

INNOVATIONS



ARC

A Newsletter of the Asthma Regional Council of New England

A Program of The Medical Foundation

WINTER 2009

ARC is a coalition of public agencies, private organizations and researchers in New England working to address the environmental contributors to asthma. Multidisciplinary leaders with knowledge, resources and determination have joined forces to swiftly identify and implement solutions to this growing public health epidemic through expanded application of innovative models and linkages to a larger network of potential partners.

Executive Director's report: Stacey Chacker

Dear ARC Members,

As you are aware, the past year has marked a period of great transition for the New England Asthma Regional Council (ARC)!

Last winter, ARC developed [A Road Map for the Future](#), a new strategic plan to guide ARC's efforts to promote environmental health across New England. In addition to outlining ARC's four major action areas, this roadmap delineates two philosophical shifts in ARC's mission. First, due to its prevalence, ARC will now address adult asthma, in addition to pediatric asthma, our focus to date. Second, ARC will now focus on improving both environmental and clinical aspects of asthma. The complete action plan is available at <http://www.asthma-regionalcouncil.org/actionplan/actionplan.html>.

Thank you to all who worked so hard on this plan.

As previously announced, we also have three new staff members on board, including myself. Having spent the past
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IMPORTANT ANNOUNCEMENT:

ARC's annual Council Meeting will be held on **April 2nd, 2009** in Marlborough, Massachusetts. The meeting will offer resources, information, and networking opportunities for individuals from government agencies, nonprofit organizations, and the health care sector. The meeting's content is appropriate not only for individuals working directly on asthma, but also on related issues like air quality, housing, health disparities, and environmental justice.

DATE: April 2, 2009
9:30 AM to 3:45 PM

LOCATION: Holiday Inn and Suites
265 Lakeside Avenue, Marlborough, MA 01752

FOR MORE INFORMATION:
Contact ARC Coordinator Molly Brett
mbrett@tmfnet.org or 617-279-2289 ext. 538.

TO REGISTER: <http://tinyurl.com/ARCMeting>



Betsy Rosenfeld Steps Down as Chair

Betsy Rosenfeld, Deputy Regional Health Administrator at the U.S. DHHS Office, Region I (New England) has decided to step down from her long-held position as Chair of ARC's Advisory Committee (formerly, the Executive Committee). She has held this position practically since ARC's inception, and feels that it is time to bring new leadership to ARC. Thankfully, she will remain an active participant on the Advisory Committee.

Betsy has been an indispensable source of guidance, connections, innovative ideas and resources for ARC. She helped to usher in ARC's new "Roadmap to the Future"—the organization's new strategic plan—and provided invaluable support and advice to our previous Executive Director,

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Best Practices in Asthma Management

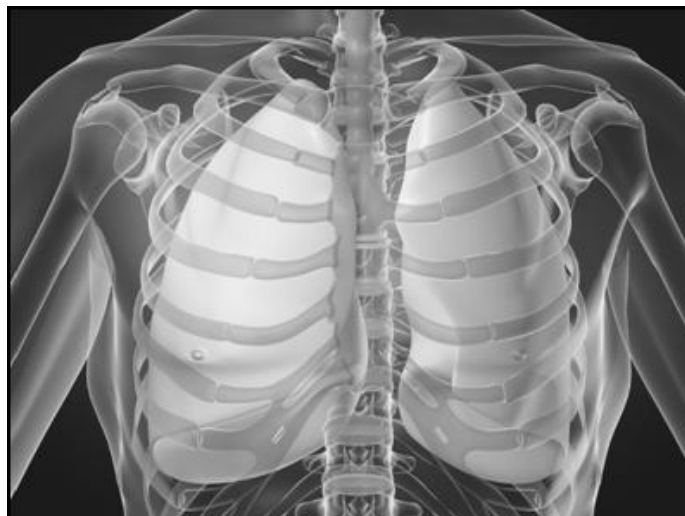
Provider Consensus Statement

This past summer, ARC and the University of Massachusetts Lowell convened health care leaders across Massachusetts to identify policy changes needed for providers to improve asthma care and outcomes for their most vulnerable populations. A group of approximately 20 physicians and nurses worked with us to identify their priority recommendations, resulting in a provider consensus statement entitled “What the Health Sector Needs to Implement Best Practices for Asthma: a Perspective from Providers.” This document contains recommendations geared to health payers (insurers), government officials, and the health care system itself. Now finalized, we are sending out the consensus statement to be endorsed by health care professionals across Massachusetts. ARC will then present the document to targeted policy-makers for their consideration and adoption over the coming years.

