Dear Colleagues,

Welcome to 2016! I look forward to an active and productive year for MPHA.

First, I would like to welcome Joseph Scariot as our student liaison from the Student Public Health Association of Missouri (SPhAM) to the MPHA Board. Joseph is a second year MPH Student and Global Health concentrator at Saint Louis University’s College for Public Health and Social Justice (SLU-CPHSJ). His primary interests include infectious disease epidemiology, biosecurity, bioterrorism prevention, nonprofit management, and global health.

Policy Advocacy has already taken off with a bang (pun intended) as the Board wrote a letter in support of ending the federal ban on gun violence research, as well as testimony to amend HB 1553, to add funding to accompany the responsibility of local public health departments to inspect health and safety conditions of commercial lodging facilities.

The Board is already beginning to plan the Annual MPHA/MOALPHA joint conference. Also, the Steering Committee for the Transformation of the Future of Public Health in Missouri has set an active meeting schedule. Some information about the Transformation has been published on the MOPHA website and you will see a status report later in this newsletter.

Once again, I entreat you to become active and to encourage your colleagues to join MPHA. Please consider making a nomination for one of the scholarships or awards given during the annual meeting. Check out the MoPHA.org website for additional information.

We thank you in advance for your active participation in promoting and improving public health in Missouri!

Yours in Health,

Linda Cooperstock
Retired
Columbia-Boone County Health Department
APHA Legislative Update

Senate Agriculture Committee unanimously approves bipartisan child nutrition bill
By unanimous consent, the Senate Agriculture, Nutrition, and Forestry Committee passed legislation to reauthorize federal child nutrition programs, including the school breakfast and lunch programs. APHA urged the full Senate to support the measure and for the House of Representatives to take a similar bipartisan approach to reauthorizing these important programs. The Improving Child Nutrition Integrity and Access Act would maintain the major nutrition-related standards for sodium, whole grains and increased fruits and vegetables in school lunches established under the 2010 Healthy, Hunger-Free Kids Act. It would also require the U.S. Department of Agriculture to revise guidelines for sodium and whole grain content to provide any struggling schools with additional time to meet the sodium standards and flexibility for whole grains. The bill would also support efforts to provide adequate kitchen equipment, technical assistance and training to school districts in need.

President Obama vetoes bill to roll back Clean Water Act protections
President Barack Obama vetoed S.J. Res 22, legislation to nullify a rule finalized by the U.S. Environmental Protection Agency and Army Corps of Engineers to clarify which U.S. waters are protected under the federal Clean Water Act. The resolution employed the Congressional Review Act, a 1996 law that allows Congress by a simple majority in each chamber to overturn executive branch regulations. However, enactment of the resolution would still require the president’s signature, and any override of the president’s veto would still require a two-thirds majority of both the House and Senate – which is unlikely. APHA joined Trust for America’s Health and Physicians for Social Responsibility in opposing the resolution and sent a letter to House Speaker Paul Ryan, R-Wisc., and House Democratic Leader Nancy Pelosi, D-Calif., urging the House to reject the measure. On Jan. 21, the Senate, which had previously approved the measure in Nov. 2015, failed to overcome a procedural vote that would have allowed it to move to a vote to override the president’s veto.

APHA and health groups support HUD's smoke-free housing proposed rule
Late last year, U.S. Department of Housing and Urban Development Secretary Julián Castro and Surgeon General Vivek Murthy announced a proposed rule that would make public housing smoke-free. Under the proposed rule, public housing agencies would be required to implement a smoke-free policy prohibiting lit tobacco products in all living units, indoor common areas, public housing authority administrative office buildings, and up to 25 feet from the housing and administrative office buildings. HUD proposes for the rule to be implemented within 18 months of the final rule being issued. Implementing smoke-free regulations would decrease exposure to secondhand smoke and promote the health of residents and public housing authority staff. APHA’s comments also urged HUD to include electronic nicotine delivery systems and waterpipe tobacco, focus enforcement efforts of the rule on smoking and tobacco cessation, and extend the smoke-free policy to all federally supported housing such as subsidized housing and mixed-finance developments. APHA also joined other leading health organizations in offering support and comments for the proposed rule.

