



# PUBLIC HEALTH ACHIEVEMENTS IN MISSISSIPPI

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## FIRST LINE OF DEFENSE



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# WELCOME

Many outstanding activities and accomplishments in our public health and healthcare systems are taking place in Mississippi. Too often we only hear about Mississippi “being near the bottom” or “being last,” and complacency takes hold and the goal of improving the health status of Mississippians seems overwhelming. And while it’s true that we’re still tackling problems of towering proportions, it’s clear that we’re pursuing new collaborative directions to make real progress toward meaningful and lasting change to benefit the health of all citizens.

The Mississippi Public Health Association (MPHA) is a community of advocates and professionals committed to making Mississippi healthier and safer. Since 1937, we have worked to strengthen and support public health efforts in Mississippi. We strive to bring together the healthcare community and collectively serve as the much needed voice for public health in our state.

While the state’s public health system is broad and supported by a variety of organizations, the Mississippi State Department of Health serves as the backbone of the system and is too often an undervalued and under appreciated component. This part of our healthcare system is vital to the health and well -being of all of us. It is in place to protect the entire population of Mississippi against the spread of infectious diseases, to protect our environment and to promote healthier and safer communities.

Because of the collaboration among the many partner organizations that comprise the state’s public health system, the state is making improvements in areas such as school health, childhood obesity, telehealth, health policy, and workforce development among others that are directly benefiting the overall health of our citizens. ***The Mississippi Public Health Association and our contributing partners would like to use this document to highlight the many accomplishments and positive directions in Mississippi as a result of our public health efforts.***

There is still a great amount of work to do, and we should not interpret this progress to mean anything but signs of what can be done through our combined and collective efforts. We all have a role to play to improve our individual health and to make every community a healthier and safer place to live and work.

Charles “Buddy” Daughdrill  
Executive Director  
Mississippi Public Health Association





# OVERARCHING PUBLIC HEALTH ACHIEVEMENTS

In recent years, Mississippians have made great strides in improving the overall health of our state. While there is much work to be done, there are also many achievements worth celebrating. We would like to highlight a number of recent public health accomplishments that are creating a healthier Mississippi:

**1. Highest vaccination rate in the United States.**

For the 2013-14 school year, Mississippi ranked #1 in the country for the highest rate of school vaccination coverage for kindergarten students at 99.7%.

**2. Declining infant mortality rate.**

Mississippi's infant mortality rate dropped to an all-time low in 2014 of 8.2 infant deaths per 1,000 live births. Mississippi's 2014 infant mortality rate showed a 15 percent decrease from 2013 and a 28 percent decrease since 2005 when it was 11.4 per 1,000 live births. The Mississippi legislature funded an additional \$1 million to implement more scientific based strategies to further the cause.

**3. Fighting childhood obesity.**

From 2005 to 2011, the combined prevalence of overweight and obese elementary age children dropped from 43% to 37.3%. Mississippi was one of the first states to report a significant drop in obesity rates among elementary age students.

**4. More smoke-free communities.**

For the fifth straight year, Americans for Nonsmoker Rights recognized Mississippi as the state that has passed the most comprehensive smoking ordinances – totaling over 100 communities.

**5. National leader in telehealth.**

Mississippi is one of seven states to receive an “A” rating in its telehealth program from the American Telehealth Association. This initiative allows for over 100,000 doctor visits per year through 165 sites around the state.

**6. More nutritious meals for children in low-income areas.**

In 2014, Mississippi Department of Education increased summer meals for children in low-income areas by 23% – the fourth highest increase in the country.

IN RECENT YEARS,  
MISSISSIPPIANS HAVE  
MADE GREAT STRIDES  
IN IMPROVING THE  
OVERALL HEALTH  
OF OUR STATE.

**7. Leader in developing coordinated systems of care.**

Mississippi is the first state to establish three formal statewide systems of care: trauma, STEMI (heart attack) and stroke. Published research has shown the success of the trauma care system – the first of the three systems to be implemented.

**8. Healthier schools. Healthier kids.**

Research has proven the effectiveness of the Mississippi Healthy Students Act from 2007. Today, we can see significant improvements in physical activity, health education and nutrition.