The consensus statement calls on the health sector to take specific steps to align their policies and programs with best practices, outlining specific recommendations for payers, providers and health systems, and public agencies. The full report will be made available on the ARC website.

In summary, the consensus statement promotes:

- Implementation of the National Asthma Education and Prevention Program Guidelines for the Diagnosis and Management of Asthma, including payment for and access to services and medications consistent with the Guidelines.



- Comprehensive disease management services that tackle asthma at multiple levels and address medical, social, and environmental factors.
- Broad access to asthma education, home visiting, environmental intervention services and supplies, and workplace exposure information as appropriate and needed.
- Better surveillance of appropriate services for those at highest risk of asthma's burden.

For additional information, please contact Laurie Stillman, Director of the Public Health Policy Center at The Medical Foundation, at 617.451.0049 ext. 504 or lstillman@tmfnet.org.

Executive Director's report: Stacey Chacker ...continued from front cover

18 years as a Community Organizer and Director of Community Building and Environment for Neighborhood of Affordable Housing in East Boston, I am excited to transition into my new role as Executive Director of ARC, as well as Director of The Medical Foundation's Environmental Health Department. Eileen Gunn joins ARC as the Director of the Healthy Homes Promotion Project, a three-year project promoting a comprehensive, evidence-based approach to achieving healthier living environments across New England. Prior to joining ARC, she managed several national advocacy campaigns for the Washington D.C.-based group Beyond Pesticides. In addition, Molly Brett is serving as ARC Coordinator and conducting several special projects for the

organization. Molly recently graduated from Yale University with a degree in American Studies. We all appreciate the continued support from Laurie Stillman, ARC's past Executive Director.

As you will read, the ARC Council Meeting is on April 2nd (with a snow date of April 7th (you never know!)). We hope that you will join us for this meeting. On behalf of all of ARC staff, we are honored to join you, and look forward to working with you to sustain ARC's impressive record of reducing the impact of asthma in New England.

Sincerely – Stacey Chacker
schacker@tmfnet.org

ASTHMA SURVEILLANCE



Results of New England Asthma Call-back Analysis: Concerning Findings Revealed

The New England Asthma Region Council (ARC) continued its surveillance of asthma in the region using results from the 2006 standard Behavioral Risk Factor Surveillance System (BRFSS) for all 6 New England states as well as the 2006 BRFSS Asthma Call-back surveys. The Call-back was conducted in just five of the six New England states (excluding Rhode Island). However, Mary Adams, ARC's consultant epidemiologist, who analyzed the results of this and past regional asthma surveys, felt confident that the results are reflective of the entire region. She felt this way based on the fact that there were virtually no statistical differences found between the five states that participated, nor were there differences uncovered in state results in past regional surveys which did include Rhode Island.

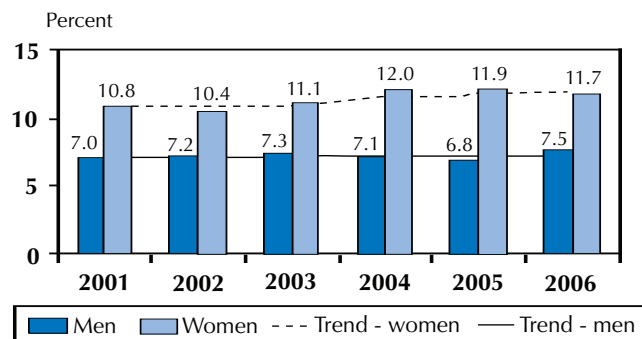
Results

The Asthma Call-back survey consisted of in-depth interviews of anyone who indicated on the BRFSS that someone in their household had asthma. The findings will be more comprehensively presented at the upcoming ARC meeting, but here are some of the highlights:

New England Adults

- The current asthma rates among adults in New England (all 6 states) at 9.7% was significantly higher than in the rest of the U.S., including when unadjusted rates were compared to the rest of the country and again when rates were controlled for a number of potentially confounding factors;
- The overall current asthma rate in New England increased between 2001 and 2006. There was an increase among women, while the rate for men has remained constant;
- Adults with current asthma were more than 3 times as likely to be unable to work as those without the disease;
- Over 18% of adults with asthma have severe persistent disease, based on the national criteria for disease classification used in this report;
- As many as 70% of adults with asthma have uncontrolled disease, based on national control guidelines.

