On Pace for a Record-Breaking Year

Thanks to our program Leaders, partners, and volunteers, WIHA is on track to have our best year ever for evidence-based health promotion programs in Wisconsin. Together, we’ve broken many records: the highest number of Leader trainings and new Leaders trained; the highest total number of workshops; and the most varied types of workshop sites.

We added in more Master Trainers in 2014. Three new Healthy Living with Diabetes Master Trainers were trained this year bringing the total number of Master Trainers in that program to nine. Saul Juarez Aguilar and Martha Viscuso (Pro Health, Waukesha) became Vivir Saludable con Diabetes Master Trainers. Lee Clay and Aimee Henry (Waukesha) became Powerful Tools for Caregivers Master Trainers and Clay — along with 12 others from six states — became Master Trainers for Stepping On. Tennessee and Alaska became the newest states licensed to provide Stepping On bringing our total number to 22!

We organized and held 19 Leader trainings in Wisconsin this year. In addition, we held a refresher training for Leaders in Tomando Control de su Salud (Spanish version of Living Well) so that 10 Tomando Leaders are re-energized and ready to plan and deliver the program to Spanish speakers.

There are several factors contributing to the higher numbers including: increased partnerships — especially with health care systems; the hard work of the counties involved in NIATx coaching; the growth of the Healthy Living with Diabetes program; and bringing Powerful Tools for Caregivers under WIHA’s administrative umbrella.

WIHA’s research component — the Community-Academic Aging Research Network (CAARN) — has also grown in 2014. We currently have 27 active research projects with academic partners from nine university departments including Medicine, Nursing, Orthopedics & Rehabilitation, Biostatistics, Pharmacy, Engineering, Kinesiology, Psychology, Obstetrics and Gynecology. There are 25 county and tribal partners participating in research projects. Our research areas span issues of medication management, falls prevention, physical activity, depression prevention,
The eighth annual Healthy Aging Summit was held June 24-25, 2014, at the Holiday Inn Convention Center in Stevens Point, Wisconsin. With over 230 in attendance, the event drew participants from beyond Wisconsin’s borders including North Dakota, Minnesota and Michigan.

The Summit kicked off with a keynote presentation by Kimberly Gretebeck, PhD, MSN, BN, describing her Community-Academic Aging Research Network (CAARN) project on the effects of exercise for older adults and the associated health factors. Later, the Wisconsin Alzheimer’s Institute’s Gina Green-Harris, MBA, gave an inspirational talk about developing cultural competency in health promotion programs. In addition, Art Walaczak, MD, gave an insightful presentation on depression in older adults. There were also many outstanding breakout sessions including new topics such as vision and hearing loss, developing partnerships for expanding evidence-based programs, and emerging new programs such as Tai Chi: Moving for Better Balance.

A highlight of every Summit is volunteer recognition. Because volunteers play such an important role in the ability to offer evidence-based programs, WIHA is honored to be able to recognize them for their selfless dedication to the programs and participants they serve. Jerry McCloskey, a Summit participant and volunteer workshop leader, stated: “Living with a physical disability my whole life, I have been helped along by many people. Now it is pay-back time for me to hopefully help others.” To read more volunteer testimonials, visit the WIHA website.

WIHA’s Healthy Aging Summit is an annual event that brings academic researchers, program leaders and volunteers, community partners from aging and health care systems, and others together to learn, network, and collaborate to spread evidence-based health promotion programs.

WIHA is so thankful for all of our wonderful volunteers many of whom (pictured above) were on hand at the 2014 Healthy Aging Summit.
Developing relationships is the key to creating collaborations that sustain evidence-based healthy aging programs says Barb Michaels. And she should know. Michaels has been the prevention coordinator at the Aging & Disability Resource Center of Brown County (ADRC) since 2005 and has been instrumental in forming partnerships to expand programs locally. She has a background in business and became a licensed registered nurse in 2009. She has always been interested in prevention personally and believes it is a life-long practice at any age. Michaels not only talks the talk, she walks the walk. Well, more accurately, she runs it. Michaels has completed 14 full marathons, several half marathons, and many 10k’s. She is committed to being a healthy eater and enjoys outdoor activities — especially when in the office all day. In addition to running, she’s an avid bicyclist and cross-country skier.

