey. Healthy U—a partnership with the New Jersey YMCA State Alliance - is already helping 20,000 kids around the state get healthy.

The workplace wellness campaign will ask New Jersey employers to pledge that they will implement a comprehensive wellness program to promote active living and health lifestyles for all employees.
Department of Health Welcomes
New Director of Chronic Disease Programs

As the daughter of a nurse growing up in North Carolina, Melita Jordan, CNM, MSN, APRN C has always had an interest in public health, and a drive to make a difference in the lives of vulnerable and at risk populations. As the new Director of the Department’s chronic disease programs, she hopes to take all of her experiences to increase access to care and improve health outcomes for residents across the state.

“In my mid-twenties, I had the opportunity to travel to the Mississippi Delta to study to become a certified nurse midwife,” said Jordan. As part of my academics I had the chance to help address a nursing shortage that was adversely affecting the health of mothers and children in the region. I had never been in the deep-south before and the need for care was great. Seeing the impact that I and other students and faculty were making in the lives of those with very little resources was incredibly rewarding for me. It is experiences like that one that I, and so many others in the field of public health share that make us want to do all that we can to make the lives of others better.”

At the Department, Melita will oversee a large number of chronic disease initiatives and programs including: the Department’s heart disease and stroke prevention program, asthma program, comprehensive tobacco program, diabetes prevention and control program, New Jersey Cancer Education and Early Detection, and the chronic renal disease program. She will also oversee grants related to cystic fibrosis, hemophilia and huntington disease. With a staff of 26, she understands that in order to be most successful she needs to successfully engage her staff, other divisions within the department and stakeholders across the state.

“New Jersey faces many challenges regarding chronic diseases, and working under the leadership of Commissioner O’Dowd, I hope to better integrate the programs we administer to make sure we have comprehensive policies that allow for our actions to be prioritized. I will work with my staff and our partners both internally and externally to improve performance, reduce mortality and improve quality of life.”

“I am a participatory leader; I hope that I can inspire my staff by setting an example, working with them and being responsive to their needs.”

Improving education, awareness and quality of care are the keys to improving health and lives noted Jordan.

Ms. Jordan was previously with Pennsylvania Department of Health as the Director of the Bureau of Family Health Services. For the past six years, she was responsible for overseeing Child and Adult Services (including the Chronic Renal Disease Program); WIC; Newborn Screening and Genetics and Community Systems Development and Outreach.

Visit the Chronic Disease home page
Building Healthy Communities: Making the Healthy Choice the Easy Choice

Outcomes measure success, and results from the Department of Health’s Community Pilot Project provide promising models for partnership building to combat obesity. Through ten small grants to local governments of between $7,500 and $15,000, DOH’s ShapingNJ Partnership and its funding partners – Robert Wood Johnson Foundation, Partners in Health and Walgreens, established a sharing network for developing sustainable community-based initiatives to increase access to healthy foods and opportunities for physical activity.

An examination of three pilot programs from 2011 is indicative of the program’s success.

Irvington, a city of nearly 54,000 residents, included both food access and physical activity strategies in their pilot initiative. The mayor, health officer, school superintendent and director of the senior housing authority partnered with seniors to create a community garden next to the senior center. Seniors took a master gardener’s class offered by the Rutgers Cooperative Extension so that they could participate in the planning and maintain the garden. Popular walking clubs, established in city parks, attracted an average weekly attendance of 70 people, and senior walking clubs meet twice a week weather permitting. Seniors, schools and the local channel 24 advertised the walking clubs to build participation.

The Monmouth Regional Health Commission partnered with five bodegas in Red Bank to stock healthy foods. Surveys were conducted to learn what customers regularly buy in each store, and what factors influenced the owner’s selection of healthier products. Healthy Pick stickers marked healthier choices and nutrition tip cards in English and Spanish were given out as bag stuffers. Healthier snack options replaced candy at the checkout counter. Another survey asked customers what other healthy items they would like their store to carry, and this information was shared with store owners.

The Cape May County Health Department worked with their local parks and recreation department to add healthy food options at the local zoo. To ensure the healthy choices continue to be offered, the county freeholders adopted new contract language that will apply to all future vendors.