Current Asthma Rates by Year New England Region, Adults 18+



Dotted lines are trend lines indicating that rates for women increased between 2001 and 2006 while rates for men did not. Source: Behavioral Risk Factor Surveillance System, 2001, 2004, 2006

New England Children

- Over one in four (25.3%) children had either moderate or severe persistent asthma symptoms;
- Nearly two out of three (64.8%) New England children with current asthma have asthma that is not considered well controlled;
- Only about half of all children with current asthma had received from their health provider an Asthma Management Plan or received a flu shot in the past year, both nationally recommended practices for people with asthma.

“The biggest news,” said report co-author Laurie Stillman, “is that contrary to what we have commonly believed, the large majority of children and adults have what is considered to be uncontrolled asthma, based on national control guidelines. The other story is the irrefutable connection between tobacco smoke and the onset -as well as exacerbation- of this disease.”

The report will be available on-line in the very near future. ARC would like to thank Mary Adams for conducting the analysis, the U.S. Department of Health and Human Services, Region I New England for having funded the report, Betsy Rosenfeld from the US HHS office for her valuable input and insights, and the New England departments of public health, as well as their state asthma programs, for their input and policy recommendations.



ARC Launches Healthy Homes Promotion Initiative

ARC is pleased to announce the launch of our new Healthy Homes Promotion Initiative! With financial support from the Jesse Cox Charitable Trust and the US EPA (Region I), ARC will work to improve asthma outcomes and public health by assisting the New England states with efforts that address healthy homes using a holistic, coordinated approach. The Medical Foundation has hired Eileen Gunn to manage the project and to serve as a resource for agencies and individuals working to promote healthier home environments across New England.

Eileen is currently completing the assessment phase of this new project. She has spent the past few months identifying efforts in the New England region that address health hazards in the home, focusing on organizations that collaborate with

partners across the healthy housing arena. She has conducted approximately 35 confidential interviews with individuals and organizations engaged in different aspects of healthy homes efforts to determine the level of coordinated healthy homes efforts, gather perspectives on a more integrated approach, identify barriers facing agencies and community-based partners, and determine how ARC and its partners can further support the New England states. The summary will be available shortly on our website, or you can email egunn@tmfnet.org for a copy. As part of the grant, she is also preparing a healthy homes training this spring for community-based groups in Springfield and Fall River, MA. For additional information, please contact Eileen Gunn: egunn@tmfnet.org; (617) 279-2240 x537.

MODEL PROGRAM: *New Hampshire Housing Finance Authority*

In New Hampshire, Housing Finance Authority (NHHFA) has been busy advancing the healthy housing agenda. NHHFA helps finance the development of 400 to 600 units of privately-owned affordable housing per year. Its recent healthy homes successes include:

- In June 2008, a NHHFA financed project became the first multifamily residence in the United States to receive a Platinum Leadership in Energy and Environmental Design (LEED) rating from the US Green Building Council. The project, owned by Child and Family Services of New Hampshire, was developed to provide four apartment units to be used by youth aging out of foster care as part of their Transitional Living Program. The building was designed with a special emphasis on energy efficiency and indoor air quality, including features like direct-vented high efficiency boilers, low-toxicity finishes and adhesives, Energy Recovery Ventilators (ERV) for each unit, and a sub-slab piped ventilation system for radon remediation. Originally designed to meet a LEED Silver certification, New Hampshire Housing covered the additional cost of less than 5 percent to achieve the Platinum rating.



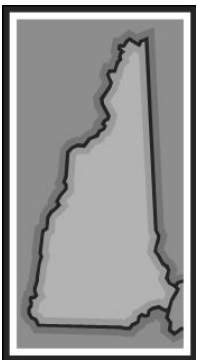
This transitional living facility in Manchester, NH is the nation's first multifamily residence to achieve a Platinum LEED certification.

- Effective January 1, 2009, NHHFA is giving preference to affordable housing projects developed as smoke-free through federal Low Income Housing Tax Credit (LIHTC) allocations. The idea was suggested by Ellen Tohn, former consultant to ARC's Housing Committee, as part of the development of a Healthy Homes transition plan for New Hampshire under contract with the National Center for Healthy Housing. With assistance from Lindsay Dearborn of the New Hampshire Asthma Control Program, staff introduced the concept to the developer community at the annual public hearing for the LIHTC program in early September. The idea received

broad support, not only for its health benefits, but also for the reasons of reduced turnover and maintenance costs and better marketability due to strong tenant preference. Projects developed as smoke-free (no smoking in any indoor areas) will receive a 2 point scoring advantage over those that do not, and because of the high level of competition for this resource it is likely that every new project submitted for LIHTC allocation in New Hampshire will be smoke-free.

- For more information, contact Bill Guinther, Program Planning Analyst at NHHFA, at bguinther@nhhfa.org.

