



Public Health Student Caucus News & Views

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ACHIEVING HEALTH FOR ALL IN 2010: YOUR LEADERSHIP AND ACTIVISM ARE NEEDED!

*Sarena D. Seifer, Executive Director, and Kara Connors, Senior Consultant,
Community-Campus Partnerships for Health*

"Health professionals must share responsibility with the public for promoting healthy lifestyles by serving as role models and resources for health information and education, and by applying knowledge of how changes in personal behavior can improve health. Health professional programs should teach principles of prevention, health promotion, risk reduction and behavior change."

~ Pew Health Professions Commission, 1998

"Our greatest opportunities for reducing health disparities are in empowering individuals to make informed health care decisions and in providing the skills, education, and care necessary to improve health. The underlying premise of the Healthy People 2010 objectives for the nation is that the health of the individual is inseparable from the health of the larger community."

~ David Satcher, U.S. Surgeon General, January 2000

January 2000 marked the launch of the Healthy People 2010 Objectives for the Nation which set the nation's public health goals for the next decade: to increase quality and years of healthy life; and to eliminate health disparities that are associated with race, ethnicity and socioeconomic status. Achieving these goals will require community partnerships that involve ordinary citizens, grass roots organizations, community agencies, hospitals and health systems, business government, philanthropy and other partners. U.S. Surgeon General David Satcher has specifically called upon health professional schools, including schools of public health and MPH programs, to be key partners in achieving the Healthy People 2010 goals and objectives. How can public health students be partners in this effort? What does it mean for public health students to commit to achieving the Healthy People 2010 objectives?

Students who commit to learning about and achieving the Healthy People 2010 objectives – through their course work, community service, and lifelong learning as professionals – develop

the knowledge, skills and attitudes they will need to promote health and prevent disease at the individual and community level. Students engaged in health promotion and disease prevention activities have enormous opportunities to develop leadership skills, adopt an ethic of service and learn effective strategies for building community partnerships. They gain an understanding of community resources and assets, the social determinants of health, and strategies for eliminating racial and ethnic health disparities. Through their leadership and activism, students can contribute to an institutional culture that is responsive and dedicated to community health issues and concerns. For many students, making a difference in communities is the driving force behind the decision to become a health professional. For these students, the opportunity to promote health through service-learning and community service can maintain their drive to make a difference throughout their lives.

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President's Corner

PHSC Leadership Develops 2002-2005 PHSC Strategic Plan

Resa M. Jones, MPH



As we reach the end of our sixth year, I am pleased to announce that our PHSC leadership has completed the all important task of developing our first-ever PHSC Strategic Plan! Over the last five years PHSC has grown and developed its programs and initiatives to better serve you. However, in order to be a more successful organization, our leadership recognized that we needed to ask ourselves imperative questions about the organization (e.g. where do we want to go and how do we plan on getting there?).

Our strategic planning was an iterative process in which we envisioned the future of PHSC and developed the necessary goals and objectives to achieve our desired future. Your peers, the PHSC Board leadership, attended our Strategic Planning Retreat in Chicago, which was very productive. Since that time, the leadership has worked collectively and spent a great deal of time and energy critically assessing and further developing the plan.

This is an exciting time for PHSC; we are poised and prepared to continue serving students of public health and health-related disciplines. Our vision looks ahead to the future; the mission assesses who we are, whom we serve, and what we are in the business of doing; the goals are what we want to accomplish; and the objectives are how in general we will accomplish our goals.

Form follows functions! The strategies are how we will meet our objectives so we can accomplish our goals and thus further the mission of PHSC.

PHSC Strategic Plan 2002-2005

Vision:

PHSC will further the development of students, the next generation of professionals in public health and health-related disciplines.

Mission:

PHSC is a student-led international organization within APHA representing students of public health and other health-related disciplines. We are dedicated to enhancing students' educational experiences and professional development by providing information, resources, and opportunities through communication, advocacy, and networking.

Goals:

Goal 1. Increase student representation in APHA

Goal 2. Develop and disseminate educational and professional development resources

Goal 3. Create and promote opportunities for student involvement within PHSC, APHA, and other health-related organizations

Goal 4. Provide and sustain vehicles for communication

Goal 5. Advocate for student issues and public and health-related policy

Goal 6. Facilitate networking among students and professionals

To see more of the PHSC 2002-2005 Strategic Plan including objectives, visit our website at www.phsc.org.