The other participants in the first round of the Community Pilot Project were the health departments of Atlantic, Monmouth, Somerset and Warren Counties; Montclair and Paterson municipal health departments; and Nutley Department of Public Affairs. This partnership initiative demonstrates how small grants can produce positive results when public and private sector organizations work together to make New Jersey communities healthier places to live.

Building on initial project successes, NJDOH is moving ahead with additional dollars and partner support for a second round of pilot projects. ShapingNJ has budgeted $45,000 and will continue to provide technical assistance and coordination to help communities develop policy and environmental approaches that make healthy choices available, easy and affordable.

The pilot projects promote evidence-based strategies that raise public awareness, support healthy behavior and make good nutrition and regular physical activity more accessible. Healthy living is possible only if healthy options are available.
Summer Workplace Blood Drive Campaign Generates Increase in Blood Donations
Nearly 450 More Blood Drives Occur Over Four-Month Period

The results of the 2012 Summer Workplace Blood Drive Campaign are in, and they are encouraging for New Jersey. During the four months from May through August 2012, New Jersey’s eight blood centers reported nearly 450 more blood drives than last summer – an increase of 13.8 percent in the number of drives and an 11.2 percent increase in the number of units of blood collected over the same period in 2011.

Earlier this week, Commissioner O’Dowd thanked the New Jersey Workplace Blood Donor Coalition for their efforts in increasing blood donations in New Jersey. Coalition members include Novartis Pharmaceuticals Corporation, Blood Bank Task Force of New Jersey, Chamber of Commerce Southern New Jersey, HealthCare Institute of New Jersey, New Jersey Association of REALTORS®, New Jersey Business & Industry Association, New Jersey Chamber of Commerce, New Jersey Food Council, New Jersey Hospital Association, New Jersey Society for Environmental, Economic Development (NJ SEED), New Jersey State AFL-CIO, New Jersey State League of Municipalities, Rutgers University, and Virtua Health.

Coalition members promoted the need for workplace blood drives to thousands of New Jersey business leaders, mayors and other public officials through newsletters, newslines, publications, websites, direct mail, presentations and special events. More than 20 companies in South Jersey received training in how to conduct blood drives. Coalition members held a total of 22 workplace blood drives and raised public awareness of the need for blood through news articles and interviews.

More on the Summer Workplace Blood Drive Campaign is available here.

“Do the WAVE” to Prevent Healthcare-Associated Infections

What is “Do the WAVE?” Hint – It’s not something you do at the beach or pool, and it’s not the latest dance craze or workout routine. It is, however, something that every caregiver should do to help protect themselves and their loved ones from healthcare-associated infections.

“Do the WAVE” stands for Washing hands to protect against germs, Asking questions to improve quality of care, getting Vaccinated to protect against flu and pneumonia, and Ensuring safety by making sure medical devices are cleaned and used properly. Important steps that can help prevent against the 1.7 million healthcare-associated infections that occur each year in the United States.

During the fall months, there is heightened awareness surrounding breast, prostate and gynecologic cancers. As of late, there has been much controversy over whether the benefits of screenings for some of these cancers outweigh the risks – and if one decides to undergo regular screening, the questions of “what age to start?” and “how often?” come to mind.

As New Jersey’s only National Cancer Institute-designated Comprehensive Cancer Center, The Cancer Institute of New Jersey (CINJ) is dedicated to educating others about matters of prevention and the importance of early detection.

There are many studies that support both the pros and cons of regular cancer testing, but the best course of action in deciding on a screening regimen is to speak to your physician.

First you must know a little bit about who is at risk. Some quick facts of note (source: American Cancer Society):

- One in six men will be diagnosed with prostate cancer in their lifetime. The disease occurs at a much higher rate in African-American men than in men of other races, and is the most commonly diagnosed cancer among Hispanic men.
- Caucasian women are more likely to develop breast cancer than African-American women, although in women under age 45, breast cancer is more common in African-American women. Women with a family history or who have a BRCA1/2 mutation also are at a higher risk of developing the disease.
- Factors such as family history, infertility, advanced age and obesity could put one at a higher risk of developing a form of gynecologic cancer (cervical, ovarian, endometrial, fallopian tube, vaginal, vulvar).