Model Program: The New Hampshire Childhood Lead Poisoning Prevention Program's Strategic Planning Process



New Hampshire's Childhood Lead Poisoning Prevention Program (CLPPP) recently completed a strategic planning process to determine "healthy homes" goals for the state and to identify key strategies to achieve them. CLPPP engaged Ellen Tohn and Rebecca Morley, two consultants from the National Center for Healthy Housing, to guide the six-month process.

Tohn and Morley, along with CLPPP staff members, held five community meetings across the state to gather input from individuals doing lead poisoning prevention and healthy homes work on a local level. In addition, they convened statewide meetings with 50 – 60 stakeholders from different health and housing programs and organizations at the beginning and end of the process. Based on the information gathered at these meetings, Morley and Tohn drafted a strategic plan, which was reviewed by stakeholders before being finalized.

The plan recommends specific capacity-building activities, education and outreach initiatives, and policy priorities that move from a lead-focused agenda to a broader healthy homes program. In accordance with the recommendations, CLPPP is establishing a Healthy Homes Taskforce to oversee implementation of the strategic plan. The group will use the plan to identify short-term work that CLPPP and local partners can implement, and it will work on creating an infrastructure

and searching for funding and other resources to accomplish long-term work.

To implement the recommendations, CLPPP will work with local lead action committees, who are interested in expanding their scope to a broader Healthy Homes approach. As one of its first initiatives, CLPPP hopes to offer Healthy Homes Specialist Credential training to environmentalists, case managers, weatherization officials, visiting nurses, and other individuals already providing home visits. They also hope to work with one of the local committees to pilot a program training high school and college students to conduct Healthy Homes Check-Ups.

According to CLPPP Health Promotion Advisor Kellie Eastman, the process has generated significant excitement and enthusiasm, already leading CLPPP's partners to implement some of the policy changes recommended in the strategic plan.

For more information, contact Kellie Eastman, Health Promotion Advisor, New Hampshire Childhood Lead Poisoning Prevention Program, Kellie.Eastman@dhhs.state.nh.us or (603)271-8128.

Indoor/Ambient Air Quality

The Role of Pest Control in Effective Asthma Management: A Business Case

As research continues to establish a firm link between asthma and certain environmental factors, experts increasingly identify environmental trigger interventions as an important component of asthma management. Last year, ARC partnered with Children's Hospital and the University of Massachusetts Lowell to produce a business case demonstrating that education and in-home environmental interventions are sound investments for patients with severe asthma. Now, ARC has partnered with the Boston Public Health Commission, with funds from the W.K. Kellogg Foundation and the US EPA, to produce a business case documenting the costs and benefits of one particular environmental intervention: pest management education and services for certain asthma patients.

The case for pest management services is grounded in research suggesting that pests both cause and trigger asthma. Children who are both allergic to a specific pest allergen and exposed to

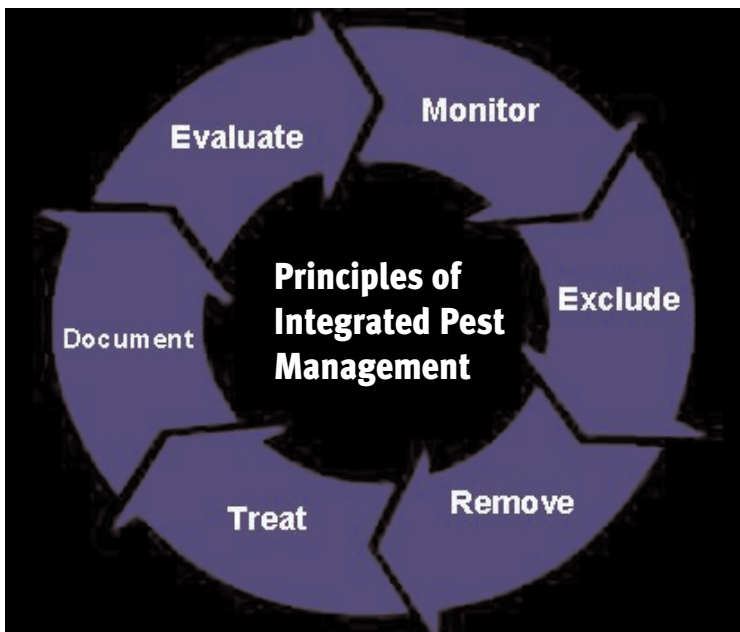
that allergen are many times more likely to require hospitalization for their asthma than children who were not allergic or not exposed to the allergen.