**9. Fewer cases of TB.**

In 2014, Mississippi's tuberculosis case rate was lower than the national average for the first time since 2006.

**10. Building a statewide culture of health.**

As part of its accreditation process, the State Public Health System has begun a strategic health assessments review and health planning effort to build momentum for a collective public health effort.

**11. Office of Mississippi Physician Workforce (OMPW).**

Working with the Mississippi legislature, OMPW was able to help increase the number of first-year graduate medical education slots for entering family medicine interns from 18 to 30 – an increase of 67%.

**12. Health Care Industry Zone Act.**

In 2012, the Mississippi legislature passed the Health Care Industry Zone Act. This provides incentives for healthcare related businesses to locate new facilities in designated health care zones throughout the state.





## ECONOMIC BENEFITS (WHO BENEFITS AND HOW?)

The economic future of our state depends on Mississippians embracing a culture of health. When people are active and in good physical condition, the cost of health care dramatically decreases while productivity in the workplace increases. Jump-starting the state's economy begins with every citizen in every community. If we work together, these little improvements will add up to big economic benefits.

### **How employers can benefit.**

Poor health generally leads to poor work. It also means higher costs for employers, both directly and indirectly. The indirect cost of an employee's poor health – including absenteeism, higher injury rates and lower productivity – is up to three times the cost of their direct medical expenses. Additionally, the health care costs of obese employees are 21% higher. With healthy employees, you have better chance for a healthy business.

### **How taxpayers can benefit.**

When we invest in improving health, the return is significant. A proven community-based program that helps residents increase physical activity, eat healthier and avoid smoking can save our country more the \$16 billion annually within 5 years. That's a return \$5.60 for every \$1 invested. (1) Even adding just one primary care physician to a community results in a spending reduction of \$684 per Medicare beneficiary. (2) These small investments can lead to big returns throughout our state and country.

### **How the community can benefit.**

Healthy individuals lead to healthy communities. When infants receive the seven routine immunization vaccines, it saves \$9.9 million in health costs, over 33,000 lives and prevents 14 million cases of disease. (3) Furthermore, providing water fluoridation to local communities in need will cut the cost of those children's dental treatments by half. (4) And adding just one primary care physician to a given community will save 3.5 lives for every 10,000 people. (2) We all look to community for guidance and sending the right message is imperative.

(1) Levi, J. et al, Prevention for a Healthier America: Investments in Disease Prevention Yield Significant Savings, Stronger Communities, Trust for America's Health, Feb. 2009. Available online at: <http://healthyamericans.org/reports/prevention08/Prevention08.pdf> \

(2) Starfield B, Shi L, Grover A, Macinko J. "The effects of specialist supply on populations' health: assessing the evidence." Health Affairs (Millwood). 2005 Jan-Jun;Suppl Web Exclusives: W5-97-W5-107.

(3) Centers for Disease Control and Prevention, Fiscal Year 20 11 President's Budget Congressional Justification. Available online at: [http://www.317coalition.org/learnmore/FY11\\_Presidents\\_Budget\\_Congressional\\_Justification.pdf](http://www.317coalition.org/learnmore/FY11_Presidents_Budget_Congressional_Justification.pdf)

(4) Centers for Disease Control and Prevention, "Water Fluoridation and Costs of Medicaid Treatment for Dental Decay, Louisiana 1995-1996," Morbidity and Mortality Weekly Report, 48 (34); 753-757, September 3, 1999. Available online at: <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm4834a2.htm>



# STATE HEALTH ASSESSMENT OVERVIEW

## (BUILDING A HEALTHIER MISSISSIPPI)

In March 2014, the Mississippi State Department of Health led a systematic assessment of the overall public health system and the status of health in Mississippi.

As a result, the State Health Assessment (SHA) and State Health Improvement Plan (SHIP) have been developed thanks to the collaborative effort of a large group of stakeholders. To date, over 75 agencies, nonprofits, businesses and community organizations have contributed to the SHA or SHIP.

The SHA and SHIP were conducted using the Mobilizing for Action through Planning and Partnerships (MAPP) process, developed by National Association of County and City Health Officials.