Michaels began her health promotion work in Brown County with the Stepping On program and later added Living Well, Arthritis Exercise, and other evidence-based programs. In 2013, Brown became a pilot county for Healthy Living with Diabetes and has also offered Powerful Tools for Caregivers for many years.

Beyond disseminating healthy aging programs, the ADRC is also an active partner in researching new ones. Working with WIHA’s research unit (a.k.a., CAARN) and the UW-Madison School of Pharmacy, the ADRC has partnered on falls prevention and medication management research projects and just recently became part of the research for the Lighten Up! project started in Kenosha County to support adults with depression and improve well-being. Michaels reports that the ADRC has also added one-hour classes on some of the same subject matters and topics — falls prevention, diabetes, hypertension, healthy eating, menu planning, massage therapy, stroke prevention, in-home fall risk screenings, and topics that are complementary alternatives to medicine such as Reiki, Reflexology, Gin shin Jutsu, and more. Generally, local medical experts provide a lecture followed by a Q&A session. Though these one-hour programs are not evidence-based, Michaels believes they provide valuable health information to older adults in their community and often lead them to evidence-based workshops or other ADRC programs and services.

Several years ago, Michaels initiated a collaboration with Northeast Wisconsin Technical College (NWTC) to develop Keep Stepping, an 8-week class run by NWTC physical therapy assistant students emphasizing strength, balance, mobility, and gait-focused exercises offered to completers of the ADRC’s evidence-based classes. A one-on-one program, each older adult is paired with one student. A grant helped provide the funding to cover the start-up cost and the program is sustained through NWTC.

The ADRC of Brown County has 40 (that’s not a typo!) volunteers who support all of the prevention programs. They assist as facilitators, schedulers, marketing promotion, and planning the programs.

Beginning Partnerships

After reaching 13 Stepping On workshops in one year, Michaels realized they had gone beyond their capacity to sustain them — and still had great interest in the program amongst older adults in the community. Looking for ideas on how to sustain Stepping On, she sent out an invitation to the four local hospitals: Bellin, Aurora, St. Vincent’s, and St. Mary’s. Based on her past work, she hand-picked the area of the health system or the individual and selected someone who had an interest in falls prevention; she looked to the areas of rehab, orthopedics and trauma, and experience with people who had falls, but it wasn’t necessarily the same within each health system.

Representatives from the four hospitals attended four planning meetings. The first gathering provided background on the issue of falls in the community, Stepping On, the work to date, and the interest and demand from the consumers for the program.

The meeting included presentations on the statewide and national perspective on falls presented by guests from DHS, WIHA, and the Brown County Health Department. The group explored ways to align goals to expand and sustain the program together. After hospital representatives discussed the issues and interest internally, the group recon-
**WIHA Website: Easier Access & Success Stories**

You spoke — we listened. We found that requiring the username and password on the Leader section of the WIHA website was a big barrier for many of our Leaders and partners, so...they’re gone. To access all of the information you need to plan, promote, and deliver your workshop, go to [www.wihealthyaging.org](http://www.wihealthyaging.org). Click on the FOR LEADERS ONLY tab on the purple bar at the top of the home page, and pick your program from the dropdown menu. And voilà! You’re in!

In the next year, you’ll also see some changes to freshen up our website. We are in the process of making changes to the look and design of our home page enabling us to tell our stories — stories about inspirational participants, unique partnerships, motivational leaders, successful research project development, and more. We hope you will be able to use these articles and other testimonials to help promote your workshops. If you have ideas for compelling stories that we could highlight on the website, please contact Kris Krasnowski at kris.krasnowski@gwaar.org.