Advocates call for balanced opioid prescribing guidelines
APHA joined a diverse group of stakeholders as part of the Collaborative for Effective Prescription Opioid Policies to offer comments on the Centers for Disease Control and Prevention’s proposed 2016 guidelines for prescribing opioids for chronic pain. In 2012, health care providers wrote 259 million prescriptions for opioid painkillers, which would be enough for every adult in the U.S. to have a bottle of painkillers. More than 16,000 people died from an overdose of prescription painkillers in 2013.

Child nicotine poisoning prevention signed into law
President Barack Obama signed the Child Nicotine Poisoning Prevention Act of 2015 into law. The law requires the use of child-resistant packaging for liquid nicotine containers used for e-cigarettes and other vaping devices, consistent with Consumer Product Safety Commission standards. Liquid nicotine products are often sold in containers without any child-proofing and come in bright colors and candy flavors, which make these substances attractive for ingestion by young children. Liquid nicotine can be absorbed quickly through the skin as well as ingested, putting children at risk of being poisoned. Even very small doses can be lethal to small children. According to the American Association of Poison Control Centers, e-cigarette devices and liquid nicotine exposures reported to poison centers jumped from 271 cases in 2011 to 3,067 cases in 2015. APHA has supported multiple iterations of the bill since it was first introduced in Congress in 2014.
Policy Watch:
State and International Updates

State and local legislation threatens health of transgender people
The Fenway Institute and Center for American Progress released a policy brief examining state and local legislation that would prevent transgender people from using gendered public facilities, such as restrooms or locker rooms that align with their gender identity. In 2015, five state legislatures — Texas, Kentucky, Florida, Minnesota and Missouri — considered the introduction of bills that would restrict access of transgender people to public bathrooms and locker rooms. The brief discredits safety concerns regarding the use of these spaces by transgender people. Research has shown the opposite, instead transgender people are often the ones who experience discrimination and harassment in these public spaces. These experiences of discrimination are associated with negative physical and mental health outcomes as well as access to equal opportunities for employment, education and social spaces.

Kentucky governor announces state’s insurance exchange program to be dismantled
Kentucky Gov. Matt Bevin plans to shut down the state-managed health insurance exchange, Kynect, created under the Affordable Care Act. Those seeking health insurance will be directed to use the federal health insurance site, healthcare.gov. The decision to end Kynect is part of Bevin’s overall plan for the state’s Medicaid program, which provides health insurance to low-income residents. Bevin is seeking to “transform” the existing expanded Medicaid system in the state to resemble Indiana’s model, which is a complex variation on traditional Medicaid coverage. More than 500,000 people in Kentucky have gotten insurance through Kynect, and dismantling the system is estimated to cost the state at least $23 million.

Zika virus spreads rapidly through Central and South America
May 2015 marked the first reported case of the Zika virus in Brazil. Twenty-four countries have reported active transmission of the virus. On Feb. 1, the World Health Organization officially issued a global health emergency over the Zika virus. WHO states the virus has spread explosively throughout South and Central America and they are estimating that more than four million people could be infected by the end of 2016. CDC issued recommendations for those traveling to areas with reported cases of Zika—covering exposed skin with long-sleeved shirts and long pants, use of EPA-registered insect repellent, and sleeping in screened-in or air-conditioned rooms, and issued special precautions for women who are pregnant or trying to become pregnant. The most common symptoms of Zika are generally mild including fever, rash, joint pain or conjunctivitis. However, there is also a major health concern regarding the potential link between the virus and birth defects including microcephaly, a birth defect that affects a baby’s brain and skull growth, and Guillain-Barré syndrome. Brazil has had the largest number of cases with 4,180 cases and the death of 70 babies whose mothers were diagnosed with the virus.
Gun Policy and Gun Safety
A Letter from Senator Claire McCaskill

August 18, 2015

The Honorable Senator McCaskill/Blunt,

I am writing on behalf of the Missouri Public Health Association (MPHA), an organization dedicated to identifying key health issues facing Missourians and advocating for resolutions. The MPHA is the single largest public health professional organization in the state, with nearly 400 members. Our members come from all disciplines of public health, including medical providers, health administrators, sanitarians, health educators among others.