The State Health Assessment has four parts that have all been completed:

### **Health Status Assessment**

A comprehensive review of state demographics related to education, poverty, access to health care, leading causes of death, chronic disease risk factors, birth outcomes and other data provided a baseline for health and sociologic issues in Mississippi.

### **Community Themes and Strengths Assessment**

Comprehensive surveys of Mississippians and Focus Group discussions were held across the state to gain community input on their perceptions of health, factors that make a healthy community, barriers to health, and community assets and challenges.

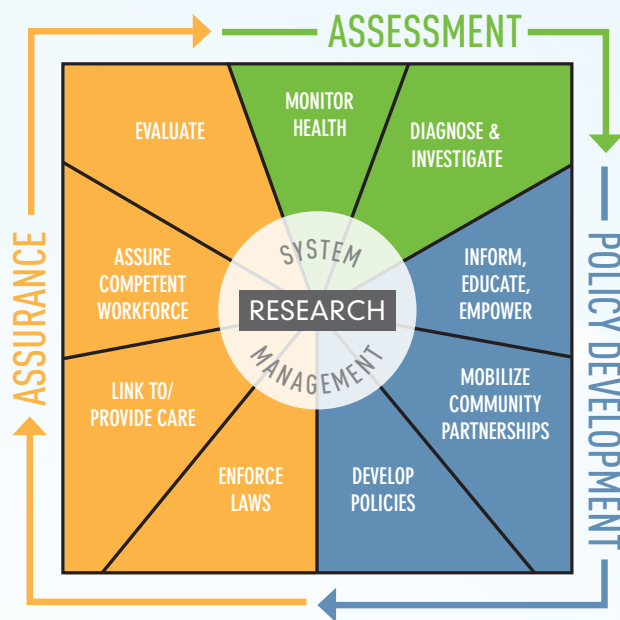
### **Forces of Change Assessment**

A diverse group of health and policy professionals came together to look at what is occurring or might occur that affects the health of our state or the state public health system. The findings included health care infrastructure and access, poverty, impact of chronic disease, lack of political and financial support, health literacy, cultural competence and urban/rural disparities among other factors impact the health of our state.

### **Public Health System Assessment**

In October 2014, over 110 stakeholders in our public health system came together to review information from the previous assessments (the whole system – not the Dept of Health). This comprehensive analysis was based on a national model of ten essential public health services and scored Performance Measures in each of the ten services. Mississippi ranked highest in diagnosing and investigating, education and empowerment, and enforcing laws.

# IMPROVING THE PUBLIC HEALTH SYSTEM (10 ESSENTIAL PUBLIC HEALTH SERVICES)



The group reached a consensus on the following areas to highlight, as they were considered crosscutting through all of the 10 Essential Services:

## System Strengths:

- Robust health hazard surveillance.
- Nationally recognized excellence in emergency preparedness.
- Robust communications in place to inform health providers and the public about disease prevention and mitigation.
- Success of tobacco prevention serves as best practice example.

## System Weaknesses:

- Prevalence and severity of chronic disease and obesity.
- System has low capacity and resources to address surveillance and response to long-term problems like chronic disease.
- Underfunding of mental health.
- Low levels of health literacy.
- Low levels of funding for public health.
- Lack of public support for public health.
- Workforce shortages limit capacity.

## Opportunities to Improve the State Public Health System:

- Strengthen funding and public support for public health.
- Advance chronic disease prevention.
- Foster a culture of health across the state.
- Address the social determinants of health.
- Increase strategic alignment and coordination of public health efforts throughout the system.
- Improve workforce development efforts to increase system capacity.



# STATE HEALTH ASSESSMENT

## (NINE PRIORITY AREAS ESTABLISHED)

Based on the collective review of the State Health Assessments, the following nine priority areas were selected to be considered as part of the State Health Improvement Plan:

### **Reducing Poverty**

Mississippi has the lowest average household income in the country and one of the highest levels of poverty. It is extremely difficult for these families to afford basic health needs, such as health care and nutritious food.

### **Increasing Education Levels**

Among Mississippians 25 or older, about 1 in 5 have not completed high school. People with higher education are more likely to eat healthy and exercise regularly, while reducing detrimental behaviors such as smoking.