**Help Us Keep our Data and You Up-to-Date**

We want to make sure we have the contact information for all of our fabulous Leaders and Coordinators current. If you aren’t getting this newsletter directly by e-mail, we may not have your current information. Similarly, without your current e-mail, you aren’t on our listservs for distributing updates. If anything has changed (name change, address, employer, phone, e-mail, etc.), please contact our Data Entry Assistant Keith Steffen to make sure we have your most current contact information. Reach Keith at keith.steffen@wihealthyaging.org or call (608) 243-5689.

**Reminders . . .**

Please remember to always [download your materials from the WIHA website](http://www.wihealthyaging.org) instead of copying the materials in your hard copy toolkits. The most up-to-date version of any document is always the one on our website — [wihealthyaging.org](http://wihealthyaging.org).

Please also remember to [submit your workshop notifications](http://www.wihealthyaging.org) to use as soon as you schedule your workshop. Once we receive your notification, we can add it to our workshop database and potential participants can find it on the WIHA website.

All newly-trained Leaders are assigned a Leader coach to assist and give advice as they prepare for their first workshop. Coaches can be a tremendous source of information and motivation, so we encourage you to reach out to get support if you have questions or need some support. If you are not sure who your Leader coach is, please contact us — [info@wihealthyaging.org](mailto:info@wihealthyaging.org) — and we’ll connect you.

"We are so grateful to the sponsors, exhibitors, and speakers who made this event so valuable for those who attended — and to the leaders, coordinators, and program partners who make these programs available and successful," says Anne Hvizdal, statewide coordinator of health promotion programs at the Wisconsin Department of Health Services Office on Aging.

"Planning is already underway for the 2015 Healthy Aging Summit and we expect it to be bigger and better than ever."

Please share ideas for topics or speakers by contacting us at [info@wihealthyaging.org](mailto:info@wihealthyaging.org).

**Let’s Get Social!**

Stay connected with WIHA and help introduce your friends, colleagues, and program participants to healthy aging by sharing WIHA with your social media contacts.

If you like us, please [LIKE US](https://www.facebook.com/WIHA3) on Facebook!

Find the WIHA Facebook page by browsing for the Wisconsin Institute for Healthy Aging in the Facebook search feature.

[WIHA is also on Twitter.](https://twitter.com/WIHA3) To find us, search for @WIHA3 and follow us.
New Leaders Ready to Deliver Programs

In Southeastern Wisconsin
We are so pleased to welcome a new class of Healthy Living with Diabetes (HLWD) Leaders to the WIHA family. Thirteen new Leaders (pictured above) were trained on four Saturdays in September and will be holding workshops in the southeastern Wisconsin area. According to Master Trainer Sherri Ohy, the enthusiasm and commitment demonstrated by the group is sure to result in tremendous outcomes for participants.

In Alaska
Stepping On Master Trainers Janell Keeter (above, left) and Mary Ferrell (above, right) congratulate Dora Diaz (above, middle) from North Slope Borough, Alaska at the Stepping On Leader training in Stevens Point in mid-October.

Dora and Margie Fischer made the long, long trek to Wisconsin for the Stepping On training joining 19 others who took the training and plan to implement the program in Alaska. This brings the number of states WIHA has trained in Stepping On to 22. Not only is Alaska the latest state to offer Stepping On, they are certainly the furthest from Wisconsin!

WIHA by the Numbers
Program Trainings and Leaders in 2014

<table>
<thead>
<tr>
<th>Program</th>
<th>Trainings</th>
<th>New Leaders</th>
</tr>
</thead>
<tbody>
<tr>
<td>Living Well</td>
<td>4</td>
<td>52</td>
</tr>
<tr>
<td>Tomando Control de su Salud</td>
<td>1 (refresher training)</td>
<td></td>
</tr>
<tr>
<td>Healthy Living with Diabetes</td>
<td>6*</td>
<td>72</td>
</tr>
<tr>
<td>Vivir Saludable con Diabetes</td>
<td>1</td>
<td>11</td>
</tr>
<tr>
<td>Stepping On</td>
<td>5</td>
<td>77**</td>
</tr>
<tr>
<td>Powerful Tools for Caregivers</td>
<td>3</td>
<td>34</td>
</tr>
<tr>
<td><strong>Totals</strong></td>
<td><strong>20</strong></td>
<td><strong>246</strong></td>
</tr>
</tbody>
</table>