The reason for this letter is the proposed federal public health funding for FY16. It has come to my attention that there is a proposed $32 million budget cut to the Sexually Transmitted Diseases (STD) prevention programs in state and local governments all across the nation. As you may be aware, there has been a significant rise in STD rates across the state of Missouri in recent years, syphilis in particular. That funding could be used in a number of ways to prevent and treat sexually transmitted diseases in Missouri.

The members of the MPHA urge you to reconsider this budget proposal in light of these facts, and to help us work to reduce the incidence of these preventable conditions.

Sincerely,

Bert Malone
Bernard R. Malone, M.P.A., Chair
Advocacy and Public Policy Committee, MPHA

February 16, 2016

Dear Mr. Malone,

Thank you for contacting me regarding gun policy and gun safety. I appreciate hearing from you, and I welcome the opportunity to respond.

As you know, the Second Amendment to the Constitution guarantees Americans the fundamental right to bear arms. I strongly support legal and safe gun ownership by law-abiding citizens, and I welcomed and supported the Supreme Court’s decision in District of Columbia v. Heller that made clear that the constitutional right to gun ownership is an individual one.

At the same time, we have to make sure that guns do not fall into the hands of individuals who should not have them, like criminals and individuals with mental illnesses. Recent shootings across the United States have made it clear that we should have sensible, constitutional controls on gun ownership that address safety in our communities. In the wake of each tragedy, I have heard from many Missouri gun owners who agree that commonsense protections, such as background checks or limiting access to high capacity ammunition magazines and weapons designed for use by soldiers in combat, are sensible measures. Veterans and hunters alike believe

(Continued on page 5)
that we can implement certain measures to improve the safety of Americans, while not infringing on Second Amendment rights.

That is why I have joined my colleagues in supporting proposals that would strengthen current background check requirements for firearms purchases, close the background check loophole for guns purchased at gun shows or online, and close the pipeline of illegal guns by making gun trafficking a crime. I am also a cosponsor of the Denying Firearms and Explosives to Dangerous Terrorists Act (S.551), which would give the Department of Justice the authority to prevent a known or suspected terrorist from buying firearms or explosives. Under current law, individuals who are known or suspected terrorists cannot be stopped from purchasing a gun, even though they are prohibited from boarding airplanes. That loophole must be closed.

I am also concerned that many of those responsible for mass shootings have suffered from mental illness. In light of this, we must consider the mental health services available to our citizens, as a more robust mental health care system would help identify and treat individuals who need help before they resort to violence. I am strongly committed to expanding access to mental health services which is why I have voted to increase mental health services in schools, as they relate to suicide prevention and recovery from traumatic events, and I supported the Affordable Care Act, which expanded critical mental health coverage.

I understand that some have concerns about the Obama Administration proposal to curb gun violence. However, due to my belief that we need stronger background check requirements and more expansive mental health coverage for Americans, I am in support. By dedicating significant new resources to increase access to mental health care, ensuring that the appropriate information is reported to the National Instant Criminal Background Check System and removing unnecessary legal barriers that prevent States from reporting relevant information to the background check system, among other measures, I believe that we can save lives.

As your U.S. Senator, I have a responsibility to Missourians to ensure public safety and I firmly believe that this nation can unite in support of sensible laws that prevent the mass murder of innocent citizens, while we continue to respect the Constitution. As future gun measures to reduce gun violence are considered in Congress, please know that I will keep your views in mind.

Again, thank you for contacting me. Please do not hesitate to contact me in the future if I can be of further assistance to you on this or any other issue.

Sincerely,

Claire McCaskill
United States Senator

P.S. If you would like more information about resources that can help Missourians, or what I am doing in the Senate on your behalf, please sign up for my email newsletter at http://mccaskill.senate.gov.
Transforming the Future of Public Health in Missouri Update

Robert Niezgoda, MPH, Director of Taney County Health Department

In 2014 the Transforming the Future of Public Health in Missouri Committee was formed to research and develop the scope of a proposal for the transformation process of the public health system in Missouri. This early work was funded by a grant from the Missouri Department of Health and Senior Services with a partnership with the Indiana University School of Public Health-Bloomington. A number of stakeholders were invited to participate in this committee with representatives from MPHA, MOALPHA, DHSS, academia, and LPHAs. The early work focused on identifying models of similar transformation projects in the United States, as well as, to develop a greater understanding of the public health system in Missouri. There were many assumptions early on, but in order to move forward, a clear understanding of the issues was needed. The feedback gathered from stakeholders during the Annual MPHA/MOALPHA Meeting Interviews and key informant interviews helped clarify many issues that were present in Missouri’s Public Health system. Stakeholder comments focused on the fragmentation of the public health system, as well as the lack of coordination, resources, and leadership. From this feedback from stakeholders, the committee developed the following goals for the proposal:

Goal 1: Identify the vision for 2030 through statewide stakeholder engagement process

Goal 2: Conduct comprehensive review of Missouri public health system guided by Foundational Public Health Capacities and Services framework

Goal 3: Establish a plan to transform Missouri’s public health system

The proposal was finalized in 2015 and, currently, funding for the implementation phase of the proposal is still being sought. Meetings are being held with various foundations, partners, and stakeholders to present the goals of the proposal and the need for the transformation of the public health system in Missouri. This has proven to be a challenge thus far. However, the feedback received during these conversations has been encouraging. The Transforming the Future of Public Health in Missouri Committee would like to thank all of the members of the Missouri Public Health system for their feedback and continued support with this project. As the work continues, information such as meeting minutes, presentation materials, and other project materials will be posted on the MPHA website. This will help facilitate discussion, share information, and increase engagement among more stakeholders of the Missouri public health system. So, please visit the website, share information, and encourage others to discuss and promote this transformation.

Academic Public Health Consortium

Alexandra Cooke, Beacon of Hope Fellow, University of Missouri

Representatives from the Missouri academic public health programs, University of Missouri, Missouri State University, Saint Louis University, Washington University, and Lindenwood University, met on Friday February 5th, 2016 at Saint Louis University to discuss the state of public health. The universities presented information regarding the requirements their internship programs set forth for students and preceptors. This led to a discussion about how student interns influence and affect the delivery of public health, particularly in Missouri where public health is continually underfunded. The Beacon of Hope Fellowship Program was considered as a model of intern placement at rural local public health agencies. Methods to lessen the burdens placed on preceptors from local public health agencies and the students that complete their internships at these sites were proposed and considered including: creating an interactive portal that students and LPHAs can access for information about internship postings, trainings for students regarding community health assessments, and webinar trainings for potential preceptors. The Consortium plans to meet again to deliberate these objectives in greater depth and consider the role of academic public health in Missouri.
Our Vision: Health People in Health Jefferson County Communities

Chrissy Oberle, MPH
Health Education Supervisor
Jefferson County Health Department

In 2015, the Jefferson County Health Department (JCHD) received a grant from the Missouri Department of Health and Senior Services (MODHSS). This funding provided JCHD with an experienced facilitator (Beverly Tremain) to familiarize and work towards, completing a Local Public Health System Assessment (LPHSA) and Forces of Change Assessment (FOCA) in adherence with a community planning process called Mobilizing for Action through Planning and Partnerships (MAPP) framework. The LPHSA serves to identify the strengths and weaknesses of Jefferson County’s public health system through discussion of and voting on the extent to which 10 Essential Public Health Services (EPHS) occur in the County. These 10 EPHS represent a broad spectrum of public health activities that contribute to healthy, vibrant communities. The LPHSA helps to answer questions such as “what are the activities and capacities of Jefferson County’s public health system?” and “How well are we providing the Essential Public Health Services in Jefferson County?”

Forty-two representatives from health care institutions, government agencies, community groups, and service providers were invited to complete the LPHSA. JCHD assigned these individuals to certain groups based on their specific role in the community. Once familiar with the process, the group began the assessment of their assigned Essential Service. The groups reviewed assessment questions as provided in the Local Public Health System Assessment Instrument. Participants discussed key activities supporting all 10 EPHS. In total, LPHSA participants voted on more than 100 actions relating to 29 model standards. Each small group was facilitated by a JCHD staff member. JCHD also provided scribes for each group who were responsible for capturing the performance scores as well as discussion notes. Examination of these performance scores provided an immediate sense of the local public health system’s greatest strengths and weaknesses. The goal is to have the Local Public Health System review and discuss these performance scores to identify potential strategies for system-level improvements.

