



National Network  
of Public Health Institutes™

NNPHI AND MEMBER PUBLIC HEALTH  
INSTITUTE SESSIONS AT THE 2024 APHA  
ANNUAL MEETING AND EXPO

Minneapolis, MN

October 27-30, 2024



## [Join the National Network of Public Health Institutes and its Member Institutes at this year's APHA Annual Meeting and Expo in Minneapolis](#)

The following summary highlights oral presentations, poster sessions, and other sessions of the [National Network of Public Health Institutes \(NNPHI\)](#) and its member institutes at the American Public Health Association (APHA) 2024 Meeting. This reference list is intended as a resource for those attending APHA as well as NNPHI members and partner organizations interested in knowing more about the collective work of our growing NNPHI network. Each year, NNPHI staff compiles this listing through a query to its members and searching the [online APHA conference program](#). For the specific location of each session at the APHA 2024 conference, please reference the mobile meeting app for the conference. For session abstracts and speaker information (including e-mail addresses), please click on the hyperlinked session titles below.

*Please note that all times listed are in Central Time.*

Should you visit the exhibit hall at APHA 2024 please visit us:

- NNPHI: 1517
- Georgia Health Policy Center: 1010

## NNPHI Facilitated Sessions and Events:

Monday, October 28, 2024	
3:00 PM - 3:15 PM	<p>Session 3256.0: <a href="#">Novel and Emerging Practice Evaluation Studies (NEPS) to Address COVID 19 Health Disparities</a></p> <p>Title: <a href="#">Reducing COVID-19 health disparities through the CDC's novel and emerging practice studies (NEPS) initiative</a></p> <p>Presenter/Author: National Network of Public Health Institutes (NNPHI)</p> <p>Session Format: Oral</p> <p>Abstract: Persons from racial and ethnic minority groups and other disenfranchised populations are disproportionately affected by COVID-19, including experiencing lower vaccination rates and increased risk for infection, hospitalization, and death. In 2021, the National Network of Public Health Institutes (NNPHI) and Centers for Disease Control and Prevention (CDC) worked with contracted evaluators to conduct evaluation studies with grant recipients of the CDC's National Initiative to Address COVID-19 Health Disparities Among Populations at High-Risk and Underserved, Including Racial and Ethnic Minority Populations and Rural Communities (OT21-2103). This served to develop a knowledge base regarding evidence-based.</p>
Tuesday, October 29, 2024	
7:30 AM – 9:00 AM	<p>NNPHI Member Breakfast Reception</p> <p>Tuesday, October 29th, 7:30 -9:00 AM</p> <p>Hyatt Regency Minneapolis, NorthStar Ballroom</p> <p>Join fellow NNPHI network members, public health leaders, community partners, training centers and APHA peers for a breakfast reception and networking at APHA. RSVP <a href="#">here</a>.</p>
9:00 AM - 9:15 AM	<p>Session 4053.0: <a href="#">Driving Public Health Excellence: Innovations in Infrastructure, Communication, and Evaluation Strategies</a></p> <p>Title: <a href="#">Learnings from year 1 evaluation of the public health infrastructure grant</a></p> <p>Presenter/Author: Public Health Accreditation Board (PHAB); National Network of Public Health Institutes (NNPHI)</p> <p>Session Format: Oral</p>

	<p>Abstract: For decades, the U.S. public health system has been under resourced. Some of the resource deficiencies have been addressed by categorical, disease-specific funding for many years. But the weakness in the public health infrastructure persisted and was exacerbated by the COVID-19 pandemic. In November 2022, the Centers for Disease Control and Prevention (CDC) leveraged the American Rescue Plan and awarded a \$3.2 billion grant to 107 state, tribal, local, and territorial jurisdictions to strengthen their public health workforce and infrastructure. This grant is the first-of-its-kind because of its focus on workforce, emphasis on improving foundational capabilities, and flexibility giving funding recipients more decision-making authority.</p>
11:00 AM - 11:15 AM	<p>Session 4113.0: <a href="#">No Trust without Sustainability: Leveraging and Linking Long-Term Funding Opportunities to Maintain Equitable Community Health Outcomes</a></p> <p>Title: <a href="#">Call to action: Long-term flexible funding to leverage public-private partnerships for equitable community health outcomes</a></p> <p>Presenter/Author: National Network of Public Health Institutes (NNPHI)</p> <p>Session Format: Oral</p> <p>Abstract: Federal investments in public health infrastructure are critical to reach national health objectives such as those outlined in Healthy People 2030. However, the boom-and-bust cycle, narrow focus, and short-term nature of many federal public health grants distributed to state and local health departments limits program innovation, stymies scalability, and diminishes trust from community-based partners that are critical to addressing health inequities.</p> <p>This session highlights the need for strategic advocacy for long-term, flexible funding that facilitates permanent public health staffing and long-term partnerships between state and local health departments, public health institutes, and CBOs. These funding structures are needed for sustainable public health infrastructure and systems transformation that will support sustainable and equitable community health outcomes. This session is for public health practitioners working in state or local public health departments and community groups who work with or interact with public health agencies.</p>

## Member Public Health Institute Facilitated Sessions and Events:

Sunday, October 27, 2024	
12:30 PM - 12:45 PM	<p>Session: <a href="#">2008.0 - Medication for Addiction Treatment: Increasing Access and Reach</a></p> <p>Title: <a href="#">Access to medication for opioid use disorder: Trends in DATA-waivered prescriber availability and moud recipient-to-provider ratios in urban and rural settings in West Virginia</a></p> <p>Presenter/Author: Health Affairs Institute (HAI)</p> <p>Session Format: Poster</p> <p>Abstract: Until 2023, only Drug Addiction Treatment Act of 2000 (DATA) waived providers could administer buprenorphine for opioid use disorder (OUD) patients in office-based settings. This study aims to assess changes in waived providers prescribing medication for OUD (MOUD) patients and variations in recipient-to-provider ratios across urban and rural areas in West Virginia (WV).</p>
1:00 PM - 2:00 PM	<p>Session: <a href="#">2007.0 - Epidemiology and Etiology of Multiple Substance Use</a></p> <p>Title: <a href="#">Burden experienced from other people's identified use of alcohol, cannabis, or other drugs besides cannabis, or combinations of these substances.</a></p> <p>Presenter/Author: Public Health Institute (PHI)</p> <p>Session Format: Poster</p> <p>Abstract: Many experience burdens from others' use of alcohol, cannabis and other drug harms. We adapted a burden scale from caring for people with mental health conditions, for our US Alcohol and Drug Harm to Others Survey (ADHTOS).</p>
1:00 PM - 2:00 PM	<p>Session: <a href="#">2021.0 - EH Poster Session 3: Healthy and Resilient Communities</a></p> <p>Title: <a href="#">Building resilience through emergency preparedness and educational curriculum for events associated with climate change and its effect on public health</a></p> <p>Presenter/Author: Puerto Rico Public Health Trust</p> <p>Session Format: Poster</p> <p>Abstract: The Centers for Disease Control and Prevention (CDC) funded the Caribbean All Hazards Project to Build Resilience and Climate Equity</p>

	<p>(CAP-BRACE) at the Puerto Rico Public Health Trust (PRPHT) to develop two adaptive actions that will reduce health impacts from climate change. Puerto Rico is an island and its location in the Caribbean makes it especially susceptible to consequences of extreme weather events exacerbated by climate change, like hurricanes, floods, landslides, drought, and extreme heat.</p>
1:00 PM - 2:00 PM	<p>Session: <a href="#">2027.0 - HIV Risk Assessment &amp; Reduction</a></p> <p>Title: <a href="#">The impact of different definitions of rurality on HIV funding eligibility for queer and trans Pennsylvanians</a></p> <p>Presenter/Author: Public Health Management Corporation (PHMC)</p> <p>Session Format: Poster</p> <p>Abstract: Rural communities face significant disparities in accessing HIV testing, prevention, and treatment. Additionally, populations most affected by HIV may face greater burdens to accessing care than the general population. Specific funding opportunities targeting HIV for rural communities are often available, and yet remain underutilized as the different definitions of “rural” can impact the populations eligible for these grants. Therefore, the goal of this analysis was to identify how application of different definitions of rurality may affect eligibility for HIV funding at the county level in the commonwealth of Pennsylvania.</p>
1:00 PM - 2:00 PM	<p>Session: <a href="#">2028.0 - Innovations in Latino Health: Shaping Tomorrow's Wellness and Equity Landscape</a></p> <p>Title: <a href="#">Building power for health equity: A short course to build the public health workforce in Puerto Rico</a></p> <p>Presenter/Author: Puerto Rico Public Health Trust</p> <p>Session Format: Poster</p> <p>Abstract: To advance equity we need to train public health students and professionals from different backgrounds on topics not usually imparted in academia. Through a power analysis participants were able to identify structural forces causing health inequities in Puerto Rican communities and learned how to address those inequities to contribute to a fairer archipelago A post-course survey showed 95% participants expressed that they understood how to use and apply the information presented in the course to address strategies for advancing health equity. Participants (95%) considered the course content to be novel and not present in other public health courses they had taken previously.</p>
2:30 PM - 2:45 PM	<p>Session: <a href="#">2074.0 - Innovative Programs Which Build Trust in Public Health and Science through Health Administration</a></p> <p>Title: <a href="#">Exploring the relationship between collaboration dynamics and trust</a></p>

	<p><a href="#">in health collaboratives</a></p> <p>Presenter/Author: Public Health Institute (PHI)</p> <p>Session Format: Oral</p> <p>Abstract: Past research demonstrates the importance of building trust when working to improve population health and health equity, yet little empirical evidence exists to guide trust-building in practice – especially when collaborating across sectors and boundaries. This presentation seeks to advance empirical understanding of how the internal working processes – or collaboration dynamics – in health collaboratives relate to perceptions of trust among participants. It explores the questions: ‘Which collaboration dynamics are most closely associated with high levels of trust?’ and ‘How do health collaboratives build trust among participants?’ After attending this presentation, attendees will be able to list three validated measures of trust and describe how collaboration dynamics contribute to trust among health collaborative participants.</p>
2:30 PM - 4:00 PM	<p>Session: <a href="#">Health Administration Roundtable: Health Equity &amp; Public Health Administration</a></p> <p>Title: <a href="#">What will it really take for transformative change? observations from practicing equity work with public health administrators</a></p> <p>Presenter/Author: Health Resources in Action (HRiA)</p> <p>Session Format: Roundtable</p> <p>Abstract: The CDC’s COVID-19 Disparities grant (OT21-2103), a two-year \$2.25 Billion initiative, provided public health agencies an opportunity to address critical capacity issues to advance health inequity. As a non-profit, public health institute tasked with providing technical assistance to 2103 recipients, Health Resources in Action (HRiA) had an insider’s view to the challenges health administrators face in implementing their equity focused goals and objectives. The challenges include formal policy constraints both within and outside agency control and engrained cultural norms and practices. Addressing both, from a full systems-change approach, is needed to build better approaches to health equity work that center community, build trust, and create more effective programs.</p>
2:30 PM - 4:00 PM	<p>Session: <a href="#">2072.0 - Health Administration Roundtable: Health Equity &amp; Public Health Administration</a></p> <p>Title: <a href="#">Factors associated with public health workforce competencies to advance health equity</a></p> <p>Presenter/Author: Northwest Center for Public Health Practice</p> <p>Session Format: Roundtable</p>