Students Now Have Option of Receiving Print Copy of *American Journal of Public Health*



One of the major action items PHSC worked on last year addressed the *American Journal of Public Health* subscription for students. As many of you may recall, APHA decided to discontinue sending print copies of the *Journal* to students in lieu of electronic access.

Based upon a motion from our PHSC President; Resa M. Jones, MPH; the APHA Executive Board has approved a "print journal rate" of \$30 for one year's subscription to the paper version of the *Journal*. Our student membership dues (\$50) provide full access to the online version, but now you have the option of paying an extra \$30 to receive the printed version each month. The actual cost of printing and mailing the *Journal* is \$27 per year, so we are getting a fair deal with the APHA rate.

For more information on the decision, check out the September edition of *The Nation's Health*, the official newspaper of APHA that members receive monthly. The article in *The Nation's Health* can be accessed online at: www.apha.org/private/tnhsept02stories/studentAJPH902.htm.



PHSC Hosting First National Leadership Conference for Students in Healthcare

The PHSC has initiated a collaborative project with leaders of thirteen National organizations representing students in healthcare and related disciplines. The intent of this collaborative effort is to work with our natural partners in order to think strategically and be better prepared to act effectively to eliminate health disparities and improve the public's health through prevention, research, and service.

"In the past, initiatives have attempted to bring the Medicine and Public Health communities together such as the Medicine and Public Health Initiative (MPHI), however we firmly believe that many of our natural partners in the management and delivery of effective and efficient healthcare were not included in these initiatives, specifically nurses, healthcare managers, sociologists etc. Clearly, many of those involved had diverse backgrounds, but each discipline was not fully represented," according to the PHSC President-Elect, Chris L. Day, MPH, who initiated the project.

As students we are aware that we will be shaping the future of healthcare. Thus, we believe that establishing an ongoing national meeting to share ideas and information and work collaboratively to develop and sustain an alliance among and between students is a logical and critical next step. The Nation's Health Objectives – Healthy People 2010 is providing the framework for our planned activities. We believe that these objectives cut across disciplines and provide clear, established guidelines that will assist us in focusing on prevention in our discussions and collaborative work.

We are holding the First Annual National Leadership Conference for Students in Healthcare on November 9, 2002 in Philadelphia. The former U.S. Surgeon General, David Satcher, MD, PhD, is the keynote speaker for the inaugural one-day conference entitled, Improving Health Through Collaboration. The conference will end with all participating student-organization Presidents signing a memorandum of understanding to formalize the alliance.

Membership to Vote on PHSC Bylaws Change

To work toward attaining our PHSC vision, we are on the brink of broadly expanding our products and services to many more students within public health and health-related disciplines. At the PHSC Business Meeting I on Sunday, November 10, 2002, PHSC members will have the opportunity to decide whether PHSC should automatically serve all APHA student members.

Currently, APHA student members are not automatically PHSC members. Rather, they must complete a separate PHSC membership application and pay annual PHSC dues. If passed, the proposed amendment to PHSC's bylaws would stipulate that all APHA student members automatically become PHSC members. Students who do not want to take advantage of PHSC will be able to opt out of their membership. A request for a \$10 donation to PHSC would be made to all APHA student members. Further, any other member of the APHA who is not a student member could become a PHSC member by paying annual dues of \$10. Any person who is not an APHA member could become a PHSC member by paying annual dues of \$20.

If passed, changes to the PHSC Bylaws will be effective November 10, 2002.

Proposed amendments affecting APHA student members:

- All APHA student members will automatically be PHSC members
- A request for a \$10 donation will be made to each APHA student member
- Individuals who are APHA student members but do not wish to be PHSC members can opt out of PHSC membership

Proposed amendments affecting APHA members who are not student members:

- Individual membership is granted to APHA members who are not student members, when they pay annual dues of \$10.

Proposed amendments affecting anyone who is not an APHA member but wants to join PHSC:

- Individual membership is granted to non-APHA members who pay annual dues of \$20.

National Mentoring Program in Public Health



Registration available year-round!

Register at www.apha.org/ppp/mentoring/
or contact the NMP Co-Chairs,
Cindy Summers, at mentoring1@phsc.org or
Mary Elizabeth O'Neil, at mentoring2@phsc.org.

NMP aims to:

- ✓ Improve the relevance of the academic training that Public Health students receive;
- ✓ Increase the professional success and productivity of Public Health students and professionals;
- ✓ Help to strengthen the field of Public Health through the retention and growth of strong committed leaders.