Through discussion of each of the 10 EPHS, information necessary for the FOCA was also collected. The FOCA requires the identification of key factors that impact the community and local public health system. During the FOCA, questions such as “What is occurring or might occur that affects the health of our community or the local public health system?” and “What specific threats or opportunities are generated by these occurrences?” were answered. Forces of Change impacting or having the potential to impact the local public health system were noted at the work session in 2015 when reviewing each essential public health service. This information, in combination with forces of change information gathered from analysis after the event, was categorized into strengths, weaknesses, opportunities, and threats that may impact the public health system regarding each essential public health service that the system conducts.

In addition to the Local Public Health System Assessment and Forces of Change Assessment, JCHD also updated their Community Health Assessment and plans on completing a Community Strengths and Weaknesses Assessment in 2016. To view the LPHSA and FOCA in detail please visit our website at www.jeffcohealth.org.

Jefferson County Health Department-Hillsboro Office
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Phone: 636-797-3737 ~ Fax: 636-797-4631
APHA Updates
Peer Learning Network Launched mid-January and looking for topics and presenters to share on the network; technical assistance needs survey is currently open for affiliates to complete, Affiliate Affairs is summarizing annual affiliates’ reports and finalizing NPHW tools.

National Public Health Week - April 4-10, 2016
Healthiest Nation 2030 is the theme; let’s make America the Healthiest nation in one generation. This is APHA’s 20th year promoting National Public Health Week. APHA has opportunities to get involved in National Public Health Week 2016.

- Become a National Public Health Week Partner at www.apha.org/2030
- Visit www.nphw.org to download materials and find out more about this year’s daily themes and activities

MPHA’s Patricia Parker completed her term as the Council of Affiliates (COA) Chair and will serve as COA Immediate Past Chair while KPHA’s Eldonna Chestnut began her role as the Council of Affiliates (COA) Chair. Eldonna has been active in the Kansas Public Health Association and most Recently served as the Kansas ARGC.

Nominations needed for APHA President elect, treasurer and Action Board members; abstract call for APHA sessions will be coming soon; COA sessions are not part of the call for abstract but are in the planning and look for calls to present.

Update on CoA Activities- Annual Affiliate report is Important for assisting with COA work plans and data will be pulled out of the reports for the COA work plan accomplishments; working on revising the Affiliate MOU in 2016-Eldonna asked each state association to review our MOA with APHA and send any updates needed to her so we have input in the new MOU. APHA Section Chairs are interested in working with affiliates.

MINK Region VII Updates
Nebraska is the host state for the MINK 2016 Regional meeting; Omaha will be the location with the dates and topics to be determined.

- Meeting will be structured similar to previous meetings with midday start on potentially Tuesday and ending midday on Wednesday with three potential panels with a representative from each state sharing their insight on 1) Medicaid panel, 2) clean power plan panel and 3) state accreditation panel.

MINK ARGC conference calls continue on the 1st Monday Of each month at 2:30 CST. The call is open to all affiliate members. Please contact Denise at DSL9171@bjc.org or 314-580-8713 for the call in information.

APHA Nominations
APHA is now accepting applications for the positions of president-elect, treasurer and Executive Board members. Information about the positions and nominations packets are available on APHA’s website at www.apha.org/nominations-committee.

The deadline for nominations is Friday, April 15, 2016.

Respectfully submitted,
Denise Strehlow
DSL9171@bjc.org
314-580-8713
**Tobacco 21**

Alicia Nelson, MPH, CHES, Public Health Manager

*Independence Health Department*

Kansas City, Columbia, and Independence, Missouri have all joined Hawaii and over 100 cities and counties, in eight states, in raising the minimum legal sale age for tobacco, alternative nicotine devices, and vapor products to 21. Columbia led the way by passing the state’s first Tobacco 21 ordinance on December 15, 2014. Progress continued as Kansas City and Independence followed that lead. Kansas City became the second most populous city behind New York City, to adopt a Tobacco 21 ordinance. Independence’s ordinance will take effect on March 1, 2016, making them the third city in Missouri to adopt this ordinance.

Tobacco 21 ordinances prohibit the sale of tobacco products, alternative nicotine products, or vapor products to anyone under the age of 21. Ordinances only affect the selling and purchasing age, not use.

