

2025 APHA ANNUAL MEETING & EXPO:

NNPHI and Network Member Institute Sessions



Join the National Network of Public Health Institutes (NNPHI) and its Member Institutes at this year's APHA Annual Meeting and Expo in Washington, D.C.!

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) 2025 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 2025 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.

All times listed are in Eastern Time.

Please visit us and our partners in the exhibit hall! You can find us at the following booths:

- NNPHI: Booth 1510
- Georgia Health Policy Center: Booth 1407
- Health Resources in Action (HRiA): Booth 613
- National Association of County & City Health Officials (NACCHO): Booth 1525
- Public Health Accreditation Board (PHAB): Booth 1648
- Trust for America's Health (TFAH): Booth 1551

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NNPHI & Member Institute Facilitated Sessions and Events:

| Sunday, November 2, 2025 | | |
|--------------------------|--|--|
| 1:00 PM - 2:00 PM | Program: Environment | |
| | Session: 2022.0 - Poster Session 3: Building Healthy and Resilient Communities | |
| | Title: Reducing lung health burden in areas with poor air quality: A community intervention | |
| | Presenter: Public Health Management Corporation (PHMC) | |
| | Session Format: Poster | |
| | Abstract: The American Lung Association's Reducing the Lung Health Burden of the Climate Crisis initiative is a public health intervention designed to decrease the negative impact that poor air quality has on lung health and address the associated health disparities faced by marginalized communities. As one of most polluted cities in the United States for ozone and particulate pollution, this intervention was implemented in Phoenix, Arizona (Maricopa County). | |
| 1:00 PM - 2:00 PM | Program: <u>Breastfeeding</u> | |
| | Session: 2019.0 - Making public health a national priority: Policies and practices that protect and support breastfeeding in the United States | |
| | Title: <u>Healthy Mothers</u> , <u>Healthy Babies</u> : A State-wide Initiative to Promote <u>Breastfeeding by Increasing Provider Capacity and Community-Based Supports</u> | |
| | Presenter: Mississippi Public Health Institute (MSPHI) | |
| | Session Format: Poster | |
| | Abstract: The Healthy Mothers, Healthy Babies (HMHB) project aimed to improve breastfeeding support and maternal health in Mississippi through a multi-faceted approach. The initiative, led by the Mississippi Public Health Institute (MSPHI) and its partners, promoted evidence-based lactation practices, expanded lactation training programs to support WIC staff and hospital employees in pursuing International Board-Certified Lactation Consultant (IBCLC) certification, fostered community engagement, and advocated for policy improvements around breastfeeding. | |
| 2:30 PM - 2:42 PM | Program: <u>Alcohol, Tobacco, and Other Drugs</u> | |
| | Session: 2045.0 - Binge and High Intensity Drinking in Varied Populations: | |



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Title: Interactive factors of heavy episodic drinking and high intensity drinking affect acute consequences: A closer look using segmentation analyses

Presenter: Public Health Institute (CA)

Session Format: Oral

Abstract: Better understanding of factors underlying acute consequences of heavy episodic drinking (HED) and high intensity drinking (HID) is an important public health priority in our nation. Identifying interactive predictors of consequences from heavy drinking episodes can inform preventive and clinical intervention efforts. Applying tree-growing strategies, this study examined determinants of alcohol-related acute consequences following recent HED and HID episodes in a national sample.

2:35 PM - 2:40 PM

Program: Health Administration

Session: 2076.0 - Lightning Talks: Perspectives on Health Administration

Title: PHIG-uring out AI: Developing an artificial intelligence policy for a local health department with data modernization training and technical assistance

Presenter: Kansas Health Institute (KHI)

Session Format: Lightning Session

Abstract: **Background**: Artificial intelligence (AI) has been called a transformative tool for public health, but many health departments lack clarity on practical applications, ethical considerations, and privacy implications for this rapidly changing technology. At the Philadelphia Department of Public Health (PDPH), AI use was guided by an underdeveloped citywide policy interpreted as a blanket prohibition. PDPH's data modernization team attended the Centers for Disease Control and Prevention's (CDC) Public Health Infrastructure Grant's (PHIG) annual convening, where the Kansas Health Institute (KHI) demonstrated AI's potential to enhance efficiency and data-driven decision-making. PDPH realized a need to develop a more comprehensive, tailored AI policy.

2:45 PM - 3:00 PM

Program: Public Health Education and Health Promotion

Session: 2097.0 - Community-Engaged Approaches to Diabetes Prevention and Management in Underserved Populations

Title: Expansion of Diabetes Prevention Program to Rural Pennsylvania communities: experiences over the past decade

Presenter: Public Health Management Corporation (PHMC)



Session Format: Oral

Abstract: Rural populations face significant health disparities and social determinants of health (SDOH) that increase their risk for type 2 diabetes. Barriers such as limited healthcare infrastructure, provider shortages, transportation challenges, and digital divide issues hinder the expansion of evidence-based programs like the CDC's National Diabetes Prevention Program (DPP). The Pennsylvania Department of Health (PADOH) has worked to expand DPP access statewide, but significant gaps persist across the Commonwealth. This study explores barriers and facilitators to rural DPP expansion through key informant interviews and provider surveys.

2:50 PM - 2:55 PM

Program: <u>Health Administration</u>

Session: 2076.0 - Lightning Talks: Perspectives on Health Administration

Title: Maximizing training and technical assistance (TTA) effectiveness to meet the needs of our public health system: A utilization-focused process evaluation of the Public Health Infrastructure Grant (PHIG) TTA model

Presenter: Texas Health Institute (THI), National Network of Public Health Institutes (NNPHI)

Session Format: Lightning Session

Abstract: Training and Technical Assistance (TTA) is a widely used model for strengthening public health (PH); however, TTA programs often lack critical feedback mechanisms to improve effectiveness. The Centers for Disease Control and Prevention's (CDC) Public Health Infrastructure Grant (PHIG), a \$4.5 billion-to-date investment in 107 state and local PH agencies to strengthen PH infrastructure, funds three National Partners to deliver TTA in support of PHIG recipients. A process evaluation of PHIG TTA applied utilization-focused evaluation (UFE¹) strategies to advance TTA effectiveness and efficiency, offering a promising approach for maximizing TTA impact in PH.

2:54 PM - 3:06 PM

Program: Alcohol, Tobacco, and Other Drugs

Session: <u>2045.0 - Binge and High Intensity Drinking in Varied Populations:</u> New Findings

Title: Who's engaging in high-intensity drinking? Results from the 2020 and 2024 National Alcohol Survey

Presenter: Public Health Institute (CA)

Session Format: Oral

Abstract: Alcohol consumption has declined since 2015, but among U.S. adults who drink alcohol, frequency of heavy episodic drinking (HED) and high-intensity drinking (HID) have increased since then. This study examined which demographic subgroups are engaging in HED and HID



| | among U.S. adults, and how this extreme drinking is associated with alcohol use disorder (AUD). |
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| 3:00 PM - 4:00 PM | Program: Maternal and Child Health |
| | Session: 2126.0 - Epidemiology & Data Poster Session |
| | Title: Obstetric hemorrhage deaths in California: trends, causes, contributing factors, and quality improvement opportunities |
| | Presenter: Public Health Institute (CA) |
| | Session Format: Poster |
| | Abstract: Obstetric hemorrhage is among the top three causes of pregnancy-related deaths in California. We describe trends and quality improvement opportunities. |
| 3:05 PM - 3:10 PM | Program: <u>Health Administration</u> |
| | Session: 2076.0 - Lightning Talks: Perspectives on Health Administration |
| | Title: Leveraging CDC's Public Health Infrastructure Grant data modernization training and technical assistance model for advancing data modernization in health departments |
| | Presenter: Kansas Health Institute (KHI) |
| | Session Format: Lightning Session |
| | Abstract: As public health systems evolve, integrating new technologies is key. Specialized expertise is needed to ensure these technologies are implemented ethically and transparently. The Data Modernization Training and Technical Assistance (DM TTA) model, enabled through CDC's Public Health Infrastructure Grant (PHIG), provides recipients with opportunities to access expert support in data modernization. By connecting recipients with a network of professionals, PHIG strengthens public health administration by addressing challenges like AI adoption and governance, improving the capacity of health departments to manage and deliver services with greater efficiency. |
| 3:30 PM - 3:45 PM | Program: Academic and Practice Linkages in Public Health Caucus |
| | Session: 2041.0 - Fostering Collaboration: Leveraging Academic-Practice Linkages to Strengthen Governmental Public Health Partnerships |
| | Title: From Silos to Synergy: Tools and Strategies to Strengthen Academic-Practice Partnerships in Public Health |
| | Presenter: National Network of Public Health Institutes (NNPHI) |
| | Session Format: Oral |
| | Abstract: The COVID-19 pandemic revealed critical gaps in the U.S. public health system and also highlighted the vital role that academic–practice |