* 4 initial trainings and 2 cross-over trainings for experienced Living Well leaders
**some from other states.

patient-provider communication, patient-pharmacist communication, bone health, reducing sedentary behavior, yoga, screening for mild cognitive impairment and exercise.

In fact, our research activities are growing so rapidly that we added another 50% time staff to the CAARN team. (See related article on page 6).

With such long and impressive lists, it’s easy to understand why Wisconsin is recognized as a national leader in the development and implementation of evidence-based health promotion programs.
**WIHA’s New Executive Assistant: Karen Denu**

Early in October, WIHA welcomed Karen Denu as our new executive assistant. Karen has a long history in providing office management and executive support in numerous settings. Karen is excited to be part of a team that gives back to the community. Being a native Madisonian with parents on the east side, Karen was drawn to WIHA and its programs: “I am very excited about WIHA’s mission and goals. Being part of a movement to share scientifically-developed programs with proven results with the greater Wisconsin community is incredibly appealing.” With significant experience in planning training events and meetings, database management, and customer service, Karen was a natural choice for WIHA and she is very busy helping us update our lists, protocols, and systems.

While not at work, Karen enjoys spending time with her (soon-to-be) husband Gary, and their combined 4 children. Currently residing outside of Wyocena, she and Gary have land just outside of Cottage Grove where they will be building a home — that Karen designed — in the spring. In addition to designing homes and interior design, Karen loves to cook and entertain, and play volleyball and trivia.

Next time you’re on the far east side of Madison, come visit us at WIHA and introduce yourself to Karen. In the meantime, you can reach her at (608) 243-5690 or Karen.denu@wihealthyaging.org.

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**New Role for Shannon Myers**

We are pleased to welcome Shannon Myers to the Community-Academic Aging Research Network family! Shannon will be working part-time (50%) as the Community Research Specialist for WIHA’s research component CAARN.

Shannon has been the Health Promotion Program coordinator for the ADRC of Adams, Green Lake, Marquette and Waushara Counties and will continue that role part-time (50%). She has a bachelor’s degree in Health Promotion and Wellness and really knows the ropes with evidence-based healthy aging programs having already worked on CAARN projects from the community partner side.

Shannon served on the Planning Committee for the 2014 Healthy Aging Summit and is also working with WIHA’s Legislative Strategy Committee. She was a major force in developing the One Million Hearts video about Living Well which showcased a workshop in Waushara County.

When not working, Shannon enjoys fitness activities and is especially crazy about soccer. She also enjoys photography and spending time with her dog and her husband, Tim.

Shannon will be assisting Jill Renken in community-academic liaison work as well as program development. Jill continues to be the main CAARN contact, but consider Shannon a resource as well. Contact Shannon at Shannon.myers@wihealthyaging.org.

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69% of family caregivers surveyed said caregiving is their number one source of stress.

*Source: Caregiving.com Caregiver Survey, Nov. 2010*

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We can do something about that!

November is National Family Caregiver month.

Find a Powerful Tools for Caregivers workshop for you or someone you love. Visit [wihealthyaging.org](http://wihealthyaging.org).
“Taking care of an older family member can be really hard and often presents caregivers with unexpected challenges,” says Stephanie Hafez, Wellness & Prevention Specialist at the Aging & Disability Resource Center (ADRC) in Green County. “We thought: what can we do to make this better?”

ADRC staff made it their mission to find out. In 2011 with a grant from the Greater Wisconsin Agency on Aging Resources (GWAAR), the Aging & Disability Resource Center (ADRC) in Green County formed a caregiver coalition to better meet the needs of caregivers in the community. Part of that process involved surveying caregivers to better understand their needs. A key finding was that many caregivers believed that communication with health care professionals was challenging — and often ineffective.

