



# KPHA E-NEWS UPDATE

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**KPHA Members Attend APHA Annual Conference in Boston**



Several KPHA members attended the Boston conference and we will hear from all those that will send a brief report for the eNews Update, on what they gained from the experience. The first is from our new Treasurer, Sonja Armbruster with the Sedgwick County Health Department! Her report is below:

You asked for a brief summary about my experiences at APHA and as I have reviewed my notes, I realize it will take me awhile to digest and put these experiences to good work locally.

I followed my core interests, so most of the sessions I attended related to advocacy, health communication (including marketing and media), and health promotion programmatic efforts.

As we consider moving forward with legislative advocacy, I think we can learn a lot from the Connecticut Public Health Association. Their president suggested starting with targeted, winnable efforts with issue specific coalitions-as your partners for primary prevention seatbelt legislation may be different than increasing public health budgets. He also stressed the need for well crafted messages that have anecdotes and data to back them up. He believes that much of the legislative process is emotion, not cognitive. I am reminded that so often we know that of course we have "right" on our side when we want public health legislation, but the story telling and emotional impacts can't be forgotten. This leads me to my second emphasis area, communication. Reporters from the Boston Globe and NPR reminded us that they call them news stories for a reason. This means there need to be characters and a plot, and sometimes we forget that part when we want our issues covered. They also reminded us that when we can tie our public health topic to a recently released study, that can help them sell it to their editors-because then it is news, even if we are talking about tobacco as we have for the last 40+ years.

Further, I heard a great speaker sharing about the tactics of tobacco marketing done through direct mail to current users; and, on the flip side, heard speakers about CDC's new effort called the National Center for Health Marketing. I also saw many great posters on successful health promotion efforts.

At the heart of things, learning from the work of others is one reason to go to a major conference. However, just as important is the rejuvenation of passion for public health. Our work is about social justice and improving the health of the public--as American as motherhood and apples (not apple pie-we're fighting an obesity epidemic here).

I can hardly wait until next year, when the theme is ***Politics, Policy, & Public Health***.

All good things,

Sonja

Sonja Armbruster  
Health Promotion Coordinator  
Sedgwick County Health Department

Thanks, Sonja, for a terrific report.

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Another member, Dr. Mike Fox, with KUMC spoke at a session on behalf of KPHA below is the description of session. **[Click here](#)** for his power point presentation!

**SESSION DATE & TIME:** Weds, Nov 8, 12:30-2:00

**SESSION TITLE:** Public Health Associations and Local Partners - Fruit and Thorns

**OBJECTIVES:** Participants will learn about and assess a range of experiences of public health

associations with local partners, learning how associations have cultivated creative relationships, recognized potential pitfalls and worked through conflicts to sustain constructive partnerships.

**DESCRIPTION:** In an interactive dialogue panelists and audience will describe their public health associations' experiences, both fruitful and problematic, with in-state partners, including how some associations have created mechanisms through which to perpetuate partnerships (e.g. board composition, formal coalitions), navigated between partners with potential mission conflicts (e.g. Planned Parenthood and abstinence-only groups) or maintained respectful partnerships even through episodic conflicts (e.g. between associations and elected policy makers).

**PANEL:** Facilitator: Jerry King, Indiana Public Health Association

**Panelists:** Lynn Abrahamson, Connecticut Public Health Association; Dr. Mike Fox, Kansas Public Health Association; Geoff Wilkinson, Massachusetts Public Health Association

**Below is Dr. Fox's report:**

Just a brief update on the Affiliate session I attended last Wednesday at APHA in Boston.

Jerry King from Indiana did a great job of keeping it informal and making sure that everyone was able to contribute ideas into the robust discussion we had. He had us in a circle, which made for good interaction. Nobody left for a while even after the allotted time was done.

In addition to Indiana, states were represented from Connecticut, Massachusetts, Mississippi, North Carolina, Maryland, New York, Wisconsin, Florida, Colorado, and Alaska, along with some people from APHA. They were very taken with the idea of the Alliance for Health Advocates, but equally interested, I think, in finding creative ways to utilize students to extend our outreach and advocacy capacities.