What testing methods are available?

For prostate cancer, the use of a simple blood test called PSA (Prostate Specific Antigen) in conjunction with a digital rectal exam (DRE) can alert physicians to early stage prostate cancer that can, in most cases, be successfully treated. While many experts say to start a regular screening regimen at age 50, it may be earlier if you have a family history or are in a high-risk category.

Mammograms and breast self-exams are the standard screening methods to detect breast cancer. While many experts recommend a mammogram annually starting at age 40, others say begin at age 50 and at different intervals.

For cervical cancer, it is recommended that women undergo Pap and pelvic exams annually, beginning no later than 21 years old. Since screening exams do not exist for every form of gynecologic cancer, it is recommended that women who experience pain or pressure in the pelvic area; unusual vaginal discharge or bleeding; frequent abdominal bloating or swelling; or a sore that does not heal should see their doctor right away, as these could be symptoms of a gynecologic cancer.

To learn more visit [www.cinj.org](http://www.cinj.org) or to learn more about screening opportunities call the New Jersey Cancer Education and Early Detection (NJCEED) program at 1-800-328-3838.
September 10  – Commissioner O’Dowd visited the New Jersey Institute of Technology to encourage students to create electronic personal health records. The Commissioner was at NJIT for the 7th Annual National Health IT Week Celebration.

September 21  – Cathleen Bennett, Director of Policy and Planning and Dr. Carolyn Daniels, Executive Director of the Office of Minority and Multicultural Health attended the New Jersey Health Literacy Summit at Mercer County Community College.

September 21  – Bill Conroy, Deputy Commissioner, gave opening remarks at a press conference where DOH announced its support of a new statewide “Workplace Wellness Campaign.” The campaign is being spearheaded by the NJ Health Care Quality Institute and NJ Business & Industry Association.

September 25  – Gloria Rodriguez, Assistant Commissioner, attended the Mercer NJCEED/County Cancer Coalition’s “Paint the Town Teal,” event in Ewing, that was held to highlight efforts to fight ovarian cancer.

September 27  – Dr. Arturo Brito, Deputy Commissioner, attended an event to promote “Healthy U,” a campaign that seeks to reduce obesity in children that is funded by The Horizon Foundation for New Jersey. The event took place at the Montclair YMCA.

Congratulations to...

The New Jersey Heart Disease and Stroke Prevention Program was awarded a $117,000 grant from the CDC’s National Heart Disease and Stroke Prevention Program to help employers create workplaces to reduce risks for heart disease, stroke and obesity. The grant funding, announced on September 19, will be used to develop a worksite wellness toolkit for employers, offer technical assistance and training to employers in all 21 counties, and evaluate impact and reach of the toolkit.

The New Jersey State Cancer Registry on being recognized by the United States Department of Health and Human Services for meeting CDC standards for data completeness, timeliness, and quality for the 2012 National Program of Cancer Registries Cancer Surveillance System.
The Burden of Chronic Illness in New Jersey

#1 Heart disease is the leading cause of death

#2 Cancer is the second leading cause of death

#3 Stroke is the third leading cause of death

14.3 The percent of adults who are obese

24.8 The percent of high school students who reported smoking cigarettes

25 The percent of deaths that are the result of cancer

30 The percent of all children who are obese

2,313 The number of residents who die due to diabetes

188,000 The approximate number of children with asthma

427,000 The number of adults living with a diagnosis of arthritis

511,000 The approximate number of adults with asthma

860,000 The number of adults with lifetime history of asthma

67 million The number of Americans with high blood pressure

Over Half a Million Dollars Awarded to Help Smokers Quit

Congratulations to the Office of Tobacco Control on receiving a $508,958 grant from the Centers for Disease Control and Prevention (CDC) to provide needed smoking cessation services and expand NJQuitline, the statewide telephone-based counseling service to help smokers who want to quit smoking. The award, received in July 2012, will make assistance available to all who seek it.

Calls to NJQuitline are expected to increase in response to the CDC’s National Tobacco Education Campaign launched in March 2012. The Department of Health is partnering with the CDC to promote the hard hitting media campaign that focuses on the negative health effects of smoking.