partnerships can play in building a more responsive and resilient public health workforce. To address these needs, the Association of Schools and Programs of Public Health (ASPPH) is advancing two complementary initiatives to strengthen collaboration between academic institutions and state, Tribal, local, and territorial (STLT) health departments. Funded by the CDC through the Public Health Leadership and Education. Advancing Health Equity and Data Science (PH LEADS) program, the first initiative focuses on developing practical guidance and recommendations to support sustainable, bidirectional partnerships between academia and practice. Drawing on findings from a national survey and site visits with academic and practice partners, ASPPH is identifying promising models for shared staffing, student placements, co-developed training, and formal agreements. The second initiative, supported by the Public Health Infrastructure Grant (PHIG) and the National Network of Public Health Institutes (NNPHI), involves the development of the Academic Partner Search Tool, a userinformed, publicly available tool designed to help STLT health departments easily locate and connect with ASPPH member schools and programs of Public Health based on geography and specialized needs. During this session, ASPPH will share preliminary research findings, highlight practitioner perspectives gathered through site visits and surveys, and provide a demonstration of the Academic Partner Search Tool. Together, these efforts aim to remove long-standing barriers to collaboration and build a stronger, more unified public health workforce. 4:30 PM - 4:45 PM Program: Disability Session: 2160.0 - Built Environment, Transportation, and Emergency Response: Disability Perspectives Title: Inclusivity of people with disabilities in emergency preparedness in Pennsylvania: A statewide poll Presenter: Public Health Management Corporation (PHMC) Session Format: Oral Abstract: One in four adults in the U.S. have disabilities, making inclusion crucial across all public health sectors. Public health emergencies, like COVID-19, magnified these challenges. Individuals with intellectual disabilities were 2.5 times more likely to contract COVID-19 and 5.9 times more likely to die from COVID-19. Local emergency management offices play a key role in ensuring that emergency planning, response, and recovery is inclusive of people with disabilities (PWD). 4:30 PM - 6:00 PM Program: Community Health Workers Session: 2159.0 - Roundtable: CHW Professional Support and Workforce **Development**



Title: Envision's virtual learning series: a national collaboration to support community health worker sustainability

Presenter: University of Wisconsin-Madison Population Health Institute

Session Format: Roundtable

Abstract: Community health workers (CHWs) play a crucial role in responding to emerging health threats, addressing chronic diseases, supporting their communities' social needs, and promoting health equity, yet sustainability remains a significant challenge for this essential workforce. Envision, a partnership between the Center for Community Health Alignment and the Wisconsin Department of Health Services, is funded by the Center for Disease Control and Prevention (CDC) National Partners Cooperative Agreement to strengthen the capacity of state, tribal, local, and territorial public health departments to support and sustain CHW programs and organizations. Leveraging a national network and proven expertise, Envision provides capacity building for CHWs and CHW allies to support and sustain the CHW workforce.

Led by Envision staff and CHWs from Envision's CHW Council, this session will highlight key tools and resources from each module of the virtual learning series, offering attendees a structured, expert-driven approach to CHW sustainability. This dynamic special session will include opportunities to explore the digital modules in real time.

4:30 PM - 6:00 PM

Program: Community Health Workers

Session: <u>2159.0 - Roundtable: CHW Professional Support and Workforce Development</u>

Title: Empowering Community Health Workers through Collaborative Governance: Insights from the Responsive Trust Network

Presenter: Texas Health Institute (THI)

Session Format: Roundtable

Abstract: The Responsive Trust Network (RTN), housed at the University of Houston's Community Health Workers Initiative (CHWI) and in partnership with the Texas Health Institute (THI), is a state-wide initiative and dynamic platform dedicated to empowering Community Health Workers (CHWs) and advancing health equity. Guided by a commitment to respect, trust, and care, the RTN fosters sustainable community-driven change through support, workforce development, and collaboration.

This abstract was developed in collaboration with CHWs who will copresent findings and share insights from their experiences. Additionally, we propose hosting a roundtable discussion to foster dialogue on strategies for supporting CHW skills, enhancing collaborative approaches, and sustaining CHW workforce development. The RTN serves as a model for integrating CHWs into value-based care systems, emphasizing the importance of collaborative governance and continuous professional



| | support. |
|-------------------|--|
| 4:30 PM - 6:00 PM | Program: Community Health Workers |
| | Session: 2159.0 - Roundtable: CHW Professional Support and Workforce Development |
| | Title: The "Magic" of Community Health Workers (CHWs): Insights from CHW Candidates, Supervisors, and Employers about CHWs' Strengths and Areas for Further Training |
| | Presenter: Public Health Management Corporation (PHMC) |
| | Session Format: Roundtable |
| | Abstract: Community health workers (CHWs) are rightly regarded as effective at earning community members' trust and bridging divides that lead to improved access to care. While there is ample literature about successful CHWs' core competencies, the skills and traits that employers seek in CHWs vary by employer type (e.g., hospital or community-based organization) and a state's certification status (Jones et al. 2021). |
| 5:00 PM - 6:00 PM | Program: Food and Nutrition |
| | Session: 2222.0 - Food & Nutrition Posters 1 |
| | Title: Why leadership matters: activating community leadership to respond to food security needs. |
| | Presenter: Public Health Institute (CA) |
| | Session Format: Poster |
| | Abstract: Strong and agile leadership is crucial in today's changing federal and local landscape. Adaptive leadership is vital in public health: helping leaders overcome barriers, responding to evolving challenges, and innovating in real-time. By fostering flexibility, it strengthens resilience and empowers leaders to address emerging issues. Cross-sector partnerships amplify impact, uniting expertise and leveraging resources to improve health outcomes across populations. |
| | This session will introduce participants to a successful model for catalyzing leadership and strengthening partnerships in local public health initiatives. PHI Center for Health Leadership & Impact (CHLI) has trained 1,138 individuals in 301 teams, across 49 states and territories. Our national program, the Leadership Academy for the Public's Health (LAPH), a program of CHLI, recruits teams nationwide to create and sustain multi-sector partnerships that drive local health improvements. Over 90% of participants in LAPH utilize agile leadership and cross-sector collaborations to improve community wellbeing. |
| 5:00 PM - 6:00 PM | Program: Alcohol, Tobacco, and Other Drugs Session: 2212.0 - Tobacco and Vaping Policy |



Title: Impact of the PA free quitline - reach, service use and success

Presenter: Public Health Management Corporation (PHMC)

Session Format: Poster

Abstract: Since 2002 the Pennsylvania Department of Health (PADOH), Division of Tobacco Prevention and Control has administered the Pennsylvania Free Quitline (Quitline). Quitline provides free telephone counseling to those 14 and older, and nicotine replacement therapy to medically eligible adults. Quitline impact and trends were examined over a five-year period. Data explored include call volume, service use, media and promotions, caller retention, cost, and quit success.

Continued examination of Quitline call volume and service utilization is essential. These data inform strategies to improve service quality and increase reach to underrepresented communities, including communities targeted by tobacco industry marketing.

Monday, November 3, 2025

8:30 AM - 10:00 AM

Program: Occupational Health and Safety

Session: 3049.0 - Roundtables: Assessment and Control of Workplace

<u>Hazards</u>

Title: Perceptions of Artificial Intelligence among Case Managers and

Physicians

Presenter: Kansas Health Institute (KHI)

Session Format: Roundtable

Abstract: Artificial intelligence (AI) has the potential to significantly change the global workplace by removing repetitive tasks and assisting with complex work, enabling workers to focus more on creative, strategic, and decision-making activities. However, ethical concerns remain about bias, human oversight, data privacy, and potential job displacement. Healthcare is an industry with particularly high potential for AI-driven improvements, but it also carries significant risks related to ethical considerations. However, there is limited knowledge about what healthcare professionals think about AI in healthcare and how these perceptions may vary within the industry.

The anticipated findings from this study will offer valuable insights into how healthcare professionals across different roles perceive the potential benefits and challenges of Al.