The goal of the Tobacco 21 ordinance is to save lives by reducing the initiation of tobacco and nicotine products among youth. Research shows that ninety-five percent (95%) of all adult smokers started smoking before age 21. According to the Centers for Disease Control and Prevention, everyday more than 3,800 children age 18 or younger smoke their first cigarette and those who have had their first cigarette by age 18 are most likely to become life-long smokers. Although this ordinance only affects the selling of tobacco products, the Institute of Medicine still cites that raising the legal age to purchase tobacco to 21 would result in 249,000 fewer premature deaths and 45,000 fewer deaths from lung cancer. One study found that 75% of adults are supportive of raising the minimum tobacco age of sale to 21, including seven in 10 smokers.

Having fewer Missourians who smoke will lower the state’s health care costs and improve the health and quality of life of its citizens. Let’s keep the momentum going by encouraging other cities within the state to adopt Tobacco 21, in order to curb underage tobacco use and prevent initiation.

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**New MPHA Members**

Pat Volkerding, Humana, Inc, November 2015

Mary Ann Signaigo, Franciscan Sisters of Mary, December 2015

Elizabeth Queathem, University of Missouri-Columbia Student, December 2015

Michelle Teti, University of Missouri-Columbia, January 2016

Denise Strehlow, BJC School of Outreach and Youth Development (Organizational), January 2016

Brenda Maley, Missouri Dept. of Health & Senior Services, February 2016

**Join MPHA**

Are you a member of APHA but not currently a member of MPHA? We need your membership to further the message of public health in Missouri.

The benefits of being a member of MPHA include:

- Three newsletters a year filled with up-to-date information
- Legislative updates on Missouri issues as well as national topics impacting Missourians
- Annual meeting with other public health professionals
- Statewide network of public health professionals

*If you are interested in membership in MPHA, please contact Denise Strehlow at dsl9171@bjc.org, 314-286-0504 or complete the membership form and return to the MPHA office.*
Foundation Scholarships

The MPHA Education Foundation awards four scholarships annually to Missouri public health professionals, students and local public health agencies. Scholarship applications are due no later than September 1st, and will be awarded at the annual public health conference in September. The following information provides a brief overview of each scholarship. Please go to http://www.mopha.org/scholarships-awards.php for details, applications and eligibility requirements.

Established in 1995, the Education Foundation receives funds that promote a higher awareness and knowledge of public health, to educate public health professionals, community leaders, and communities about public health issues, and to honor Missouri public health leaders by awarding scholarships in their name. In addition to giving scholarships, the Foundation supports awards to public health professionals and students, as well as educational programs to promote quality public health for Missouri.

Applicants may apply an unlimited number of times for each of our scholarships providing they qualify under the established requirements and have not been a previous recipient. More detailed information can be found on the MPHA website at http://www.mopha.org/scholarships-awards.php.

Edna Dell Weinel Scholarship
Edna Dell Weinel Scholarship provides the opportunity for practicing public health professionals to participate in this lifelong learning process. This scholarship, the value of which is dependent upon the request and need of the applicant(s), not to exceed $750, is available for public health workers to develop in their profession through educational meetings, professional credentialing, seminars or through traditional academic course work.

Jackie Liesemeyer Nursing Scholarship
Jackie Liesemeyer was a Community Health Nurse who worked for more than 20 years in various positions in the Central District Office of the Missouri Department of Health. Jackie’s spirit of independence and self-reliance was reflected in her approach to her clients, individuals, program representatives and local health units. She provided the information, support and encouragement that fostered growth and the ability to do for oneself all that was possible in the spirit of community health nursing. Jackie is honored with a $750 nursing scholarship in her name that will enable others to enhance public health in Missouri. One scholarship is awarded at the MPHA Annual Meeting, usually held in the Fall.

Leuthen–Brunner Local Public Health Agency Scholarship
Leuthen-Brunner Local Public Health Agency Scholarship grant honors Ron Leuthen and Phil Brunner, former MPHA members who worked tirelessly to advance local public health in Missouri. This award is designed to assist local public health agencies towards voluntary accreditation through Missouri Institute for Community Health or National Public Health Accreditation Board. This is a one-time grant for local public health agencies. The $750 scholarship will be awarded at the annual MPHA Meeting.

Health Professional Scholarship
The $750 Health Professional Scholarship is available for a MPHA member who is working on an undergraduate or graduate degree in a public health related field which will further their career. Examples of fields of study include: administration, epidemiology, health education, nursing, health promotion, etc.