BE A PART OF THIS VISION!

Give back to your field as a professional by being a mentor, or learn from and gain valuable experience as a novice/student by being a mentee.

All matches will be made within 6 weeks of registration, and a one-year commitment is requested. All participants will be invited to a social and question/answer event at the 2002 APHA Annual Meeting in Philadelphia.

NATIONAL MENTORING PROGRAM IN PUBLIC HEALTH

Cynthia Summers, MPH, and Mary Elizabeth O'Neil, Co-Chairs

The National Mentoring Program in Public Health (NMP) is a project of the Public Health Student Caucus (PHSC), which is in official relations with the American Public Health Association (APHA). The Project links public health students with public health professionals across the nation and across many disciplines, and then helps facilitate the development of effective and beneficial mentoring relationships between these novices and masters. The PHSC believes that, in order to attract and retain qualified and diverse students in public health, as well as improve the relevancy and quality of their training, it is essential to connect students with field professionals early in their studies and careers. The resulting national network continuum will strengthen the field of public health by fostering multidisciplinary relationships among and across fields, and by promoting the growth and development of strong and committed leaders. Furthermore, it facilitates the unification of public health professionals with a wide array of skills and talents, and encourages public support and understanding of public health issues, initiatives, and visions.

The Program is currently starting its fourth year of operation. Mentees are

matched with mentors based on the following criteria: (1) general area of interest, (2) specific sub-area of interest, (3) three rank-ordered mentoring objectives, and (4) vision of an ideal match. Participants have represented 35 U.S. states and territories, two countries outside of the United States, six races/ethnicities, and seven general areas of interest within public health. There were kick-off events at the APHA annual meetings in Chicago (1999), Boston (2000), and Atlanta (2001) to welcome and orient matched participants. There will be a similar event at the 2002 meeting in Philadelphia this November. All participants receive materials to guide them in the building of their effective mentoring relationships and to remind them to stay in touch with their mentoring counterparts. Furthermore, registration has recently been converted to a year-round process to make it more convenient for interested individuals and to increase the numbers of participants.

The Public Health Student Caucus aims to improve the relevancy of academic training that public health students receive, and increase the professional success and productivity of public health students and professionals.

The current objectives for NMP are: to expand the program by matching at least 100 public health students (mentees) with 100 public health professionals (mentors) within the next 12 months; to promote both professional and personal growth among all participants; to facilitate the development of effective mentoring relationships between these students and professionals and; to continue to adapt and improve this mentoring program through ongoing evaluation and feedback from participating students, professionals, and institutions.

If you are interested in being either a mentee or a mentor in the National Mentoring Program in Public Health, please register online at: www.apha.org/ppp/mentoring/. For additional information, please contact the Co-Chairs, Cindy Summers, at: mentoring1@phsc.org, or Mary Elizabeth O'Neil, at: mentoring2@phsc.org, or visit the Caucus website at: www.phsc.org/mentoring.html.



Public Health Student Caucus 2002 APHA Annual Meeting Schedule

<u>Date</u>	<u>Time</u>	<u>Session Number</u>	<u>Meeting/Session</u>
Saturday, November 9	8:30am-5:15 pm	NA	National Leadership Conference for Students in Healthcare
Sunday, November 10	4:00-6:00 pm	278	PHSC Business Meeting I
Monday, November 11	8:30-10:00 am	3068	PHSC Poster Session I
	8:30-10:00 am	3069	PHSC Poster Session II
	12:30-2:00 pm	3208.1	PHSC: Welcome and Orientation
Tuesday, November 12	8:30-10:00 am	4076	Climbing the International Health Career Ladder
	12:30-2:00 pm	4162	Developing Your Career in Public Health
	2:30-4:00 pm	4229	National Mentoring Program in Public Health: Successes and Challenges
Wednesday, November 13	8:30-10:00 am	5069.1	Take Action Now! Public Health Advocacy Strategies
	6:30-8:00 pm	533	PHSC Business Meeting II

The PHSC is co-sponsoring many other sessions.

Please check the final APHA program for session details and location.

PHSC President Serves on APHA Executive Board

For the first time in the history of APHA, students have direct representation on one of the APHA's highest governing bodies. Over the past year our President; Resa M. Jones, MPH; has officially served as an ex-officio member of the APHA Executive Board. This significant appointment came into effect after the proposed amendments to the APHA constitution were approved by a majority vote of APHA's general membership.