### **Creating a Culture of Health**

Healthy communities are successful communities. When residents are surrounded by people and systems that promote wellness, the effect is much more prominent. Creating a culture of health makes it easier to establish good health practices on a consistent basis.

### **Improving Access to Care**

In 2013, about 1 in 5 Mississippians were unable to afford a doctor visit at some point in the past year. About 1 in 6 were without any kind of health insurance. Mississippians need access to affordable care in order to treat and prevent illnesses and injuries.

### **Sharing Public Health Agenda**

State health agencies and community health organizations do not have a common set of priorities that they follow. In order to effectively and quickly improve the overall health of Mississippi, we need a common set of goals that we can all work towards.

### **Improving Mental Health**

To improve overall health, one must have a healthy body as well as a healthy mind. Yet mental health does not receive the same level of funding as physical health. Research shows that poor mental health often leads to poor physical health.

### **Reducing Chronic Disease**

Mississippi is far above the national average in rates for diabetes, cancer and heart disease. Low level of physical activity and poor nutrition are key factors. Besides shortening lives, these chronic diseases are a financial burden to everyone in the community.

### **Improving Infant Health**

Infants are the future of the state, but nationally Mississippi has significantly higher rates of premature birth, low birthweight babies, and infants who do not survive the first year of life.

### **Improve Sexual Health**

In 2012, Mississippi had the highest rate of gonorrhea and chlamydia infections in the nation, and it ranked 10th in HIV infection. Younger Mississippians and African-Americans are disproportionately affected by sexually-transmitted diseases: 64% of all cases are among African-Americans.



# STATE HEALTH IMPROVEMENT PLAN (MOVING FORWARD!)

As a result of the work completed and findings from the State Health Assessment, stakeholders throughout the health care system began work on a State Health Improvement Plan (SHIP) to move Mississippi toward a healthier and more productive population based on the steps outlined below:

- In order to select which of the seven identified priorities would be addressed in the SHIP, a large group of stakeholders reviewed each using five criteria:
  - a. Magnitude:** How many people are affected?
  - b. Seriousness:** To what extent does this issue affect quality of life or economic burden?
  - c. Concern:** What do the community and stakeholders think about this issue?
  - d. Feasibility:** Can we do it?
  - e. Strategies:** Is the problem responsive to interventions?
- Based on the five criteria, the four priorities being addressed in this iteration of the SHIP are:
  - Increase Educational Attainment
  - Improve Infant Health
  - Create a Culture of Health
  - Reduce Rates of Chronic Disease
- Throughout 2015, four smaller groups of stakeholders worked on each priority. A root cause analysis was completed for each priority and goals, objectives and strategies were developed for the next two years.
- Implementation of the SHIP began January 1, 2016. An independent website about the SHIP will be available in the first quarter of 2016 which will allow for progress and achievement updates and future plans.
- The plan incorporates the strategies and roles of all public health partners and will be implemented through the efforts of the combined public health community.



## MISSISSIPPI STATE DEPARTMENT OF HEALTH (HERE TO SERVE YOU)

Public health is what we as a society collectively do to ensure healthy living conditions; from environmental safety and disease prevention, to basic public health care access and healthy lifestyle promotion.

The Mississippi State Department of Health serves as the backbone of our public health system in Mississippi and is an integral part of our overall healthcare system. It serves as a catalyst to prevent the spread of contagious diseases, to promote healthy and safe communities and to protect our state through ongoing emergency preparedness and environmental activities.

Who benefits from public health? Every person. Every day. Everyone who lives or travels in Mississippi – from babies who need protection through the childhood immunization program, First Steps Early Intervention, and quality childcare centers, to those who need chronic disease services and accredited nursing home and home health care. Every person who eats in a Mississippi restaurant or drinks our public water benefits from public health. County health departments directly serve more than 450,000 people each year, as well as the entire state population through various programs and initiatives.

The Department, like all healthcare entities, is undergoing transformation to adapt to the changing healthcare environment while maintaining its core functions to continue to improve the health status of all Mississippians.

