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## Center for Health Promotion and Prevention Research

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UNIVERSITY OF NORTH DAKOTA :: QUASQUICENTENNIAL :: DEPARTMENT HISTORY



UNIVERSITY OF NORTH DAKOTA  
1883-2008  
CELEBRATING 125 YEARS

CENTER FOR HEALTH PROMOTION  
AND PREVENTION RESEARCH

SCHOOL OF MEDICINE  
AND HEALTH SCIENCES

Louise E. Diers  
Nancy Vogeltanz-Holm



## Center for Health Promotion and Prevention Research

### **ESTABLISHMENT AND MISSION**

The Center for Health Promotion and Prevention Research (CHPPR) at the University of North Dakota School of Medicine and Health Sciences (SMHS) was originally established in 2001 by Vice President of Health Affairs and Dean, **H. David Wilson, M.D.**, as the **Center for Health Promotion and Translation Research (CHPTR)**. The Center was established with federal funding from the Health Resources Services Administration (HRSA) through the initial efforts of North Dakota's congressional delegation. The new clinical sciences Center would function to increase the SMHS' health promotion and prevention education, research, and service activities and was initially established as two separate units: **Primary Prevention** and **Secondary Prevention**. The Primary Prevention unit was administratively affiliated with the SMHS' Center for Rural Health and the Secondary Prevention unit with the SMHS' Department of Community Medicine.

The mission of the Primary Prevention unit was to assist public health and other community partners in reducing and preventing chronic diseases caused by unhealthy behaviors such as tobacco use, poor nutrition, and sedentary lifestyles. Two main goals were established to accomplish this mission: (1) to provide education, training, consultation, and evaluation services to students, healthcare providers, and public health organizations involved in health promotion and disease prevention; and (2) to develop, implement, and evaluate evidence-based prevention programs delivered in North Dakota schools, clinics, and worksites.

The Secondary Prevention mission was to assist health professionals in their efforts to reduce complications and improve health in patients diagnosed with diabetes. Secondary Prevention faculty and staff worked with several North Dakota physicians in implementing strategies to reduce complications through improved monitoring and service delivery in the treatment of diabetes, and then later, in the treatment of asthma.

### **CHPTR PRIMARY PREVENTION**

#### Personnel

From September 2001 to May 2002, **Nancy Vogeltanz-Holm, Ph.D.**, Associate Professor of Psychology, contributed 20% of her time to work in the CHPTR Primary Prevention unit while remaining a fulltime faculty member in the Department of Psychology. **Jeffrey Holm, Ph.D.**, Professor of Psychology, also contributed 20% time. Drs. Vogeltanz-Holm and Holm were assisted in that first year by **Jessica White Plume** and **Lori Listug-Lunde**,

both clinical psychology doctoral students. Efforts during that first year were largely developmental and included extensive research into determining which school-based programs and practices were most effective for preventing tobacco use in youth.

Beginning in June 2002, Dr. Vogeltanz-Holm moved her academic appointment from the Department of Psychology to the Department of Neuroscience at the SMHS and was appointed Director of Primary Prevention for CHPTR (60% time commitment). In June 2003, Dr. Vogeltanz-Holm moved her office from the Psychology Department to the SMHS and began contributing 100% time to the SMHS and CHPTR. Dr. Jeffrey Holm continued to work part-time with the Center and was designated Senior Scientist.

**Bonnie Thompson, B.A.**, served as the Primary Prevention Administrative Assistant from 2002-2005. In 2003, Dr. Vogeltanz-Holm recruited **Jeanne Prom, B.A.**, as a tobacco prevention specialist and Psychologist **Dmitri Poltavski, Ph.D.**, as a research analyst and webmaster. **Polly Alfonso, M.A.**, and **Louise Diers, B.S.**, joined CHPTR in 2003 as part-time project coordinators. Ms. Alfonso left her position in 2005.