9:00 AM - 9:15 AM

Program: Injury Control and Emergency Health Services

Session: 3037.0 - Clinical Approaches to Firearm Injury



Title: Integrating gun violence prevention in healthcare settings: Findings from a scoping review

Presenter: Health Resources in Action (HRiA)

Session Format: Oral

Abstract: In 2023, over 46,000 people died due to firearm-related injuries in the United States (U.S.), and many more (97,000) were injured. Firearm-related injury is now the leading cause of death among children and disproportionately affects Black, Latinx, and Indigenous communities. The healthcare sector can play an important role in preventing firearmrelated injuries. Many people who were injured by or died from firearm wounds had recent contact with a healthcare provider. On average, 53% of people who died by suicide had contact with a mental health provider and 77% with a primary care provider in the year before death. People injured by firearms also require emergency medical attention and may require extended services. These encounters provide opportunities to prevent reinjury. Despite this, healthcare-focused interventions to prevent firearm injury have not been systematically studied. The Kaiser Permanente Center for Gun Violence Research and Education conducted a scoping review of healthcare-centered gun violence interventions to codify how the healthcare sector is contributing to firearm-injury prevention and to better understand the state of the evidence regarding these interventions.

This scoping review codified existing healthcare-focused interventions to prevent firearm injury. To maximize the healthcare sector's contribution to firearm injury prevention, additional research is needed to assess their effectiveness and sustainability.

9:15 AM - 9:30 AM

Program: LGBTO Health Caucus

Session: <u>3042.0 - Structural determinants (e.g., laws, policies, social norms)</u> of LGBTO+ health

Title: Systems transformation for LGBTQ equity in politically turbulent times: Lessons learned from coalition building in the wake of New Hampshire's anti-trans laws

Presenter: Health Resources in Action (HRiA)

Session Format: Oral

Abstract: Political attacks at local, state, and federal levels have created climates of uncertainty and fear for LGBTQ+ communities, with transgender and gender non-conforming people disproportionately impacted by harmful legislation. Program cuts, data erasure, and systems and policy changes threaten the physical, mental, financial, and social health of LGBTQ+ people. It is imperative that public health commits to systems transformation for equity to protect the lives and well-being of LGBTQ+ communities.



This session focuses on an active engagement in New Hampshire, led by Health Resources in Action (HRiA) in partnership with a coalition of equity-focused and LGBTQ+ serving organizations. Understanding that the experience may be instructive for others, HRiA is documenting learnings about the successes and challenges in building effective and proactive long-term strategies to advance LGBTQ+ rights. This effort began with a landscape assessment of the state's LGBTQ+ population, informing discussions about shared narratives and messaging, community power building, and local policy opportunities, with a goal of building a coalition of advocates and shifting harmful narratives about LGBTQ+ people in New Hampshire. By aligning siloed efforts and engaging new partners, this project aims to build collective power and elevate a replicable model for policy and systems change in politically fraught climates.

This session will discuss the development and implementation of this effort, focusing on considerations for working with populations under political threat. Participants will learn about conducting research for systems transformation and explore how assessment findings can catalyze narrative change and community power building, creating pathways for grassroots-led systemic change.

10:30 AM - 11:30 AM

Program: Community Health Planning and Policy Development

Session: 3077.0 - Transforming Community Health: Spotlight on Public-Private Partnerships

Title: The Hub-Spoke Model: Implications as an Effective Public Health
Approach for Community Health

Presenter: Public Health Management Corporation (PHMC), National Network of Public Health Institutes (NNPHI)

Session Format: Poster

Abstract: In 2023, the CDC established the Public Health Infrastructure Grant (PHIG) and awarded funding to local and state health departments, public health institutes, training centers, and national technical assistance providers across the United States to promote and protect the health of communities via increased access to public health services and strengthened public health infrastructure. This national grant effort takes a regionalized approach to effectively providing technical assistance and resources to health departments engaged in systems change. The following describes the value of PHIG's approach in utilizing a "hub and spoke" model of technical assistance to increase effectiveness in providing support to funded health departments, an implication for best practice in community health efforts.

The "hub and spoke" model of operations originated from the airline industry in 1955 when Delta Airlines optimized flight routes by centralizing connections at a primary "hub" airport and added smaller regional airports as "spokes" feeding into it. This concept has become a strategic approach in healthcare and public health as well. The Public Health



Infrastructure Grant has leveraged hub and spoke models for effective and efficient technical assistance provision, allowing the National Network of Public Health Institutes to coordinate with the 9 TA Hubs regarding national guidance, and for those 9 hubs to bring that information and TA coordination back to their regions and with their regional TA provider partners ("Spokes").

The Public Health Management Corporation (PHMC), the TA Hub for federal regions 2 & 3, has implemented a robust hub and spoke model through the PHIG work to include one TA Hub, 5 public health institute spokes, and 2 regional public health training centers, to effectively coordinate quality TA to 14 funded local and state health department partners over 2 years of the Public Health Infrastructure Grant. The past two years are testament to the power of this streamlined approach in coordinating TA to bolster local health, an antidote to the silo-ed culture of public health services, and an immense value-add in increasing efficiency and connectivity while reducing duplication of efforts. Especially when resources are limited, maximizing efficiency through strong partnerships and systems is essential.

10:30 AM - 11:30 AM

Program: Injury Control and Emergency Health Services

Session: 3082.0 - Special Topics in Firearm Prevention Posters

Title: Focus Group Insights for Mississippi Violence Injury Prevention Program (MS-VIP)

Presenter: Mississippi Public Health Institute (MSPHI)

Session Format: Poster

Abstract: Firearm violence and its related injuries and deaths in the U.S. continue to increase, having devastating effects on victims, families, and communities. Developing prevention approaches to reduce firearm and related violence in the Jackson metropolitan area requires a better understanding of the unique individual- and community-level factors that influence rates of firearm injury, recovery from injury, firearm ownership and storage practices, and utilization of existing services.

Based on participant responses, the following recommendations need to be considered for the firearm prevention program to be a success:

- Listen to the Peers in the group
- Provide training, incentives, support and protection when needed
- Provide resources individuals can use right away: gift cards, fruits, vegetables, etc.
- · Provide youth with more fun activities daily and in the summer

The results of this study informed the development and refinement of community- and hospital-based violence interventions. Understanding community needs and preferences is essential for designing effective,



culturally competent violence prevention strategies.

10:30 AM - 11:30 AM

Program: Community Health Planning and Policy Development

Session: 3077.0 - Transforming Community Health: Spotlight on Public-

Private Partnerships

Title: Planning for the future in the Pacific Islands: Creating collaboration amongst public-private partnerships for improved community health

<u>outcomes</u>

Presenter: Hawaii Public Health Institute

Session Format: Poster

Abstract: The Pacific Islands face unique challenges in healthcare services due to geographic isolation, limited resources, and a declining workforce. As the region grapples with rising climate concerns impacting its public health infrastructure, the need for sustainable partnerships has never been more critical. With funding by the five-year Public Health Infrastructure Grant (PHIG), a multi-billion dollar national investment, health departments in the U.S. Affiliated Pacific Islands seek to strengthen their public health workforce and infrastructure. This grant prompted national collaboration essential to deliver community-led health initiatives.

Hawaii Public Health Institute (HIPHI), a member of the National Network of Public Health Institutes (NNPHI), one of the three national technical assistance providers, uniquely positioned Year 2 activities to provide inperson technical assistance for two island jurisdictions and many others virtually. By combining the strengths of the public sector's focus on equity and the private sector's efficiency and innovation, this partnership proved its potential to transform healthcare systems in the region. Mobilizing a team of public health professionals on two separate occasions, HIPHI traveled to Palau and the Commonwealth of the Northern Mariana Islands (CNMI) to deliver tailored technical assistance for improved health outcomes in the Healthy Palau 2025 report and CNMI's Department of Public Health accreditation journey.

This session highlights lessons learned for partnership development in the Pacific Islands and expansion strategies that leverage current funding that facilitates permanent public health solutions and long-term partnerships between health departments, public health institutes, and community based organizations. It also highlights the importance of community engagement to ensure that partnerships are responsive to the unique needs and cultural contexts of island communities. These funding mechanisms are needed for sustainable public health infrastructure that will support sustainable and attainable community health outcomes. Attendees will gain practical tips to outline three key factors that contribute to successful community-centered collaboration.