## HIGHLIGHTS OF RECENT ACHIEVEMENTS

### OFFICE OF HEALTH PROTECTION

#### **Criminal History Record Check Unit**

- In 2014 the Criminal History Record Check Unit transmitted 46, 922 fingerprints for childcare and licensed healthcare facilities.

#### **MSDH Professional Licensure**

- MSDH licensed, registered, certified or renewed 6,558 individuals in 15 professions.
- MSDH certified over 2,241 Paramedics in 2014.
- 35,007 food establishment inspections were conducted in 2013.

#### **Mississippi Public Health Laboratory**

- The lab performed analyses of 9,823 boil water samples for detection of coliform and E. coli.
- In FY 2013, the lab performed 548,571 tests: 462,402 clinical tests and 86,169 environmental tests.

#### **Community Water Fluoridation**

- MSDH provided funding to public water systems for community water fluoridation programs serving over 301,000 people.
- These programs increase the total population of Mississippians receiving fluoridated public water to 1.87 million. (59.83% of state)

#### **Emergency Planning and Response**

- MSDH's office of emergency planning and response has worked to significantly improve MS's emergency response with:
  - Weapons of Mass Destruction Centers of Excellence in hospitals across the state.
  - A satellite based Health Alert Network connecting 13,000 Mississippi physicians and facilities.
  - A distribution system for emergency medication from the Strategic National Stockpile.



## OFFICE OF COMMUNICABLE DISEASE

### **Immunization**

- During the 2013-2014 school year, MS ranked #1 of all states with the highest school vaccination coverage for kindergarten students at 99.7%.

### **Tuberculosis**

- Mississippi tuberculosis cases decreased from 388 in 1989 to 65 in 2013.
- In 2014, Mississippi was lower than national average case rate per 100,000 – 2.6 (MS) vs. 5.0 (US) for the first time since 2006.

### **General Epidemiology**

- MSDH developed a comprehensive, in-depth ebola response plan that effectively monitors persons at potential risk and prevents potential transmission in MS.
- MSDH instituted a novel hospital based mortality surveillance system for the 2013-2014 flu season, with 83 percent of the targeted hospitals participating.

## OFFICE OF HEALTH PROMOTION AND HEALTH EQUITY

### **Preventive Health**

- The American Diabetes Association awarded the department with an Educational Recognition Certificate for its Diabetes Self-Management Education Program. MS is only one of four to be recognized by the ADA.

### **Tobacco Program**

- Americans for Non-Smokers Rights annually recognizes the state that passes the most comprehensive ordinances.
  - Since 2010, Mississippi has received three 1st place and one 2nd place awards
  - Approximately 30% of Mississippi's population is protected by these comprehensive ordinances
  - Mississippi's smoking population continues to decline – from 5.8% to 4.1%



## OFFICE OF HEALTH SERVICES

### **Infant Mortality**

- Mississippi's infant mortality rate dropped to an all-time low in 2014 of 8.2 infant deaths per 1,000 live births.
- Mississippi's 2014 infant mortality rate showed a 15 percent decrease from 2013 and a 28 percent decrease since 2005 when it was 11.4 per 1,000 live births.

### **39 Week Initiative**

- Thirty-seven Mississippi delivering hospitals (80%) have joined the March of Dimes Banner Program, committing to reduce unnecessary early elective deliveries (before 39 weeks) to 5% or less of all births.
- Mississippi has realized a 22% reduction in the number of early term deliveries and a 37% reduction in early non-medically indicated deliveries.

- Mississippi recently received the March of Dimes Virginia Apgar Award for successfully lowering the preterm birth rate by 11 percent since 2009. Preterm births are the leading cause of infant mortality in Mississippi.

#### **Family Planning**

- The MSDH Family planning program provided reproductive health services to 47,324 patients of which 27% were teens.

#### **Women, Infant and Children (WIC) Program**

- For Federal FY 2015, WIC had an average monthly enrollment of 102,177 Pregnant Women, Infants, and Children under 5 who met both income and nutritional standards.
- The average monthly participation rate for the same year (eligible to pick up food package) was 87%.

## **PUBLIC HEALTH PHARMACY**

#### **Pharmacy**

- Expanded delivery systems for AIDS Drug Assistance Program (ADAP) medications to include direct shipment to client's home or shipment to clinic of care.