Scholarships Awarded in 2015

Edna Dell Weinel Scholarship
Amanda Grodie

Health Professional Scholarship
Laura McCulloch
MPHA Members

Now in existence since 1925, the Missouri Public Health Association (MPHA) continues to strive to expand our services to meet the needs of public health across Missouri. We hope that you took part in one or more of the many events that we offered in 2015. Check out the 2016 calendar!

It is our mission to be the voice of public health in Missouri through advocacy, membership services and our Education Foundation. In order to meet our mission and provide services in our state, MPHA relies on the generosity of individuals and organizations for support. Without the investment of members like you, MPHA wouldn’t be able to continue to be the voice for public health across Missouri.

We are asking you to help us continue the public health message by a donation to MPHA Education Foundation. Every dollar counts in the advancement of public health. If each member would make a donation, imagine the progress and impact we could make in Missouri. Your generosity will make a difference in the future of MPHA by allowing us to continue in our work advancing public health in Missouri. The MPHA Education Foundation is a 501(c)3 corporation which means that donations to the Foundation are tax deductible.

Thank you in advance for your generosity.

Sincerely,

Linda Cooperstock
MPHA President

Donating is easier now more than ever. Visit www.mopha.org and click on the Scholarship/Awards tab. Your generous donations will help support educational opportunities for public health professionals and students and promote quality public health for Missouri.

Annual Conference

September 27-29, 2016
Stoney Creek Inn
Columbia, MO
Missouri Public Health Association: Call for Articles

As a member of the Missouri Public Health Association, you are invited to submit articles for our newsletter. We welcome submissions on any public health related topic.

Please include the following information with your article submission:
Name, Professional affiliation or academic institution (if a student), Title of article, Reference list and a headshot or photo of you doing public health work

Please keep your article to 300-500 words. Articles from members will be reviewed by the Missouri Public Health Association Board. Please email your articles and any questions to Corrie Courtney ccourtney@clayhealth.com and Sandy Boeckman sboeckman@mopha.org.

2016 Newsletter Schedule
February Newsletter ~ Article submissions are due by February 12
June Newsletter ~ Article submissions are due by June 3
October Newsletter ~ Article submissions are due by October 7

Northwest Chapter Report
Dan Luebbert

The Northwest Chapter of the Missouri Public Health Association continues to meet quarterly. The most recent Chapter meeting was held on January 12 in Independence and included 19 attendees.

At the meeting, Rashid Junaid and Jamal Shakur of the Aim4Peace Violence Prevention Program presented regarding their efforts in Kansas City. The program addresses violence as a contagious disease and a public health issue rather than addressing it through a traditional policing approach. Violence is a learned behavior and the program sets out to rewire the learned behaviors in those most likely to retaliate after a violent act.

Aim4Peace Staff are visible and active in the communities they serve, which gains them credibility. They respond to scenes of violence and engage the families affected by violence in an effort to stop the spread of the contagious disease.

In other business, after careful consideration, members voted to formally adopt Chapter bylaws. Also, members voted to endorse the HealthyKC Team in support of local “Tobacco 21” ordinances that raise the legal age for the purchase and sale of tobacco and nicotine products to 21.

The next meeting of the Northwest Chapter is scheduled at 11:30 AM on April 12, 2016 at the Ennovation Center in Independence. All interested parties are encouraged to attend.

Current Officers of the Northwest Chapter

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NOTE: The Executive Committee is made up of
the President, President-Elect, Immediate Past
President, Vice President, Secretary, Treasurer
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the President, President-Elect, Immediate Past
President, Vice President, Secretary, Treasurer
and the ARGC Rep.
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I want to help fulfill MPHA’s mission to promote health in the State of Missouri

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Areas of Professional Interest
☐ Citizen Health Involvement ☐ Other: ____________
☐ Health Promotion ☐ Public Health Nursing
☐ Infectious Disease ☐ Health Care
☐ Health Official ☐ Support Services
☐ Environmental Health ☐ Food and Nutrition
☐ Chronic Diseases

I'd like to serve on the following committees:
☐ Education
☐ Membership
☐ Annual Meeting
☐ Resolutions & Bylaws
☐ Advocacy & Public Policy
☐ Public Health Week

PAYMENT OPTIONS
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