Some other ideas that were exchanged:

the need to balance short term efforts aimed at influencing legislation with more long-term strategic planning;

successfully reaching out to "non-traditional" partners, especially in the business community, who now are beginning to interpret reduced demand for medical services among their employees and controlling risk through preventive measures as somehow connected to public health;

the need to keep board members invested through regular meetings and committee involvement. The most frequent time between board meetings appeared to be three months, with call-in capacity for each call but face-face encounters preferred. Obviously, Connecticut and Alaska represented geographically polar opposites on this approach.

the use of strategically selected ex-officio board members to extend outreach, having them serve or lead committees;

maintaining ongoing self-assessment through SWOT analysis, and using this approach to determine who best to partner with and the needed direction for further outreach;

"paying more attention to history (of the organization and influence of public health in the state) and not moving too quickly." This was an

observation of the representative from North Carolina in response to dealing with potentially competing organizations under a large umbrella organization.

serving as incubators for other advocacy organizations;

doing an "environmental scan" of members to determine where additional representation is needed;

using events in a state as catalysts to extend partnerships and alliances. This was raised by the representative from Mississippi in reference to post-Katrina coalition building.

Overall, I found this session extremely beneficial and enjoyable. Really nice people in a helpful atmosphere. I wasn't shy in offering our approaches to the group, but found probably the greatest value in hearing that affiliates in other states are dealing with many of the same challenges. This was an excellent opportunity to network in ways that could prove very helpful to all of us.

Thanks for the opportunity to attend.

Mike

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## **KPHA Helping with the KDHE Committee for the 2nd Annual Governor's Conference on Public Health**

Below is the announcement about the spring conference. KPHA member, Linda Frazier, is doing a terrific job in leading this effort. President Ed Kalas has also been involved at the meetings, along with other KPHA members on the committee.

**"New Frontiers in Public Health"  
April 30, May 1&2, 2007  
Grand Prairie Hotel, Hutchinson, KS**



The 2nd Annual Governor's Public Health Conference will be held on April 30, May 1&2, 2007, at the Grand Prairie Hotel in Hutchinson, Kansas. The combination of previous conferences (MCH, KPHA, and Public Health Nursing) made last year's Governor's Public Health Conference a success and that partnership continues this year.

A "Call for Presentations" will be sent out electronically in the next few weeks. The 2007 Conference theme is "New Frontiers in Public Health".

The goals of the conference are:

Identify actions to positively affect the top three cross-cutting issues impacting multiple Leading Health Indicators, as listed in Health Kansas 2010:

1. Reducing and Eliminating Health and Disease Disparities
2. System Interventions to Address Social Determinants of Health
3. Early Disease Prevention, Risk Identification and Intervention for Women, Children and Adolescents

Offer programs in the top three public health competency training need areas identified in the 2005 Kansas Local Health Department Workforce Needs Assessment:

1. BT and Emergency Preparedness
2. Basic Public Health Science Skills
3. Community Dimensions of Practice

For more information, Contact:

Linda Frazier

KDHE Public Health Workforce Dev. Coordinator

[lfrazier@kdhe.state.ks.us](mailto:lfrazier@kdhe.state.ks.us) (785) 296-3641

**Sponsors of this program include: Kansas Department of Health and Environment, Kansas Public Health Association, Kansas Association of Local Health Departments, Heartland Centers for Public Health Community & Capacity Development, Heartland Centers for Public Health Preparedness.**

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**Governor's Column: Giving Thanks**



The following is a column by Governor Kathleen Sebelius:

This month, we had the opportunity to once again select the leaders of our state and nation. The right to cast a ballot is one that many have fought and died for over the years, both as part of our nation's military and in the civil rights struggles, the echoes of which still call out to us today.

The right to vote too often goes unexercised, but nevertheless it is one for which we should all be thankful.

Giving thanks is something we are reminded to do each year at this time, when we gather together with our friends and family to celebrate Thanksgiving and to take stock of the blessings we've received over the past year.

Last Thanksgiving, I had the opportunity to travel to Iraq and Afghanistan to visit Kansas soldiers who were deployed to those nations. Being away from their families was difficult for these men and women, but they made the best of it by having a traditional turkey dinner and by sending messages home to their loved ones.