Tobacco use is highly addictive. Surveys indicate that nearly 70 percent of smokers want to quit, yet less than 3 percent are successful without help from a structured smoking cessation program. Of New Jersey’s estimated 980,000 smokers, nearly 1 in 5 adults or an estimated 686,000, want to quit.

Smoking continues to be the leading preventable cause of death and disease in the United States. Services that increase quitting can decrease premature mortality and tobacco-related health care costs in both the short- and long-term. Quitting by age 30 eliminates nearly all excess risk associated with tobacco use. Tobacco users who quit before age 50 cut in half their risk of dying in the next 15 years. The benefits of quitting at any age are well documented no matter how many years a person has smoked.

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Chronic Diseases, continued from page 1

but now it is expanding to preschools and 12 public schools. Deputy Commissioner, Dr. Arturo Brito, joined a press conference about the expansion at the Montclair YMCA on September 27.

While good health starts at home, the workplace is also an area where people can take steps to improve health. Last week, Deputy Commissioner Bill Conroy joined in the announcement of a new Workplace Wellness Campaign with the New Jersey State Chamber of Commerce, the New Jersey Business and Industry Association and the New Jersey Health Care Quality Institute.

Workplace wellness is critical not only in terms of individual health but in terms of improving economic activity. Workers who are overweight or obese and have other chronic health conditions miss an estimated 450 million additional days of work each year compared with healthy workers, reducing employer productivity. The Workplace Wellness Campaign will ask New Jersey employers to pledge that they will implement a comprehensive wellness program to promote active living and healthy lifestyles for all employees.

The impact of chronic illnesses in New Jersey is staggering. In New Jersey, 188,000 children have asthma, more than 425,000 residents suffer from arthritis; and stroke, heart disease and cancer are the top three leading causes of death.

Moreover, risk factors for chronic disease such as obesity and tobacco use threaten the health of future generations. New Jersey has the highest obesity rates in the nation among low-income children, ages 2-5. If nothing is done to reverse the obesity trend, today’s children may be the first generation in this country to live shorter, less healthy lives than their parents. The stakes in terms of public health cannot be higher.

The Department is committed to focusing on programs that provide the best health returns for our residents. We are implementing strategies that build support for programs that help people manage their chronic conditions, and the Department is supporting public health initiatives that reduce incidence of disease, disability and healthcare costs.
High Blood Pressure is Out of Control for Too Many Americans

Serious health risk needs more attention at every healthcare visit

The majority of people with high blood pressure are being treated with medicine and have seen a doctor at least twice in the past year, yet their condition is still not under control, according to a new Vital Signs report from the Centers for Disease Control and Prevention. Millions more are either aware they have high blood pressure but aren’t getting treated with medicine or don’t even know they have it, the report says.

High blood pressure, also known as hypertension, is a leading risk factor for heart disease, stroke, and other cardiovascular diseases. High blood pressure in childhood often leads to high blood pressure in adulthood—and is associated with early development of cardiovascular disease and risk for premature death. In this study, for the first time, researchers conducted a large-scale examination of the joint effect of weight status and sodium intake on the risk for high blood pressure among more than 6,000 children and adolescents aged 8–18 years. Click here for study highlights.

Help Smokers Quit, continued from page 7

The one-year grant, which represents the first 12 months of a two year program, will significantly increase the capacity and efficiency of NJQuitline. Each call to 1-866-NJ-STOPS is answered by an interactive voice that provides information and access to live services. Callers receive quit tips and encouragement to assist with quit attempts. One-on-one sessions with trained counselors guide smokers through the quitting process and help smokers get through the difficult times and prevent relapses. In addition, callers are referred to resources to assist them with quitting based on eligibility through Medicaid or insurance.

As a result of the CDC grant, NJQuitline services are now open to all New Jersey residents. Counseling is provided in 120 languages every weekday from 5 a.m. to 3 a.m. and weekends from 7 a.m. to 7 p.m. Given New Jersey’s diverse population and the disparities that exist in access to health care for many minority communities throughout the State, NJQuitline provides a readily accessible, caller-friendly individualized approach to quitting smoking.
Health Comes First on the ‘Back-to-School’ Checklist

By: Jennifer Smith, Health Educator, Department of Health Vaccine Preventable Disease Program

Healthy children learn better so it is important to prevent diseases. Whenever children are brought into group settings, there is a potential for the spread of infections. To prevent some of the most serious infections, New Jersey requires that children receive a series of vaccines prior to school entry. Administrators should take this opportunity to ensure that students, parents, and staff understand the importance of vaccinations and are familiar with school vaccine requirements.