To combat the problem, WIHA’s Community-Academic Aging Research Network (CAARN) paired the ADRC and health care professionals at the local Monroe Clinic with UW-Madison researchers Paul Smith, MD; Betty Chewning, PhD; and Beth Martin, PhD, to design and pilot an intervention aimed at improving communication between doctors and the caregivers of older people. The result was BeST Communication — a project that promotes health communication skills in caregivers of older adults. It involves a program called CareTalks — an intervention to improve patient-initiated, patient-provider communication.

CareTalks workshops consists of three weekly sessions of 120 minutes each, a “booster” fourth session about one

continued on page 8

CareTalks for Caregivers

Lynnette Miles starts her day at 5:30 a.m. “The first thing I do is pray,” she says. “I ask God for the strength to do everything I need for my husband that day.”

A resident of Monroe, Lynnette’s role as a caregiver began in 2013 when her husband Bud suffered two strokes during a vacation. She was told that Bud would not be able to walk, use his right hand, or speak ever again. The couple has been married for 57 years — for Lynnette, this is just a change in the way they do things together. She works with her husband daily on speech therapy, reflexology, and massage to help regain his abilities. She also attends and advocates for him at doctor appointments.

When she received a letter inviting her to participate in CareTalks as part of a research study, she knew it was something she should do. “I knew I had to get better at communication,” says Lynnette, “and the class has done wonders for me!”

The sessions that focus on making the most of interactions with health care professionals by explaining what a caregiver should do before, during and after an appointment were especially helpful for Lynnette. “I like to be prepared,” she says, “this class showed me how.”

Lynnette has changed the way she communicates with her husband’s doctors since the workshop. She now uses online systems (MyChart) to ask questions, makes sure to use “I” statements when bringing up concerns, and brings two copies of her list when they have an appointment — one for her and one for the doctor.

“This class was so informative,” says Lynnette. “It taught me what I need to know to take good care of Bud.”

continued on page 8
Congratulations to the Chippewa Sokaogon community on their recently-awarded grant to develop a Stepping On program at the Mole Lake Tribe. The tribe received one of just five tribal awards funded through the U.S. Public Health Prevention Fund and will use the new resources to train leaders, hire an evidence-based health promotion coordinator, and work with the Tribal Health Care center that will serve as a direct referral source for tribal members into Stepping On falls prevention workshops.

Donna Vandiver will serve as the group’s Program Coordinator and several tribal members are preparing to become Stepping On leaders. The group has been meeting and planning over the summer and a community meeting was held on October 9 to introduce the grant project to community members launch grant activities.

Stay tuned for more news about this exciting new project!
vened for a second meeting and discussed what each of the four health care systems and the ADRC could bring to the program. This was then the basis for a high-level process document that outlined the responsibilities and roles within the new collaboration. The health care systems designated a coordinator for the program at the hospital who would set workshop dates and select leaders and peer leaders. The coordinator then notifies the ADRC of their schedule and the ADRC puts the workshop information into one combined annual schedule. Michaels and the ADRC made a complete “starter kit” for each site stocked with all necessary handouts, weights, and display “gadgets and gizmos” to get them started. The ADRC is the central source for registration, handles confirmations, maintains the Leader lists, and handles all data collection. The health care systems schedule the workshops securing class facilitators and all four guest experts. They also purchase snacks, make copies, rebuild displays, and promote the program within their system.

“We are so very appreciative of the health care systems here in Brown County and their support of the ADRC, says Michaels. “A big thanks to Aurora, Bellin, St. Mary’s, and St. Vincent’s for their commitment to the health of our community.”

Between the health care systems and the ADRC, Brown County now has a pool of 25 Leaders and Peer Leaders — about half from their health care partners. The ADRC keeps the list updated (e.g., contact information and what sites the Leaders prefer). Each partner’s goal is to offer two or three workshops per year resulting in at least eight workshops every year in Brown County.

