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Did You Wash Your Hands?

by **ROBIN STOMBLER**, for the Sun Gazette

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Public-health leaders are some of the most powerful people around. We just don't realize it. They can slyly change the behavior of a nation before the rest of us are able to organize a Tweet campaign in opposition.

Relative extinction of the three-martini lunch, smoking lounges and riding bicycles sans helmets all point to campaigns - some subtle, others not - to improve health and minimize trauma whether we like it or not.

You might ask how they do it.

Sometimes it's like having your mom nag you incessantly to put on warmer clothes, cut your hair or get some exercise.

Other times, it's much more understated - somewhat a kin to when she crushed your medicine into a teaspoon of applesauce to get you to swallow it.

Public-health leaders employ a number of methods to clean up our collective behaviors. Once epidemiological and scientific data pinpoint the cause of a problem, we begin to notice a multitude of signs that we better shape up.

Slick ad campaigns, financial incentives, compelling business case models, peer pressure, research, data and federal, state and local laws and regulations all lend themselves to a complex, multi-tiered approach to improving the public health.

Change happens, often without us realizing what a profound effect it has made in our lifestyles.

Certainly, we are aware of the deleterious impact smoking has on our health. Even if we never read the scientific literature or listened to Congressional hearings with tobacco executives, we are aware of the ubiquitous warnings on cigarette packages and attended the holiday parties once clouded with smoke.

Hollywood and the media send us messages too. Recent movies of bygone eras all have characters whom smoke cigarettes. Actors in today's generation films do less so. Today, in our magazines and on television, we are much more likely to encounter an advertisement with a man with erectile dysfunction than the Marlboro Man. Public-health professionals are at the metaphorical root of our replacing "Do you have a light?" with "Have you seen the cool cigarette lighter app on my iPhone?"

There is an arsenal of weapons that public-health leaders may use to change our health behaviors. It's not easy. We don't wake up one day noticing the extra 20 pounds on our hips and then immediately sustain a diet of nutritious food and rigorous exercise to reduce our fat deposits.

We may have the will to get in shape (at least in the short-term), but we need assistance from the public-health community to support us in our quest. When our corner grocery store sells more fresh produce than processed snack food, or when our children spend an hour playing soccer in the local park rather than sitting home in front of the television, or when our office-mates organize a brisk walk around the block during lunch breaks, then we know public health is having an impact.

Yet, for all the persuasiveness of the public-health community, the effectiveness of a hand washing campaign in this period of influenza pandemic remains challenged. It's not clear that this important message is reaching the priority population - kids.

Case in point, after a rough-and-tumble game of afternoon football with his friends and family, and a cuddle session with the scruffy dog, my 13-year-old nephew bolted inside the house looking for something to eat. He settled on a piece of finger-licking good fried chicken.

He readily admits that he is supposed to wash his hands all the time, and flu hygiene is discussed at home and at school. But, as he confesses honestly, "I'm a kid" and he doesn't feel compelled to follow through. (That's when his aunt sends him gross photos of bacteria, but I digress.)

It seems that not a day goes by without a flu message posted by the U.S. Department of Health and Human Services.

Who's listening? It took long enough for the medical profession to adopt hand-washing techniques after Dr. Ignaz Semmelweis discovered in the mid-1800s that mortality rates decreased significantly if physicians washed their hands before delivering babies.

Today, the Computational Epidemiology Group at the University of Iowa developed an iPod-friendly software application to track hand hygiene practices in health care settings. Despite the data favoring hand-washing, infectious disease shows our hands remain dirty.

Efforts have been employed to get kids to wash with soap and water for 20 seconds. There is parental pressure ranging from threats ("no dinner until you wash your hands") to the ever-present bottle of hand sanitizer at youth soccer games.

Outside promotional efforts from the Clean Hands Coalition and its partners, including the American Society for Microbiology and the International Association for Food Protection, have been organized. Web sites geared for the teen and tween crowd, such as Nemours' kidshealth.org, provide intelligent, understandable information.

Despite these public-health efforts, unless a child has snot all over his hands, is the peer pressure there to wash? It's not clear.

As adults, our own track record for hand-washing is not 100 percent. Just stand by the sink at a public restroom to count the number of people who don't lather up.

My gym, filled with seemingly knowledgeable executives, decided that, in honor of H1N1, hand sanitizers would now be offered. Problem is the gel is placed next to the soap dispensers in the restroom and not on the floor next to the exercise equipment with the sweaty palm marks.

If we don't get it, what kind of message are we passing to the children?

Once the pandemic subsides, there will be many opportunities to evaluate the effectiveness of this public health campaign to fight the flu and wash our hands.

Let's not forget to ask directly one of our highest priority constituencies - the kids - what worked and what didn't.

Stompler is president of Auburn Health Strategies LLC.