

Communiqué

PRESIDENT'S MESSAGE

November 2014



Linda Cooperstock, Retired
Columbia-Boone County Health Department

Dear Colleagues,

Hope this finds you all well and enjoying our transition into winter. I am very happy to report that we had an exceptional annual conference and a record number of attendees (234), posters (16), and exhibitors/sponsors (21)! This could not have been accomplished without our efficient Executive Director, Sandy Boeckman and her energetic and highly organized staff. Also, thank you to Mahree Skala for her diligence in coordinating the session topics and speakers. I also want to commend the conference planning committees of both MPHA and MoALPHA.

At the annual meeting we heard about several issues that impact public health. For those who could not attend, some examples include:

- The Health Care Home project that shows the absolute necessity to integrate primary care and behavioral health care to ensure appropriate care for those special populations with complex medical conditions and severe mental illness.
- Bullying as a cause of long-term health issues requires prevention, education, and active advocacy.
- Opportunities for improving healthier food choices and reduction of youth tobacco use through neighborhood store projects.
- Traumatic stress disorders may arise from root causes such as disaster, accidents, child abuse, living in dangerous or threatening environments.

I would like to extend a warm welcome to all our new members! To both the veteran and the new members I ask that you consider focusing on an area in which you'd like to expand your activity in service to MPHA. One small action taken by each of our 400+ members will multiply the return on investment considerably. One such activity might be to write a letter to the editor or send an email to your legislator when the call goes out. Another would be to serve on one of the committees that helps implement the Annual Meeting. Contact any of the Board members for ideas or to volunteer.

I would also like to thank Denise Strehlow for serving as the ARCG rep in keeping the MPHA membership apprised of national issues.

The announcement was made at the Annual Meeting about the initiative to Transform the Future of Public Health in Missouri. This can be our approach to integrating traditional and non-traditional partners with public health to create a system that can provide solutions to the issues mentioned above and so many more! Dr. Beth Meyerson from the Indiana University School of Public Health-Bloomington and her team began collecting comments, ideas, and observations from attendees at the Annual Meeting. This monumental undertaking will begin in 2015. I hope you will enthusiastically support this effort and look forward to participating and following the progress of this venture.

Our next newsletter will not be until spring, so I wish you all a wonderful Thanksgiving, a blessed Christmas and a Happy New Year!

Linda Cooperstock



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APHA Legislative Update

November 2014



Funding issues take center stage in post-election, lame-duck session

On Tuesday, Nov. 4, Republicans captured at least 52 seats in the U.S. Senate, guaranteeing they will take control of the chamber when the Senate convenes for the first session of the 114th Congress in January. Republicans in the U.S. House of Representatives picked up at least a net gain of 13 seats, strengthening their grip on control of the House.

With the election behind us, the House and Senate will reconvene in the coming weeks to try to hammer out their differences and pass a fiscal year 2015 spending bill to fund the federal government through the end of the fiscal year. Congress must act before the current continuing resolution expires on Dec. 11.

APHA is urging Congress to pass an omnibus spending bill that prioritizes public health and includes the \$6.18 billion Ebola emergency funding request submitted by the administration to Congress earlier this week. The proposal, supported by APHA, includes \$1.83 billion for the Centers for Disease Control and Prevention to respond to the Ebola

outbreak in West Africa, bolster U.S. preparedness capabilities to address infectious disease outbreaks and other public health emergencies and to strengthen the ability of vulnerable nations to respond to disease outbreaks and prevent future epidemics. Recent media reports have stated that leaders and congressional aides are working to develop a proposal that could pass both chambers and win the president's signature. APHA members and Affiliates can help advocate for a strong bill that prioritizes public health funding and includes the requested emergency funding for the Ebola outbreak by sending a message to their senators and representatives using APHA's updated action alert.