10:45 AM - 11:00 AM Program: Epidemiology



Session: 3131.0 - Epidemiology Section: Maternal and Child Health **Epidemiology**

Title: Examining pregnancy-associated cancer deaths in California, 2015-2022

Presenter: Public Health Institute (CA)

Session Format: Oral

Abstract: Despite cancer accounting for 1 in 10 deaths during pregnancy or up to one year postpartum in California, pregnancy-associated cancer deaths (PACD) are often excluded from maternal mortality reviews, limiting the understanding of how cancer and pregnancy intersect. This study compared PACD to non-pregnancy-associated cancer deaths (non-PACD) among women 15-49 years to explore demographic differences, cancer types, and implications for integrated surveillance.

PACD disproportionately impact younger and Hispanic individuals and those residing in the least healthy communities, indicating health inequities. Enhanced collaboration between cancer registries and maternal mortality surveillance is recommended to address data gaps in PACD and to inform maternal health policies to improve screening and treatment of cancer during pregnancy and postpartum.

11:15 AM - 11:30 AM Program: Community Health Workers

Session: 3128.0 - Bridging Policy and Practice: Integrating CHWs into Medicaid and Healthcare Systems

Title: Leveraging CHW referrals to address social needs and reduce emergency department utilization: A retrospective analysis in Southwest Virginia

Presenter: Institute for Public Health Innovation (IPHI)

Session Format: Oral

Abstract: The association between unmet health-related social needs (HRSNs) and healthcare utilization is well-documented. Prior research shows that community health workers (CHWs) are an effective workforce in addressing HRSNs, reducing avoidable healthcare utilization, and improving population health outcomes. In 2021, Ballad Health, a health system operating in Southwest Virginia, equipped a team of CHWs with a closed-loop referral platform (Unite Us) to facilitate social care coordination. The purpose of this evaluation was to demonstrate the feasibility of leveraging matched-patient-level social care referral data and health system UB-04 utilization data to examine the potential impact of social care coordination administered by CHWs on ED use within Ballad Health.

Conclusions: These results establish the feasibility of leveraging standardized social care and health systems claims data to characterize



the impact of technology-enabled social care coordination on ED use and reinforce the critical role of CHWs, equipped with technology, in addressing HRSNs. Policymakers may consider the value of recognizing and reimbursing the role of social care interventions, including the essential CHW workforce, in reducing high-cost healthcare utilization. 11:15 AM - 11:30 AM Program: American Indian, Alaska Native and Native Hawaiian Caucus Session: 3104.0 - Road Map for Brain Health Title: Road Map Champions: Implementing the HBI Road Map for AI/AN **Peoples** Presenter: American Indian Public Health Resource Center Session Format: Oral Abstract: The Alzheimer's Association launched the Healthy Brain Initiative (HBI) Road Map Champions program to support the advancement of community-focused population health approaches related to dementia in American Indian and Alaska Native (AI/AN) communities. Up to 15 triballyled health programs and urban Indian organizations were selected to receive direct funding, training and technical assistance to establish a Road Map Champion to implement the public health strategies outlined in the HBI Road Map for American Indian and Alaska Native Peoples addressing brain health, caregiving and dementia. HBI Road Map Champions emphasize a strengths-based approach that honors cultures and incorporates the indigenous and social determinants of health. The Alzheimer's Association partnered with North Dakota State University's American Indian Public Health Resource Center for development and program implementation and support. The Urban Indian Health Institute also served as a partner in the development and evaluation of the program. With the resources provided through the program, Road Map Champions share dementia-related knowledge with community members and organizational staff, assess local needs and strengths related to dementia, and lead local prioritization and implementation of the actions outlined in the HBI Road Map for AI/AN Peoples. 12:30 PM - 1:30 PM Program: Cancer Session: 3175.0 - Research to Improve Cancer Screening in Diverse Settings Title: Evaluating culturally resonant campaigns about clinical trial participation: Addressing health disparities in lung cancer screening and diagnosis Presenter: Public Health Management Corporation (PHMC) Session Format: Poster Abstract: Worldwide, lung cancer is the leading cause of cancer-related deaths. Hispanic patients experience health disparities including lower



diagnosis rates and underrepresentation in clinical trials, which are vital to lung cancer treatment. The American Lung Association's Awareness, Trust, and Action (ATA) campaigns provide information about the importance of clinical trials and empower patients to talk with their provider.

The evaluation showed the ATA campaign improved attitudes towards clinical trial participation. This year, another campaign will be evaluated among Hispanic communities in the New York, NY, San Antonio, TX, and Long Beach, CA areas.

12:30 PM - 1:30 PM

Program: Alcohol, Tobacco, and Other Drugs

Session: 3171.0 - Delivering the Message: Campaigns, Culture, and Clinical Settings in Substance Use Prevention

Title: Benefits of increased implementation of brief alcohol interventions in rural and urban populations: Findings from a simulation study of universal alcohol screening and brief intervention in primary care settings

Presenter: Public Health Institute (CA)

Session Format: Poster

Abstract: Alcohol screening and brief intervention (ASBI) is an evidence-based strategy for reducing heavy alcohol use. This study simulates effects of universal ASBI in primary care and estimates impacts on alcohol consumption and alcohol use disorder (AUD) for rural and urban men and women.

Simulated interventions suggest increasing evidence-based BI could lead to a reduction in heavy alcohol use and AUD, with varying effects among subgroups.

12:30 PM - 1:30 PM

Program: Academic and Practice Linkages in Public Health Caucus

Session: <u>3168.0 - Academic-Practice Linkages in Public Health Caucus Poster Session 2</u>

Title: Increasing the use of evidence-based healthy housing practices in public housing renovation

Presenter: Georgia Health Policy Center

Session Format: Poster

Abstract: Due to social inequities, many Americans are unable to access stable, quality housing, resulting in sizable impacts on their health. Extremely low-income (ELI) households often rely on public housing to address this vital need. However, the existing public housing stock is developing quality issues as it ages, exacerbating the excessive burden of poor health this population already faces. Using an equity-grounded Health in All Policies (HiAP) approach to health promotion, the Homes for Healthy Futures (HHF) initiative was developed to integrate health-



promoting designs, materials, and amenities into standard public housing renovation practices in the state of Georgia. As a collaboration of the state housing finance agency, public health professionals, and green building experts, the HHF initiative sought to educate renovation teams, inform renovation plans, and transform affordable housing sector practices. In addition to capacity building and knowledge exchange among housing, public health, and green building professionals, HHF also incorporated outcome tracking to measure impacts on renovation plans, practitioner behaviors, and self-reported health status of residents at participating public housing sites. This project revealed unanticipated health issues prevalent at the participating sites, particularly around mental and behavioral health. Additionally, it demonstrated successful transfer and implementation of evidence-based best practices from academic public health experts to affordable housing practitioners, resulting in tangible changes in housing conditions. Finally, it detected correlations between healthy green housing recommendations, changes in housing renovation practices, and changes in resident health outcomes, attributable to HHF. 12:30 PM - 1:30 PM Program: Alcohol, Tobacco, and Other Drugs Session: 3172.0 - It Starts Early: Family, Messaging, and Prevention of Substance Use Across the Lifespan Title: Safe Start-ing pregnancy: Implementation factors for the adoption of a hybrid intervention to reduce alcohol-exposed pregnancies in an urban clinic setting Presenter: Health Resources in Action (HRiA) Session Format: Poster Abstract: Prenatal alcohol exposure can cause lifelong physical and cognitive challenges known as fetal alcohol spectrum disorders (FASD). Over 1 in 10 U.S. pregnancies are alcohol exposed. In addition to identifying evidence-based interventions to reduce alcohol use among pregnant women, successful implementation of these interventions is critical for their adoption and scale-up. Launched in 2024, Safe Start is a hybrid intervention set in an urban OB/GYN clinic aimed at reducing alcohol-exposed pregnancies among women who are underprivileged. This abstract seeks to bridge the gap between evidence and practice by systematically identifying factors that affected implementation during the initial planning phase of Safe Start. The work to reduce alcohol-exposed pregnancies, particularly among lowincome women in underprivileged urban settings is urgent. Implementation lessons inform ongoing study rollout and may be useful to other practitioners as they develop similar treatment programs. 2:30 PM - 3:30 PM Program: Injury Control and Emergency Health Services Session: 3217.0 - Topics in Violence Prevention: Partner Violence. Community Violence, and Firearm Violence Posters



Title: <u>Assessment and Adaptation: Evaluating the Impact of the</u> Massachusetts CVI Capacity Building Initiative

Presenter: Health Resources in Action (HRiA)

Session Format: Poster

Abstract: Community violence is a public health crisis that disproportionately affects historically marginalized communities and undermines health, safety, and community cohesion. Boosting Organizational Capacity for Community Violence Intervention (BoostCVI), implemented by Health Resources in Action (HRiA) and funded by the Bureau of Justice Assistance (BJA), aims to strengthen the infrastructure, effectiveness, and long-term sustainability of community violence intervention (CVI) strategies. By investing in the capacity of five Massachusetts-based community-based organizations (CBOs), the initiative centers community leadership in advancing safety, healing, and public health equity. BoostCVI directly supports the national priority of integrating public health approaches into violence prevention efforts.

