

APHA-SA: Health Policy & Practice Oral Session

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APHA 2017 Annual Meeting & Expo (Nov. 4 - Nov. 8)

Abstract

Improving Outreach and Continuous Care for HIV: Evaluating and Improving Home Visits

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Uganda has a high prevalence of People Living with HIV (PLHIV) and its impact on orphans and vulnerable children (OVC) is of great concern given their large unmet health needs. A local NGO is working to support PLHIV and OVC in the slums of Kampala. While trained staffs are involved in a range of activities including the provision of psychosocial support and vocational training of OVC, this project to support PLHIV is implemented in 2 health divisions of Kampala. The activities include conducting home visits to retain PLHIV in care, to support OVC households, to trace children and partners of index PLHIV, and to increase HIV testing and referral. From November 2016 to January 2017, we conducted 83 home visits to trace those PLHIV lost to follow-up; 84 home visits to trace children and partners of index PLHIV and another 22 home visits to trace partners of partners. We are monitoring the outcomes of these home visits to design better support of PLHIV. By visiting 63 PLHIV lost to follow-up, we found that 6 had died, 38 could not be found and 19 have resumed care. This evaluation underscores the need to include additional contact information to retain PLHIV and to address other barriers for continued care. Other lessons have also been learned with respect to the need for support and outreach to the children and partners of PLHIV. The project will be monitored and evaluated continuously to enhance and strengthen our outreach effort to support PLHIV

Epidemiology

Abstract

Nutrition Label Reform: Four Design Factors of Front-of-Package Labeling on Sugar-Sweetened Beverages to Bridge the Knowledge Gap of Low Nutritional Knowledge Consumers

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Front-of-package (FOP) labeling on sugar-sweetened beverages may be an effective method of helping consumers make healthier dietary choices. On the other hand, there is evidence that the current Grocery Manufacturers Association industry standard FOP label design is not effective. From my research, I will create a set of visual label guidelines derived from existing literature to assist future policymakers in developing more effective FOP labels. First, I complete a negative-binomial regression analysis using the 2011-2012 California Health Interview Survey (CHIS) Adult data set. Second, after verifying relationship between sugar-sweetened beverage consumption and nutritional knowledge, I review available literature to develop a set of visual characteristics to enhance the effectiveness of current front-of-package label designs in their ability to convey relevant health information to low nutritional knowledge consumers. Consumers with low nutritional knowledge consume 16.9% more soda per week than those with an education beyond high school. From the literature, I derive four visual characteristics which should improve the conveyance of relevant health information to low nutritional knowledge consumers; clarity and size of text; a color such as

red which evokes an avoidance response; contextual relevance; and novelty of design. Recommendations: I recommend mandating a new FOP label for use on sugar-sweetened beverages which includes the four visual characteristics derived from my research. A label with information presented in a manner which is easy to understand and apply to the individual will be more effective than the current design at improving consumer nutritional knowledge and potentially reduce consumption of sugar-sweetened beverages.

Implementation of health education strategies, interventions and programs Planning of health education strategies, interventions, and programs Public health or related public policy

Abstract

Impact of stand your ground law on aggressive behavior in Florida

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The purpose of this study is to determine whether the Stand Your Ground Law, alone or in combination with Florida's Right to Carry Law, influences an individual's likelihood to use deadly force with the presumption of fear. This study will employ a mailed, anonymous pencil-and-paper, survey with an online option administered to 1300 English speaking Floridians age >18. The survey instrument is based on five constructs from the Social Cognitive Theory (SCT) with emphasis on the moral disengagement construct. The construct "attitude" from the Theory of Planned Behavior (TPB) will also be examined. Data will be analyzed using the statistical software SPSS®, version 22.0. Descriptive statistics will be utilized to assess distribution of responses; correlational techniques will be employed to study the zero-order relationships (their strength and direction) among variables, and multivariate techniques such as multiple regression, and factor analysis will be used to examine interactions among variables.

Administer health education strategies, interventions and programs Planning of health education strategies, interventions, and programs Program planning Public health or related education Public health or related public policy Social and behavioral sciences

Abstract

Three Rounds of Unannounced Mystery Patient Drills to Assess Emergency Preparedness for Infectious Diseases at Community Health Centers in New York City, 2015–2016

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BACKGROUND: Mystery patient drills using patient-actors are common in hospitals to assess emergency preparedness for infectious diseases, but have seldom been reported for the primary-care setting. We conducted mystery patient drills in community health centers in New York City. **METHODS:** Two drills were designed, to simulate influenza-like illness (ILI) and measles. Three rounds were completed from April 2015 through December 2016. Drill performance was evaluated using standardized guides. Screening was defined as provision of a mask or referral to the medical team given concern of infection. Isolation was defined as placement in a closed room. Non-parametric methods were used for statistical analysis. **RESULTS:** Fifty drills were conducted. Forty-nine drills screened the patient, 35 (70%) without any challenges. Forty-seven drills isolated the patient, 29 (58%) without any challenges. Patients with ILI were more likely to be masked than those with measles (93% versus 59%; $P=0.007$). Median (IQR) time to screening and isolation was 2 (1.5–7) minutes and 1 (0–2) minute, respectively. In subsequent rounds, median time to screening decreased (7 to 2

mins; $P_{trend}=0.048$) and median time to isolation increased (0 to 2 mins; $P_{trend}=0.012$). Approximately 95% of participants reported the drill was realistic and prepared them to deal with the hazards addressed. Qualitative analysis revealed recurring themes for strengths (e.g., established protocols, effective communication) and areas for improvement (e.g., hand hygiene, explaining isolation rationale). **CONCLUSIONS:** Mystery patient drills are an effective and feasible collaboration between health departments and primary care clinics to assess and inform emergency preparedness for infectious diseases.

Protection of the public in relation to communicable diseases including prevention or control Public health or related research