	<p>Abstract: We examined individual staff and local health department (LHD) characteristics associated with health equity concepts. Findings suggest the need for more targeted workforce development, including designing training which involves explicitly naming structural racism's effects, application of health equity concepts, skill development in policy advocacy, and measurements to evaluate success. Future research should explore ways to effectively motivate white staff to accept responsibility as public health practitioners to address racism and support staff of color in health equity work.</p>
2:45 PM - 3:00 PM	<p>Session: <a href="#">2063.0 - CHW Supervision Skills Development, Including Opportunities for CHWs to Supervise</a></p> <p>Title: <a href="#">Bridging the divide: Challenges and recommendations for CHW supervisors</a></p> <p>Presenter/Author: Institute for Public Health Innovation (IPHi)</p> <p>Session Format: Oral</p> <p>Abstract: Community Health Workers (CHWs) are a unique profession, positioned to serve community members and their social and health challenges. As the profession develops, many organizations face challenges with integrating the role into process flows, building knowledge of the role, and financing and sustainability of the position. Often, CHWs are also new to working in health and social service systems and some CHWs also face similar health and social challenges to the individuals they are employed to work with. CHW Supervisors frequently play the role of "CHW for the CHW" supervisee, while balancing other responsibilities within their organization without proper support or training. CHW supervisors must bridge the divide between formal work environments, rigid organization policies and process, and the needs of their CHW supervisee. Enhancing the quality of supervision of CHWs is a critical step towards achieving the full benefits of CHW's work but is often not perceived as a priority.</p>
3:00 PM - 3:15 PM	<p>Session: <a href="#">2060.0 - Evaluation and Assessment Tools for Community Health Research and Policy Implementation</a></p> <p>Title: <a href="#">Community health workers identifying and understanding technology barriers to address the digital divide</a></p> <p>Presenter/Author: Public Health Solutions</p> <p>Session Format: Oral</p> <p>Abstract: Digital access and literacy have become critical social determinants of health. As our healthcare and social service systems have rapidly digitized, there is a need to adapt to accessing web-based resources to meet basic needs, including those associated with housing, food, employment, and health insurance. Where healthcare is concerned,</p>



	<p>patients have had to learn how to navigate telehealth and patient portals to access health information, meet with and communicate with providers, and to request medication refills. As a result, disparities in digital access and literacy have the potential to magnify existing disparities.</p>
3:00 PM - 3:15 PM	<p>Session: <a href="#">2074.0 - Innovative Programs Which Build Trust in Public Health and Science through Health Administration</a></p> <p>Title: <a href="#">Revitalizing the public health workforce: Rebuilding trust through pathways programs</a></p> <p>Presenter/Author: Public Health Institute (PHI)</p> <p>Session Format: Oral</p> <p>Abstract: Early career professionals face barriers to launching careers in public health. Extensive education and prior work requirements for entry-level positions, complex hiring processes, and limited professional development opportunities have resulted in a lack of trust in the viability of public health careers. Additionally, there is a nationwide public health workforce shortage. In 2017, 47% of public health workers intended to leave the workforce or retire within 5 years. The pandemic and “great resignation” accelerated this loss.</p>
3:00 PM - 4:00 PM	<p>Session: <a href="#">2120.0 - Data and Epidemiology Poster Session</a></p> <p>Title: <a href="#">Emergency department and hospital utilization patterns among California pregnancy-related deaths, 2017-2021</a></p> <p>Presenter/Author: Public Health Institute (PHI)</p> <p>Session Format: Poster</p> <p>Abstract: Healthcare utilization and hospital-switching patterns have not been well-studied among pregnancy-related deaths. Lack of continuity of care has been identified as a contributing factor to pregnancy-related mortality. Having frequent ED visits or accessing care at multiple hospitals is associated with complex medical issues but may also represent dissatisfaction with care, mistrust, interpersonal or structural discrimination. Further research should focus on developing system-level approaches to improve maternity care and decrease pregnancy-related mortality.</p>
3:00 PM - 4:00 PM	<p>Session: <a href="#">2126.0 - Public Health in Action</a></p> <p>Title: <a href="#">Developing a guide to using CDC data for rural analysis</a></p> <p>Presenter/Author: Public Health Institute (PHI)</p> <p>Session Format: Poster</p>

	<p>Abstract: The Centers for Disease Control and Prevention (CDC) publishes several public health datasets, many of which have variables that indicate the rural status of individual observations. To increase awareness of these variables and provide guidance for accessing them, the CDC Office of Rural Health (ORH) and the Population Health Innovation Lab (PHIL) are developing a guide titled <i>The Cookbook: A Guide to Using CDC Data for Rural Analysis</i>.</p>
3:15 PM - 3:30 PM	<p>Session: <a href="#">2060.0 - Evaluation and Assessment Tools for Community Health Research and Policy Implementation</a></p> <p>Title: <a href="#">Insights from a collaborative, community-focused food systems assessment to inform food equity strategies</a></p> <p>Presenter/Author: Texas Health Institute</p> <p>Session Format: Oral</p> <p>Abstract: Southwest Houston is a racially, culturally, and linguistically diverse, densely populated community where food insecurity is estimated to impact 40% of residents. A collaborative food systems assessment was conducted to understand the food access landscape and inform subsequent food equity strategies.</p>
4:45 PM - 5:00 PM	<p>Session: <a href="#">2136.0 - More Than Individual Choice: How Context Shapes Alcohol Use</a></p> <p>Title: <a href="#">Unjust alcohol environments: The role of structural racism in the alcohol outlet density – violent crime link</a></p> <p>Presenter/Author: Public Health Institute (PHI)</p> <p>Session Format: Oral</p> <p>Abstract: Alcohol outlets are well-established violent crime attractors, and overconcentrate in areas subjected to various forms of structural racism (SR), including but going beyond redlining. This study examined the role of neighborhood-level SR in associations between alcohol outlet density (AOD) and violent crime in Baltimore, Maryland.</p>
4:45 PM - 5:00 PM	<p>Session: <a href="#">2183.0 - Addressing Health Disparities through Health Promotion Initiatives</a></p> <p>Title: <a href="#">Enhancing local health department capacity for data-driven outbreak response in healthcare settings</a></p> <p>Presenter/Author: Public Health Institute (PHI)</p> <p>Session Format: Oral</p> <p>Abstract: The Public Health Institute's Innovation Lab (PHIL), in</p>

	<p>collaboration with the National Association of County and City Health Officials (NACCHO), embarked on an evaluation to understand how Local Health Departments (LHDs) utilize infection and health equity data for outbreak responses in healthcare settings. This initiative sought to highlight the operational capacities and barriers LHDs encounter in applying data for equitable and effective outbreak interventions. Engaging a broad spectrum of LHDs across the United States through interviews and focus groups, the project unearthed insights into current practices and pinpointed critical areas for enhancement, notably the strengthening of partnerships and data usage for outbreak management.</p>
5:00 PM - 6:00 PM	<p>Session: <a href="#">2195.0 - Barriers and Facilitators to Accessing Overdose Prevention, Harm Reduction, Treatment, Recovery and Wrap Around Services Related to Opioids</a></p> <p>Title: <a href="#">Role of stigma in opioid use and treatment among West Virginian Medicaid beneficiaries</a></p> <p>Presenter/Author: Health Affairs Institute (HAI)</p> <p>Session Format: Poster</p> <p>Abstract: This study explores how stigma impacts seeking and continuing treatment for opioid use disorder (OUD) in WV Medicaid beneficiaries. WV Medicaid beneficiaries with an OUD diagnosis were randomly selected from claims data and surveyed between April 2022 and August 2023. A total of 1,198 individuals completed a paper, online, or telephone questionnaire. Stigma was gauged via responses indicating reduced attention from service providers, reluctance to disclose OUD, embarrassment about OUD, expecting disapproval from pharmacies/Medicaid, fear of failing workplace drug tests, and housing insecurity due to OUD prejudice. Linear and logistic regression were used to predict the association between stigma, opioid use, and various behaviors during treatment.</p>
5:00 PM - 6:00 PM	<p>Session: <a href="#">2198.0 - Important Issues in Tobacco Control</a></p> <p>Title: <a href="#">Vaping among adults seeking tobacco dependence treatment in southeastern Pennsylvania</a></p> <p>Presenter/Author: Public Health Management Corporation (PHMC)</p> <p>Session Format: Poster</p> <p>Abstract: Electronic vapes are perceived as a tobacco cessation tool or alternative to cigarette smoking. The growth in vaping products over the past decade has raised public health concerns, since users are exposed to harmful chemicals. The Pennsylvania Department of Health (PADOH) Tobacco Control Program provides an opportunity to better understand the characteristics and behaviors of adults who vape.</p>

5:00 PM - 6:00 PM	<p>Session: <a href="#">2199.0 - Integrated Behavioral Health Interventions: Challenges of Multiple Substances</a></p> <p>Title: <a href="#">Interest in tobacco-free recovery among Pennsylvanians with a behavioral health condition and treatment implications</a></p> <p>Presenter/Author: Public Health Management Corporation (PHMC)</p> <p>Session Format: Poster</p> <p>Abstract: Pennsylvanians with behavioral health conditions have higher rates of tobacco use. Meanwhile, research has documented the positive impact of addressing tobacco use concurrently with other substance use treatment. Provider misinformation about potential client resistance to tobacco-free recovery continues to be a barrier to its integration into behavioral health care.</p>
5:00 PM - 6:00 PM	<p>Session: <a href="#">2201.0 - Novel Approaches to Addressing Substance Use Disorder and Health Inequities</a></p> <p>Title: <a href="#">Beyond awareness: Building equitable solutions to the overdose crisis</a></p> <p>Presenter/Author: Public Health Institute (PHI)</p> <p>Session Format: Poster</p> <p>Abstract: Overdose rates among communities of color (COCs) continue to soar, requiring an immediate call to action. According to the CDC, overdose death rates in 2022 increased by 44% among Black communities and 39% among American Indian and Alaskan Natives. Despite these alarming increases, COCs have lower access to prevention and treatment services. Furthermore, decades of high overdose rates, limited services, and disproportionate criminalization of drug use have intensified mistrust in public health efforts among COCs.</p>
5:00 PM - 6:00 PM	<p>Session: <a href="#">2203.0 - Tobacco Cessation Considerations</a></p> <p>Title: <a href="#">Navigating tobacco cessation: Understanding the impact of mental health conditions</a></p> <p>Presenter/Author: Public Health Management Corporation (PHMC)</p> <p>Session Format: Poster</p> <p>Abstract: To support and encourage individuals who use tobacco to end their use, the Pennsylvania Department of Health, Division of Tobacco Prevention and Control offers free in-person cessation classes across the state. Within the context of tobacco industry marketing, mental health can be a factor influencing tobacco use and quit interest/readiness. Evaluation data from tobacco treatment/cessation classes can be used to construct a better picture of the relationship between mental health/emotional challenges and desire to quit</p>

tobacco for adults across Pennsylvania.