BoostCVI illustrates how strategic investment in community-rooted organizations can advance public health–centered violence prevention. By embedding evaluation and feedback into a tailored capacity-building approach, the initiative strengthens local infrastructure while amplifying the voices and leadership of those closest to the work. As the field increasingly recognizes violence prevention as a public health imperative, BoostCVI offers a model for how public health-centered systems can partner with CBOs to build sustainable, community-driven solutions. Elevating these efforts is essential to making the public's health a national priority.

2:30 PM - 3:30 PM

Program: Public Health Education and Health Promotion

Session: 3228.0 - Science, Justice and Health Equity

Title: Advancing policy-driven solutions using the equity equation webinar

<u>series</u>

Presenter: Institute for Public Health Innovation (IPHI)

Session Format: Poster

Abstract: In 2024, The Institute for Public Health Innovation started the Equity Equation Webinar Series. In this series, we examine pressing public health issues in the District of Columbia, Maryland, and Virginia region (IPHI's primary service area) through an anti-racist lens and explore equity-centered policy and systems solutions. Regional and national experts provide insight into the history, scope, and current landscape of health inequities in the region and share best practices and policy and systems solutions aimed at addressing root causes perpetuating these issues. The presentations translate policy into action on a community, state, and/or regional level and mobilize the local public health workforce



and others to address longstanding inequities. The format of the webinars followed what we call the "Equity Equation". It uses the perspectives of Data + Policy + Community to address various health topics that affect our region. Our first three webinars in 2024 were on the Decline in Life Expectancy, Black Maternal Health, and Gun Violence. We are currently planning 3 more webinars that will happen in the Spring and Summer which will cover, Climate Change, Vaccinations, and DEI backlash. The presentation for the conference would highlight webinar development, best practices, and lessons learned in educating the public on policies that impact health equity.

3:00 PM - 3:15 PM

Program: Latino Caucus

Session: <u>3273.0 - Latino Health, Environmental Justice, and Community</u> Driven Strategies (A collaborative session with the Environment Section)

Title: Disaster preparedness for health impacts in a Puerto Rican community: Strengthening community readiness and sustainability

Presenter: Puerto Rico Public Health Trust (PRPHT)

Session Format: Oral

Abstract: The Centers for Disease Control and Prevention funded the Building Action for Emergency Preparedness and Well-being Project at the Puerto Rico Public Health Trust to facilitate community access to resources protecting health from disasters in Torrecilla Baja, Loíza a coastal neighborhood in Puerto Rico. The study aimed to identify priorities, vulnerabilities, and capacities, distribute evidence-based resources to mitigate health impacts from extreme heat and storms, develop a community plan, and complete individual emergency plans.

Conducted under an approved Institutional Review Board (IRB) protocol from the Ponce Research Institute, this study involved collaboration with a community-based organization and a community health promoter. Community members were invited to meetings on disaster planning. Participants documented vulnerabilities and capacities through PhotoVoice methodology, analyzing extreme heat, drought, sea level rise, storms, and floods. Then they identified and ranked top priorities in community meetings. Individual emergency plans are being completed through home visits. Since January 2025, a community plan is in development, addressing priorities, vulnerable individuals, response actions, personal skills, emergency protocols, and communication strategies.

Through ongoing community meetings and home visits, 85 community members have participated. 158 emergency supplies have been distributed, including waterproof backpacks, mist fans, emergency kits, radios, water showers, and flashlights. Six meetings have been conducted, and 42 emergency plans completed. Using PhotoVoice methodology, participants identified drainage infrastructure, emergency medical service, debris removal and community water storage tank as top



priorities. These were ranked and identified to be the most urgent priorities by community members. Inductive coding and thematic analysis continue, preliminary findings highlight the same top four priorities.

We are working with the community-based organization to address one of these top priorities to provide a shared community resource along with a plan for management, maintenance and sustainability. The participatory approach ensures share ownership, leadership and community empowerment to providing locally relevant adaptation strategies.

3:20 PM - 3:35 PM

Program: Spirit of 1848 Caucus

Session: <u>3295.0 - Spirit of 1848 Politics of Public Health Data</u>
<u>Session: Making Data for Health Justice: Everything Everywhere All at</u>
Once

Title: Where do we go from here? Re-inserting politics, power and the structural determinants of health in public health practice

Presenter: University of Wisconsin-Madison Population Health Institute

Session Format: Oral

Abstract: More than a decade ago, the WHO's Commission on the Social Determinants of Health (SDOH) published a SDOH framework with two distinct concepts: "distinguishing between the mechanisms by which social hierarchies are created, and the conditions of daily life which then result (Solar & Irwin 2010)." In the U.S., SDOH have primarily been operationalized as the conditions of daily life and omitted the wider set of forces and systems that influence community conditions. This mistranslation, and prevailing understanding, depoliticized the meaning of the SDOH and the ways it was operationalized in practice.

We introduce a definition for the structural determinants of health (StrDOH) that draws from cross-disciplinary fields, including population health, sociology and political science and a review of select theories related to the concepts of social structure and power. With this definition as grounding, we engaged in design thinking and user experience research via focus groups, surveys and interviews among population and public health practitioners and scholars to develop tools that can clarify the concepts and help differentiate between actions to address the SDOH and StrDOH.

Measuring structures and power is key to re-inserting StrDOH back into public health practice. This presentation will share learnings from audience-engaged research and a practice-oriented graphic representation that can help practitioners assess and name the ways that power and structures are shaping health justice in their communities. We will also explore potential ways to measure structures and power, and evidence-informed strategies to inform local action. We can't realize health justice without addressing power.

3:30 PM - 3:45 PM

Program: Community Health Planning and Policy Development



Session: 3255.0 - Chronic Disease Prevention VI

Title: <u>How communities win: 5 best practices for building effective</u> overdose prevention coalitions that save lives.

overdose prevention coalitions that save lives

Presenter: Public Health Institute (CA)

Session Format: Oral

Abstract: The national public health system is under fire and communities across the country need a powerful response that incorporates a systems perspective, coherent vision, and committed collaborations. Local coalitions enable an "all hands on deck" approach for addressing systemic public health challenges, including unacceptably high rates of overdose. PHI Center for Health Leadership and Impact (CHLI) has supported almost 300 communities across 53 states and territories in building strong coalitions by cultivating local leaders, catalyzing learning networks, and supporting cross-sector partnerships. In California specifically, CHLI's Overdose Prevention Network resulted in a 21% reduction in fatal opioid overdoses in communities with an opioid coalition. This presentation will provide a case study of how one overdose coalition used CHLI's model to garner the political will to successfully increase awareness of fentanyl among youth, expand access to addiction treatment, and distribute thousands of doses of naloxone, the overdose reversal agent. The case study will incorporate five best practices for collective action that communities nationwide can utilize - strategic partnerships, aligned messaging, data-driven decision-making, sustainability planning, and an equity mindset. The presenter will also share free tools and resources that attendees can utilize going forward to implement these practices and drive collective action in their own communities.

Tuesday, November 4, 2025

8:30 AM - 10:00 AM

Program: APHA Public Health Funder Network

Session: 4008.0 - Hospitals and Beyond: A Case for Health Funder Investment through the Community Safety Ecosystem

Title: <u>Hospitals and Beyond: A Case for Health Funder Investment through</u> the Community Safety Ecosystem

Presenter: Health Resources in Action (HRiA)

Session Format: Panel Session

Abstract: Using voices from throughout the field, this presentation will provide relevant data on gun violence and effective strategies, information on the public health approach to safety, and describe a comprehensive community safety ecosystem and alignment with health-focused philanthropic priorities.



In 2024, the U.S. Surgeon General declared gun violence as a public health crisis. Because of gun violence's disproportionate impact on communities of color, it is a leading health disparity that exacerbates other health disparities. Similarly, a recent study by Pew Charitable Trust notes that half of Americans see gun violence as a major problem. Data demonstrates the effectiveness of coordinated, community-based efforts at driving down rates of violence when consistently resourced and implemented. However, many false narratives around gun violence data, root causes of violence and effective strategies to combat exist; this panel combats these narratives using data.