During the past year various issues relevant to students have come before the APHA Executive Board. Some of the most noteworthy decisions affecting students are:

- APHA Executive Board authorized a survey of student members to learn more about student issues
- APHA Executive Board approved a motion that allows students to receive the American Journal of Public Health monthly via mail for additional \$30 per year
- APHA Executive Board established an Ad Hoc Committee on Student Issues

Visit the PHSC Booth at APHA Annual Meeting

Come check out the PHSC Booth at the Expo Hall at the APHA Annual Meeting in Philadelphia; booth #1607. Grab a "Public Health Student Caucus" sticker and wear it on your name badge. Proudly promote your PHSC membership and affiliation with APHA's fastest growing Caucus!



Action Angle

Heather R. Britt, MPH, Action Chair

Spotlight on Advocacy Training Letters to the Editor

So you recently read something in your local paper that piqued your interest, made you madder than a hornet, or was just downright off base. Or you have been participating in a debate with fellow students or public health professionals about a hot issue at the state legislature. Or maybe you watched something on the local news channel or listened to the local radio station and just *need* to make a comment.



Ever found yourself in one of the above scenarios? Well, the next time you do, take a little time and consider writing a **letter to the editor**. A letter to the editor is a great way to let the general public know more about an issue, express a strong public health opinion, and let policymakers and community leaders know their constituents' concerns. Particularly when you write in to your local paper, you have a fairly good chance at having the letter published.

You have decided that you would like to write something and submit it, but what are the steps you should follow? Consider these...

First, do your research! If you are writing about an issue that has recently been hot in the local media, do a quick review of the coverage. You can usually do this by checking media outlet websites for their story information. Review the information and, if necessary, do some follow-up research. Make sure that what you write can be supported with some literature. You might want to do a quick Medline search just to be sure you have your facts straight. Or visit the website of a respected authority on the issue and examine the data.

Once you have the information gathered that you want to share, get started on the writing. There are 3 cardinal rules to writing a letter to the editor.

- Get to the point! Make sure you are brief, concise and very clear. Narrow your message down to one or two ideas. Limit your word count (around 300 words or less). Check out the regular letters-to-the-editor in the paper you will be submitting to and try to keep within their length range.
- Point out the obvious! You have done the research and examined the data, so be sure to use it. Reference the original story, editorial, letter or other media coverage, but also include the facts you've found that are relevant. The sooner you write the letter after the original coverage, the better!
- Do not forget to let everyone know who you are! Be sure to include your name, address and phone number so you can be contacted if necessary. And, if you think your degrees or job title will be useful (especially to demonstrate expertise), then be sure to include them. You should also consider including the organization with which you are affiliated.

That is it! You're done. Send your letter to the appropriate mail or electronic address and keep an eye on the local paper! And if you need some help or another pair of eyes to review what you have written, call on the Action Committee!

Resource: Kaiser Family Foundation

Looking for quick and easy access to health policy news and information?

Kaisernetwork.org, the premier online resource for non-partisan, timely, and in-depth coverage of health policy news, debates, and discussions, provides students with the tools they need to stay current on contemporary health policy issues. This free and comprehensive multimedia service connects users to the information, research, events, and people that shape health policy, in the U.S. and abroad. To learn more, stop by the kaisernetwork.org booth (#1540) at the APHA Conference in Philadelphia or visit www.kaisernetwork.org/about/phschools.

Kaisernetwork.org features include:

- **NEWS SUMMARIES** -The Kaiser Daily Reports provide summaries of health-related news stories with links to the full text of the original articles and related resources, and a fully searchable archive.
- **WEBCASTS & TRANSCRIPTS** - Students and faculty anywhere in the world can access HealthCast for video/audio coverage, transcripts, and related materials of congressional hearings, national policy conferences, and press briefings.
- **PUBLIC OPINION SURVEYS** - Researchers can use Health Poll Search, a searchable archive of public opinion on health issues, to find out the public's view on more than 300 topics dating back to 1935.
- **CONGRESSIONAL AUDIO REPORTS** - In partnership with Congressional Quarterly, this weekly audio report highlights the latest health policy developments in Congress.
- **ISSUES IN-DEPTH PAGES** - Coming soon to kaisernetwork, this new feature will take an in-depth look at important issues such as global HIV/AIDS and prescription drug coverage, and will include webcasts of important conferences and hearings, access to new studies and developments, key facts about issue, and links to resources and organizations.
- **EMAIL ALERTS** - Sign up to receive the news summaries, webcast alerts, and special announcements via email at www.kaisernetwork.org/email.

