Welcome from APHA
Tennessee Public Health Association
Annual Educational Conference
September 2, 2009

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Dean, UAA College of Health & Social Welfare
President
American Public Health Association
WWW.APHA.ORG
The APHA is the oldest, largest and most diverse organization of public health professionals in the world

- 501C(3); predates tax code
- Nonpartisan

Stephen Smith at age 98
APHA’s 50th Anniversary 1921
Our Fundamental Values

Vision
A Healthy Global Society

Mission
Improve the health of the public and achieve equity in health status
APHA’s Work Is Strategic

Strengthen the Effectiveness of APHA’s Voice for Public Health

- Improve Effectiveness of Policy and Advocacy
- Improve Public Health Science and Practice
- Increase Member Engagement and Expand Membership
- Strengthen Organization Capacity

Policy Priorities
- Access
- Disparities
- Infrastructure

Updated January 2007
**APHA’s Overarching Policy Priorities**

- Access to health care for all
- Eliminating health disparities
- Building public health infrastructure
Health Access Issues

- Expanding coverage
- Medicare Part D repair
- Safety net providers
- Vulnerable populations
- Health workforce
Eliminating Racial & Ethnic Disparities In Health

The NATION’S HEALTH
The Official Newspaper of the American Public Health Association

The goal of eliminating disparities between now and the year 2010.
The report examined data on whites, Hispanics, blacks, American Indians and Alaska Natives, and Asian and Pacific Islanders. Finding that all of the groups experienced improvements in preventable chronic illness mortality, infant mortality, teen births, behavioral health, obesity, injury, and death rates for heart disease, strokes, motor vehicle crashes, and work-related fatalities.

Ameliorative efforts for American Indians and Alaska Natives, improvements were also observed in death rates for stroke, lung cancer, breast cancer and suicide. The percentage of children who lived in poverty improved for all groups except Asians and Pacific Islanders, and the prevalence of obesity declined.

2.5 million in U.S. lost insurance in 2001
New partnership campaigns for ‘covering the uninsured’

The organizations formed the Covering the Uninsured Coalition, which includes the Robert Wood Johnson Foundation, AMF, U.S. Chamber of Commerce, AFSCME, and American Medical Association. The organizations targeted uninsured adults and American Indians.

“None too many families who suffer because our nation has ignored the mission of the uninsured, leaving them to fend for themselves,” said Howard Brown, executive director of the Robert Wood Johnson Foundation.

In 2001, 150 million Americans were uninsured, and that number appeared to increase in 2004, as economic troubles led to increased job losses.

Almost 2.5 million Americans lost their health insurance in 2001, the largest one-year increase in almost

Crosscutting effort

- AMA/NMA Disparities Commission
- Disparities legislation
- Health literacy
- Congressional Tricaucus
- Focus many efforts on vulnerable populations
## Building Infrastructure

### Education & training
- Annual meeting
- Learning Institutes
- AJPH
- CEPH*
- Books & publications

### Resources advocacy
- Campaign for Public Health
- CDC Coalition
- Friends of HRSA
- Research!America
- Federal budget advocacy

### Workforce & systems
- Workforce legislation
- Public Health Accreditation Board*
- Certification of public health workers (NBPHE)*
- NCEH workforce project
- NHTSA traffic safety institute
- MCH Institute
- Career Mart
- QA/QI & performance standards

### Nongovernmental Associations
- Affiliate infrastructure project
- APHA infrastructure improvements

*Separate organizations
Publications

- Cyclic funding stream
- Two major books
- AJPH
- Nation’s Health Newspaper
Annual Meeting

- Association & profession mainstay
- Averages over 13,000 attendees/year
- Drives over \( \frac{1}{2} \) of revenues of association
- Few cities can host
- Nonsmoking requirement after 2011
- Complex meeting with numerous concurrent sessions
- Several affiliated & concurrent meetings
National Public Health Week

- We serve as national coordinator
- Second largest activity we do
- Historically stayed away from health reform during NPHW since Covering the Uninsured Week is always within 1-2 weeks of NPHW
- This year is different because we can leverage
  - National efforts at health reform
  - Members intense interest in topic
  - State level efforts
  - Need to define public health role in reform
APHA Effort To Strengthen Nongovernmental Public Health – W. K. Kellogg Supported

- National program office at APHA
- Capacity building for:
  - Business functions
  - Policy development
  - Local & national advocacy
  - Community engagement
  - Affiliate fiscal stability
  - Leadership development
  - Improve partnerships

- Improve policy development impact through the public
- Improve the public’s awareness of public health measures
APHA Policy Center

- Issue briefs, educational materials
- Based on APHA policy, known facts
- Inform policy makers, public, members
- Engage members
Public Health Preparedness

The Get Ready campaign, sponsored by the American Public Health Association (APHA), provides information, resources and tools so that all individuals, families and communities in the United States are more prepared for a potential influenza pandemic, outbreak of an emerging infectious disease or other hazard or disaster.
Welcome to APHA.org

Our New Front Door

- Cleaner
- Better function
- Easier to navigate
- Engaging
- More helpful
Making APHA the Voice of Public Health

NPHW

Policymaker
Education

Get Ready

Strategic Partnerships

Media
Advocacy
Why Join a Professional Organization?