While many health-focused funders are interested in safer communities, they note difficulties in funding violence reduction efforts. Using voices from throughout the field, this presentation will: provide relevant data on gun violence and effective strategies; define the public health approach to community safety and describe the aspects of a comprehensive community safety ecosystem and alignment with health-focused philanthropic priorities.

10:30 AM - 11:30 AM

Program: Health Administration

Session: 4080.0 - (Poster Session E) Health Administration

Title: Data quality challenges in performance measurement for large-scale capacity-building programs; strategies for improvement and lessons learned from the Centers for Disease Control and Prevention's (CDC) Public Health Infrastructure Grant (PHIG)

Presenter: National Network of Public Health Institutes (NNPHI)

Session Format: Poster

Abstract: Performance measurement is an established practice for assessing federally funded program accountability. The Centers for Disease Control and Prevention's (CDC) funding opportunities must evaluate recipients' progress and outcomes against stated program goals. However, implementing standardized measures at a national level poses challenges, including decentralized recipient networks and the lack of reliable data sources and collection procedures.

Lessons learned include prioritizing recipient-centered communication (e.g., individual and group office hours), committing to consistent and continuous quality improvement (e.g., using recipient feedback to update guidance), and empowering recipients in reporting more accurate data (e.g., collaborative validation checks). Expected improvements to data quality will enhance CDC's ability to monitor and evaluate the progress, success, and impact of this national investment to strengthen public health infrastructure.

10:30 AM - 11:30 AM Program: Alcohol, Tobacco, and Other Drugs

Session: 4061.0 - Improving the Delivery of Integrated Behavioral Health



(IBH) Services through Workforce Development: The Role of Education and Training

Title: Tobacco-free recovery in behavioral healthcare: Provider beliefs, practices and barriers to implementation

Presenter: Public Health Management Corporation (PHMC)

Session Format: Poster

Abstract: The Pennsylvania Statewide Tobacco-free Recovery Initiative (PA STFRI) aims to promote evidence-based tobacco interventions in behavioral health settings. Evidence shows tobacco use negatively impacts behavioral health treatment outcomes; individuals treated for tobacco use disorder (TUD) concurrently with treatment for other substance use disorders exhibited 25% greater odds of long-term recovery.

To determine the level of preparedness to adopt tobacco-free recovery practices. PA STFRI conducted a readiness assessment of behavioral health providers across Pennsylvania. This assessment was first conducted in 2021, and results were used to inform strategies aimed at improving provider readiness. Behavioral health sites were reassessed in 2024 to measure any change in attitudes, practices, or policies.

Provider attitudes towards tobacco-free recovery remain positive; although, beliefs that tobacco-free polices may negatively impact program admissions and a lack of understanding about integration of tobacco treatment services into existing workflows persist. Results will continue to inform training and education strategies in Pennsylvania to equip behavioral health providers to address TUD to promote a higher quality of care and maximize treatment outcomes.

11:00 AM - 11:15 AM Program: Sexual and Reproductive Health (SRH)

Session: 4152.0 - Improving Access and Communication in Inclusive Sexual and Reproductive Health Care

Title: Gender-affirming care interest and access in Pennsylvania

Presenter: Public Health Management Corporation (PHMC)

Session Format: Oral

Abstract: Lack of access to competent healthcare is a source of negative outcomes for LGBTO people. Data regarding LGBTO access to comprehensive healthcare are fundamental to equitable public health planning. The PA LGBTQ Health Needs Assessment (HNA) highlights LGBTQ experiences in a variety of health topics, including genderaffirming care.

Competent care for LGB, transgender, non-binary, and gender expansive individuals includes improved access to gender-affirming health care, including hormone replacement therapy and affirming surgeries. Ongoing



| | data collection provides focused insight into advancing LGBTQ healthcare access. |
|--------------------|---|
| 12:30 PM - 1:30 PM | Program: Academic and Practice Linkages in Public Health Caucus |
| | Session: 4158.0 - Academic-Practice Linkages in Public Health Caucus Poster Session 4 |
| | Title: <u>Building Bridges to a Shifting Workforce: Integrating Infection</u> <u>Prevention and Control Education in Public Health Curricula</u> |
| | Presenter: National Network of Public Health Institutes (NNPHI) |
| | Session Format: Poster |
| | Abstract: The field of infection prevention and control (IPC) is undergoing a paradigm shift, moving beyond its historical roots in nursing due to a large sector of the workforce entering retirement age and overcoming burnout from the COVID-19 response. |
| | As healthcare-associated infections (HAIs) persist as a major public health challenge, there is an increasing need for infection preventionists (IPs) in acute and non-acute care settings with expertise in epidemiology, health communication, and systems thinking—competencies that align closely with public health training. |
| | This presentation highlights the collaborative efforts of the National Network of Public Health Institutes (NNPHI) in working on CDC's Project Firstline—a national learning collaborative on infection control education for healthcare workers. By partnering with the University of South Florida College of Public Health, Indiana University School of Public Health-Bloomington, and the Association for Professionals in Infection Control and Epidemiology (APIC), we have worked to embed IPC competencies into public health curricula, ensuring that future public health professionals are equipped with the skills necessary for infection prevention roles. |
| | We will explore the challenges and opportunities in integrating IPC into academic programs through syllabi reviews, discuss lessons learned from partnerships with healthcare systems, and outline strategies for further strengthening the pipeline of public health-trained IPs. This session aims to inspire educators, public health leaders, and IPC professionals to rethink workforce development and embrace the evolving landscape of infection prevention. |
| 2:30 PM - 2:45 PM | Program: Community Health Planning and Policy Development |
| | Session: 4244.0 - Public-Private Partnerships to Improve Community Health VII |
| | Title: Development of an Index to Evaluate a Community Health Initiative |
| | Presenter: Public Health Management Corporation (PHMC) |



Session Format: Oral

Abstract: Children's Hospital of Philadelphia (CHOP) partnered with the Public Health Management Corporation's (PHMC) Division of Research & Evaluation (R&E) to evaluate their Healthier Together (HT) initiative. The goal of HT is to improve the health of children and families in West/Southwest Philadelphia by partnering with local organizations to address social drivers of health in four key areas (housing, food, finances, trauma). R&E created an index that combined multiple indicators into a single composite score to assess the overall community impact of HT from 2019-2024.

Over 150 indicators were analyzed to derive HT's overall community impact score. Creating a community impact score provides an objective measure of a programs progress toward outcome goals and incorporating the RE-AIM framework provides context to better understand HT's successes and challenges and can help increase HT's community impact in future.

2:30 PM - 2:45 PM

Program: Community Health Planning and Policy Development

Session: <u>4245.0 - Racial Equity in Health</u>

Title: Introducing a new survey tool to measure Policy, Systems, and Environmental Change approaches across varied racial equity-focused initiatives

Presenter: Health Resources in Action (HRiA)

Session Format: Oral

Abstract: Policy, Systems, and Environmental (PSE) change approaches aim to address the root causes of health disparities and racial inequities and require a long timeframe to shift institutional, power, and social structures. Many leaders and funders are reluctant to invest in these approaches because it is difficult to show tangible progress and impact within shorter-term funding cycles or other time or political constraints. Measurement of process, progress, and impact can be difficult to compare across varied PSE initiatives, making it hard to judge success. Moreover, PSE change has a long time horizon, so measuring intermediary and often somewhat intangible impacts is vitally important for continued funding.

In this session, we will present a newly developed tool called the "PSE change Approaches Report and Inventory" (PSE-ARI) that seeks to measure progress and impact of PSE initiatives across a range of topic areas and populations. The tool was developed to evaluate the overarching impact of a growing group of over 75 grantees working towards dismantling structural racism and improving health equity through community-based PSE change approaches in the State of Massachusetts. Our equitable evaluation approach engaged an Evaluation Workgroup of current grantees in the development, piloting, and administration of this



tool among our grantees.

The PSE-ARI combines quantitative survey questions and short answer responses and is based on the Water of Systems Change framework (Kramer, MR., et al., FSG, May 2018). We adapted the tool and created six categories of Systems Change approaches: National, State, and Local Policies; Internal/Organizational Policies, Practices, and Processes; Resource Distribution and Access to Services; Relationships, Connections, and Community Engagement; Power Shifting; and Mental Models, Beliefs and Narratives. Survey questions ask about activities, strategies, tools used, and current progress.