One of these units - the 2nd Battalion of the 137th Infantry - returned home to Kansas this month, just in time for Thanksgiving. I know I join all Kansans in saying "welcome home" to these brave men and women who spent the past year in Iraq, seeking to bring stability to that troubled nation.

But as we welcome home these soldiers, we must also remember the Kansans who are still deployed overseas this Thanksgiving. And we must remember that many Kansans will never return home, having given their lives in the service of their nation.

As you celebrate Thanksgiving, I hope you'll join me in thanking the men and women who will spend the holiday away from their families, as well as those who have paid the ultimate price in the defense of our rights and our nation.

We live in a great and free country, and for that we should all give thanks.

Happy Thanksgiving!

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## Job Openings



## **Sedgwick County, Kansas Senior Epidemiologist**

### **Job Objectives:**

This professional position is responsible for epidemiology program supervision, which includes public health surveillance, disease investigation, outbreak management, and public health data keeping. The overall goal of this section is planning and implementation of epidemiologic initiative to evaluate and control communicable or chronic diseases, injuries, or other conditions. Work is directed and reviewed through the establishment of goals and subsequent evaluation of progress toward goal attainment.

### **Essential Job Functions:**

Supervises and directs epidemiology programs.

Supervises, evaluates, and develops epidemiology staff and interns.

Manages local and grant budgets that fund these programs.

Designs and implements epidemiological studies, surveillance systems and reports.

Determines and utilizes appropriate statistical methods to evaluate and interpret data.

Advises Health Officer and Director of Health as necessary for community containment and disease management events.

May function as delegate of Health Officer if requested.

Interacts with the media and conveys information to the public when necessary.

Provides consultation to health care professionals, community organizations and others on specific disease, injury or conditions.

Lectures for various organizations on diseases, injuries and conditions, and prepares and reviews educational material for public distribution.

Researches, develops and maintains the necessary epidemiological data bank, policies and procedures to be followed in epidemiological investigations including specimen collection, diagnosis verification, determination of immunization eligibility, case reporting and statistical compilation.

Consults with state and regional health officers, private physicians, school officials, and others on the prevention and control of diseases.

Performs related work as required.

### **Job Standards:**

Thorough knowledge of epidemiological methods, a working knowledge of laboratory methods, parasitology, toxicology, immunology and pathology; and a basic understanding of medical terminology, statistical analysis in software packages, biometry and demography, and social and economic conditions.

Thorough knowledge of principle federal, state, county and local laws and regulations applicable to epidemiology and disease control.

Considerable knowledge of cultural factors, including social, economic and health, as they relate to disease control and patterns of disease communication.

Ability to work effectively with both professional and lay people; to meet with the public and conduct such public information programs as necessary.

Ability to write technical and non-technical informative material.

Ability to communicate clearly and effectively, both orally and in writing.

Ability to utilize personal computers, applicable software and manipulate large databases.

Ability to work as a team member, to develop and maintain effective working relationships with associates, employees of other Departments, representatives of other organizations, and the public.

Ability to acquire and maintain a valid Kansas driver s license.

An employee shall not pose a direct threat to the health or safety of other individuals in the workplace.

A masters in public health or an equivalent degree in a biological, medical, health science or related field including coursework in epidemiological methods is required; a doctorate is preferred. A minimum of three years experience in epidemiology is necessary, preferably in a public health agency; administrative experience a plus. Strong communication, interpersonal, problem-solving and computer skills are required. Any equivalent combination of experience and training will be considered.

**Equipment:**

Office equipment and other relevant tools

**Work Environment:**

Office and some field work.

SALARY; \$48,827/YEAR

M-F 8 a.m. to 5 p.m.

1530 S. Oliver Suite 130 Wichita KS 67218

Valid Kansas Drivers License Required. Must meet Driver Qualification standards as set forth in Sedgwick County s Fleet Vehicle Operation and Usage policy (R#225-1999).

This position may be filled or closed to further application without notice.

Sedgwick County will prohibit the hiring of spouses and/or immediate family members within the same department, but not within the County structure.

Immediate family and family of the employee s spouse shall be considered husband, wife, son, step-son, son-in-law, daughter, step-daughter, daughter-in law, brother, step-brother, brother-in law, sister, step-sister, sister-in-law, mother, step-mother, mother-in law, father, step-father, father-in-law, grandchildren, grandparents and grandparents-in-law.