The health systems have also combined forces with the ADRC on Stepping On reunion classes, which are held quarterly — one by each hospital and one by the ADRC. Anyone from any of the classes can go to any (and all) of the reunions, which Michaels calls “wildly successful” with each reunion filled to capacity.

What’s the secret of Brown County’s success in developing this partnership?

Michaels’s advice: “We were very methodical in going through the process. We let everyone share their personal interests, goals, and concerns and built a collaborative model with everyone’s strengths in mind. We were very open-minded to how the collaboration would take shape.” She said it also helped that the planning process commitment was time-limited to four meetings. “People appreciated knowing that there’s an end in sight, goals, and anticipated closure,” she said. “We let people know that we’re in this together, and invited them to let us know if they have a problem. For example, if they are struggling with finding a leader, or an expert, the ADRC is always available for backup. The main message is that we didn’t just hand it off. We continue to collaborate on all of them in our shared process. We now meet twice each year to discuss what is working well and what could be improved and plan for the next six months.” People are really pleased with the collaboration, she says, and the results are clear — all workshops were full and this fall had 41 people on waiting lists!

Michaels has created several modifiable documents as part of the Stepping On collaboration process and is happy to share them (posted on WIHA’s website).

Next Steps

And the collaboration doesn’t stop with Stepping On. The four health systems and the ADRC have now moved into a continuing collaboration in prevention. They have identified their top goals: falls prevention, diabetes care, and care transitions — with the latter being the most critical. By the end of 2014, they hope to agree on a community intervention to support patients transitioning from hospital to home. Currently, they are gathering and reviewing data, finalizing data sharing agreements, and revising their key objective. They are informing their work by looking at data from the hospitals as well as countywide through MetaStar — Wisconsin’s quality improvement organization. They will let the data help define the intervention they might pursue.

For additional information, contact Barb at (920) 448-4300 or michaels_ba@co.brown.wi.us.
Healthy Living with Diabetes Program
18-Month Status Update

Healthy Living with Diabetes (HLWD) is one of two programs WIHA brought in-house last year. WIHA’s Board and partners adopted the Stanford Diabetes Self-Management Program for several reasons. First and foremost, we knew the issue of diabetes was a growing problem in Wisconsin and was especially important in communities of color where there is an even higher incidence of diabetes. Second, we already had the license included with our CDSMP license. Third, compared to other programs, we could more easily get Master Trainers certified and Leaders trained. Fourth, we were confident that the program could lead to expanded partnerships with health care providers and might even lead to reimbursement under Medicare, Medicaid, and private insurers.

The workshop topics for the six-week, 2½ hours-per-session workshop include healthy eating, exercise for strength and endurance, preventing hypoglycemia, monitoring glucose, stress/depression, appropriate use of medications, preventing complications, and working more effectively with health care providers. The process includes weekly action plans, brainstorming, sharing experiences and problem-solving in creating or carrying out self-management plans.

WIHA’s Sherri Ohly is leading dissemination of HLWD and her work is really taking off! Her goal is 100 workshops per year by the year 2017. In 2013, we held our first three Leader Trainings and trained 66 Leaders and six Master Trainers in 10 counties. Together, these Leaders led 25 workshops.

Participants in the program in 2013 indicated that they signed up for the workshop to gather information and knowledge. Many were newly diagnosed and needed more information, were frustrated by unclear directions from their health care providers, and/or wanted support from others. Their experiences in HLWD were very positive. Some indicated that they had never learned some of the critical diabetes self-management information when they were first diagnosed. Others said they may have learned it, but had forgotten or never implemented it. All indicated that the support of and accountability to the group was very positive and that they benefited from learning about the self-management techniques of problem-solving, brainstorming, and creating action plans.