For more information, contact Mary O'Neill at (202) 347-5270, ext. 209, or via email at moneill@kaisernetwork.org.

Opportunity at Annual Meeting

The Health Communication Working Group (HCWG) would like to invite students interested in health communication to several events during the annual meeting in Philadelphia. HCWG offers many leadership and networking opportunities for those interested—and that includes students!

Their social event will be held on Sunday, November 10 from 7-9 pm at the Marriott in Salon G Grand Ballroom. Their business meeting will be held Monday, November 11, bright and early from 7-8 am at the Marriott in Room 413. The Healthy People 2010 meeting will be Tuesday, November 12 from 6:30-8 pm, at the Marriott in Room 501. Also, review the final APHA program for a list of sessions sponsored by HCWG.

New PHSC T-shirts on Sale

Newly designed PHSC T-shirts are available NOW!

Short-sleeved navy blue t-shirts are available in small, medium, large, XL, XXL, and XXXL. T-shirts cost \$12 (XXL and XXXL are \$14). We also have PHSC hats available, which cost \$5. To buy a t-shirt at the APHA annual meeting, please visit the PHSC booth (#1607). If you are not attending the APHA annual meeting in Philadelphia, please order your t-shirt by accessing the order form on our website: www.phsc.org. Or, contact our Development Chair at development1@phsc.org.

T-SHIRT
FRONT



T-SHIRT
BACK

West Nile Virus, Bioterrorism Require Developing a Radically New Approach to Public Health

APHA- Washington, DC, October 3, 2002-The emergence of West Nile Virus in the United States and bioterrorist threats require a new strategic approach to public health, the American Public Health Association said today in testimony before the U.S. House of Representatives.

"The globalization of disease has changed the world. And with it, public health must change," said Mohammad N. Akhter, MD, MPH, executive director of the American Public Health Association. "Last century's model of protecting ourselves from disease is no longer sufficient. We need to look at new, more strategic models of doing business."

Akhter testified before the House Government Reform Committee, Subcommittee on Criminal Justice, Drug Policy and Human Resources, on the emergence of West Nile Virus in the United States. He said while federal and state health agencies are expertly handling the outbreak, most of the activity has occurred after the disease reached our shores.

"We work on vaccines and cures for diseases that currently exist and after they arrive in our country," said Akhter. "But we are not aggressively addressing key questions to get ahead of the curve: What is next? Where will our next outbreak be located? What can

we do to prevent it?" According to Akhter, public health needs to develop a proactive, global approach. He cited four key components to this strategy:

- **Our public health system needs an increased presence outside of the United States.** Infectious diseases do not adhere to political boundaries. We need to gather information from around the globe, track these old and emerging infections, and assess their risk of coming to this country.
- **We need to do a better job of studying these emerging diseases and new versions of old diseases.** Disease is unpredictable. We need to employ new science to track these diseases as they change when they hit a new environment. Our federal agencies - particularly the Centers for Disease Control and Prevention and the National Institutes of Health - need to integrate their work.
- **We need a war college for public health.** We need an institution where long-term, futuristic battle plans can be mapped. Where the best minds in public health science collaborate in a coordinated effort to attack difficult disease scenarios and advise the Congress and administration on appropriate action.
- **We need to ensure that our nation's public health system and the public health systems of other nations are prepared.** The public health system in the United States has been neglected for far too long. We have begun to rebuild, but the job is far from complete. The infrastructure of public health in other parts of the world is very weak. We need to provide technical assistance and support to promote global health and development.

Support Strong Funding for Public Health

The Situation The U.S. House of Representatives has reached an impasse on the Labor-Health and Human Services-Education Appropriations bill - the bill that funds important public health programs under the Department of Health and Human Services. It is **VITAL** that any bill contain **INCREASES** over the President's budget in a number of areas including Chronic Diseases at CDC, Title VII Health Professions Education programs under HRSA and Substance Abuse Prevention Programs at SAMHSA.

While there are a number of Republicans and Democrats seeking to increase funding for these and other programs neglected under the President's proposed budget for health programs, many conservatives in the House oppose any increases. In July, the Senate Appropriations Committee passed a Labor-Health and Human Services-Education Appropriations bill that boosted a number of neglected programs above the President's request without shifting money away from other key public health programs.