In addition to the full and part-time faculty and staff working at CHPTR Primary Prevention, several faculty and staff members at the SMHS contributed 10-20% time efforts to several projects in the 2002-2005 period. **Mary Wakefield, Ph.D., Director, Center for Rural Health**, provided essential administrative and organizational contributions to CHPTR Primary Prevention. Additional important consultants and contributors were **Nora Amann, B.A., Center for Rural Health (CRH); Elizabeth Burns, M.D., Family Medicine; Charles Christianson, M.D., Family Medicine; Tanya Hauf, R.N., Center for Family Medicine (CFM)-Minot; Scott Knutson, M.D., CFM-Minot; Kim Krohn, M.D., CFM-Minot; Francine McDonald, M.A., CRH; Leander (Russ) McDonald, Ph.D., CRH; Kyle Muus, Ph.D., CRH; Julie Rickert, Psy.D., CFM-Minot; Amanda Scurry, M.S., CRH; Patty Vari, Ph.D., College of Nursing; Richard Wilsnack, Ph.D., Clinical Neuroscience; and Sharon Wilsnack, Ph.D., Clinical Neuroscience.**

### Projects and Activities

With offices located on the south wing of the 5<sup>th</sup> floor of the SMHS, CHPTR faculty and staff developed three major prevention projects during the 2002-2005 period: an anti-tobacco media campaign in central and western North Dakota called *The Plain Truth*; two school-based tobacco and alcohol prevention programs for middle- and elementary- school students (*LifeSkills* and *Towards No Tobacco*); and a cardiovascular disease risk/obesity prevention program for elementary school students called *Coordinated Approach to Child Health (CATCH)*. Participating school districts and communities in these projects included the following: **Burlington-De Lacs Elementary, Century Elementary-Grafton, Dunseith Day School, Dunseith High School, Ellendale**

**Elementary, Gackle-Streeter Elementary, Hebron Elementary, Hettinger Elementary, Kenmare Elementary, Killdeer Elementary, Lidgerwood Elementary, Lisbon Elementary, Lisbon Middle School, Minot Public Schools, Ojibwa School, Ray Elementary, Turtle Mountain Community Elementary, Turtle Mountain Community Middle School, and White Shield Public School.**

Another significant project initiated in 2003 was the *American Indian Health Project* in which interviewers completed the first face-to-face health surveys in four North Dakota American Indian reservation communities. The respondents provided representative American Indian health data that was previously unavailable and has been used for health planning by Tribal Council leaders, statewide public health officials, and other community stakeholders.

In addition to ongoing education and training of medical and graduate health sciences students, CHPTR Primary Prevention faculty also provided specialty training to North Dakota healthcare providers for treating tobacco dependent patients. Finally, several important public health partnerships were established including with the North Dakota Departments of Public Instruction and Health for addressing school-based health; and with state and local tobacco control units for monitoring tobacco prevention activities.

## **CHPTR SECONDARY PREVENTION**

### Personnel

The secondary prevention team was initially headed up by **Steven Helgerson, M.D., MPH**, and **James Brosseau, M.D., MPH**. Dr. Helgerson, formerly with the Centers for Disease Control and Prevention (CDC), provided public health consulting services for all phases of the Secondary Prevention unit's projects. Dr. Brosseau, Chair of the SMHS Department of Community Medicine and Director of the Altru Diabetes Center, provided oversight and established connections with several rural healthcare providers. Other members of the Diabetes Secondary Prevention team included **Pat Campbell, MPH, LRD, CDE**, Nutrition Field Coordinator and **Julie Moulton, B.A., CRS**, Physical Activity Field Coordinator. **Greg Holzman, M.D., MPH**, Associate Professor of Community Medicine, worked with the team in developing an Asthma Care Monitoring System. **Kyle Muus, Ph.D.**, Center for Rural Health, joined the team to manage and analyze primary and secondary health data. **George Johnson, M.D.**, Professor of Pediatrics, provided expertise in working with children and adolescents diagnosed with diabetes and asthma. **Erin O'Leary, B.A.**, and **Mary McLaughlin**, a programmer/analyst, assisted

in development of the office-based computer software systems used in the project for monitoring and managing diabetes and asthma.