In 2014, we’ve ramped up fast! We held 7 Leader Trainings: 4 initial Leader Trainings in English and one in the Spanish version — Vivir Saludable con Diabetes (all four-day trainings); and 2 two-day cross-over Leader Trainings for experienced Living Well Leaders. That made for a total of 83 new Leaders (72 in English and 11 in Spanish) in 2014.

Workshops have taken place in 25 counties — over one-third of all Wisconsin counties. Together with the 2013-trained Leaders, we are on track to conduct 62 workshops in 2014 — that’s a 250% increase! With an average of 12 participants per workshop, the program will reach nearly 750 individuals this year.

Facts About Diabetes in Wisconsin

• 1 in 12 Americans is affected by diabetes.
• By 2050, there will be 40 million Americans with type 2 diabetes.
• In Wisconsin, there are 475,000 adults with diabetes and 1.45 million adults with pre-diabetes.
• There is an even higher incidence in communities of color, especially African Americans, Latinos and Native Americans.
• In Wisconsin, 25% of Wisconsin Medicare beneficiaries have type 2 diabetes.
• Mortality for people with diabetes is twice that of people without diabetes of similar age.
• Diabetes is the leading cause of blindness, heart disease, stroke – and lower extremity amputations.
• Diabetes is very expensive to treat:
  - $4.07 billion in direct health costs
  - $2.7 billion in indirect costs

continued on page 11
Workshops are held mornings, afternoons, and evenings (the latter especially for younger working adults) and at a wide range of sites: workplaces, health care clinics, Aging and Disability Resource Centers or county aging units, residential facilities, educational settings, libraries, senior centers, community/multi-purpose centers, faith-based organizations, food pantries, and village halls. Fees for workshops ranged from $0 (some with requests for donations) to $25, although some with a fee refund it when the workshop is completed.

We are also working with many health care systems to offer the program including their Certified Diabetes Educators who recognize that the program is an excellent complement to their work in diabetes self-management education and that the program is increasing referrals for their services as well. Examples of the health care systems and insurers that are progressing rapidly (e.g., hosting the workshops, designating staff to become trained as workshop Leaders, and/or developing a direct patient referral system into the program) are Aurora (in Milwaukee, Kenosha, Brown and Manitowoc counties), Holy Family (Manitowoc County), Molina (Milwaukee County), Dean and Unity (Dane County), Marshfield (Barron County). Network Health, our first health care system partner in HLWD, continues to be a strong referral source for many of the HLWD counties in the east-central Wisconsin. Special kudos to Aurora St Luke's in Milwaukee for implementing a direct referral system where Aurora referral specialists in the endocrinology clinic provide one-on-one workshop registration assistance to patients and hold workshops right in their clinic. Thanks also to Network Health for sending targeted mailings to their members with type 2 diabetes in the geographic areas where workshops are held.

Thanks to all for your enthusiasm, commitment, and hard work. Together, we will exceed Sherri’s goal of 100 workshops in five years. If your county or health care system is interested in determining your readiness to offer Healthy Living with Diabetes, please contact Sherri Ohly at (414) 687-1223 or sherri.ohly@wihealthyaging.org.

Has this happened to you? You’re at a gathering and someone asks you what you do. You break through a description of the kind of workshop you lead, but stop short when trying to describe WIHA.

If you’ve found yourself struggling to tell others what WIHA is and does, we have a handy new tool for you.

"From research, to practice, to people" is a new document that describes WIHA from the perspective of what we as an organization do – namely, we develop and research interventions that help people live healthier lives as they age; then we put those interventions into practice around the state so they can make a difference in the lives of real people.

The document identifies the most current research focus areas for our research component — the Community-Academic Aging Research Network — and highlights community and academic partners and current funding levels. It outlines the types of program support we provide such as data collection, leader training, and program promotion. The document also gives an overview of the current programs we offer along with testimonials from some former participants.

We hope this document will clarify for you and others what WIHA is and does. To access and download a copy of "From research, to practice, to people", visit our website — wihealthyaging.org — and find it in the News & Events section.