Monday, October 28, 2024

8:30 AM - 8:45 AM

Session: [3024.0 - Qualitative Methods and Community Health Evaluation](#)

Title: [Storytelling as a tool for evaluating policy, systems, and environmental change](#)

Presenter/Author: Health Resources in Action (HRiA)

Session Format: Oral

Abstract: Policy, Systems, and Environmental (PSE) Change initiatives aim to address root causes and can be powerful tools to bring about impactful, sustained community-level change. Increasingly, public health practitioners and funders are focused on PSE strategies as they seek to build sustained practices that continue to impact systems and communities past the end of a grant or funding stream. However, long timeframes, the iterative and evolving nature of PSE initiatives, and the large scale of most PSE change work makes it challenging to evaluate. Creating PSE change takes time and seeing the true impact of that change takes even longer. PSE strategies need to be adaptable and responsive to shifting political environments and unanticipated developments, making them a poor fit for traditional outcomes evaluation approaches focused on set intervention activities, defined populations or participants, and predefined outcomes that can be measured in short timeframes. This presentation will show how qualitative methods, specifically storytelling, can be used to work around these challenges and are an important tool for evaluating PSE change. Working collaboratively with organizations and communities to tell the story of PSE work, evaluators can capture the process and progress of the work in meaningful ways and identify relevant levers of change that act as through-lines over the course of the work. Storytelling captures incremental and long-term successes, challenges, and impacts of PSE initiatives. Storytelling approaches can describe changes in planned activities brought about by the evolving political landscape, unexpected events, or shifting community priorities that influence PSE work. Grounded in a developmental evaluation approach, storytelling as an evaluation tool creates space for evaluators to emphasize equity in their work and build trust, as it allows for PSE changemakers to drive the evaluation and centers their voices and experiences. This evaluation approach also results in evaluation products that can be used by grantees in their own communication or outreach efforts or by others interested in replication. This presentation will explore storytelling as an approach to PSE evaluation and, using real life examples from a diverse array of projects, help participants understand how they can use these tools in their own work.

9:00 AM - 9:15 AM	<p>Session: <a href="#">3043.0 - Global Innovations to Improve Health</a></p> <p>Title: <a href="#">Using digital health to deliver maternity care in rural settings: Findings from an implementation science evaluation of an intervention in Peru</a></p> <p>Presenter/Author: Health Resources in Action (HRiA)</p> <p>Session Format: Oral</p> <p>Abstract: Antenatal care is essential to saving lives, but large disparities in access persist. Using information and communications technologies (ICTs) to deliver maternity care to women in rural and hard-to-reach areas is considered a promising strategy to bridge this gap.</p> <p>Between 2022 and 2023, with support from Global Affairs Canada, the Pan American Health Organization (PAHO) co-developed and implemented with the Ministry of Health a maternity care intervention that incorporated digital health in the Amazon region of Peru. All women receiving prenatal services at three rural micro health networks, ranging from 8 to 21 primary care clinics and health outposts each, with no specialists on staff, were offered at least one teleconsultation with an obstetrician-gynecologist at the regional hospital during their pregnancy. PAHO conducted a process evaluation to examine the model's feasibility.</p>
9:15 AM - 9:30 AM	<p>Session: <a href="#">3000.0 - Academic-Practice Linkages That Support the Recruitment, Retention, and Training Needs of the Public Health Workforce: Part 1</a></p> <p>Title: <a href="#">Reflecting on 20 years of the Wisconsin population health service fellowship: Recruiting, retaining, and training early career professionals in Wisconsin's public health workforce</a></p> <p>Presenter/Author: University of Wisconsin Population Health Institute</p> <p>Session Format: Oral</p> <p>Abstract: The Wisconsin Population Health Service Fellowship (hereafter referred to as The Fellowship Program) is a two-year service and training workforce development program for early career public health professionals housed at the University of Wisconsin Population Health Institute. Since 2004, the Fellowship has recruited and placed 109 early-career postgraduate professionals to work for public health and community-based organizations throughout Wisconsin. In 2024, with 20 years of experience, the program is well equipped to share lessons learned on recruitment, retention, and leadership development to strengthen our public health workforce.</p> <p>The Fellowship is committed to strengthening and diversifying our public</p>

	<p>health workforce and has been able to recruit and retain talented and diverse fellows. Among fellows in the last three graduating cohorts, at least 60% identified as people of color and LGBTQ+, and at least 35% were first generation college students. While we continue to implement new ways to foster inclusion and belonging in our programs and provide models for mentorship and networking, we do see success in retaining fellow alum in the workforce. Since 2017, nearly 80% of graduating fellows continued to work in Wisconsin public health and ~95% of alum continued to work in public health following the completion of their fellowship.</p> <p>Additionally, the Fellowship is committed to building the capacity of our public health workforce through increasing leadership and health equity readiness for both fellows and their placement sites. Our academic health department partnerships are a key success to the program and have reported both satisfaction with the program and increased capacity of their organization from the partnership. Fellows go through a curriculum centering collaborative leadership, health equity, and systems thinking. And the last three graduating cohorts reported the highest growth in the following competencies: increased confidence as public health practitioners; improved leadership; increased skills in collaboration, partnership building, and communication; and enhanced understanding of public health systems.</p> <p>While the WI Fellowship Program is one small part of workforce development, we are well equipped to pilot novel approaches and consider how our lessons learned can inform larger workforce development initiatives at the state and national level.</p>
10:30 AM - 11:30 AM	<p>Session: <a href="#">3098.0 - Oral Health Equity: Promoting Teeth for Life</a></p> <p>Title: <a href="#">The provider and Medicaid beneficiary experience with dental care in West Virginia – a rural health perspective</a></p> <p>Presenter/Author: Health Affairs Institute (HAI)</p> <p>Session Format: Poster</p> <p>Abstract: Dental care is crucial for well-being. Geographic isolation and workforce challenges are obstacles to accessing dental care in rural areas. U.S. Census Bureau data indicate that most West Virginians lived in rural areas in 2020. This research examines provider and beneficiary experiences with Medicaid dental benefits across West Virginia (WV) since the state expanded adult Medicaid dental benefits in January 2021 to include additional services.</p>
10:30 AM - 12:00 PM	<p>Session: <a href="#">3132.0 - Roundtable Session: Building Trust in Environmental Health and Science</a></p> <p>Title: <a href="#">Envisioning a climate change and health micro-credential for</a></p>



	<p><a href="#">community health workers</a></p> <p>Presenter/Author: Michigan Public Health Institute (MPHI)</p> <p>Session Format: Roundtable</p> <p>Abstract: The Community Health Worker (CHW) workforce in the United States has grown substantially in the last decade and is projected to keep growing into the next. The next decade is also a crucial time for climate change mitigation and adaptation, as the window for remaining below 1.5 °C warming begins to close and impacts of warming continue to increase in frequency and magnitude. As a trusted bridge between community members and health services, as well as practiced advocates, CHWs have the potential to play a pivotal role in community-level climate change adaptation and mitigation, particularly when it comes to both human and planetary health. What's missing for many CHWs is the training in how to do so. The Climate Change Impacts Project (CCIP) team at the Michigan Community Health Worker Alliance (MiCHWA) works to meet this need with a series of self-paced continuing education trainings for CHWs. This presentation uses post-learning evaluation data from CCIP's first course, <i>Climate Change Impacts for CHWs</i> (disseminated 2022), to demonstrate the perceived value of the course's information to CHWs. Under a second grant, CCIP is currently developing a second course, <i>Climate Change and Health Equity</i>, and is templating its first course for use in other states. Using these first two courses as a foundation, this presentation will detail CCIP's vision of a robust CHW Climate Change and Health micro-credential, which provides training on various aspects of climate change and health and acknowledges this specialization for CHWs who complete it. Finally, this presentation will highlight the importance of customizing courses available in this micro-credential to suit different states and geographical areas.</p>
12:30 PM - 1:30 PM	<p>Session: <a href="#">3192.0 - Stigma, Discrimination, and Trauma Poster Session</a></p> <p>Title: <a href="#">Culturally competent and trauma-informed mental health services for AAI youth in alameda county, CA</a></p> <p>Presenter/Author: Public Health Institute (PHI)</p> <p>Session Format: Poster</p> <p>Abstract: Asians make up over half of the new immigrants in California, many of whom have suffered various types of trauma before and after their migration. Additionally, Asian American and Asian Immigrant (AAI) communities have experienced an increasing amount of racial harassment and violence since the start of the COVID-19 pandemic. However, mental health problems in AAI youth are often under-reported and under-treated due to assessment biases, lack of data for Asian sub-ethnic groups, and stigmatization of mental health issues in Asian cultures. To fill this gap, in 2016, the Improving the Wellness of Asian</p>



	<p>Youth (IWAY) project collaborated with community-based mental health service agencies to provide trauma-informed mental health care and prevention for AAAI youth in Alameda County, CA. In 2023, we launched the school-based IWAY2 project with an expansion of focus to address the negative impacts of racial harassment and violence against AAAs. IWAY and IWAY2 adapted a community-based comprehensive service delivery model and integrated multiple evidence-based programs. Both projects have four components: 1) culturally and linguistically competent counseling, 2) youth empowerment program, 3) youth internship, and 4) dissemination of mental health prevention messages. IWAY also implemented a digital storytelling program to facilitate AAAI youth voicing their living experience of racial trauma.</p>
<p>12:30 PM - 1:30 PM</p>	<p>Session: <a href="#">3171.0 - Alcohol Use By Special Populations</a></p> <p>Title: <a href="#">Recovery goals and their associations with outcomes in a cohort of adults in early recovery from alcohol use disorder</a></p> <p>Presenter/Author: Public Health Institute (PHI)</p> <p>Session Format: Poster</p> <p>Abstract: Recovery from alcohol use disorder (AUD) is a dynamic process often characterized by periods of abstinence and non-abstinence, with changing AUD severity during periods of use. Although personal recovery goals are an established predictor of recovery outcomes, little is known about their stability and related outcomes among those who forego alcohol treatment. Different recovery goals present both benefits and challenges for resolution of AUD. Understanding changes in recovery goals and related outcomes can help to inform strategies to support recovery, particularly for people pursuing recovery without treatment.</p>
<p>12:30 PM - 1:30 PM</p>	<p>Session: <a href="#">3192.0 - Stigma, Discrimination, and Trauma Poster Session</a></p> <p>Title: <a href="#">Cultural resilience: Trauma-informed children's books and community engagement in loíza, Puerto Rico</a></p> <p>Presenter/Author: Puerto Rico Public Health Trust</p> <p>Session Format: Poster</p> <p>Abstract: The repercussions of childhood trauma stemming from natural disasters and community violence have a detrimental impact on academic performance and the capacity for teaching and learning, particularly in vulnerable communities affected by socio-economic and sociodemographic factors. The municipality of Loíza, Puerto Rico, is an example where natural disasters and health disparities have heavily affected the community and their health outcomes. To address this issue, focus groups were conducted with elementary school students to delve into their experiences concerning trauma. The results of a qualitative</p>