What you can do Call your Representative and tell him/her to oppose any bill that does not fund public health programs at least at the level passed by the Senate Appropriations Committee. You can reach your Representative by calling the Capitol Switchboard at 202-224-3121, or by email at www.house.gov/writerep/.

Stop Big Tobacco

The Situation Why doesn't the government stop tobacco companies from adding toxins to cigarettes and marketing to kids? Because Congress won't let them.

The need for legislation to grant the U.S. Food and Drug Administration the authority to regulate tobacco products is a direct result of the Supreme Court's March 2000 decision that held that, under current law, the FDA does not have authority to regulate tobacco products. As a result of the Court's ruling, it is now up to Congress to grant the FDA the authority it needs to regulate tobacco products - just as it does with any other consumer product. Senators Kennedy and DeWine have introduced legislation (S. 2626) granting the Food and Drug Administration (FDA) oversight over tobacco products.

What you can do The American Public Health Association has a new legislative action Web site, www.stopbigtobacco.org. APHA members and friends can take instant action on tobacco control issues with one easy click. Use the action site to urge your Senators to cosponsor this S. 2626. Go to www.stopbigtobacco.org today and send the link to your friends and colleagues!

The site is a joint project between APHA and the Campaign for Tobacco-Free Kids. To see what APHA is doing to protect Americans from tobacco addiction and gain access to tobacco-related information materials go to www.apha.org/index tobacco.cfm.

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Information on this page can be found at www.apha.org/legislative/actionalerts.htm

From Theory to Practice: A Students Guide to Cutting through the Jargon

Chris L. Day, MPH, President-Elect

As the next generation of public health professionals, is it critical that we know how to define public health and have an understanding of its breadth and scope or is this just a ploy by our professors to fill our heads with more theoretical jargon? How about the 10 Essential Public Health Services (EPHS)? Does your school of public health or graduate public health program subject you to memorizing each EPHS or do they demonstrate why they are useful and practical and how they can be used to guide effective public health action?

The purpose of this article is to identify a few areas where opportunities exist for current and future leadership and to demonstrate the importance of utilizing many of our national frameworks for improving health such as Healthy People 2010, our nation's prevention agenda.

Public Health: Dispelling the Myth

Do we really know what public health is and how it works? More importantly, does the public know? Our nation's current public health leaders have done their "best" effort to define and translate the message of public health to our colleagues and communities. From these efforts we have at least 10 different definitions that are frequently cited in public health literature. For example, are we supposed to be assuring the health of our communities or assuring conditions in which people can be healthy? Is there even a difference? I firmly believe that public health encompasses so much of our daily lives that no one definition can describe the entire scope of public health. Therefore, it is important that students and professionals develop a level of understanding of each definition of public health so that they may be used interchangeably.

Developing your Message

As future public health leaders you must be able to convey the message of what public health is to any audience you come into contact with, particularly policymakers. Policymakers, guided by the communities they serve drive local health policy including funding for public health programs and interventions. Therefore,

effective public health leaders must become politically savvy in order to shape health policy and assure the conditions in which we can be healthy. This is of course in addition to being strong public health scientists. As Tip O'Neil said, "All politics is local," and that reigns true for public health.

Public opinion may be the most critical component to influencing policymakers. However, to shape public opinion the public must be able: 1) hear your message; 2) understand your message; 3) translate your message into their own language; and 4) share that message with community leaders and policymakers. This list indicates that to be an effective advocate for public health you must speak with members of your community at town meetings, hearings, public events and conferences to share your ideas for improving community health. You must also be able to convey your message clearly to them so that they may pass your message on to others. If you carry out each of these steps effectively, members of your community can become much more informed about issues like the need for a strengthened public health infrastructure or improved surveillance programs, what they are, and how it affects their daily lives. Empowered with this new information, the public can become your strongest political ally for helping to shape and influence public health policy.

Clarify your Message

Becoming an effective communicator of public health information requires practice. It also requires that you have a clear understanding of these concepts so that you may formulate a clear and concise message. For a reality check, try explaining the scope of public health to a family member or a friend. If your family and/or friend think that public health is nothing more than sick care for the indigent and water sanitation after your discussion, it might be important to work on your delivery and augment your knowledge of what public health is. Think about using sound bytes in your message about

public health to others. A sound byte is a short, descriptive phrase that is easy to understand and remember, i.e. "Milk does the body good." If you can develop short sound bytes like the one just described about public health, your message will resonate in the minds of your audience and help them to clarify their own understanding of what public health is. Remember, not everyone has a Masters of Public Health (MPH) degree or even a college degree and its important to translate your message into common language so that people can get behind you and advocate for public health programs and interventions.