There is currently a lack of standardized, ready-to-use tools available for organizations or funders to utilize in evaluating the impact of PSE change initiatives. We hope that this new tool will increase the ability to compare approaches across scope, topic area, population, time, and geographic area. This will enable funders and public health practitioners to measure quantifiable results of PSE work, thereby demonstrating the tangible products of PSE change efforts.

2:45 PM - 3:00 PM

Program: Health Informatics Information Technology

Session: 4260.0 - Special Session Disability

Title: Bridging Voices and Design: How Perceptions Shape the Self-

Assessment Tool

Presenter: Public Health Institute (CA)

Session Format: Oral

Abstract: N/A

3:00 PM - 3:15 PM

Program: Sexual and Reproductive Health (SRH)

Session: 4282.0 - Perspectives and Practices in Abortion Care: Clinical,

Policy, and Media Landscapes

Title: Medication Abortion Expansion from California's Emergency
Departments: Lessons Learned from Champion Implementation

Presenter: Public Health Institute (CA)

Session Format: Oral

Abstract: Access Bridge is rapidly revolutionizing access to reproductive healthcare in America's emergency departments (EDs). We train ED clinicians to offer stigma-free treatment of pregnancy emergencies and initiate contraception, particularly in states and regions with limited access to these services. In 2025, Access Bridge partnered with the Reproductive Health Service Corps, led by the trailblazing abortion training organization Training in Early Abortion for Comprehensive Healthcare (TEACH), to test the feasibility of implementing Access Bridge's Medication Abortion protocol from the emergency setting. This work was



funded by the state of California and was a unique opportunity to help define what it means for California to be an abortion-access state. Access Bridge recruited 15 passionate emergency providers (MD/DOs, NPs, PAs, senior residents) to complete training in medication abortion provision and provide feedback to Access Bridge. These champions also sought opportunities to educate their peers. This presentation will review the successes and barriers experienced by these champions, document trends in clinician-led abortion expansion, and document to the participant best practices in expanding abortion care in traditional healthcare settings where it was not previously available. This presentation will highlight regional differences in implementation across California's diverse landscape and will highlight the most realistic possibilities for future medication abortion expansion.

4:30 PM - 6:00 PM

Program: Aging & Public Health

Session: 4286.0 - Public Health Partnerships to Advance Healthy Aging

Title: Laying the Groundwork for an Age-Friendly Ecosystem in Kansas

Presenter: Kansas Health Institute (KHI)

Session Format: Roundtable

Abstract: The Age-Friendly Ecosystem Framework has emerged as a powerful communication tool for educating multidisciplinary stakeholders about healthy aging, clarifying their roles in public health, and facilitating collaborative, multi-sector action. Through Age-Friendly Kansas, part of the Age-Friendly Public Health Systems cohort, this framework has united a multi-state agency steering committee and an advisory committee comprising professionals from public health, aging services, Medicaid (KanCare), data modernization, advocacy, healthcare, legal sectors, local government, academia, and research.

To achieve a multi-sector public health approach, the initiative uses ecosystem language that resonates with non-traditional stakeholders, enabling them to recognize their roles as vital public health actors influencing community health outcomes. By establishing shared understanding and common goals, the framework empowers public health professionals and their partners to address the unique needs of an aging population. It provides a structured yet adaptable approach to identifying community-specific gaps and aligning resources.

Implementation has generated robust statewide dialogue to pinpoint key priorities and emerging strategies in transportation, housing, healthcare access, and social isolation—to name a few. The initiative emphasizes a data-driven approach to inform strategy development, currently underway, with a statewide action plan due in March 2026. The Age-Friendly Ecosystem Framework demonstrates significant implications for public health practice, policy, and research. Its approach seeks sustainable improvements, enhances public health agencies' capacity, and prepares systems to effectively support healthy aging now and for future



generations.

Wednesday, November 5, 2025

8:30 AM - 8:45 AM

Program: Aging & Public Health

Session: 5002.0 - Empowering Public Health for Healthy Aging: An Age-

Friendly Guide to Policy and Planning

Title: The Age-Friendly Public Health Systems 6Cs Training and

Implementation Guide

Presenter: National Network of Public Health Institutes (NNPHI)

Session Format: Oral

Abstract: Public health is uniquely positioned to support efforts aimed at advancing healthy aging. There are over 3,400 local health departments and every state has a state-level department of health. Public health departments and organizations have worked with the aging sector on several endeavors including vaccine distribution and providing meals. To support public health engagement with programs and services that support older adults, further guidance on how to embed activities and approaches into their work is needed. Trust for America's Health (TFAH) leads the national Age-Friendly Public Health Systems movement which focuses on expanding the public health role in healthy aging. The roles of public health include creating and leading policy, systems, and environmental changes; connecting and convening multi-sector stakeholders to improve older adult health and well-being; and collecting and translating data on older adult health to inform interventions in communities and states. TFAH, in partnership with National Network of Public Health Institutes, the Association of State and Territorial Health Officials (ASTHO) and the National Association of County and City Health Officials (NACCHO), Trust for America's Health has developed a training and implementation guide based on the Age-Friendly Public Health Systems 6Cs Framework. This six-module guide includes strategies and approaches public health professionals can use to develop plans and policies to advance healthy aging. This presentation will highlight components of the guide and demonstrate how public health professionals and organizations can use this information to propel their healthy aging work forward.

8:30 AM - 8:45 AM

Program: <u>Health Administration</u>

Session: 5028.0 - The Impact of the PHIG on Health Administration

(Complete Session)

Title: <u>Promising Practices from the Centers for Disease Control and Prevention's (CDC's) Public Health Infrastructure Grant (PHIG): Results</u>

from the 2025 Pilot.

Presenter: National Network of Public Health Institutes (NNPHI)



Session Format: Oral

Abstract: Additional evidence is needed to better understand best practices for strengthening public health infrastructure. To promote the identification and sharing of successful infrastructure-strengthening activities, the PHIG National Evaluation Team (NET) designed the Promising Practices Initiative (PPI), utilizing implementation science principles. The PPI seeks to identify and disseminate effective PHIG-funded PH agencies' activities that demonstrate evidence of success and have potential for replication across the PH sector.

The PHIG PPI supports the identification and sharing of evidence-based practices to promote the adoption of proven strategies across PH agencies, ultimately strengthening state and local PH systems. This presentation will detail the PPI methodology, explain its connection to implementation science, and showcase practices that indicate promise in strengthening PH infrastructure.

8:45 AM - 9:00 AM

Program: Health Administration

Session: 5028.0 - The Impact of the PHIG on Health Administration (Complete Session)

Title: Meeting the needs of our public health system: A coordinated national approach to training and technical assistance

Presenter: National Network of Public Health Institutes (NNPHI)

Session Format: Oral

Abstract: The Centers for Disease Control and Prevention's (CDC) Public Health Infrastructure Grant (PHIG) is a critical investment across 107 health departments to address public health (PH) infrastructure needs and strengthen the nation's PH system. Training and Technical Assistance (TTA), a key PHIG strategy, is the primary method for delivering support to health departments and equipping them with tools, knowledge, resources, and support to enhance their PH infrastructure capacity and effectiveness. This session showcases the PHIG TTA model and how CDC leverages partnerships across national organizations, including the National Network of Public Health Institutes, Association of State and Territorial Health Officials, Public Health Accreditation Board, and their extended network of TTA providers, to implement TTA.

The PHIG TTA model evolved into a more streamlined and effective system through a continuous quality improvement approach. TTA accelerates health department progress toward workforce development, foundational capabilities, and data modernization. Insights from this work can inform future large-scale TTA models and cross-sector delivery.

9:00 AM - 9:15 AM

Program: Health Administration

Session: 5028.0 - The Impact of the PHIG on Health Administration



(Complete Session)

Title: <u>Early findings from CDC's Public Health Infrastructure Grant</u> <u>evaluation: Data modernization improvements among state, local, and</u> territorial health agencies

Presenter: National Network of Public Health Institutes (NNPHI)

Session Format: Oral

Abstract: The Data Modernization (DM) strategy of the Centers for Disease Control and Prevention's Public Health Infrastructure Grant (PHIG) was designed to strengthen public health agencies' (PHAs) data capacity and modernize their data infrastructure, resulting in more efficient and accurate public health reporting and more rapid detection of outbreaks and emerging threats. Early process evaluation data focus on development of foundational data capacity in recipient agencies.