Health groups urge EPA to adopt strong clean water rule

On Oct. 24, APHA and other health partners sent a letter to U.S. Environmental Protection Agency Administrator Gina McCarthy urging EPA to move forward with its proposed rule to improve water quality and protect public health. The proposed rule would clarify the protection of streams and wetlands under the Clean Water Act, including streams that provide some portion of water to drinking water systems that serve nearly 117 million people. The proposed rule would clarify which waters are protected and which are not, allowing pollution control officials to better protect water quality and public health. The comments submitted by the health organizations highlight the important role access to clean water plays in protecting public health and urge EPA to move forward with a strong, science-based rule.

Advocates call on Congress to reauthorize the Children's Health Insurance Program

On Oct. 23, APHA joined more than 1,200 leading national, state, tribal

and local organizations in sending a letter to House and Senate leaders urging them to pass a four-year extension of the Children's Health Insurance Program when Congress reconvenes to finish out the 113th Congress. CHIP provides affordable health care for children in working families whose parents earn too much to qualify for Medicaid but too little to purchase private health insurance. In addition, CHIP provides lower premiums and out-of-pocket costs and often provides more comprehensive benefits at better cost than private plans. An estimated 10.2 million children are expected to be enrolled in CHIP in 2015. In the letter, the groups note that unless Congress acts soon to stabilize the CHIP funding stream to ensure states can continue to operate their programs without interruption, health coverage for millions of children could be disrupted.

Advocates call on Congress to avert primary care cliff

Multiple primary care programs face a scheduled expiration of funding at the end of fiscal year 2015, representing a significant threat to the stability and viability of access to care for millions of underserved people. Without congressional action, funding that supports the Community Health Centers program would be cut by about 70 percent, and the National Health Service Corps and Teaching Health Centers Graduate Medical Education programs would be eliminated entirely. The Community Health Centers program supports operating sites in more than 9,000 communities across the country and coordinates a full spectrum of health services including medical, dental, behavioral and social services – often delivering the range of services in one location. NHSC provides scholarships and loan repayment to primary care practitioners who make a multi-year

(Continued on page 3)

APHA Legislative Update (continued)

commitment to work in underserved communities. The THCGME program provides primary care training in a community-based setting for medical residents, and although funding does not expire until the end of fiscal year 2015, the recruitment of new residents is already being impacted due to the uncertainty in funding.

APHA joined more than 100 national organizations in sending a letter to House and Senate leaders urging Congress to act during the upcoming lame-duck session to extend funding for these primary care programs.

Trade agreement negotiations continue; tobacco control remains vulnerable

The U.S. continues to negotiate the Trans-Pacific Partnership, a proposed free trade agreement, with 11 other countries. APHA joined other health advocates in sending a letter to U.S. Trade Representative Ambassador Michael Froman calling for the protection of the right of TPP countries to implement tobacco control measures that support the health of their citizens. The letter calls for the TPP to acknowledge the unique harms of tobacco products, and urges for the inclusion of provisions to address the current practice of the tobacco industry to misuse trade and investment treaties to challenge public health measures. For example, Philip Morris has filed suit challenging a plain packaging law in Australia by using a 1993 investment treaty seeking billions of dollars in financial compensation, and New Zealand has recently delayed its plans to adopt plain packaging until the legal challenges against Australia are resolved. Barring a proposal to protect a nation's sovereignty in carrying out tobacco control efforts, advocates fear the tobacco industry would be able to undermine the ability of the U.S. to implement the Family

Smoking Prevention and Tobacco Control Act – a U.S. law that gives the U.S. Food and Drug Administration the authority to effectively regulate the manufacturing, marketing, labeling, distribution and sale of tobacco products.

APHA and organizational comments on preventive services under ACA

On Oct. 21, APHA submitted comments to the U.S. Department of Labor on the interim final regulations for coverage of certain preventive services under the Affordable Care Act. The regulations would amend the ACA's contraceptive coverage requirement by changing the process religious non-profit organizations and schools use to object to providing coverage of contraceptives in their insurance policies. Instead of notifying the insurance company of objections to covering contraception, the rule would allow non-profits to directly notify the federal government. The government would then work with the insurance company to provide contraception. APHA's comments focus on the need for women who are employees or students of qualifying organizations to have seamless access to contraception coverage and provide guidance on how to implement the accommodation.