From Jargon to Action

Understanding the scope of public health will enable you to more effectively translate the theoretical jargon you learn in the classroom into practical public health action. As you learn about theories such as the Precede-Proceed method or the Health Belief model, try to relate them to the definition of public health. Again, I suggest that you think about ways that you could explain these models in common language to your friends and family, if possible. This strategy will serve you well as you begin to formulate your own opinion of what theories will be helpful to you in the field and which will sit on your bookshelf collecting dust. Take my word for it; if you are outside of academia, many theories will simply sit on the shelf! That is not to say they are useless, but policymakers and public health practitioners don't speak in theoretical language. Thus, a theoretical framework may serve as the foundation for your program or intervention, but this must be implicit in your message. The public and policymakers will tune you out when you speak in academic language. Convey your message in common terms as if you were speaking to your family or friends.

Organizing Your Thoughts Utilizing Three Main Frameworks

The three main frameworks that I learned in my MPH program and now use every day include: 1) the Core Functions of Public Health as identified by the 1988 Institute of

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Medicine (IOM) report, “The Future of Public Health;” 2) EPHS; and 3) Healthy People 2010. At first glance, the Core Functions of assessment, policy development and assurance and the EPHS seemed to be pointless jargon that was too general to be useful. On the other hand, the Core Functions and EPHS are, in my mind, the most useful tools available to all public health professionals. The Core Functions and EPHS help channel our thoughts, ideas and creativity into effective public health action. This is accomplished by providing general to specific organizing principles for actions that need to be carried out to improve community health, i.e. first we must assess the health status of our community, second we must develop policy that fosters an environment in which we can be healthy and finally we must assure that these policies are implemented in the form of public health programs and interventions to improve community health.

The EPHS provide a higher level of specificity for each of the Core Functions. In fact, the EPHS were developed and organized by the Core Functions. Memorizing the EPHS is not what is important. It is however important to understand how they can be used to guide the development and implementation of necessary programs for improving community health. They also provide a basis for ensuring less variation in the delivery and types of services provided by health departments and other public health organizations across the country. For example, it is not essential that health departments directly provide personal health services for the community, but it is essential that health departments link people to needed personal health services. This is arguable, but it demonstrates how the EPHS define the role of the health department or public health agency in the community. As your studies progress, you will find that the EPHS also serve as: 1) the foundation for developing Core Public Health Competencies that may be used as a basis for credentialing public health workers, assessing the skill-level of public health workers, developing competency-based curricula, performance evaluations etc; and 2) measures used by the National Public

Health Performance Standards Program to evaluate the capacity and effectiveness of a public health system.

Healthy People 2010, based on the Core Functions and EPHS, provides some baseline data about the health of our nation and set forth numerous goals and objectives to deliver the EPHS leading to community health improvement. It is useful because it highlights areas we need to improve and provides achievable goals for our public health system to strive towards. ***Communication to Improve the Health of the Nation***

So why is all this important? Ultimately, communication is key to improving the health of the public. Public health practitioners cannot achieve Healthy People 2010 goals, effectively deliver the EPHS or carry out the Core Functions unless there is substantial public support. Implicit in building this public and political support is the need to understand what public health is and how our national frameworks fit together so that as students and young professionals, we can deliver effective, concise sound bytes about how they can be used to improve community health. Although seemingly theoretical, they serve as our guides for the future. Learn it, live it and love it! Armed with this knowledge and improved communication skills, you will be able to help shape public health programs and interventions now and in the future. So get to it!

PHSC Representative to the Epidemiology Section

*Linda J. Hazlett, MPH,
Membership Chair*

I have represented the interests of students and the PHSC as a liaison to the Epidemiology Section in 2002. I have participated in monthly conference calls, where the business of the Section has been discussed. The Section leadership has been particularly responsive to the needs of students and frequently sought my input on matters directly related to students. This Section was quite vocal in its displeasure that APHA student membership no longer included the Journal.

My term as liaison will come to an end this year. Are you interested in representing the PHSC as the liaison to the Epidemiology Section? The requirements of the position are that you be a member of the Epidemiology Section as well as PHSC and that you be available to participate in monthly conference calls (this year they have been in the afternoon).