	<p>analysis conducted revealed two common themes associated with childhood traumatic events, hurricanes and gun-violence. Trauma-informed children's books were developed to help kids navigate adverse experiences and challenging feelings. These books aim to illustrate, recognize, and validate childhood trauma, while promoting coping skills among children and were conceived as socializing tools for healing the effects of childhood trauma. To ensure the inclusion of sociocultural elements discussed in the focus groups, a comprehensive community tour was conducted. This visit involved the participation of the author, illustrators, and Puerto Rico Public Health Trust team, who visited various sites including schools, community centers, the municipality's health service center, beaches, and local businesses. This initiative facilitated a profound connection with the community, enhancing understanding of their culture and identity, while also guaranteeing the authenticity of cultural representation and nurturing pride among children. As a result, the illustrations prominently feature Afro-Caribbean descendants, fostering discussions on racial equity in Caribbean children's literature. A total of 8,000 copies were produced to be distributed to the community and various stakeholders. Dozens of teachers, psychologists, nurses, and social workers will be trained in utilizing these tools to address trauma in children within the school environment, both at individual and group levels, employing the train-the-trainers model through six Community Health Workers. These trainings will be carried out in elementary schools located in Loíza, Arecibo, Añasco, Utuado, and Comerío. It is proposed to integrate trauma-informed storybooks into the educational curriculum of the Puerto Rico Department of Education as an integral component of the teaching and learning process in all schools across the archipelago.</p>
12:30 PM - 1:30 PM	<p>Session: <a href="#">3193.0 - Suicide Prevention, Intervention, and Crisis Response Poster Session</a></p> <p>Title: <a href="#">The role of data dashboards in strengthening trust and transparency of the 988 suicide and crisis lifeline</a></p> <p>Presenter/Author: University of Wisconsin Population Health Institute</p> <p>Session Format: Poster</p> <p>Abstract: The U.S. transitioned from the 10-digit National Suicide Prevention Lifeline to 988 – an easy-to-remember three-digit number that provides free and confidential support for anyone experiencing a suicidal, mental health, and/or substance use crisis. However, many people are unaware of, or hesitant to contact 988. The APHA issued a statement calling for 988 partners to ensure transparent processes for assessing and monitoring 988 implementation, emphasizing that consistent data would improve public-facing reporting: an essential element to build trust in an accountable crisis system. A data dashboard is one method for providing data to diverse audiences. Recognizing the need for transparent</p>

	<p>and accessible data, Wisconsin public health evaluators at an academic institution led an iterative process to develop and implement a public-facing data dashboard. The evaluators collaborated closely with a state agency and a service provider. The team ensured equitable messaging was embedded throughout the dashboard alongside comprehensive data visualizations. The collaborative approach ensured that the dashboard aligned with the needs and priorities of diverse stakeholders, including prioritizing feedback from those with lived experience.</p>
12:30 PM - 1:30 PM	<p>Session: <a href="#">3169.0 - Poster Session #2</a></p> <p>Title: <a href="#">Brave spaces for health equity and anti-racism learning</a></p> <p>Presenter/Author: Northwest Center for Public Health Practice (NWCPHP)</p> <p>Session Format: Poster</p> <p>Abstract: The COVID-19 pandemic brought greater awareness to the impacts of racism on health as well as the roles and resources of health departments to address this crisis. Recent findings from the 2021 Public Health Workforce Interest and Needs Survey (PH WINS) reveal that 72% of state and local governmental public health staff believe addressing racism should be part of their work, but that they need more support to do so. Survey participants also listed training among the top three “non-monetary” resources needed to support their efforts. With centers in each of the ten federal service regions, the Public Health Training Center Network (PHTCN) represents the nation’s most comprehensive resource for public health workforce development. This presentation will showcase innovative training and other resources from the PHTCN, developed in close collaboration with public health professionals, that can support learning and capacity building in the areas of health equity and anti-racism. Each of these no- or low-cost resources are easily accessible and can be used immediately to ground new and long-standing staff from across various teams and backgrounds in a common understanding of what drives community health outcomes and the roles health departments play in the process. Organizations can supplement these materials with additional information about their own agency’s specific activities and goals for a more comprehensive onboarding experience. Presenters will also share guiding principles and practices for developing training in this foundational topic area. Examples include: lessons learned about audiences and readiness, how to meet people where they are while still advocating for change, and determining the appropriate training format for sensitive topics. Participants will leave this session with a list of up-to-date resources to help their organization or team build brave spaces for learning immediately, as well as information on how to collaborate with the Public Health Training Center in their region to access even more training and staff development resources.</p>

2:30 PM - 2:45 PM	<p>Session: <a href="#">3256.0 - Novel and Emerging Practice Evaluation Studies (NEPS) to Address COVID 19 Health Disparities.</a></p> <p>Title: <a href="#">Equitable procurement: Results from an innovative way for state health agencies to engage community partners to reduce COVID-19 health disparities</a></p> <p>Presenter/Author: Public Health Institute of Western Massachusetts</p> <p>Session Format: Oral</p> <p>Abstract: State health agencies fund community-based organizations (CBOs) to reduce health inequities. Through a process known as Equitable Procurement (EP), some invest in making these opportunities more fair, transparent, and inclusive to reduce barriers to funding access, support the advancement of racial and health equity, and to (re)build trust in government. In 2023, the Public Health Institute of Western Massachusetts (PHIWM) evaluated how well New York State Department of Health (NYSDOH) Bureau of Health Equity and Community Engagement (BHECE) implemented an EP process as one strategy of their CDC grant to reduce health disparities related to COVID-19.</p> <p>The implementation dimension of the RE-AIM framework was used to guide the evaluation of EP. Specifically, PHIWM examined the extent to which BHECE's Small Wellness Mini-Bid process was equitable. As part of that process, PHIWM created a new tool entitled "Promising Practices in Equitable Procurement" that was used to compare BHECE practice to a standard. The Promising Practices in EP is based on peer-reviewed and grey literature, in-depth comparison to BHECE practice, and a review from experts across the United States engaged in such practices. Reviewers included public health institutes, state health departments, consulting organizations doing EP, and municipal agencies external to public health.</p> <p>Findings show that the Promising Practices are a systematic taxonomy that can be used to guide organizations during the design, planning and implementation stages of an EP initiative and to evaluate their work. Use of the Promising Practices Tool also provides a structure and starting point for a more rigorous research agenda on the health equity benefits of equitable procurement (EP). While this evaluation and the Promising Practices in EP was designed for government agencies, these practices also can be applied in any grant making sector.</p>
2:30 PM - 2:45 PM	<p>Session: <a href="#">3282.0 - Understanding the Mental Health Status of Children and Adolescents in the United States and Examining Multilevel and School-Based Program Solutions</a></p> <p>Title: <a href="#">School-based CHW-supported tele-behavioral health programs expand access, reduce inequity, and are financially sustainable.</a></p>

	<p>Presenter/Author: MCD Global Health</p> <p>Session Format: Oral</p> <p>Abstract: Schools are challenged to address the mental health crisis among students. School-based, CHW-supported tele-behavioral health programs are essential to addressing inequity by improving access to behavioral health services for K-12 students. Beginning in 2022 a rural school district partnered with a federally qualified health center (FQHC) and an emerging certified community-based behavioral health center (CCBHC) to add school-based, community health workers (CHWs) and the use of telehealth to their existing in-person provider(s). Students and parents responded positively to receiving services via telehealth. Students who participated in behavioral health services had lower absenteeism, fewer disciplinary referrals, and were more likely to achieve their individual learning goals when compared to the school population as a whole. Tele-behavioral health utilization increased in Year 2.</p>
2:30 PM - 4:00 PM	<p>Session: <a href="#">APHA Key Sessions</a></p> <p>Title: <a href="#">3241.0 - Champion Conversation V: AJPH Session: Ensuring Inclusivity for The Quality of Scientific Publication</a></p> <p>Presenter/Author: University of Wisconsin Population Health Institute</p> <p>Session Format: Oral</p> <p>Abstract: The vitality of public health relies on evidence-backed policies and viewpoints. Scientific publications serve as the conduit for disseminating this evidence, making it accessible to policymakers and public health professionals alike. Over three years, a project has investigated potential biases in scientific publishing and strategies to mitigate them. Editorial processes mustn't hinder participation based on identity or subject matter. New guidelines will be introduced and deliberated upon by panelists from diverse backgrounds, including health professionals, academics and grassroots organizations.</p>
2:45 PM - 3:00 PM	<p>Session: <a href="#">FF04 - Building Trust: Stories of Health, Equity, and Community Leadership</a></p> <p>Title: <a href="#">Centering community voice: Stories of lived experiences</a></p> <p>Presenter/Author: Georgia Health Policy Center</p> <p>Session Format: Oral</p> <p>Abstract: Centering Community Voice is a movement to place the perspectives, opinions, and goals of community residents at the heart of community health system transformation with the goal of achieving</p>

	<p>equitable health outcomes for all. <i>Centering Community Voice: Stories of Lived Experiences</i> features the story of three communities and the lessons learned while working to transform community health with residents at the center of their efforts. This documentary introduces the importance of community voice and seeks to inspire community residents and community organizations to continue to press for changes in how community-wide efforts are identified, planned, and executed. This effort emerged from the learning and sense-making of 25 years of on-the-ground community health transformation efforts supported by the Georgia Health Policy Center.</p>
2:45 PM - 3:00 PM	<p>Session: <a href="#">3254.0 - Employing Community-Engaged, Place-Based Approaches to Addressing Health Inequities</a></p> <p>Title: <a href="#">Community-based systems dynamics as a tool to inform evaluation planning in a new place-based healthcare initiative</a></p> <p>Presenter/Author: Public Health Management Corporation (PHMC)</p> <p>Session Format: Oral</p> <p>Abstract: PHMC's Public Health Campus on Cedar (Cedar Campus) aims to co-locate medical, behavioral, and social services on a single campus in southwest Philadelphia to meet community social determinants of health and medical needs. Drexel's Urban Health Collaborative at the School of Public Health is partnering with PHMC's Research &amp; Evaluation group to develop a stakeholder-engaged evaluation of the Cedar Campus. This evaluation design draws from the small but growing field of evaluation of place-based initiatives. Place-based initiatives require evaluation approaches that account for their inherently complex, systems-oriented, multi-stakeholder nature. During the one-year evaluation planning, we incorporated group model building (GMB) to inform the evaluation development. GMB is a stakeholder-engaged systems thinking method that engages participants with diverse backgrounds. GMB has been shown to improve understanding of complex models and problems, promote systems thinking to create change, and develop consensus for action.</p>
3:00 PM - 3:15 PM	<p>Session: <a href="#">3254.0 - Employing Community-Engaged, Place-Based Approaches to Addressing Health Inequities</a></p> <p>Title: <a href="#">Using a community-engaged, place-based approach to evaluate an innovative public health campus</a></p> <p>Presenter/Author: Public Health Management Corporation (PHMC)</p> <p>Session Format: Oral</p> <p>Abstract: Philadelphia experienced the closure of seven community hospitals between 1990 and 2020, steadily reducing access to care and</p>



	<p>straining the remaining hospital systems. In 2020, an eighth major safety net provider announced that it, too, would close. Recognizing the potential harm of yet another shutdown in a neighborhood with the City's highest mortality rates and worst health outcomes, three of Philadelphia's major healthcare systems came together in an unprecedented effort to prevent the hospital's closure. This collaboration ensured the continuation of essential services for the most vulnerable residents of Southwest Philadelphia. The resulting public health campus now offers a comprehensive array of onsite health services, including emergency and primary care, dental, and mental /behavioral health.</p> <p>Historically, this community has been plagued with mistrust, given the loss of trust caused by the dissolution of the old hospital. Would the community, welcome this new resource? Could perceptions regarding the former hospital's reputation be changed? How would a multi-system healthcare center, providing streamlined care coordination and internal referrals contribute to improved health outcomes?</p> <p>Practitioners and evaluators in other cities can learn from Philadelphia's experience with challenges encountered and results achieved when convening disparate partners to safeguard health care access for their most vulnerable populations.</p>
3:00 PM - 3:15 PM	<p>Session: <a href="#">3285.0 - Population Oral Health Equity</a></p> <p>Title: <a href="#">Aligning systems to advance oral health equity: A community-driven approach to inform the delivery of integrated, person-centered oral health care</a></p> <p>Presenter/Author: Texas Health Institute</p> <p>Session Format: Oral</p> <p>Abstract: Oral health disparities have important implications for population health, yet capacity is limited for cross-sector and data systems alignment to advance, incentivize, and integrate oral health equity efforts. Texas Health Institute (THI) conducted a community-engaged, human-centered approach to deepen the understanding of oral health disparities in Texas. THI engaged eight community-based organizations as research partners to center community voices as the driving force of this statewide project and to contextualize oral health disparities by age, race and ethnicity, disability status, sexual orientation and gender identity, and geography. Themes from community-led, regional focus groups were further contextualized by key informants leading oral health efforts across the state, formal evidence, and publicly available data—highlighting where the community-informed research findings can be translated into priority areas of action. Drawing from the Aligning Systems framework (RWJF), the need for equitable public health data to evaluate disparities, and the importance of deliberative language to find shared purpose across sectors, the findings from this human-centered,</p>