APHA also joined other organizations in submitting comments to the Centers for Medicare & Medicaid Services on the proposed rule to define for-profit, "closely held" companies that could be eligible for the accommodation. In addition to offering recommendations on the

(Continued on page 4)

Calendar of Events

January 15, 2015
Board of Directors Meeting
 MPHA Office
 Jefferson City, MO

March 25, 2015
Education Workshop
 Topic and Location TBA

April 9, 2015
Board of Directors Meeting
 MPHA Office
 Jefferson City, MO

June 10, 2015
Education Workshop
 Topic and Location TBA

July 16, 2015
Board of Directors Meeting
 MPHA Office
 Jefferson City, MO

September 22, 2015
Joint Annual Conference
 Stoney Creek Inn
 Columbia, MO

October 31, 2015
APHA 143rd Annual Meeting
 Chicago, IL

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APHA Legislative Update (continued)

definition, the comments recommend close oversight and enforcement to ensure that plans and employers comply with the changes resulting from the final rule.

Advocates urge President Obama to support federal child nutrition program funding

In an Oct. 14 letter to President Barack Obama, national, state and local organizations representing a wide variety of interests, including the anti-hunger, public health, education and agriculture sectors, expressed support for effective and adequately funded federal child nutrition programs. The letter urged the president to request a significant investment

in child nutrition programs in his upcoming fiscal year 2016 budget request, which is expected to be released next February. The letter also notes that Congress is set to reauthorize federal child nutrition programs next year. Earlier this year, many of the same advocates worked to stave off efforts to use the appropriations process to scale back improvements to the child nutrition programs made as a part of the Healthy, Hunger-Free Kids Act of 2010.

Advocates urge funding for antibiotic resistance recommendations

On Oct. 27, APHA and other advocates representing public health, health care providers, patients, scientists,

veterinarians and the biotech and pharmaceutical industry sent a letter to White House Office of Management and Budget Director Shaun Donovan urging the administration to provide adequate resources to fund implementation of the President's Council of Advisors on Science and Technology recommendations to combat antibiotic resistance. The PCAST recommendations call for a significant increase in federal investments to address antibiotic resistance through prevention and control activities, enhanced data collection and surveillance, and antibiotic stewardship, as well as greater investment in research and development for antibiotics, diagnostics, vaccines and other therapeutics.



Tobacco Free Missouri

Linda Cooperstock, MPH

Working statewide to create a healthier Missouri by eliminating the burden of tobacco.

This year TFM has focused on organizational structure and dealing with reduced funding. However, the strong volunteer base has helped provide some successes. The most recent success was the passage of the Branson smokefree ordinance that included e-cigarettes. TFM has provided support to a number of communities that are pursuing comprehensive smokefree ordinances.

TFM is providing resource information to the movement in Columbia to raise the age of cigarette sales to 21 years of age. TFM is encouraging that community to include e-cigarettes in its proposal and also to include e-cigarettes as an adjunct ordinance to the current comprehensive smokefree city policy.

TFM has a very active Youth Connection. This year Alex Higginbotham joined Dr. Reed Tuckson of United Health Foundation in an interview in Washington DC to highlight Kick Butts Day and its goal to prevent youth tobacco use.

The Annual Meeting was held in Columbia on Nov 6th. Fifty five members from across the state attended to work on coalition skills and receive legislative updates. John Gulick from Community Capacity Builders facilitated the working session on overcoming challenges within coalitions. TFM youth made a presentation on their activities.

The Board of Tobacco Free Missouri meets on a bi-monthly basis to plan policy strategies to help reduce tobacco use and secondhand smoke exposure. TFM works to support local smokefree policies that are comprehensive and adhere to a basic set of standards that adequately protect all workers from secondhand smoke.