School immunization laws are one of the most effective tools for preventing outbreaks of contagious diseases. Prior to the availability of effective vaccines, diseases like diphtheria, polio, measles, rubella, and mumps were common occurrences in schools. School immunization laws were established to prevent these outbreaks and have been highly successful in not only protecting children, but also in protecting entire communities. All 50 states in the United States have school immunization requirements.

Administrators of all New Jersey public and private schools, including child care, preschool, Head Start, and K – 12, are responsible for ensuring that all students are in compliance with N.J.A.C. 8:57 – 4, Immunization of Pupils in School regulations. In accordance with N.J.S.A. 26:1A-10, local health departments may impose penalties on facilities for non-compliance.

Although immunization is touted as one of the most successful public health initiatives, cases and outbreaks of vaccine preventable diseases still occur. Diseases are often brought into this country by people who get infected abroad and can rapidly spread among susceptible individuals in our schools and communities. As an example, from June 2009 - June 2010, approximately 3,500 cases of mumps were reported in New York City, two upstate New York counties and Ocean County in New Jersey. There were 425 cases reported in Ocean County. The initial patient for this outbreak was an 11-year-old child who returned to the United States from the United Kingdom, which was experiencing ongoing mumps activity. The child became ill while attending a summer camp exposing other campers—the campers then spread the infection within their communities when they returned home. This was the largest mumps outbreak in the United States since the 2006 outbreak among college-aged persons.

Illnesses and outbreaks can be very disruptive to educational programs and family life. School officials are responsible for reporting the diseases specified in N.J.A.C 8:57-1, Reportable Communicable Diseases regulations. School officials should work closely with local and state public health authorities to ensure appropriate and timely management of ill and exposed individuals to prevent further spread of disease.

It is important that schools consistently review the vaccination records of their students to ensure they are up-to-date. One way to easily keep track of student immunizations, is for schools to enroll in New Jersey’s immunization registry—the New Jersey Immunization Information System (NJIIS). NJIIS is a free, confidential, population-based online system that collects and consolidates vaccination data for children and adults statewide. NJIIS provides an official record of a child’s vaccination history for school attendance. The reporting features of NJIIS enable schools to continued on page 11
September Is National Emergency Preparedness Month

The best time to prepare for an emergency is before it happens. That is why during National Emergency Preparedness Month, the Department urges all New Jersey residents to create emergency plans and update emergency kits. Everyone should make the following preparations to protect their family, their business and their community in advance of an emergency:

- Have an emergency kit
- Make an emergency plan
- Stay informed
- Get involved

**Have an emergency kit:** Everyone should be prepared to have enough supplies for at least three days. Emergency kits should include the basics for survival including non-perishable food, water, medicine (both over-the-counter and prescription, if possible), flashlight, transistor radio, batteries, phone chargers, baby supplies and other special medical needs.


**Make an emergency plan:** Families should have an emergency plan that includes all family members and friends in case family members are separated when an emergency occurs. Plans should spell out how to contact each other, where everyone will meet and what to do in various situations.

An emergency plan should also include a comprehensive contact list that includes school and health care information as well as family information. Make sure this list is updated often as cell phone numbers may change.

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*‘Back-to-School’ checklist, continued from page 10*

assess immunization coverage by age groups, track and remind students about missing immunizations, add past immunization history to achieve a more accurate vaccination record and to easily transfer students’ records between schools.

The New Jersey Department of Health applauds schools for their commitment to ensuring that students are appropriately immunized. These continued efforts will help protect students, schools and communities from preventable diseases.

**For further information:**

**New Jersey Immunization Requirements:**
[http://www.state.nj.us/health/cd/imm.shtml](http://www.state.nj.us/health/cd/imm.shtml)

**New Jersey Immunization Information System (NJIIIS):** [http://njiis.nj.gov](http://njiis.nj.gov)