	<p>community-engaged research aim to inform policy, practice, and system transformation in Texas and beyond. This large-scale assessment offers insight and guidance for public health practitioners, community leaders, and funders hoping to successfully align across sectors in a prescriptive manner to advance population oral health equity.</p>
<p>3:15 PM - 3:30 PM</p>	<p>Session: <a href="#">3285.0 - Population Oral Health Equity</a></p> <p>Title: <a href="#">Advancing oral health equity: A community-driven approach to understanding the role of trust in the delivery of person-centered oral health care</a></p> <p>Presenter/Author: Texas Health Institute</p> <p>Session Format: Oral</p> <p>Abstract: The oral health system is historically reactive, disease-focused, inaccessible, costly, and directly attributable to worsening health and oral health inequities. Texas Health Institute (THI) conducted a community-engaged, human-centered approach to deepen the understanding of oral health disparities in Texas. THI engaged eight community-based organizations as research partners to center community voices as the driving force of this state-wide project and to contextualize oral health disparities by age, race and ethnicity, disability status, sexual orientation and gender identity, and geography. Themes from community-led focus groups were further contextualized by key informants leading oral health efforts across the state, formal evidence, and publicly available data—highlighting where the community-informed research findings can be translated into priority areas of action. The role of trust in oral health equity emerged as a common theme across priority areas of 1) access to oral health care, 2) delivery, finance, and accountability of person-centered oral health care, and 3) integration of medical and dental care. This presentation aims to demonstrate how the absence or presence of trust influences oral health equity and the capacity of clinical, community, state, or systems to deliver timely, accessible, and affordable person-centered oral health care.</p>
<p>3:30 PM - 3:45 PM</p>	<p>Session: <a href="#">3280.0 - Promoting Health for Men of Color</a></p> <p>Title: <a href="#">Creating spaces to support the health of men of color</a></p> <p>Presenter/Author: Health Resources in Action (HRiA)</p> <p>Session Format: Oral</p> <p>Abstract: Men of color report that the spaces they access (doctor's offices, hospitals, community based health centers, behavioral health support services, etc.) to support their wellbeing do not welcome them, are not set up to support and work with them, and often misjudge and mistreat them. Also, the other spaces that they go (workplaces, education and training</p>



programs, and some third spaces) are not supportive of their health, and often, put their health at risk.

The Men of Color Health Equity Initiative is working to identify improvements to the spaces that men of color inhabit that would support their better health. These spaces include secondary spaces such work and school, third places such as social and recreational spaces, voluntary spaces including cultural spaces and interest-based spaces, and health and wellness spaces. We aim to improve the approaches and programming that support men of color to be healthy, with an additional focus on health maintenance in general, and help seeking/receiving in medical/clinical spaces, specifically.

Activities included updating, through secondary sources, the profile of the health of men of color in Massachusetts; a survey of men of color focused on their perceptions of health in the COVID and post-vaccination era; and community conversations about these topics.

We will review recommendations to make the environs and programs that serve men of color more supportive of their health. Where men seek help, where they live, work, play, pray, learn, and chill, should not be detrimental to their health, but rather facilitate their overall well-being.

Tuesday, October 29, 2024

8:30 AM – 8:45 AM

Session: [4056.0 - Enumerating Our Workforce: The Latest Efforts to Count and Describe Public Health Nurses and the Larger Public Health Workforce](#)

Title: [Using novel datasets to enumerate the public health nursing workforce: Data limitations and recommendations](#)

Presenter/Author: Northwest Center for Public Health Practice

Session Format: Oral

Abstract: Estimating the number of public health nurses (PHNs) is complex due to data limitations. We explored using national and state licensure data for evaluating the size of the PHN workforce.

Our findings highlight the importance of using uniform definitions when assessing the PHN workforce and the challenges in doing this with currently available data. Discrepancies between national and state licensure data in PHN proportions, along with errors in PHN counts when using setting only, pose concerns for potential misrepresentation of PHNs. Addressing these concerns is crucial for accurately shaping policies aimed at growing and sustaining the PHN workforce.

8:30 AM - 10:00 AM

Session: [4021.0 - Roundtable: Innovative Models of CHW Team](#)

	<p>Integration</p> <p>Title: <a href="#">Merging climate change and health equity in CHW education: A participatory approach</a></p> <p>Presenter/Author: Michigan Public Health Institute (MPHI)</p> <p>Session Format: Roundtable</p> <p>Abstract: Social inequity is a significant problem facing public health, with some groups facing higher health risks and lower access to and quality of health care, leading to poorer health outcomes. These inequities arise from economic, social, and environmental factors and have contributed to a legacy of distrust in the healthcare system among certain groups. Furthermore, it is widely accepted that climate change can increase health risks in the general population, as well as intensify existing social inequalities. By addressing social determinants of health (SDoH), CHWs contribute substantially to health equity in their communities and are well-placed for adapting their existing skills to address climate-related health disparities. This presentation will overview the <i>Climate Change and Health Equity</i> course for CHWs being developed by the Climate Change Impacts Project (CCIP) team at the Michigan Community Health Worker Alliance (MiCHWA). The course builds on CCIP's previous <i>Climate Change Impacts for CHWs</i> course (disseminated in 2022) by applying a health equity lens to the knowledge gained by CHWs in the previous course. This presentation will describe CCIP's priorities in the new training, such as recognizing groups most vulnerable to climate-related health impacts, understanding intersectional vulnerabilities, understanding distrust of health and mental health care systems, and suggesting ways CHWs can use their existing skills to address these health inequities within their roles. The presentation will highlight the role of practicing CHWs in the development of this course, such as in content creation and in-module CHW features. Finally, this presentation will suggest implementation strategies for co-created community climate change and health equity education for CHWs. One member of CCIP works part-time as a CHW, and is responsible for abstract drafting and presentation development, including for this submission.</p>
8:45 AM - 9:00 AM	<p>Session: <a href="#">4056.0 - Enumerating Our Workforce: The Latest Efforts to Count and Describe Public Health Nurses and the Larger Public Health Workforce</a></p> <p>Title: <a href="#">How many public health nurses (PHNs) work in government? –new ways of describing the governmental PHN workforce</a></p> <p>Presenter/Author: Northwest Center for Public Health Practice</p> <p>Session Format: Oral</p> <p>Abstract: We do not know enough about how many nurses work in</p>

	<p>governmental public health settings or what they do. Yet this is necessary for staffing recommendations to meet state and local needs. Our study sought to examine National Council of State Boards of Nursing (NCSBN) data to provide a novel national estimate and description of the size, characteristics, and functions of the governmental public health nursing (PHN) workforce. Findings indicate that 1.8% of the nation's nurses are working in governmental public health settings, based on our restricted definition. Major state variation exists in terms of the percent of PHNs working in public health and in what specialty and depending on the definition used. NCSBN data show governmental PHNs working predominately in public health, school health, community health, and maternal and child health specialties and their numbers vary based on our two definitions.</p>
9:00 AM - 9:15 AM	<p>Session: <a href="#">4001.0 - Extending Our Understanding of the Factors Driving Heavy and Hazardous Drinking</a></p> <p>Title: <a href="#">Risky relationships: Secondhand harms and consequences associated with college students' relationships with heavy drinkers</a></p> <p>Presenter/Author: Public Health Institute (PHI)</p> <p>Session Format: Oral</p> <p>Abstract: Excessive drinking is pervasive on college campuses. Yet, no studies have investigated whether college students' heavy drinking affect their peers' experiences of alcohol-related harms to others (AHTOs) and related consequences. People with and without heavy drinkers in their lives often differ systematically (e.g., by sex, race/ethnicity, or own drinking patterns), complicating such analyses. This study uses propensity score weighting to overcome this challenge while assessing the role of college students' relationships with heavy drinkers in harms and related consequences. Relationships with heavy drinkers are a risk factor for college AHTO and consequences, particularly service use. Evidence-based strategies that decrease heavy drinking on college campuses and engage parents in student selection of friends, partners, and roommates may reduce the negative impact of these relationships.</p>
9:00 AM - 9:15 AM	<p>Session: <a href="#">4017.0 - Chronic Disease and Community Health Research and Policy Implementation</a></p> <p>Title: <a href="#">Implementation of social needs screening and closed-loop referrals within a food is medicine program for diabetes</a></p> <p>Presenter/Author: Public Health Institute (PHI)</p> <p>Session Format: Oral</p> <p>Abstract: Lack of access to social determinants of health like food, education, social support, and transportation can negatively impact</p>

	<p>health and individuals' ability to manage diabetes and other chronic diseases. As part of a community-based food is medicine program for people with diabetes, social needs screening was conducted to make community referrals to partner organizations to address social determinants of health. Through the network of partners, clients had access to the Healthy Food Rx program, nutrition and diabetes education, diabetes support groups, health coaching, one-on-one meetings with pharmacists about medications, access to free blood glucose testing supplies, and non-emergency medical transportation.</p>
9:15 AM - 9:30 AM	<p>Session: <a href="#">4019.0 - Mixed Methods Approaches to Address Racial Health Inequity</a></p> <p>Title: <a href="#">Advancing health equity and dismantling structural racism using a community-led approach</a></p> <p>Presenter/Author: Public Health Institute (PHI)</p> <p>Session Format: Oral</p> <p>Abstract: The City of East Point, Georgia is a small, predominantly Black city with a documented history of structural racism. In 2019, East Point began a new journey focused on equity. Building on this momentum, a partnership was formed between the City, Morehouse School of Medicine, and several community partner organizations aimed at identifying and modifying policies related to social determinants of health. East Point residents advocated for health equity in the Comprehensive Plan through participation on the Steering Committee, presentations at City Council, and direct outreach to their City Council members. In 2023, East Point City Council approved its Comprehensive Plan update, which included health equity for the first time. The plan mentioned equity 48 times included an equity statement co-developed by East Point residents, and listed health equity as a community goal. Implementation of the plan will be led by the City's new Office of Equity, Inclusion, and Empowerment and will involve consideration of local ordinances to improve access to affordable housing and healthy food and to improve environmental justice.</p>
10:30 AM - 10:45 AM	<p>Session: <a href="#">4113.0 - No Trust without Sustainability: Leveraging and Linking Long-Term Funding Opportunities to Maintain Equitable Community Health Outcomes</a></p> <p>Title: <a href="#">Advancing trusted government CBO partnerships for the public's health through public health infrastructure funds</a></p> <p>Presenter/Author: Public Health Institute (PHI)</p> <p>Session Format: Oral</p> <p>Abstract: Public Health Infrastructure Grant (PHIG) is an</p>

innovative national reinvestment in the nation's public health infrastructure. Health departments have the funding and supports from national technical assistance providers, to build capacity to better engage with the communities they serve and advance community health. As a part of the national TA model, a network of regional innovation hubs led by public health institutes, are providing needed supports in a localized model that integrates learning community development with training and technical assistance supports.