- Professional obligation
- Professional socialization
- Networking opportunities
- Advocacy opportunities
- Presentations and publications
- Leadership training and experience
- Professional visibility
Quyana
Cheryl E. Easley, Ph.D., R.N.
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President
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“Protect, Prevent, Live Well”
Questions???
There are 25 primary Sections that represent major public health disciplines or public health programs. These sections are designed to allow members with shared interests to come together to develop scientific program content, policy papers in their areas of interest or fields of practice, provide for professional and social networking, career development and mentoring. Sections serve as the primary professional units of the Association and conduct activities that promote the mission and fulfill the goals of APHA. Sections create a variety of opportunities for member involvement, thus making the APHA experience richer for individuals who have the opportunity to attend and choose to interact with their primary Sections.
APHA Sections

- Alcohol, Tobacco & Other Drugs
- Chiropractic Health Care
- Community Health Planning & Policy
- Development Disability
- Environment
- Epidemiology
- Food & Nutrition
- Gerontological Health
- Health Administration
- HIV/AIDS
- Injury Control and Emergency Health Services
- International Health
- Maternal & Child

- Health Medical Care
- Mental Health
- Occupational Health
- & Safety
- Oral Health
- Podiatric Health
- Population, Reproductive and Sexual Health
- Public Health
- Education & Health
- Promotion
- Public Health Nursing
- School Health
- Education & Services
- Social Work
- Statistics
- Vision Care
APHA defines a Special Primary Interest Group (SPIG) as an open group of self-selected APHA members sharing a common occupational discipline or program area interest and electing no primary Section affiliation. SPIGs were established as a member option in 1978.

The current APHA SPIGs are
• Alternative & Complementary Health Practices
• Community Health Workers
• Ethics
• Health Informatics Information Technology
• Health Law
• Laboratory
• Veterinary Public Health
APHA Caucuses

The Association defines a Caucus as a group of at least 15 APHA members or partisans of a particular position on an issue important to APHA, who pursue a desired result within the Association. A Caucus is considered to be “in official relations” with APHA, rather than a regular component of the Association. The Association has two types of Caucuses that allow members to coalesce around (1) shared characteristics that cannot be changed (i.e., ethnicity/race, gender, sexual orientation) and (2) special interests, worksite issues, and social justice issues.
APHA Caucuses

- Academic Public Health
- American Indian, Alaska Native & Native Hawaiian
- Asian Pacific Islander
- Black Caucus of Health Workers
- Caucus on Homelessness
- Caucus on Public Health & the Faith Community
- Caucus on Refugee & Immigrant Health
- Community-Based Public Health Caucus
- Health Equity & Public Health Hospital Caucus
- Labor Caucus
- Latino Caucus
- Lesbian, Gay, Bisexual & Transgender Caucus of Health Workers
- Peace Caucus
- Socialist Caucus
APHA Advocacy Players and Process: What a Member can do to Advocate for the Public’s Health

- APHA member
- Read The Nation’s Health
- Check APHA website
- Respond to Action Alerts from APHA
- Join Affiliate and respond to requests for action
- Work with/ respond to requests by Action Board representative
- Send letter to legislators
- Call legislators
- Visit legislators
- Engage the press using interviews, press releases or letters to the editor
- Meet with agency leaders
- Offer testimony on issues of importance
- Offer comments on regulations of importance
APHA Caucuses, continued

- Spirit of 1848 Caucus
- Vietnam Caucus
- Women’s Caucus
Strong Partnerships Yield Expanded Influence

- Research!America
- Partnership for Prevention
- CDC, HRSA, NHTSA, NIEHS
- Advocates for Highway Safety
- AAAS
- WebMD
- WFPHA, WHO, PAHO, Global Health Council
- Council of State Governments (CSG), NGA, NCSL, women legislators
- AMA, NMA, ACEP, APA, AAP, AAFP
- CSIS
- YMCA
- Trust for America’s Health
- ASTHO, NACCHO, NALBO, ASPH, Others
- MADD
- Consumer’s Union
- Health reform dialog
- Clinton foundation
- American Hospital Association, Families USA, others
A Forum is a membership unit composed of APHA members who are working together on a specific issue that is important to public health, crosses disciplinary and section or SPIG boundaries, requires expertise that may reside in more than one section or SPIG, and supports APHA's mission. Forums are free to APHA members and may be joined at any time. Current Forums are