If you are interested and would like more information about being selected to represent PHSC as the Epidemiology Section Student Liaison, please contact me (Linda Hazlett) at: ljhazlett@sc.rr.com. The Epidemiology Section needs and wants your participation!

Promote PHSC on Your Campus!

The PHSC is the nation’s largest public health student organization, and its members serve as a critical link between schools of public health students and the American Public Health Association (APHA). PHSC is inviting students to serve as national representatives at Schools of Public Health as part of PHSC’s Campus Liaison program. Campus liaisons have an opportunity to:

- Foster relationships with other public health students
- Network with other liaisons across the country through regional conference calls
- Learn about national student initiatives
- Disseminate timely information about student opportunities for leadership, internships, and mentoring
- Gain a working knowledge of PHSC and APHA

For more information about becoming a national student leader through PHSC’s Campus Liaison program, please contact Toni Rhodes at: advancement1@phsc.org You can also find more information online at: www.phsc.org/Campus_liaisons.htm.

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What specifically can you do to advance the Healthy People 2010 objectives in your community? Here are just a few of the many possibilities:

- Sponsor a brown-bag discussion group on the Healthy People 2010 objectives. Invite your state's Healthy People 2010 coordinator to give a presentation, recruit faculty who are doing prevention research to share their latest findings.
- Develop community service projects around the Healthy People 2010 objectives. Your student group might want 'adopt' a specific Healthy People 2010 objective and volunteer with community agencies that are working in the issue area.
- Link your MPH practicum requirement to the Healthy People 2010 objectives. For example, you might work with your program's practicum coordinator to identify agencies and projects that allow you to develop your knowledge and skills in health promotion.
- Reach out to students in other health disciplines to pursue interdisciplinary community-based projects. When it comes to promoting health, we need to work as a team to achieve change.
- For more ideas and resources, visit www.healthypeople.gov

Community-Campus Partnerships for Health is a national nonprofit organization that promotes health through partnerships between communities and higher educational institutions. These partnerships take many forms, and include service-learning (community service incorporated into the curriculum), community-based research, and broad-based coalitions. Students are often critical players in these partnerships and in some cases are the driving force behind the partnerships (for example, in the case of student-run free clinics and community outreach projects). CCPH has always valued student leadership and involvement in the organization. One of our founding board members, Deb Archer, was a medical student at Brown University when she joined the board, and we have continued to have at least one student on our board ever since. In spring of 2000, we commissioned the paper, "Social Change Through Student Leadership and Activism" to celebrate student contributions to social change and to engage more students in CCPH (available on our website, see below). We currently have 40 student members from a wide range of health professional disciplines. Our student members tell us they join for a variety of reasons:

- To make professional contacts in the fields of community health and public health
- To obtain information and other resources to support their community projects.
- To meet fellow students from across the country, who share their passion for community work and promoting health
- To share their "lessons learned" through workshops and posters at the CCPH annual conference (the current call for proposals has an October 25th deadline; proposals from students are strongly encouraged!).
- To help keep themselves focused on the "light at the end of the tunnel" as to why they went into the health professions to begin with: to make a difference.

To learn more about Community-Campus Partnerships for Health, resources available, and opportunities to get involved as a student, stop by our booth #1521 at the APHA convention or visit our website at www.ccpn.info. Or, feel free to email us at: sarena@u.washington.edu.

Recipient of 2002 Friend of Caucus Award

PHSC News & Views

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Barbara J. Hatcher, PhD, MPH, RN, has been named the 2002 Friend of the Caucus Award recipient. Dr. Hatcher is the APHA Director of Scientific and Professional Affairs and is being honored for her contributions to the PHSC's National Mentoring Program in Public Health (NMP).

Mary O'Neil and Cindy Summers, the NMP Co-chairs, stated, "this past year alone, Dr. Hatcher helped [PHSC] secure APHA funds to cover the redesign of the [NMP] webpages and registration process. This enabled [NMP] to move to a year-round registration process, which has greatly enhanced recruitment and management abilities."

The Friend of the Caucus Award is given annually to an individual who has been very influential in the success of PHSC activities, programs or initiatives. Recipients are nominated by members of PHSC and are recognized for their contributions to the advancement of PHSC.

The award will be represented at the PHSC Welcome and Orientation (Session 3208.1) at the APHA annual meeting in Philadelphia.