The PHI Center for Health Leadership and Impact (CHLI) is the region 9 innovation hub lead. CHLI is a public health “do tank”, a trusted partner to governments, non-profits, and social change organizations committed to health equity and multi-sector partnerships. CHLI improves health outcomes at scale with dynamic tools, deep expertise, and cross-sector collaboration. As a program of the Public Health Institute, a goal of the PHIG hub is to figure out best practice models to ensure access to the immense resources of most benefit to our governmental public health partners. Scaling opportunity through proactive planning is meant to ensure efficient use of public funds. Initial survey efforts resulted in 250+ training and TA opportunities available to grantees from PHI programs. Those already packaged events, toolkits and materials were packaged into an accessible resource guide for our partner PHD's. Others were noted as available based on requests for either limited opportunity supports paid through the hub or more substantive available for purchase using department PHIG funds. The virtual Leap into TA event showcased opportunities from an initial three PHI partner orgs that offered the most highly ranked needed areas of TA for grantees. Of the three selected, two resulted in follow up TA requests the same week of the event, demonstrating strong alignment with the needs of grantee PHD's.

This session will explore the CHLI hub TA approach of showcasing PHI resources and scaling opportunity for PHD's through a proactive training and TA model.

10:30 AM - 10:45 AM

Session: [4133.0 - Firearm Violence Data, Research, and Practice Special Oral Session](#)

Title: [Gun violence research grantmaking focus and priorities: A landscape analysis of federal and philanthropic gun violence research grantmaking](#)

Presenter/Author: Health Resources in Action (HRiA)

Session Format: Oral

Abstract: Black and Brown communities are disproportionately affected by gun violence. Firearm violence is the leading cause of death for young Black men and the second for Latinos. The firearm homicide rate for Black men was 16x higher, and for Native American/Alaskan Native men was 4x higher, than the rate for White men. Native American/Alaska Natives also have the highest suicide rate of any

	<p>racial/ethnic group. This study aimed to understand how current research funding is allocated to address the different types of gun violence, which populations are being prioritized in the funding, and whether funding awards align with current burden. Despite recent increases in gun violence research funding, opportunities exist to refocus research funding on the most impacted populations and increase equity and inclusion amidst this public health crisis. Though gun violence research funding favors a community-based violence focus, it does not currently seem to prioritize the involvement of those same communities in the implementation of research initiatives. There is a need to refocus gun violence research on the populations most affected by gun violence while ensuring these communities are the drivers of approaches and solutions.</p>
10:30 AM - 11:30 AM	<p>Session: <a href="#">4082.0 - Understanding Telehealth and Its Advancements Today</a></p> <p>Title: <a href="#">Building a learning community between mental and behavioral health experts and primary care physicians through telementoring in rural Puerto Rico.</a></p> <p>Presenter/Author: Puerto Rico Public Health Trust</p> <p>Session Format: Poster</p> <p>Abstract: In Puerto Rico (PR), by 2023, there was a rate of 5.64 patients admitted for mental health (MH) conditions, leading to a significant burden on primary care providers (PCP) and highlighting the pressing need for enhanced MH care services. Recognizing this need, and according to a needs assessment conducted among PCP in rural PR, the Puerto Rico Public Health Trust (PRPHT) initiated a transformative program aimed at empowering PCP in rural areas through virtual learning communities utilizing the ECHO Model. The ECHO series offered was titled "Mental Health: The Use of Telemedicine and Tele mentoring to Improve Access and Quality of Services in Rural Areas of PR for Health Professionals". Recruitment efforts targeted professionals across 287 spoke sites, encompassing physicians, MH professionals, nurses, administrative staff, and other health professionals, and attracting 189 participants. Fifteen sessions were conducted, focusing on key topics such as stress management, suicide prevention, and the utilization of telehealth in diverse populations, and a 100% of the participants expressed satisfaction with the program and its relevance to their clinical practice. Pre/posttest assessments were administered to measure knowledge enhancement, revealing a significant increase of 72% in knowledge. The success of this initiative highlights the potential of collaborative approaches to address MH challenges in underserved communities. Ongoing evaluation and assessment will be crucial in measuring the long-term impact of the program on behavioral changes and patient outcomes. The resources shared during the series, housed in a digital library provided by PRPHT, will continue to serve as valuable tools</p>

	for advancing MH care in PR.
10:45 AM - 11:00 AM	<p>Session: <a href="#">4113.0 - No Trust without Sustainability: Leveraging and Linking Long-Term Funding Opportunities to Maintain Equitable Community Health Outcomes</a></p> <p>Title: <a href="#">Reinvigorating public health services in communities via a coordinated public health infrastructure investment and approach</a></p> <p>Presenter/Author: Public Health Management Corporation (PHMC)</p> <p>Session Format: Oral</p> <p>Abstract: The COVID-19 pandemic elucidated the degree to which the United States falls short of providing essential public health services. Through the Public Health Infrastructure Grant (PHIG), a historic \$4.35 billion was dedicated to strengthening the nation’s public health infrastructure. As a technical assistance “hub” in PHIG, the Public Health Management Corporation (PHMC) has seen the immense benefit of this long-term, flexible funding. Through this work, PHMC has:</p> <ul style="list-style-type: none"> <li>• Coordinated the 6 public health institutes and 2 public health training centers in our region to meet monthly to discuss our work, collaborate across technical assistance requests, and share ideas on how to best support capacity building in health departments within our 10 state and territory region to make meaningful impact in their communities.</li> <li>• Developed a webinar and training series, Public Health Essentials for Health Departments, to address the gap of training for new hires in health department settings that: 1) creates space for health departments to hear cutting edge public health information; 2) equips health departments with on-going training tools; and 3) centers health department voice nationwide, both through sharing expertise in the sessions and by providing feedback that drives the webinar design. There has been an average of 175 individuals attending the webinars representing 47 states, 1 district, and 1 territory. Examples of webinar topics include: public health frameworks, accreditation, cultural humility and community engagement, health equity, and social isolation and loneliness.</li> <li>• Hosted an in-person convening to bring together health departments, public health institutes, and training centers across our region. Thirty-six representatives attended and participated in a strategic planning activity which denoted the following topics as regional priorities: health department structure/culture, hiring/recruitment, and sustained funding. A post-convening survey showed 87% satisfaction regarding the strategic planning activity across respondents.</li> </ul>



	<p>The PHIG network is facilitating the much-needed change to offer essential public health services, spurring the development of critical partnership building from the community level to the network of national technical assistance providers. We recommend this scope of continued collaboration across public health organizations to best address the gaps in public health infrastructure with a coordinated, community-informed approach.</p>
10:45 AM - 11:00 AM	<p>Session: <a href="#">4133.0 - Firearm Violence Data, Research, and Practice Special Oral Session</a></p> <p>Title: <a href="#">Towards equitable gun violence research funding: Findings from a survey of gun violence researchers</a></p> <p>Presenter/Author: Health Resources in Action (HRiA)</p> <p>Session Format: Oral</p> <p>Abstract: In 2022, gun violence-related injuries claimed more lives than motor vehicle accidents in the U.S. The burden of gun violence disproportionately falls on Black, Latinx, and American Indian/Alaska Native (AI/AN) communities. In 2020, the firearm homicide rate of Black youth (58.1/100,000) was 10 times that of White youth (5.5/100,000). That year, AI/AN youth had the highest firearm suicide rate (11.3/100,000) of any other racial/ethnic group.</p> <p>Research is essential to identify and scale up effective solutions to gun violence. Further, community-led research is critical to ensure that these solutions are effective and acceptable and that they align with the needs and values of the most affected groups. Gun violence research has been historically underfunded compared to its societal burden. This situation began to improve in recent years with growing philanthropic investment and the thawing of federal gun violence research funding. To inform planning efforts for the Kaiser Permanente Center for Gun Violence Research and Education, in 2023, we conducted a study to understand the characteristics of those leading research in this field.</p> <p>Gun violence research grant recipients are not representative of the populations most burdened by gun violence. Almost a third (31.4%) of gun deaths in 2022 occurred among Black people and 11.8% among Latinx; however, researchers from these races/ethnicities received 10.5% of grants. Further, even though AI/AN communities are highly impacted by firearm suicide, no researchers identified with this race/ethnic category.</p> <p>Gun violence research funding is crucial to find and amplify urgently needed strategies and interventions that work to reduce gun violence. However, all phases of this research -from defining the research questions to determining which data to gather and the measures of success- must meaningfully involve the people with lived experience in</p>



	<p>gun violence. Gun violence research must be grounded in local knowledge and values and be centered on the voices and perspectives of those most affected by violence.</p> <p>Renewed investments are an opportunity to examine grantmaking priorities and processes. Making gun violence research funding more equitable could entail establishing guidelines for equitable community-academic partnerships, developing funding criteria that prioritize researchers from communities with the highest gun violence burden, and providing material and technical support to Black and Brown researchers.</p>
11:00 AM - 11:15 AM	<p>Session: <a href="#">4133.0 - Firearm Violence Data, Research, and Practice Special Oral Session</a></p> <p>Title: <a href="#">The fundamental role of data in community violence prevention and intervention practice</a></p> <p>Presenter/Author: Health Resources in Action (HRiA)</p> <p>Session Format: Oral</p> <p>Abstract: Community gun violence is a health crisis concentrated in communities most impacted by racism and structural violence, which includes systemic denial of access to economic, educational, and employment opportunities. The lack of opportunity resulting from this disinvestment constrains choices and perpetuates the cycle of violence. Many communities have declared gun violence as a public health issue and an “epidemic.” However, health departments often fail to diagnose and investigate this health issue harming our most vulnerable communities.</p> <p>Far too many communities lack the proper assessment and surveillance to understand their community gun violence problems. Many are doing little to address gun violence because they lack understanding of the scope of the problem and the need for evidence-based interventions, while some who are engaged in community violence prevention and intervention (CVI) strategies struggle to do effective work because they lack the data to target the individuals most at risk. Without a clear understanding of the contours of the problem and those most impacted by it, public health violence prevention will lag behind the criminal justice system in addressing violence. Health departments should lead the way in providing foundational and continuing data to policy makers, interventionists, and community members that accurately describe the problem, capture progress on solutions, and inform improvements.</p> <p>But what data should health departments be collecting and analyzing? Health departments must understand the core metrics for community gun violence and strengthen their cross-sector partnerships to access data from diverse sources. Understanding community gun violence requires examining data such as fatal and non-fatal shootings, aggravated</p>

