



New York

The *Steps to a HealthierUS* five-year cooperative agreement program aims to help Americans live longer, better, and healthier lives by reducing the burden of diabetes, overweight, obesity, and asthma and addressing three related risk factors—physical inactivity, poor nutrition, and tobacco use.

For FY 2003, this U.S. Department of Health and Human Services (HHS) program allocated \$13.6 million to fund 23 communities, including four counties in New York, to implement community action plans to reduce health disparities and promote quality health care and prevention services.

Project Area

- Broome County: Binghamton (population 200,536).
- Chautauqua County: Jamestown, Dunkirk-Fredonia (population 139,750).
- Jefferson County: Fort Drum, Watertown (population 111,738).
- Rockland County: Ramapo (population 286,000).

Target Population of *Steps* Interventions

Students and staff members in low-income school districts, children, employees, health care providers, low-income mothers, people with special needs, people with disabilities, tobacco users, public housing residents, people with diabetes or prediabetes, people living in households with someone with asthma, teachers, Hispanic communities, and African-American mothers.

Proposed Interventions

Media

- Increase public awareness of the health breast-feeding (Broome).
- Multimedia campaign on diabetes and obesity prevention (Chautauqua).
- Reinforce the Eat Well Play Hard (EWPH) message through multimedia campaign (Rockland).
- Initiate media/education campaigns with messages related to diabetes care, low-fat milk, EWPH and promotion of smoke-free homes and vehicles (Jefferson).

Policy

- Incorporated into the school-based and workplace initiatives.

School-Based

- Promote 5 A Day for Better Health concepts in selected school districts through policy changes, school activities, and school communication channels (Broome).
- Conduct asthma education programs for preschool staff, day care providers, and school children (Broome, Chautauqua, Jefferson).
- Train elementary and special education teachers to integrate physical activity into the classroom (Rockland).
- Offer mini-grants to schools to implement or enhance nutrition or physical activity policy change. (Rockland).
- Complete and analyze results of CDC's School Health Index assessment and planning guide to identify opportunities to improve physical activity and healthy food choices (Chautauqua, Rockland, Jefferson).
- Improve healthy food options in elementary schools (Rockland).
- Expand the reach of K–12 curriculum promoting physical activity and nutrition (Chautauqua).

Community-Based

- Enlist grocery stores in a promotional campaign to highlight the nutritional value of locally grown produce (Broome).
- Expand BC Walks, a community walking program, and promote use of school athletic facilities for community members (Broome).
- Increase referrals of high-risk families to the Broome County Health Department's Environmental Health Team, which will make home visits to help identify environmental triggers and help families develop a remediation plan (Broome).
- Sponsor programs for people at risk for diabetes and obesity that incorporate Diabetes Prevention Program strategies (Broome, Jefferson).
- Develop tobacco-use cessation programs, focusing on people with diabetes and people who share a household with someone who has asthma (Broome).
- Promote participation in Get Moving Chautauqua and offer mini-grants to increase physical activity options (Chautauqua).
- Train day care center providers to increase children's access to healthy food options (Chautauqua).
- Promote obesity prevention and EWPH messages in grocery stores frequented by low-income and ethnic minorities (Rockland).
- Implement asthma awareness/education program in a Hispanic community (Rockland).
- Develop smoking cessation programs and educational materials for Hispanic communities (Rockland).
- Provide a diabetes public education forum (Jefferson).
- Expand the existing tobacco-use cessation referral system and provide home-bound cessation and asthma intervention services (Jefferson).

Workplace

- Implement a 5 A Day promotional campaign in Broome County's largest worksite (Broome).
- Provide guidance to work sites on breast-feeding policies (Broome).
- Promote nutritional strategies and 5 A Day in work sites (Chautauqua).

Health Care

- Develop tobacco screening, counseling, and referral systems within health care facilities (Broome).
- Provide continuing education related to diabetes prevention, screening, and the American Diabetes Association's clinical practice recommendations for health care professionals (Broome, Chautauqua, Rockland, Jefferson).
- Provide mini-grants to local hospitals to increase the number of tobacco-use cessation counselors (Chautauqua).
- Train health care providers on *Clinical Practice Guidelines for Treating Tobacco Use and Dependence* (Chautauqua).
- Train health care professionals on standards of asthma care and self-management (Chautauqua).
- Conduct educational sessions for health care providers on the link between tobacco use, secondhand smoke, and asthma (Rockland).
- Train pediatric health care providers on asthma management (Rockland).
- Provide case management to Hispanic families at high risk for asthma (Rockland).
- Identify and refer people at high risk for diabetes to appropriate services (Jefferson).

Evaluation

HHS will provide training and technical assistance to help each *Steps* community develop measurable program objectives and specific indicators of progress and use relevant data to support ongoing program improvement. HHS also will conduct a national evaluation of the overall program. Existing data sources, such as the Behavioral Risk Factor Surveillance System and the Youth Risk Behavior Surveillance System, will be used to identify and measure program outcomes and assess progress toward program goals.

Community Consortium

Departments of education and health; various other government agencies; school district personnel; Board of Cooperative Education Services (BOCES); health care providers; health plans; national and local health organizations; faith-based organizations; private sector participants; YMCA; chambers of commerce; cooperative extensions; and academic institutions, offices, county executives and other county government personnel; offices for the aging; rural health networks; youth bureaus; boys and girls club; WIC programs; business community; transit authorities; breast-feeding coalitions; organizations assisting people with disabilities; prenatal/perinatal councils; alcohol and substance abuse council; teacher training centers; family resource centers; child and adult food care programs; Head Start; and social services and environmental resources agencies.

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Note: *Steps* communities have until May 2004 to finalize their community action plans. Proposed interventions may change accordingly.