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VN: 20002312111506 \$/ Open Until Filled.

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**Legislative News from APHA**



Below is some interesting news about what is happening in other states related to public health!

**State Ballot Initiatives:** In addition to Congressional, Gubernatorial, State and Local races on the ballot this month, voters across the country weighed in on more than 200 state ballot measures on election day, ranging from raising the minimum wage to same-sex marriage. A number of those measures allowed voters to directly weigh in on health related initiatives. Summaries of the measures listed by issue appear below.

**Abortion:** South Dakota voters effectively repealed a law banning abortion under all but the most limited circumstances. In addition, voters in California and Oregon defeated ballot measures that would have required physicians to notify parents at least 48 hours before performing an abortion on a minor.

**Raising the Minimum Wage:** Voters in six states approved ballot measures boosting their minimum wage above the federally mandated \$5.15 an hour, giving a boost to the newly empowered Democrats in Congress who have vowed to raise the wage nationwide.

**Tobacco:** Voters approved an unprecedented six statewide ballot initiatives to require smoke-free workplaces, increase tobacco taxes and fund tobacco prevention programs. Voters approved ballot measures in Arizona, Nevada and Ohio to require smoke-free workplaces and public places; in Florida to require that tobacco settlement money be used to fund tobacco prevention programs; in South Dakota to increase tobacco taxes and fund tobacco prevention and other health care programs; and in Arizona, to increase tobacco taxes and fund early childhood development programs.

**Stem Cell Research:** Voters in Missouri approved a constitutional amendment that would allow scientists in the state to conduct any form of stem cell research permitted under federal law and ensure patients there access to any cures and therapies that might result from such research. The measure also set some limits, including banning human cloning.

**Affirmative Action:** Voters in Michigan approved a constitutional amendment to ban affirmative action programs in government contracts, hiring and higher education admission. At least one organization has filed suit in U.S. District court to prevent the ban from going into effect. A similar ban was adopted in California in 1996. The ban would have a significant effect on the University of Michigan, which uses race in its admissions policies. According to press reports the University is also plan to legally challenge the ban. [Back to top](#)

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## MOKAN Safety & Health Council News



# Safety & Health Council of Western MO & KS

5829 Toost, Kansas City, Missouri 64110

Phone: (816) 842-5223

Fax: (816) 842-6226

Due to the high cost of snail mail, and the amount of time required to do a surface mail out, the Safety & Health Council has eliminated almost all surface mail. If you would not like to receive e-mails from the Safety & Health Council of Western MO & KS, please notify us at [shc@safetycouncilmoks.com](mailto:shc@safetycouncilmoks.com). We would hate to loose valuable friends like you.

If you have any contributions or articles that you would like to have in the next newsletter, please let us know. We are most appreciative of all contributions!

If you have any questions or comments, please do not hesitate to contact any of the staff or myself.

Kathy Zents  
President

[Click here](#) for the latest newsletter from the Council. [Back to top](#)

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## Legislative Session Nears-KPHA Plans to Meet with Legislators Prior to Session

Dr. Kim Richter, Chair, KPHA's Legislative Issues and Action Committee, is chairing a meeting on November 30 for the group, AHA-KS (Alliance for Health Advocates-KS) to discuss a "health" legislative platform and the upcoming session. In addition we plan to meet with the Chairs of the Health Committees prior to the session starting. If you are interested in attending the meeting and especially interested in serving on the Legislative Issues and Action Committee just email the KPHA office. The meeting is set for November 30th at 3:30 PM at the Shawnee County Library in the 2nd Floor Anton Board Room. [Back to top](#)

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## Board Member, Ed Garner, Shares Flu Email, for Us All to Heed!

### ~Love Story~

I will seek and find you . .  
I shall take you to bed and have my way with you.

I will make you ache, shake & sweat until you moan & groan.

I will make you beg for mercy, beg for me to stop.

I will exhaust you to the point that you will be relieved when I'm finished  
with you.

And, when I am finished, you will be weak for days.

All my love,

The Flu

Now, get your mind out of the gutter and go get your flu shot!

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Happy Thanksgiving!

Wishing you and yours a blessed holiday!!

Elaine Schwartz, Executive Director  
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