	<p>assaults, and gun crimes, understanding who is impacted and exposing others to violence, and using data to improve existing interventions. To effectively combat gun violence, leaders must build surveillance systems to adequately reflect the lived experience of gun violence in the communities most afflicted by it, as to improve direct intervention and prevention strategies. Examples of this are the ability to detect influxes of the co-occurring issues, such as aggravated assaults and gun crimes, and fluctuations in the data at the local level beyond available monthly or yearly law enforcement tallies.</p> <p>Health Resources in Action is a Boston-based public health consultancy collaborating with communities nationally (including Baton Rouge, Atlanta, Milwaukee, Boston, and Baltimore) to support effective CVI initiatives. This interactive session will examine what data is necessary to understand the problem, posit a set of evidence-informed frameworks for examining the data, and explore the additional sources of data health departments can use to inform and direct interventions and engage community members and multi-sector actors. Through examples from national work at the city and county level, the authors will share lessons learned from misuse or lack of data, common challenges to data access, and data-related successes from violence intervention practice in multiple states at the city and county level. The authors will share insights and recommendations that health departments may consider when developing their data collection plans; and will describe innovative uses of existing data that community-based organizations use to strengthen their CVI work.</p>
10:30 AM - 11:30 AM	<p>Session: <a href="#">4077.0 - Health Administration Section Poster Presentations Group 3</a></p> <p>Title: <a href="#">Stepped governance in cross-sector community initiatives: Drawing on practitioner experiences to create a framework for building and maintaining trust as decision-making roles shift</a></p> <p>Presenter/Author: Georgia Health Policy Center</p> <p>Session Format: Poster</p> <p>Abstract: The importance of social factors for shaping health care and health outcomes is now widely recognized, as is the need to take cues from community leaders with intimate knowledge of community health and social needs. While research in the field has acknowledged a multi-step process of decision making about priorities, no studies have directly explored the process of stepped governance, wherein decision-making power intentionally shifts within cross-sector health initiatives from central institutional locations, through diffuse organizational collaboratives, and finally on to community leaders and members of the community in focus. As a consequence, collaboratives are often blindsided by challenges emerging from shifting decision-maker roles, making it difficult</p>

	<p>to maintain trusting relationships across a given initiative. To help solve this problem, this presentation draws on qualitative data from a program evaluation of an emerging cross-sector health initiative to explore how collaborative members at different levels (e.g.: institutional decision makers, catalyst change makers, and community advocates) negotiate increasing interdependence as additional decision-makers join the work and offer a framework for making sense of stepped governance in complex community-oriented health collaboratives.</p>
11:15 AM - 11:30 AM	<p>Session: <a href="#">4113.0 - No Trust without Sustainability: Leveraging and Linking Long-Term Funding Opportunities to Maintain Equitable Community Health Outcomes</a></p> <p>Title: From ARPA to PHIG: Leveraging strategies from public health infrastructure funds to support meaningful community engagement</p> <p>Presenter/Author: Health Resources in Action (HRiA)</p> <p>Session Format: Oral</p> <p>Abstract: Historic investments in public health infrastructure and sustainability have been made through the America Rescue Plan Act (ARPA), National Initiative to Address COVID-19 Health Disparities (OT21-2103) and the Public Health Infrastructure Grant (PHIG). While state and local public health agencies expect PHIG funding for an additional four years, ARPA and OT21-2103 funds are ending. PHIG recipients and partners can leverage and learn from aligned ARPA and OT21-2103 activities, especially those focused on challenging, critiquing, and disrupting internal policies, practices, and systems at health departments. By incorporating lessons from ARPA and OT21-2103 and improving their internal systems, PHIG recipients can position themselves to learn from successes and address continued constraints as they work to be trusted partners with communities and community-based organizations (CBOs).</p> <p>Health Resources in Action (HRiA) has been engaged in all three initiatives, both in Massachusetts and nationally, allowing for an overarching perspective of the various leverage points across all three. For example, in HRiA's capacity as a technical assistance provider for PHIG, we are engaged with the Connecticut Department of Public Health (CT DPH) and their efforts to meaningfully engage CBOs in the development and launch of an associates of public health degree program. Through our work with ARPA and OT21-2103, HRiA developed the <i>POWER Playbook: Equitable Community Engagement Practices for Equitable Outcomes</i> and the <i>Foundations of Community Engagement</i>, resources that provide strategies, real-work examples, and practical tools for governmental institutions to build trust through effective community engagement. As an example, through our work with CT DPH, HRiA can intentionally leverage these learnings to further the efforts of PHIG and support CT DPH In being a trusted partner with the CBOs they hope to</p>

	<p>engage.</p> <p>In this session, HRiA will examine the critical role of CBOs in the public health ecosystem, provide case studies of public health agencies partnering with CBOs, and share resources and lessons learned that highlight tactical strategies for increasing community power and meaningfully engaging community to strengthen the public health infrastructure. This session is for public health practitioners and community groups who work with or interact with public health agencies.</p>
11:30 AM - 11:45 AM	<p>Session: <a href="#">4113.0 - No Trust without Sustainability: Leveraging and Linking Long-Term Funding Opportunities to Maintain Equitable Community Health Outcomes</a></p> <p>Title: <a href="#">Advancing relationships and community health through public health infrastructure funds</a></p> <p>Presenter/Author: Louisiana Public Health Institute (LPHI)</p> <p>Session Format: Oral</p> <p>Abstract: Evolving from the National Initiative to Address COVID-19 Health Disparities (OT21-2013), the Public Health Infrastructure Grant (PHIG) is an innovative approach to reinvesting in the nation's public health infrastructure, affording health department recipients the flexibility to reflect, define, and realize their own plans for reinvestment and growth. Through dedicated funding, time and support from national technical assistance providers including public health institutes, health departments are building capacity to better engage with the communities they serve and advance community health.</p> <p>The Louisiana Public Health Institute (LPHI) has been engaged in OT21-2013 and PHIG as a TTA provider working regionally and nationally. LPHI aims to assist recipients in building their capacity to empower communities expanding upon community health work.</p> <p>LPHI, in its capacity as a TTA provider for PHIG, facilitated a strategic planning session with the Louisiana Department of Health, Office of Public Health, Bureau of Planning and Performance team. This team conducts the state's community health needs assessment and implementation plan. Creating an intentional space for the team tasked with engaging community in assessment of needs and implementation of programs to improve health outcomes is critical to ensure impactful work for their community. Equitable Data Practices was offered as a proactive TA webinar to explore how data practices can positively and negatively impact a community's trust and health outcomes. PHIG recipients learned tools in centering equity in the data life cycle. Lastly, LPHI is providing TTA to Harris County Public Health (HCPH) to support the launch of a capacity-strengthening program for local community-based organizations. This is a noteworthy program showcasing HCPH's direct investment back into the</p>

	<p>community to not only build trust but also create a system to uplift local CBOs leadership and long-term capacity to improve health outcomes. LPHI has extensive experience in facilitating Communities of Practice and is supporting HCPH in deploying best practices for a successful program to ensure lasting impact for the CBOs participating.</p> <p>In this session, LPHI will showcase the unique opportunities created through OT21-2103 and PHIG uplifting health department recipients to invest time, money, and staff capacity to intentional community engagement efforts.</p>
2:30 PM - 3:30 PM	<p>Session: <a href="#">4194.0 - CHW Section Poster Session 3</a></p> <p>Title: <a href="#">Addressing smoking: Community health worker initiative in Puerto Rico</a></p> <p>Presenter/Author: Puerto Rico Public Health Trust</p> <p>Session Format: Poster</p> <p>Abstract: Smoking represents a chronic, addictive, and recurring health concern. In Puerto Rico, a demographic analysis reveals that the typical smoker is male, aged between 35-44, earning less than \$15,000 annually, possessing a high school education or less, divorced, unemployed, and lacking medical insurance, with a prevalence rate of 12.6%. Recognizing smoking as the leading preventable cause of death globally, Community Health Workers (CHW) have directed efforts towards addressing this pressing issue.</p> <p>A CHW led initiative was devised to deliver educational workshops in schools and hospitals across the central region of the archipelago. The primary aim is to raise awareness regarding the adverse effects of tobacco use on both active and passive smokers, acquaint individuals with legislation in Puerto Rico, and promote the Smoking Cessation hotline operated by the Puerto Rico Department of Health. Additionally, the initiative seeks to prevent tobacco and vaping usage.</p> <p>To date, A total of 16 workshops have been facilitated in community settings, by the same CHW who conceived the initiative, involving approximately 214 individuals collectively. Feedback from participants suggests that these educational sessions have successfully enhanced awareness regarding available services, as well as the risks and harms associated with smoking and exposure to second and third-hand smoke. Furthermore, the workshop was presented by the CHW that developed it to other CHWs and public health workers, enabling them to replicate this intervention in their future work. A total of 219 individuals received this training.</p> <p>Through the trust of the community and the dedicated efforts of CHWs, significant strides have been made in educating individuals about</p>

	<p>smoking-related issues. By promoting access to available resources and advocating for prevention strategies, efforts are underway to reduce and prevent the impact of this treatable disease within the community.</p>
2:30 PM - 3:30 PM	<p>Session: <a href="#">4194.3 - Genomics Forum Poster Session 2</a></p> <p>Title: <a href="#">Pediatric provider attitudes regarding the diagnosis and management of familial hypercholesterolemia (FH)</a></p> <p>Presenter/Author: Michigan Public Health Institute (MPHI)</p> <p>Session Format: Poster</p> <p>Abstract: Familial hypercholesterolemia (FH) is a common autosomal dominant inherited disorder which greatly increases a person's risk for cardiovascular disease and premature mortality. Current guidelines from the National Heart Lung and Blood Institute (NHLBI) recommend universal pediatric screening for FH, however actual screening rates are only about 20%. This project seeks to elucidate potential barriers to screening in the context of pediatric provider perceptions of FH.</p> <p>Provider attitudes were assessed in the context of a Continuing Education and Quality Improvement (CEQI) project entitled "Addressing Familial Hypercholesterolemia" which was offered at no cost to participants. Participants completed Pre- and Post-Knowledge Assessments containing Likert scale, multiple-choice, and open-ended qualitative questions on their perceptions of FH, the efficacy and feasibility of universal lipid screening, and planned changes to their clinical practice based on the knowledge gained. Data were analyzed using Wilcoxon-Signed Rank testing and percent change calculations.</p> <p>Results showed that prior to the educational program, providers had poor knowledge and confidence regarding FH diagnosis and management. Upon completion of the training, all participants reported increased knowledge and confidence about FH screening and management, (39.7%-52.9%). Furthermore, chart audit data showed 73.0% of the participants' patients seen after participation had lipid panels ordered to screen for FH. These preliminary findings demonstrate that increasing knowledge and awareness of FH may ameliorate underdiagnosis of FH and poor adherence to screening guidelines.</p>
2:45 PM - 3:00 PM	<p>Session: <a href="#">4222.0 - Good for Community, Good for Members, Good for the Public Health Workforce: Lessons Learned from Evaluating Public Health AmeriCorps</a></p> <p>Title: <a href="#">How the Trailhead Institute is using evaluation to improve their public health AmeriCorps program</a></p> <p>Presenter/Author: Trailhead Institute</p>



	<p>Session Format: Oral</p> <p>Abstract: Trailhead institute located in Denver, Colorado, has a robust Public Health AmeriCorps program: Colorado Public Health Works. Colorado Public Health Works is an apprenticeship program that allows members to gain experience in public health roles and pursue their Community Health Worker (CHW) certifications. This session will share successes, challenges and findings from this program.</p>
4:45 PM - 5:00 PM	<p>Session: <a href="#">4275.0 - Academic-Practice Linkages That Support the Recruitment, Retention, and Training Needs of the Public Health Workforce: Part 2</a></p> <p>Title: <a href="#">Investing in the future to rebuild trust in public health: Revitalizing the workforce through academic and practice linkages</a></p> <p>Presenter/Author: Public Health Institute (PHI)</p> <p>Session Format: Oral</p> <p>Abstract: Young professionals face significant barriers in launching careers in public health. Complex hiring processes and extensive education and work requirements for entry-level positions have resulted in a lack of trust in the viability of public health career paths, contributing to the ongoing workforce shortage. In 2017, 47% of public health workers intended to leave the workforce or retire within 5 years, and the “great resignation” accelerated the loss of leadership. Currently, a significant gap exists between the need for qualified health department personnel and the early career individuals seeking these opportunities. Innovative programs are needed to reinvigorate the workforce and create clear pathways for early career professionals.</p> <p>In 2022, PHI Center for Health Leadership &amp; Impact launched the Workforce Pathways for the Public’s Health (WPPH) initiative to help revitalize the workforce and provide clearer pathways for emerging public health professionals. The initiative includes a Public Health Residency Program and the second largest AmeriCorps VISTA program in the western region. These programs partner with academic institutions and health departments to transform the public health workforce through recruitment and direct placement to fill critical needs and build a more diverse workforce. Program participants receive career and academic support, technical training, and mentorship from experienced public health leaders.</p> <p>Early career professionals have expressed high demand for these pathways programs, with a total of 2,036 applicants and 185 placements at health departments and local organizations across the Western Region. One-quarter of program alumni have gone on to pursue academic opportunities in public health and 17% were hired by their host site.</p>