## **MPHA ACHIEVEMENTS**

MPHA MADE  
INCREMENTAL STRIDES  
TO IMPROVE PUBLIC  
HEALTH IN MISSISSIPPI  
IN THE AREAS OF  
ADVOCACY, EDUCATION  
AND LEADERSHIP

Founded in 1937, the Mississippi Public Health Association is a 501(c)(3) non-profit organization whose mission is to promote personal and public health and to promote development of the public health workforce through advocacy and education. During the past six years, MPHA made incremental strides to improve public health in Mississippi in the areas of advocacy, education and leadership. Here is a sampling of our recent efforts and successes:

### **ADVOCACY - MAKING A DIFFERENCE!**

- Developed annual Legislative Agenda through our Policy Committee and communicated to members. Hired Policy Student Intern to monitor health legislation at Capitol and communicated through Legislative Updates and Action Alerts. Produced an Advocacy Toolkit.
- Produced letters to the editor and journal interview (MSMA) on public health funding and developed a state funding comparison document for all state legislators.
- Succeeded in deterring a \$9 million budget cut to the Mississippi State Department of Health.
- Partnered with multiple organizations to prevent passage of immunization legislation aimed at weakening Mississippi's immunization laws.

## EDUCATION - LEARNING TO GROW!

- Conducted the premier annual public health training event-MPHA Public Health Conference with over 400 attendees, over 15 concurrent workshops on current public health issues and 35 exhibitors and sponsors to promote development of the public health workforce.
- Partnered with various health organizations to host public health events during National Public Health Week. Runner up in APHA Share Your Starting Line contest for best use of media.
- Co-sponsored the Mississippi Health Summit from 2011 through 2015.
- Sponsored several Young Professional events for engagement and education and sponsored a Public Health Retiree Symposium
- Contracted with various organizations to plan and coordinate numerous training events

## LEADERSHIP - KEEPING IT GOING!

- Developed and enhanced strategic alliances with the Mississippi Department of Health, Mississippi Public Health Institute, Mississippi Rural Health Association, the Center for Mississippi Health Policy, MDE Office of Healthy Schools and other healthcare and education organizations.
- Implemented a rebranding and communications effort for member development and education. Rolled out new, robust website with additional resources, online e-commerce, new logo/ brand and a social media presence. Produced over 15 professional outstanding testimonial videos on public health.
- Integral role in the public health accreditation process including development of the State Health Improvement Plan and bringing leaders together for critical support.
- **Based on our ongoing efforts, MPHA was recognized nationally as the 2014 Outstanding Affiliate of the Year by the American Public Health Association.**





BUSINESS STREETS PARKS  
 POLICY STATE PURSUIT CITY  
 STREETS CHILDREN BUSINESS  
 PEOPLE POLICY COMMUNITY  
 TOWN HEALTHIER WORKPLACE  
 BUSINESS STREETS PARKS POLICY  
 STATE PURSUIT CHILDREN PEOPLE  
 PARKS COMMUNITY TOWN STATE  
 HEALTHIER WORKPLACE BUSINESS  
 STREETS CITY PARKS POLICY STATE  
 PEOPLE PURSUIT CHILDREN CITY  
 BUSINESS PURSUIT **MISSISSIPPI**  
 PARKS CHILDREN **PUBLIC**  
 HEALTHIER CITY **HEALTH**  
 WORKPLACE **ASSOCIATION**  
 STREETS PEOPLE  
 POLICY BUSINESS  
 WORKPLACE CHILDREN PARK STATE  
 PARKS POLICY STATE PURSUIT TOWN  
 CHILDREN TOWN PARKS BUSINESS CITY  
 PEOPLE PURSUIT  
 POLICY STREETS  
 HEALTHIER CITY  
 WORK



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Recognition for contributions to this document include:

Mississippi Public Health Association  
 Mississippi State Department of Health  
 Mississippi Department of Education - Office of Healthy Schools  
 University Medical Center - Office of Mississippi Physician Workforce  
 Mississippi Business Group on Health

Center for Mississippi Health Policy  
 The Partnership for A Healthy Mississippi  
 Mississippi Rural Health Association  
 The Bower Foundation



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