



**~ October 13th Issue~**

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**Official Resolution for MPHA on TABOR**

Members, the following is shared with you by the Board of Directors for the Maine Public Health Association and is the official position of MPHA.

RESOLUTION  
OPPOSITION TO THE TAXPAYERS BILL OF RIGHTS

WHEREAS, the Maine Public Health Association Board of Directors opposes the Taxpayers Bill of Rights because it is a one-size-fits all formula that limits government spending to a level of population growth plus inflation, resulting in the under-funding of public services such as secondary and higher education, health care, emergency services, and infrastructure repairs; and

WHEREAS, TABOR is likely to have a devastating impact on public health infrastructure and programming, including declines in public funding for

- State Policy and Other Public Safety
- Child Welfare and Foster Care
- Mental Health Services
- Community public health disease prevention & health promotion programs
- Environmental Protection

**MORE**

## ***TABOR Continued...***

with resulting reductions in prenatal care, vaccinations, health insurance coverage; and

WHEREAS, the Board agrees that Maine Public Health Association can be listed on all public materials, press materials and as a organization opposed to TABOR on the Citizens United to Protect Safety, Schools and Communities Political Action Committee website; and

WHEREAS, the Board agrees to educate Maine Public Health Association's constituency by sharing information on the negative impact of TABOR as well as ways to defeat TABOR through membership communications and field organizing activities; and

NOW, THEREFORE, BE IT RESOLVED that the Board of Directors of the Maine Public Health Association hereby expresses its grave concern about the Taxpayers Bill of Rights and will work to defeat it on November 7.

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## **Alliance for a Healthier Generation and industry leaders set healthy snack food standards for U.S. schools**

The Alliance for a Healthier Generation - a joint initiative of the American Heart Association and the William J. Clinton Foundation - announced a breakthrough collaboration today with five of the nation's leading food manufacturers to help combat childhood obesity in America. Campbell Soup Company, Dannon, Kraft Foods, Mars and PepsiCo have joined with the Alliance to establish first-ever voluntary guidelines for snacks and side items sold in schools that will provide healthier food choices for the nation's children.

These five industry leaders will invest in product reformulation and new product development, while encouraging broader support of the guidelines. The new guidelines, which were developed in conjunction with nutrition experts at the American Heart Association, will apply to foods offered for sale in schools outside of the National School Lunch Program to students before, during and after the school day. The guidelines cover foods and snacks, desserts, side items and treats sold throughout schools, including school vending machines, ala carte lines, school stores, snack carts and fundraisers.

"Ensuring that children have healthier food choices at school is another critical step in the fight against childhood obesity," said President Clinton. "I'm proud of these five companies for making an important statement about this health challenge and an even more important commitment to doing something about it. What we are setting in motion with these guidelines will dramatically change the kind of food that children have access to at school. It will take time, but through coalitions like this of industry and the non-profit sector, we are going to make a real difference in the lives of millions of children by helping them eat healthier and live healthier."

***MORE***

## ***Snack Foods Continued...***

The new, science-based guidelines will provide kids with food and snack products that are lower in calories, reinforcing the nutrition lessons they learn at home and in the classroom about healthy, balanced diets. Notably, the guidelines promote the consumption of fruits, vegetables, whole grains, nutrient-rich foods, fat-free and low fat dairy foods and place limits on calories, fat, saturated fat, trans fat, sugar and sodium. These foods cover a wide range of choices, including everything from chips to chocolate, crackers to cookies, candy, ice cream, granola bars, nuts, soup and yogurt.

"Kids across America will benefit from today's agreement," said Raymond Gibbons, M.D., American Heart Association president. "Our goal is to point kids to foods that are healthier and that will contribute to a healthier lifestyle overall. By working with schools and industry to implement these guidelines, we are helping to give parents peace of mind that their kids will be able to make healthier choices at school."

To learn more about the guidelines visit us online at [www.HealthierGeneration.org](http://www.HealthierGeneration.org).

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## **Bipolar Disorder Exacts Twice Depression's Toll In Workplace, Productivity Lags Even After Mood Lifts**

Bipolar disorder costs twice as much in lost productivity as major depressive disorder, an NIMH-funded study has found. Each U.S. worker with bipolar disorder averaged 65.5 lost workdays in a year, compared to 27.2 for major depression. Even though major depression is more than six times as prevalent, bipolar disorder costs the U.S. workplace nearly half as much - a disproportionately high \$14.1 billion annually. Researchers traced the higher toll mostly to bipolar disorder's more severe depressive episodes rather than to its agitated manic periods. The study is among two on mood disorders in the workplace published in the September 2006 issue of the American Journal of Psychiatry. This study is the first to distinguish the impact of depressive episodes due to bipolar disorder from those due to major depressive disorder on the workplace.