	<p>Overall, 96% reported that their experience improved their understanding of public health practice. These outcomes demonstrate that strong workforce pipeline programs are effective in attracting early-stage professionals towards careers in public health.</p> <p>During this session, presenters will highlight these two innovative programs that are broadening the trust, visibility, and sustainability of public health careers for younger generations. Attendees will be able to list the core components of a workforce pathways program, describe how partnerships between academic institutions and health departments create pathways for employment, and identify resources for developing new workforce pathways programs.</p>
5:00 PM - 5:15 PM	<p>Session: <a href="#">4275.0 - Academic-Practice Linkages That Support the Recruitment, Retention, and Training Needs of the Public Health Workforce: Part 2</a></p> <p>Title: <a href="#">Public health training centers: An essential partner to strengthen public health infrastructure &amp; workforce development</a></p> <p>Presenter/Author: Northwest Center for Public Health Practice</p> <p>Session Format: Oral</p> <p>Abstract: According to the 2021 PHWINS data, only 14% of the public health (PH) workforce has formal PH training. Additional findings show that 32% of the workforce intend to leave their positions for retirement or a reason other than retirement. These data illustrate the need for training the PH workforce. Furthermore, PH students have many choices once they graduate, and it is important that they see local health departments as a viable employment option post-graduation. In a time when the US Congress and CDC have invested in PH infrastructure, the national Public Health Training Center Network (PHTCN) is an essential partner in workforce development.</p> <p>Established in 1999 by HRSA, today the PHTCN is comprised of ten regional PHTCs – all housed at CEPH-accredited Schools of Public Health – that serve all U.S. states and territories through a regional model that aligns with the Department of HHS regions. In addition to providing training for the current PH workforce and consultation/technical assistance for health departments, PHTCs also provides experiential learning opportunities for public health students, which allows the students to practice the skills and content learned in the classroom in applied settings.</p> <p>Trainings provided by the regional PHTCs focus on a myriad of topics and skills including the nine strategic skills most recently defined by the de Beaumont Foundation. Trainings are designed to meet local, state and regional needs. Training centers also use a continuum of training modalities that include podcasts and webinars at one end of the</p>



	<p>continuum and cohort-based training opportunities (e.g., ECHO, leadership institutes) at the other end. Field placement opportunities provided by the regional PHTCs are an important part of preparing PH students to take on the challenges of PH practice once they graduate. For many, they also demonstrate the value of working in governmental PH.</p> <p>The PHTCs are an ideal – and essential – partner for those jurisdictions that were funded through the Public Health Infrastructure Grant (PHIG); as well as other communities that did not receive PHIG funding. Local, State, territorial and tribal health departments and other PH agencies are encouraged to connect to their regional PHTC.</p>
5:15 PM - 5:30 PM	<p>Session: <a href="#">4317.0 - Fostering Trust: Community Engagement and Latino Health Disparities</a></p> <p>Title: <a href="#">Addressing the social determinants of health in the clinical setting using the echo learning modality</a></p> <p>Presenter/Author: Puerto Rico Public Health Trust</p> <p>Session Format: Oral</p> <p>Abstract: The Social Determinants of Health (SDoH) are defined as the circumstances in which humans are born, live, work and age. To address the SDoH in clinical settings, we designed an educational series following the Project ECHO – Extension for Community Health Outcomes - learning strategies. The ECHO strategies include creating a virtual learning community where everyone teaches, and everyone learns. 996 individuals registered for the educational series, with 450 unique participants. Results showed significant knowledge increases in sessions related to the implications of transportation on health (68.5%) and the relevance of SDoH in treatment continuity (53.3%). Despite some sessions showing reduced knowledge change, 96% or more participants reported increased knowledge in all sessions. Participants showed great interest in learning about the SDoH and the resources provided with post project surveys reflecting 94% satisfaction with the content. On average, 132 participants attended each session, eager to develop collaborations with community-based organizations to enhance their services, demonstrating the importance of providing this space for connection and collaborative learning.</p>
<p>Wednesday, October 30, 2024</p>	
8:30 AM - 10:00 AM	<p>Session: <a href="#">5000.0 - Communication, Aging, and Technology</a></p> <p>Title: <a href="#">Bridging the digital gap: An innovative solution for digital inclusion in aging communities</a></p> <p>Presenter/Author: Puerto Rico Public Health Trust</p>

	<p>Session Format: Roundtable</p> <p>Abstract: In Puerto Rico, the rapid expansion of internet services has exacerbated the digital gap, particularly among older adults. It is estimated that by 2035, 35% of the population will be over 60 years old, underscoring the urgency to address this issue. To bridge the gap, a digital literacy project for seniors was initiated, resulting in the creation of user-friendly cellphone manuals. These manuals were developed based on data from the project's literacy pre-tests and underwent thorough review by gerontologists, community health workers and older adults. The evaluation of the manuals was based on content relevance, appropriate language, reading comprehension, and readability. They cover essential topics such as operating systems, phone features, basic apps, and online security. The 36-page manuals, tailored for Android and Apple iOS, have been distributed both in print to project participants and digitally for wider access. The manuals have facilitated digital literacy interventions for older adults with varying levels of technological proficiency by providing clear visual guidance and step-by-step instructions. While initially implemented in Naguabo, Puerto Rico, the project aims to expand to six additional municipalities. These manuals serve as invaluable educational tools, reflecting a commitment to digital inclusion and the well-being of older adults. In an increasingly digital world, ensuring inclusivity is paramount, and this project represents a significant step in that direction.</p>
10:30 AM - 10:45 AM	<p>Session: <a href="#">5095.0 - Innovative Practice or Research: School Health Service Delivery</a></p> <p>Title: <a href="#">School-based, CHW-supported, tele-behavioral health services address equity and improve access to care in rural Maine: Lessons learned and key strategies for success.</a></p> <p>Presenter/Author: MCD Global Health</p> <p>Session Format: Oral</p> <p>Abstract: Schools are challenged to address the mental health crisis among students and have limited access to behavioral health providers available to work with children and youth. This session will describe a rural school district that partnered with a federally qualified health center and a community-based non-profit behavioral health agency to add a school-based, community health worker (CHW) and the use of telehealth. In the first year of the program, 18% of the entire student body participated in behavioral health services in-person or via telehealth. Students who participated in behavioral health services had lower absenteeism, fewer disciplinary referrals, and were more likely to achieve their individual learning goals when compared to the school population as</p>

	<p>a whole. Participation increased in year two. Results varied by school. The variation appears to be associated with the skills and background the CHWs brought to their positions.</p>
12:30 PM - 2:00 PM	<p>Session: <a href="#">5126.2 - Latinx Health Matters: Promoting Health in Our Communities</a></p> <p>Title: <a href="#">Advancing health equity: The impact of community health workers in Puerto Rico's vulnerable communities</a></p> <p>Presenter/Author: Puerto Rico Public Health Trust</p> <p>Session Format: Roundtable</p> <p>Abstract: Puerto Rico, an impoverished archipelago with significant health challenges, faces gaps in healthcare access due to low literacy. Vulnerable populations struggle to navigate the complexities of healthcare, leading to disparities in health outcomes. Community Health Workers (CHWs) play a crucial role in addressing these gaps. This project aimed to leverage CHWs to improve health outcomes in underserved communities by facilitating clinical and social referrals. Forty-two CHWs were recruited, trained, and deployed across 29 municipalities, operating in community and clinical settings. To enhance the sustainability and effectiveness of CHWs, the Puerto Rico Public Health Trust established the first CHW Coalition. From 2022 to 2024, the CHWs made 2,372 social and clinical referrals, facilitating access to essential services for underserved populations. This effort resulted in the orientation of more than 5,000 people for the recertification of Medicaid, ensuring that communities maintain access to healthcare coverage. Advocacy efforts of the coalition resulted in a proclamation by the Puerto Rico Senate to recognize them as an integral part of our health system and the development and approval of Bill PS 1303, which officially defines the role of the CHW and designates the last week of August as CHW Awareness Week. CHWs are vital to addressing the health challenges faced by the population. The deployment of 42 CHWs resulted in an increased access to health and social services for vulnerable populations. CHWs role in providing public health services, demonstrates the need for sustained support and formal recognition of CHWs within the healthcare system.</p>
12:45 PM - 1:00 PM	<p>Session: <a href="#">5100.0 - A Focus on Tobacco Cessation</a></p> <p>Title: <a href="#">The Pennsylvania free quitline: Trends and outcomes of young adult callers who use e-cigarettes</a></p> <p>Presenter/Author: Public Health Management Corporation (PHMC)</p> <p>Session Format: Oral</p> <p>Abstract: According to the 2022 Behavioral Risk Factor Surveillance</p>

	<p>System, 18% of 18- to 29-year-olds in Pennsylvania report using e-cigarettes or other electronic vaping products some days or every day. To support all individuals who use tobacco, the Pennsylvania Department of Health, Division of Tobacco Prevention and Control administers the Pennsylvania Free Quitline (Quitline). This service provides free telephone counseling and nicotine replacement therapy (NRT) to medically eligible adults.</p>
1:15 PM – 1:30 PM	<p>Session: <a href="#">5102.0 - Focusing on Our Youth: Approaches to Indigenous Health</a></p> <p>Title: <a href="#">Canoe journeys: Climate change, culture and healing for native youth in the Pacific Northwest</a></p> <p>Presenter/Author: Seven Directions</p> <p>Session Format: Oral</p> <p>Abstract: Seven Directions, an Indigenous Public Health Institute at the University of Washington, partnered with two Native-led non-profit organizations in the Pacific Northwest for the 2023 Canoe Journey pilot research project. Researchers collaborated with community partners to conduct interviews, focus groups, and collected additional data through surveys. Further, community partners were involved in the entire process of research implementation, data analysis and interpretation to ensure Indigenous Data Sovereignty. Partners were able to provide contextual insight from their lived experiences and knowledge from being part of and working with the Indigenous youth from their communities. This mixed-methods pilot explored Indigenous youth perceptions of Canoe Journey and relationships between mental health and wellness, climate change, cultural and community connectedness, and resiliency. Initial findings include ways Canoe Journey participation increased youth connection to culture, environment, peer and community support, and the promotion of health and wellbeing. Additionally, youth shared the impact of Canoe Journey on mental health and their interest in having support with connection to resources. This research project prioritized building trust and establishing a strong relationship with community partners to ensure the research aligned with tribal community priorities. This study exemplifies the focus on rebuilding trust in public health and science by offering concrete examples of how a community based participatory approach can strengthen community connections, ensure community voice in research, and support community capacity building.</p>