Early findings demonstrate that recipient PHAs are using grant funding to lay the foundation for modernized data capacity, allowing them to exchange the critical public health data needed to enhance their public health practice. Continued evaluation will provide further insights into technical enhancements and longer-term impacts on public health data infrastructure.

9:15 AM - 9:30 AM

Program: Aging & Public Health

Session: <u>5002.0 - Empowering Public Health for Healthy Aging: An Age-Friendly Guide to Policy and Planning</u>

Title: Advancing Age-Friendly Public Health Strategies through Public Health Institutes

Presenter: National Network of Public Health Institutes (NNPHI)

Session Format: Oral

Abstract: Public health institutes (PHIs) are nonprofit organizations dedicated to advancing public health practice and improving population health. PHIs work closely with governmental public health agencies to convene partnerships and design, implement, and evaluate programs. The National Network of Public Health Institutes (NNPHI) serves as a forum for PHIs and provides them with several opportunities including technical assistance, organizational capacity building, and program development. Health departments rely on partners like public health institutes to support the implementation of State Health Improvement Plan goals and to measure progress on individual activities. Public health institutes have influence beyond their own state borders, often working to support public health department activities in other states in their region. Trust for America's Health and NNPHI have engaged a cohort of 10 PHIs on the adoption and implementation of age-friendly public health strategies in their states. Part of this develop includes pilot testing the Age-Friendly Public Health Systems 6Cs Training and Implementation



Guide. The 10 PHIs provided feedback on the content in the modules contained within the guide. This session will highlight the results from the pilot and how the PHIs have applied some of the strategies and approaches included the guide. 9:45 AM - 10:00 AM Program: Community Health Planning and Policy Development Session: 5013.0 - Public-Private Partnerships to Improve Community Health II Title: Optimizing resources: Harnessing Cross-Sector Partnerships to Strengthen Mental Health Awareness Presenter: Public Health Institute (CA) Session Format: Oral Abstract: Coalition building plays a vital role in public health by uniting diverse stakeholders to tackle complex health challenges through shared expertise and resources. In community health planning, coalitions ensure that the voices of all affected groups are not just heard, but included, thus leading to more inclusive and effective solutions. By fostering collaboration across sectors, coalitions strengthen efforts to address the social determinants of health and promote equitable outcomes. Ultimately, they enhance the capacity of communities to drive sustainable, positive change in health policy and practice. PHI Center for Health Leadership and Impact (CHLI) has supported almost 300 communities across 53 states and territories in building strong coalitions by cultivating local leaders, catalyzing learning networks, and supporting cross-sector partnerships. Our national program, the Leadership Academy for the Public's Health (LAPH), a program of CHLI, recruits teams nationwide to create and sustain multi-sector partnerships that drive local health improvements. Over 90% of participants in LAPH utilize agile leadership and cross-sector collaborations to improve community wellbeing. This presentation provides a case study on how a team utilized the LAPH tools and resources to strengthen cross sector partnerships within their network to address mental health in Arkansas with an annual summit including partners representing faculty, staff. students, faith leaders, and colleagues within the community. Session participants will gain insight into the LAPH model and tools that can be applied locally to enhance community health planning efforts and partnerships in their communities. 10:30 AM - 10:45 AM Program: Community Health Workers Session: 5076.0 - Advancing CHW Integration and Leadership in Clinical and Public Health Systems Title: Community Health Workers (CHWs) as Public Health Leaders: Adapting a National Framework for CHW Integration in Wisconsin

Presenter: University of Wisconsin-Madison Population Health Institute



Session Format: Oral

Abstract: This interactive presentation features a Community Health Worker (CHW) as both co-presenter and co-author.

CHWs are widely recognized for their ability to improve health outcomes and address disparities, and they are increasingly employed by health departments across the country. While much attention has focused on integrating CHWs into clinical settings, there is less guidance on how to effectively incorporate CHWs into local and tribal health departments (LTHDs) as permanent, valued members of the public health workforce. LTHDs may benefit from structured support when starting or expanding CHW programs.

In 2024, the Wisconsin Department of Health Services (WI DHS) Chronic Disease Prevention Unit partnered with Envision CHW—a CHW-led national training and technical assistance center with staff at the University of Wisconsin Madison's Population Health Institute, the Center for Community Health Alignment (CCHA), and WI DHS—to address this need. Drawing on Envision's experience supporting CHW integration in over 60 health departments, the partners co-developed the CHW Integration Toolkit for Local and Tribal Health Departments in Wisconsin.

This toolkit provides best practices, tools, and resources specifically tailored for LTHDs that are either planning to integrate CHWs or are in the early stages of doing so. It offers a structured approach that recognizes the varied capacities and needs of LTHDs in Wisconsin.

As an example, one feature of the toolkit is a Self-Assessment questionnaire designed to help organizations reflect on key topics like CHW leadership, roles, and competencies. A Wisconsin-based CHW focus group reviewed and refined this tool to ensure the questions reflect priorities that affect CHWs' experiences of meaningful integration.

Toolkit development was informed by the voices of both CHWs and LTHD staff across Wisconsin. Input was gathered through one-on-one conversations, focus groups, and the Wisconsin CHW Integration into LTHDs Community of Practice. Drafts were reviewed by both CHWs and LTHD staff to ensure content relevance, accuracy, and usefulness.

This state-specific approach enabled the creation of more responsive and actionable resources by considering Wisconsin's public health priorities, CHW workforce environment, and readiness across rural, urban, and tribal areas.

The collaboration between WI DHS and Envision CHW to develop this toolkit offers a model for other states seeking to adapt national CHW integration frameworks to meet local needs. Creating tailored, state-level roadmaps is a crucial step toward supporting the long-term, sustainable integration of CHWs into public health systems.

11:00 AM - 11:15 AM Program: Asian & Pacific Islander Caucus for Public Health



Session: 5068.0 - Shaping the Future of Public Health: Building trust. addressing health diversity, equity and inclusion, and tailoring culturally healthy communication in AAPI communities.

Title: Adapting Evidence-Based Practices for Asian American and Asian Immigrant Communities: Insights from Community-Based Organizations and Service Providers in California

Presenter: Public Health Institute (CA)

Session Format: Oral

Abstract: Evidence-based practices (EBPs) are essential in mental health services, yet they often fail to address the cultural, linguistic, and contextual needs of Asian American and Asian Immigrant (AAAI) populations. CBOs and service providers help bridge these gaps by culturally adapting EBPs to better serve AAAI communities.

This project underscores the importance of culturally adapting EBPs to improve their relevance and effectiveness for AAAI communities. CBOs and service providers discussed existing cultural adaptation practices that have improved engagement and built trust with AAAI populations. However, challenges and barriers such as limited resources and language access highlight the need for continued efforts in developing, implementing, and evaluating culturally adapted EBPs for AAAI populations.

11:15 AM - 11:30 AM Program: Community Based Public Health Caucus

Session: 5072.0 - Community perspectives and priorities driving change

Title: Building Community-Based Organizations' Capacity to Use Data for Equity-Centered Action: A Cohort Model

Presenter: Public Health Institute of Western Massachusetts (PHIWM)

Session Format: Oral

Abstract: While many Massachusetts community-based organizations express interest in using data for action, they report barriers that include difficulty understanding data, a lack of peer examples, and challenges determining appropriate actions.

The Massachusetts Department of Public Health's (MDPH) Community Health Equity Initiative (CHEI) is a community-engaged platform for data on structural drivers of health. CHEI collaborates with partners to collect, analyze, and use data to advance health equity, including through capacity-building support around using data for action.

In fall 2024, MDPH and contracted partners Metropolitan Area Planning Council and Public Health Institute of Western Massachusetts convened a Data & Action Peer Learning Cohort comprised of 30 community-based organization staff. The cohort's aim was to build capacity to use CHEI and



other data for funding, programming, and advocacy. Over four virtual meetings, CHEI facilitators introduced data & action frameworks, invited organizations to share examples of using data to advance their work, and facilitated breakout sessions to foster peer learning.

Ongoing cohort meetings built trust between MDPH and community partners and generated collaborations among member organizations. Further, the cohort facilitated direct data sharing with community partners. Ultimately, members reported they were further along in their data-to-action process following the cohort series.

Capacity building around using data for action can build community capacity to advance equity-centered work. Based on cohort members' positive evaluations and requests for further capacity-building, the CHEI team expanded upon the approach to create a publicly available workshop series that has reached 100+ Massachusetts organizations.