In a related NIMH-funded study in the same issue of the American Journal of Psychiatry, researchers found that many aspects of job performance are impaired by depression and that the effects linger even after symptoms have improved. The researchers tracked the job performance and productivity of 286 employed patients with depression and dysthymia, 93 with rheumatoid arthritis and 193 healthy controls recruited from primary care physician practices for 18 months. While job performance improved as depression symptoms waned, even "clinically improved" depressed patients performed worse than healthy controls on mental, interpersonal, time management, output and physical tasks. Read press release: <http://www.nimh.nih.gov/press/workplacebipolar.cfm>

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***More***

## **Nonprofit Program Manager Opportunity**

NAMI Maine is seeking a manager to oversee its award winning criminal justice projects, including its Crisis Intervention Team Program. Responsibilities include the development and delivery of training statewide, oversight of project budgets and work plans, responding to help-line callers, and supervision of project staff. The successful candidate must have a graduate degree in mental health and familiarity with the criminal justice system. Person with previous clinical and management experience preferred. NAMI Maine (The National Alliance on Mental Illness of Maine) is the nation's foremost grassroots advocacy organization protecting the right to treatment for families with members that have mental illness.

Please send a letter of interest and resume to: Carrie Horne, 1 Bangor Street, Augusta, Maine 04330 or via email to [carriehorne@gwi.net](mailto:carriehorne@gwi.net)

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## **Prevention Programs for Young Rural Teens Can Reduce Methamphetamine Abuse Years Later**

New research supported in part by the National Institute on Drug Abuse (NIDA) shows that prevention programs conducted in middle school can reduce methamphetamine abuse among rural adolescents years later. Because methamphetamine addiction leads to problems with social interactions and a wide range of medical conditions, research into early interventions such as this is critical to protecting the nation's youth. The paper is published in the September issue of Archives of Pediatrics and Adolescent Medicine.

Read press release: <http://www.nih.gov/news/pr/sep2006/nida-04.htm>

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## **Early Alcohol Dependence Linked to Reduced Treatment Seeking and Chronic Relapse**

Individuals who become alcohol dependent before age 25 are less likely to ever seek treatment than those who become alcohol dependent at age 30 or older, according to a new study supported by the National Institute on Alcohol Abuse and Alcoholism (NIAAA). They also are more likely to have multiple dependence episodes, of longer duration, and to meet more dependence diagnostic criteria than those who become alcohol dependent later in life. The study appears in the September 1, 2006 issue of Pediatrics.

Read press release: <http://www.nih.gov/news/pr/sep2006/niaaa-05.htm>

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## **SAMHSA: Depression, Particularly in Combination with Substance Abuse, Significant Risk Factor for Suicide**

Suicide is the 11th leading cause of death among adults and is already considered a major public health problem; however, those who die from suicide represent only a fraction of those who consider or attempt suicide, according to a new report from the Substance Abuse and Mental Health Services Administration (SAMHSA). Also, individuals with a major depressive episode (MDE) who also engaged in alcohol or drug abuse, had a greater likelihood of suicide attempts or suicidal thoughts. According to the new report, Suicidal Thoughts, Suicide Attempts, Major Depressive Episode, and Substance Use Among Adults, 10.4 percent of adults aged 18 or older who experienced an MDE made a suicide attempt, 14.5 percent made a suicide plan, 40.3 percent thought about committing suicide, and 56.3 percent thought that it would be better if they were dead. When alcohol abuse — particularly binge drinking or the use of illicit drugs — is added to a major depressive episode, the proportion of suicide attempts rises to nearly 14 percent for alcohol abuse and nearly 20 percent for illicit drug use.

Read press release: [http://www.samhsa.gov/news/newsreleases/060915\\_suicide.aspx](http://www.samhsa.gov/news/newsreleases/060915_suicide.aspx)

Read report: <http://www.oas.samhsa.gov/2k6/suicide/suicide.cfm>

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## **RWJ Health Policy Fellowship**

The RWJ Health Policy Fellowship, administered by the Institute of Medicine, is the nation's most prestigious learning experience at the nexus of health science, policy and politics. The call for applications for 2007-2008 is now posted at [www.healthpolicyfellows.org](http://www.healthpolicyfellows.org). Applicants with backgrounds in the behavioral and social sciences are particularly encouraged to apply.

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## **Working Women in Maine: Initial Indicators for Progress**

The Women's Employment Issues Committee of the Maine Jobs Council has just released Working Women in Maine: Initial Indicators for Progress. Lisa Pohlmann, MECEP's associate director, serves on this committee and was involved in the development of this report. Ed Cervone also helped with editing. The intention is to derive baseline information, then annually track progress in attaining economic security for women in Maine. Eight "spotlights" are highlighted including employment, wages, education, and insurance, and their related differentials between men and women. Spotlights will be updated annually to identify areas in which Maine women are not reaching the economic status of their male counterparts. This report can be found at: <http://www.maine.gov/labor/mjc/documents/2006womensreport.html>.

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## **Deadline for Next MPHA E-News**

The deadline for the MPHA E-News is **Thursday, October 19th for the Friday, October 20th**. Please keep this in mind when submitting information. If you have questions about this publication, please contact Michelle Caliandro at [mcaliandro@mainelung.org](mailto:mcaliandro@mainelung.org) or 1-800-499-5864 x 103.