- Cancer Health Communities for Health Aging
- Genomics Family Violence Prevention
- Trade and Health
The APHA Student Assembly (APHA-SA) is the nation's largest student-led organization dedicated to furthering the development of students, the next generation of professionals in public health and health-related disciplines. APHA-SA represents and serves students of public health and other health-related disciplines by connecting individuals who are interested in working together on public health and student-related issues.
APHA Student Assembly
Mission

APHA-SA is a student-led international organization within the American Public Health Association (APHA) representing students of public health and other related disciplines. We are dedicated to enhancing students' professional development by providing resources, fostering diversity and promoting opportunities.
According to APHA-SA’s Strategic Plan, APHA-SA supports the development of the next generation of public health professionals by:

• Increasing student representation in APHA
• Developing and disseminating educational and professional development resources
• Creating and promoting opportunities for student involvement within APHA-SA, APHA, and other health-related organizations
• Providing and sustaining vehicles for communication
• Advocating for student issues and public and health-related policy
• Facilitating networking among students and professionals
APHA Events, continued

- 1911 *Journal of the American Public Health Association* established
- 1916 APHA publishes first issue of *Control of Communicable Diseases in Man*
- APHA postpones its Annual Meeting in reaction to a global influenza pandemic. The Association conducts scheduled discussions regarding the pandemic in December 1918
1906 First Federal Food and drug Act passed; APHA publishes the American Journal of Public Hygiene

1908 APHA’ standardized death certificate adopted by the US Census

1909 APHA publishes the standard methods for the examination of air
Funding: Where It Comes From
FY 2008-9 Budget Revenues: $16.1 million

- Conventions: 36%
- Membership Dues: 25%
- Learning, Global & Public Health: 3%
- Kellogg - Affiliates: 9%
- Periodicals: 13%
- Books: 8%
- Other: 4%
- Resource Development: 0%
- Professional Development: 2%

Must Raise **ALL** Annually
Funding: Where It Goes

FY 2008-9 Budget Expenses: $16.1 million

- Conventions: 26%
- Periodicals: 24%
- Government Relations & Affiliate Affairs: 8%
- Learning, Global & Pub Hlt: 14%
- Kellogg - Affiliates: 9%
- Membership Dept. Services: 8%
- Books: 10%
- Resource Dev: 1%
Taking Our Seat At The Table

- Numerous stakeholders in this debate
- APHA has defined a unique role & is a “player”
- Population health is uniquely ours BUT others working to “crowd” into this space
- Population & prevention focus does not prohibit engagement in other issues
Annual Meeting

- Association & profession mainstay
- Averages around 13,000 attendees/year
- Only about 10 cities can host
- Nonsmoking requirement after 2011
- Quality & number of presentations an issue for some
- Learning institutes – Under evaluation
- Drives over ½ of association revenues
Association Resources In Context

- American Cancer Society ~ $1,000,000,000
- American Heart Association ~ $799,000,000
- American Medical Association ~ 289,000,000
- American Public Health Association ~ $15,000,000
- Trust for America’s Health ~ $4,000,000

(2006)
Strengthen the Effectiveness of APHA’s Voice for Public Health

**Improve Effectiveness of Policy and Advocacy**
- Focus on Three Policy Priority Areas and Proactive Advocacy Agenda
- Enhance APHA Investment in Policy Initiatives
- Improve APHA Policy Process
- Promote and Strengthen the APHA Policy Center
- Strengthen Advocacy of APHA Components and Affiliates
- Strengthen Links with WFPHA and Other Global Policy Groups
- Collaborate with Traditional and Non-Traditional Partners on Advocacy

**Improve Public Health Science and Practice**
- Advance the Public Health Research Agenda to Improve Practice
- Promote Competency of Public Health Workforce
- Advance a Curriculum that Emphasized Policy and Advocacy
- Communicate Public Health Issues and Science to Key Audiences
- Strengthen Public Health Infrastructure

**Increase Member Engagement and Expand Membership**
- Increase Perceived Value to Members and Potential Members
- Create Mechanisms For Joint Affiliate/APHA Membership and Activities
- Create Mechanisms for Increasing and Transitioning Student Memberships
- Implement Strategies to Grow Membership
- Increase Engagement of New and “Low Involved” Members
- Increase Interaction Among Members and Between Members and Affiliate Members
- Implement Innovative Strategies to Re-engage Lapsed Members

**Strengthen Organization Capacity**
- Expand APHA Resource Base
- Provide Information Technology Required to Support Key Initiatives
- Continue to Strengthen External and Internal Communication
- Implement the TFAIR Recommendations
- Maximize Partnership Opportunities
- Improve Effectiveness and Efficiency of APHA Governance