### Projects and Activities

Work in CHPTR Secondary Prevention during the 2001-2006 period focused on the development and implementation of the Diabetes Care Project in participating clinic sites. Software was field tested at the sites and by the end of 2002 the software was functioning at all participating sites. In 2002-2003, the Secondary Prevention unit Asthma Team began working with a few selected rural clinics to design and implement an effective Asthma Care Monitoring System. These teams continued to provide services and work with the clinics until the end of the HRSA project funding cycle in June 2006, at which time, the Secondary Prevention unit ceased operations.

### **2005-CURRENT: CENTER FOR HEALTH PROMOTION AND PREVENTION RESEARCH**

By 2005, in addition to the HRSA grant that originally funded CHPTR, the Primary Prevention Unit had secured other funding sources and taken on additional community health projects with the goal of sustaining the mission and functions of the unit. The CDC provided funding for the Enhanced Prenatal Care (EPC) Program. This program, in collaboration with healthcare providers from the Minot Center for Family Medicine and the Minne-Tohe Health Clinic in New Town, North Dakota, provided specialty health promotion services to expectant mothers. The North Dakota Public Employees Retirement System (NDPERS) provided funding for a three-year worksite health promotion project in which varying levels of health and wellness services were provided and evaluated for effectiveness in improving employee health and in reducing healthcare costs. This project is ongoing and involves over 400 state employees in Bismarck, North Dakota.

Because of the considerable growth in the CHPTR Primary Prevention unit by 2005, it became necessary to administratively separate from the Center for Rural Health. In September 2005, CHPTR became the **Center for Health Promotion and Prevention Research (CHPPR)**, with its own departmental identity and broadened public health and prevention mission. Several graduate student research associates completed one to four year training programs at CHPPR: **Anna Evans, M.A., Sonia Marrone, M.A., Patrick Kerr, M.A., Mark Goetz, M.A., Patty Vari, Ph.D., and Margaret Cowles, M.A.** These RAs all went on to successfully complete their Ph.D. graduate training at other clinical and academic sites or are in the process of completing their training. Almost all of these students conducted original research through CHPPR, expanding the Center's portfolio of basic and clinical behavioral health research.

In 2005, **Louise Diers** moved from the part-time project coordinator position to full time administrative and grants officer. Psychologist **Tami Jollie-Trottier, Ph.D.**, completed a two-year post-doctoral fellowship from 2005-2007; **Jessica White Plume, MPH, Ph.D.**, also began a two-year postdoctoral fellowship in 2006. Both of these psychologists completed their Ph.D. training through the Department of Psychology's Indians into Psychology (INPSYDE) program and made strong contributions to CHPPR's goal of assisting community partners involved in improving American Indian health. **Bev Benda-Moe, B.A., LRD**, joined CHPPR in 2006 as a health coach and worksite coordinator. **Margo Adams Larsen, Ph.D.**, a clinical child psychologist, joined CHPPR in 2007 as a part-time staff member to further develop CHPPR's child behavioral health services and home-based health promotion services.

## **THE FUTURE**

Several of the school- and community-based prevention programs that were the initial basis for the Center for Health Promotion and Prevention Research have been successfully brought to a conclusion. Data collected during these initial three-year programs have been analyzed and disseminated, providing important results that will guide and support future work in preventing tobacco use and reducing cardiovascular disease and diabetes risk in North Dakota youth and their families. CHPPR's worksite health promotion programs and research will contribute to our state's understanding of the health benefits and cost effectiveness of these programs. CHPPR faculty began efforts during the 2007 legislative session to provide information to lawmakers on the importance of a statewide and sustainable disease prevention and wellness health plan for all North Dakotans. In 2008 and beyond, CHPPR faculty and staff will continue to provide education, research, and public health services that will contribute to healthier futures for all North Dakotans.