Seminal research on in-home environmental intervention programs reveals that reducing allergen levels significantly correlates with reduced complications of asthma, including fewer unscheduled asthma-related hospital visits. Allergen reduction efforts can assume a variety of forms, from provision of basic supplies to education about asthma triggers to actual pest management services. Integrated Pest Management (IPM) is a prevention-based approach to pest control that avoids high-toxicity pesticides: IPM represents a safe and effective method for reducing allergen levels in the homes of asthma patients whose conditions warrant professional pest services.

Given the high costs of medications and hospital visits for patients and payers, pest management demands consideration by the health sector as a reasonable intervention for asthma patients. An analysis of the research on costs and health benefits of pest management demonstrates that, relative to standard means of asthma management, Integrated Pest Management education and services are cost-effective interventions for certain high-risk asthma patients.

The forthcoming report draws on relevant literature and case studies to outline the efficiencies and costs of providing pest management services to asthma sufferers. Additionally, it details model programs and proposes a framework for assigning patients to different categories of pest management interventions. Once finalized, the report will be available on the ARC website.

For additional information, please contact Molly Brett, ARC Coordinator, at 617.279.2289 ext. 538 or mbrett@tmfnet.org.



Betsy Rosenfeld Steps Down as Chair...continued from front cover

Laurie Stillman on a variety of issues including policy leadership on asthma surveillance and health sector environmental investments. In a previous newsletter, Laurie said, "I have had the opportunity to work with exceptional leaders and visionaries over the years. They have provided me with guidance, expertise, and support (both moral and financial) all along the way. I would be entirely remiss if I didn't single out Betsy Rosenfeld as one of the best among them..."

We want to thank Betsy for all of the wisdom and time she has given ARC, and we are grateful to DHHS Regional Health Administrator Captain Michael Milner for approving the time she has devoted to this important role for so many years and for allowing her to continue on as an important contributor to ARC.



MISSION: ARC works to reduce the impact of asthma across New England through collaborations of health, housing, education, and environmental organizations, with particular focus on the contribution of schools, homes, and communities to the diseases and with attention to its disproportionate impact on populations at greatest risk.

The Asthma Regional Council membership consists of senior representatives of the Environmental Protection Agency, the Department of Health and Human Services, and the Department of Housing and Urban Development as well as state governmental partners in health, housing, education and environment, large municipal housing and health authorities, and select representatives from community based organizations, academic and health institutions.

The Council is lead by an Executive Director under the supervision of an Advisory Committee drawn from the Council membership.

The current Advisory Committee includes:

Betsy Rosenfeld

U.S. Department of Health and Human Services, Region I (New England)

Suzanne Condon

Massachusetts Department of Public Health

Lindsay Dearborn

New Hampshire Department of Health and Human Services

Rhona Julien

U.S. Environmental Protection Agency, Region I

Megan Sandel, MD

Boston Medical Center

EXECUTIVE DIRECTOR:

Stacey Chacker

[Asthma Regional Council](#)

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ARC RECEIVES FINANCIAL SUPPORT FROM THE FOLLOWING GENEROUS ORGANIZATIONS:

- U.S. Environmental Protection Agency (Region 1)
- U.S. Department of Health and Human Services – Office of Women’s Health
- Jessie B. Cox Charitable Trust
- East Bay Community Action Program
- Boston Public Health Commission

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THE MEDICAL FOUNDATION

The Asthma Regional Council is a program of The Medical Foundation (TMF) of Boston, a non-profit organization that is committed to helping people lead healthier lives and to creating healthy communities. Visit TMF on the web at www.tmfnet.org.



**Asthma Regional Council
of New England**

The Medical Foundation
622 Washington Street, 2nd Floor
Dorchester, MA 02124

“INNOVATIONS”

A newsletter on asthma and the environment

Implementing an Effective Pest Control Program Using Integrated Pest Management:

A Free Three-Part Webinar Series

Mark your calendars! ARC, the Boston Public Health Commission, and the Boston Housing Authority are sponsoring a webinar series on Integrated Pest Management (IPM).

The series provides a wealth of practical tools for Housing Authorities and landlords interested in implementing IPM in affordable housing. This program is made possible by support from the W.K. Kellogg Foundation and the US Environmental Protection Agency.

SCHEDULE

FEBRUARY 11, 2009 (2-3 PM)

Elements of a successful program:

A case study from the Boston Housing Authority

<https://www2.gotomeeting.com/register/260795469>

FEBRUARY 23, 2009 (2-3 PM)

Working with an IPM Contractor

<https://www2.gotomeeting.com/register/651956201>

For more information, contact Molly Brett: mbrett@tmfnet.org or 617-279-2289 ext. 538



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