APHA Membership

- Represents broadest public interests
  - 27 – 30,000 individuals; 50,000 with affiliates
  - 53 Affiliates – Every state represented & D.C.
  - 15% crossover between affiliates and national
- 80% of members renew each year: But: We need 6,000 new members each year to remain even
- Membership expense of $335 is greater than cost of $122 average payment / member (2007)
  - Growth is in discounted memberships

New joint membership pilot

Where are the other 450,000 public health workers? The public?
APHA Advocacy Players and Process: Making APHA Policy

APHA members in Sections, SPIGS, Caucuses and Affiliates, and staff identify need for policy

Review of existing policies for gaps/timelines by Sections, members and staff

Action board/staff create list of policy gaps and send out to all components for action

All components can develop draft policy statements and share with APHA units for support

Policy submitted to JPC

Policy passed by JPC and forwarded to Governing Council with changes incorporated

Public hearings at annual meeting to receive additional input on proposed policy

Policy considered by the Governing Council

Policy approved by Executive Board after appeal and sent to Governing Council

Policy sent to Science Board to review draft and ensure evidence-based

Policy denied by Executive Board

Policy denied by JPC

Policy passed by JPC

Policy rejected by Governing Council

Policy ready for advocacy activities by members, Affiliates and staff

Policy available to public on line and enters APHA repository
Alignment of resources with priorities
Board Communication Issues

- Read monthly
  - Inside public health
  - The Nation’s health
  - Scan AJPH
- Perform liaison role
- Identify and refer potential funders to Dr. B
- Best way to handle member or nonmember questions is to acknowledge questioner, get informed & refer to Dr. B or appropriate staff to handle
APHA Advocacy Players and Process: What a Section, SPIG or Caucus can do to Advocate for the Public’s Health

- Develop roster of issue experts
- Identify and Develop new policy and usher through process of Governing Council approval
- Assign members to review new policy and archive old APHA policy
- Send “active” Responsible Representatives To Action Board
- Encourage members to join state Affiliate
- Send alerts to section members
- Send letters to state legislature on state issues of importance
- Actively educate state policymakers on public health
- Work with other Affiliates to share best practices
- Work in coalition to support state PHA priorities
- Send letters to editor and press releases in support of priorities
- Participate in public events and rallies

- Send letter to federal legislators
- Call federal legislators
- Visit federal legislators
- Engage the media using interviews, press releases or letters to the editors
- Meet with agency leaders
- Offer testimony on issues of importance
- Offer comments on regulations of importance
- Respond to APHA requests for federal level advocacy by calling, visiting sending letters to Congressional representatives
- Participate in public events and rallies
Association Finances

- Fiscal year July – June
- Budget ~$16 million
- Three major funding sources
  - Annual meeting
  - Publications
  - Dues
- Grant funding growing
- Resource development growing
- Recession now a problem

Must raise annually!
APHA Events during the Progressive Era

- 1893 APHA and US focus on control of TB
- 1895 APHA publishes the standard methods for the examination of water and sewage
- 1900 Walter Reed reports at the APHA annual meeting that mosquitoes carry yellow fever
- 1905 APHA publishes the standard methods for the examination of milk
"Get Ready" Campaign’s Strategic Alignment

Strengthen the Effectiveness of APHA’s Voice for Public Health

- Improve Effectiveness of Policy and Advocacy
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Protect, Prevent Live Well Movement
- Get Ready Campaign
  - Consumer centered
  - Science based
  - Members engaged
  - Prevention focused

Web site: http://www.getreadyforflu.org
Flu blog: http://www.getreadyforflu.blogspot.com/
APHA is creating a national movement for all Americans to be able to protect themselves, their families, and their communities from preventable, serious health threats.
**APHA Advocacy Players and Process:**

**What an Affiliate can do to Advocate for the Public’s Health**

- **Respond to requests From COA Regional Representatives**
- **Assign members to review policy**
- **Send APHA Advocacy Alerts and legislative information to members**
- **Encourage members to join APHA**
- **Identify and develop new policy with APHA members and usher through process to Governing Council**
- **Engage APHA members in your state with issue expertise**
- **Send state Affiliate alert to members**

**Supporting Activities:**

- Send letters to state delegation on issues of importance
- Work with APHA staff to find areas of common interest
- Plan visits with congressional delegation during recesses
- Work in coalition to support federal priorities
- Help APHA understand impact of federal changes on state public health initiatives
- Letters to the editor on important federal public health initiatives
- Participate in public events and rallies

- Send letters to state legislature on state issues of importance
- Actively educate state policymakers on public health
- Work with other Affiliates to share best practices
- Work in coalition to support State PHA priorities
- Send letters to editor and press
- Releases in support of priorities
- Participate in public events and rallies
Member Communication

- Nation’s Health Newspaper
- Media advocacy
- Inside Public Health
- Legislative updates
- APHA Web Site
- Member newsletters
- E - Communities

Communication still is a real challenge