

Indiana State Department of Health

# **Annual Family Impact Report**

Submitted to the Office of the Governor May 1, 2015

As Required by Executive Order 13-05

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## **INTRODUCTION**

The Pence Administration is leading the country as the first state to make the success equation the centerpiece of anti-poverty policy. Essentially, social science research indicates that if three conditions are met, children are highly unlikely to live in poverty during their lifetimes:

1. Graduate from high school,
2. Work full time or go to college, and
3. Have children after marriage.

As required by Executive Order 13-05, the Indiana State Department of Health compiled this report to demonstrate the effects of the department on the success equation.

## **SUMMARY OF PROGRAMS AND POLICIES**

Sometimes, programs are working with individuals after the success equation has broken down. A full third of the department's budget comes from the Nutrition Services and Administration federal grant, funding direct food subsidies to low-income single mothers through the Women, Infants, and Children (WIC) program.

However, there are several areas worth highlighting where ISDH programs are inclusive of the family and encourage mothers and fathers to participate in the well-being of their children.

- The Baby and Me Tobacco Free Program provides smoking cessation services not only to pregnant mothers, but also to fathers and others living in the household with the pregnant woman.
- Women participating in WIC programs learn about breastfeeding as the best start for their babies. This training also includes information on how fathers can be supportive of breastfeeding.

The state's Abstinence Education Program is run through the ISDH director of adolescent health, and the agency is currently in the second year of a possible five year grant cycle from the federal Administration for Children and Families. The \$960,000 grant is used to fund evidence-based curricula in abstinence education. In the first year, the program reached over 10,000 teenagers in 28 counties.

Currently, there are three grantees: the PEERS Project of Indiana, the Social Health Association of Indiana, and the Indiana Alliance of Boys and Girls Clubs.

There are also some areas where programs have detected statistically significant outcome differences when both parents participate.

- In the smoking cessation area, the child's odds of being a regular smoker decrease by 25% if one parent quits smoking. If both parents quit, the odds of being a regular smoker decrease by 40%.
- While this report will not claim causation or correlation, it is noted that members of married couples are less than half as likely to be smokers as members of unmarried couples.

## **FAMILY IMPACT STATEMENT LIST**

ISDH conducted Family Impact Assessments on five rules in 2014. None of the proposals were deemed to have an impact on the family, as described in Executive Order 13-05. Summaries of the rules are included below.

Residential and Commercial Onsite Sewage Systems Rule 410 IAC 6-8.3  
410 IAC 6-10.1

*410 IAC 6-8.3 (residential onsite sewage systems) and 410 IAC 6-10.1 (commercial onsite sewage systems) contain agency requirements pertaining to the design, construction, installation, maintenance, and operation of residential and commercial onsite sewage systems. Onsite sewage systems are self-contained waste disposal units that are not connected to sewer lines, and are designed to treat and dispose of effluent on the same property that produces the wastewater. You may also see onsite sewage systems referred to as “septic systems.”*

Motor Fuel Rule 410 IAC 12.1

*410 IAC 12.1 provides for the inspection, labeling, and registration of motor fuel and motor fuel outlets to protect consumers from damage to their cars’ engines and guarantees that they get what they pay for when they purchase motor fuel. The Indiana State Department of Health inspects every motor fuel outlet in the state under this rule by enforcing a national standard for octane in motor fuel. The rule amendments in LSA Document #13-483(F) brought the rule up-to-date by including the latest versions of the ASTM International (ASTM) and National Institute of Standards and Technology (NIST) standards that apply to motor fuel, octane and ethanol fuel blends and updated references to sections of the Indiana Code that were repealed.*

Weights and Measures Rule 410 IAC 12-1

*410 IAC 12-1 provides for the specifications, tolerances, and other technical requirements for weighing and measuring devices. The Indiana State Department of Health inspects weighing and measuring devices used in industry and at the consumer level to ensure accuracy based on the adopted standards to benefit the consumer and the Indiana economy. Consumers are ensured that they receive full measure when they purchase a product sold by weight, measure, or count, and that any statements on packaging which declares a weight or measure are accurate. The rule amendments in LSA Document #13-455(F) brought the rule up-to-date by including the latest versions of the National Institute of Standards and Technology (NIST) handbooks to ensure consistency within Indiana and throughout the United States.*

Communicable Disease Rule 410 IAC 1-2.3

*410 IAC 1-2.3 defines and classifies communicable diseases that must be reported and establishes the necessary surveillance systems and recommended control measures. The current rule, promulgated in 2008, is outdated regarding best practices, disease control and prevention, definition and inclusion of emerging diseases, and description of current control measures. The rulemaking will repeal 410 IAC 1-2.3 and add a new rule that will add new definitions and update existing definitions; revise the list of reportable communicable diseases; update control measures for communicable diseases; and update documents incorporated by reference. The proposed rule will also clarify language and modify reporting*

*requirements and control measures based on best practices outlined by the Centers for Disease Control and Prevention (CDC), American Public Health Association (APHA), and the American Academy of Pediatrics. These proposed changes to the rule are intended to streamline governmental reporting processes and promote public health.*

## **NEW OPPORTUNITIES**

ISDH publishes a pamphlet regarding HIV and other sexually transmitted diseases (“Before You Marry”) that is distributed to couples applying for marriage licenses throughout the state. This publication could be updated to provide other information about the benefits of marriage in relation to children and poverty.

The Office of Minority Health sponsors the INShape Indiana Black and Minority Health Fair each year, and the department sponsors part of the Indiana Latino Expo. The department will seek opportunities at these large-scale events (20,000 attendees at the health fair and 13,000 attendees at the Expo) to promote the benefits of marriage for children and its ability to lift families out of poverty. According to the Heritage Foundation, “non-married black families are six times more likely to be poor than married black families,” and “non-married Hispanic families are three times more likely to be poor than married Hispanic families.”

In relation to the Abstinence Education Program, the ISDH will work to increase the number of grant applications for the next award cycle. The federal government has a 43% match requirement from grantees, which can cause a barrier for some organizations.

While we do not propose specific plans at this point, the department sees its resources and expansive statewide network as opportunities. With 139 WIC clinics, hundreds of community partners across program spectra, lists of healthcare professionals, and more, there are networks already in place to distribute future messaging.