Policy Watch: State and International Updates

November 2014



California passes law guaranteeing paid sick leave to employees

California Gov. Edmund Brown recently signed into law the Healthy Workplaces, Healthy Families Act of 2014, which will provide paid sick time for employees if they or a family member becomes ill. More specifically, the law will provide at least three days of paid sick leave per year to employees who work at least 30 days for that employer. About 40 percent of California’s workforce does not currently earn this benefit. The law is expected to affect 6.5 million workers when it goes into effect July 1, 2015. Most recently, Massachusetts and three additional cities passed ballot initiatives on Nov. 4 to require paid sick leave, joining the cities of Seattle, New York, Portland, Oregon, and Newark, New Jersey and the states of California, Connecticut and Washington, D.C. Vicki Shabo of the National Partnership for Women and Families notes that “we’re the only economically developed country in the world that doesn’t have paid sick days.” In addition to city and state efforts, Congress introduced the Family and Medical Insurance Leave Act of 2013, H.R. 3712 and S. 1810, during the first session of the 113th Congress,

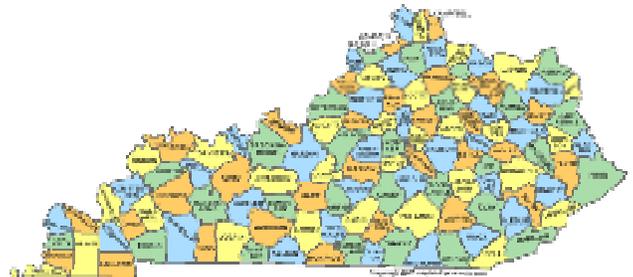
legislation that would require a national sick leave program. Read the letter APHA and other organizations sent to Congress in support of the FAMILY Act and send a message to your senators and representative asking them to cosponsor the bills.

Kentucky health officials target young children to prevent obesity

Kentucky has the third highest rate of childhood obesity in the country. One in five children in Kentucky is overweight or obese.

Kentucky’s public health officials, funded by a \$275,000 grant received in February from CDC, are working to reduce the childhood obesity rate among children ages 2-5. The initiative will educate family members and child care staff in five target areas: physical activity, screen time, food, beverages and infant feeding.

In its initial year, the program is targeting 75 child care centers in Jefferson, Fayette, Boone, Kenton and Campbell counties out of the nearly 3,000 licensed child care centers in Kentucky. The program is expected to reach 4,000 children.



Tuberculosis continues to decline, yet worse than anticipated

Tuberculosis, a curable illness, claimed 1.5 million lives last year, according to a new World Health Organization report. Nearly one-sixth of all TB cases ended in death. The data for 2013 indicate a larger incidence, prevalence and mortality rate from TB than anticipated by experts, reflecting improved surveillance and reporting in many countries. Although the data were worse than expected, mortality rates have declined by 45 percent, and incidence rates declined by 41 percent between 1990 and 2013. TB is concentrated in certain countries – India and China account for 24 percent and 11 percent of total cases of TB worldwide, respectively. The number of people dying from HIV-associated TB has fallen over the past decade; however, TB remains a leading cause of death for people who are HIV-positive. The WHO report identified universal access to antiretroviral therapy as critical to continuing the progress of reducing mortality among HIV-positive TB patients. Drug-resistant TB also poses a key threat to controlling TB worldwide. WHO provided a supplement to the report that outlines priority actions needed to address drug resistant TB, including prevention, surveillance and treatment



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MPHA Resolutions Form the Basis for Legislative Agenda

Bert Malone, Vice President

At its most recent meeting, the MPHA membership reviewed proposed resolutions for consideration by the body in anticipation of the next sessions of the US Congress and the MO General Assembly. Having a list of issues with sufficient background and rationale upon which the Association has taken a position is a very meaningful step in the setting of an agenda for our Legislative and Public Policy Committee. It affords the Committee a foundation upon which to build an argument in support of or opposition to proposed policy issues.

Medicaid Expansion

NOW THEREFORE BE IT RESOLVED that the Missouri Public Health Association supports efforts in the Missouri General Assembly to expand Medicaid coverage to all persons earning up to 138% of the federal poverty level.

Improving Access to Health Services

NOW THEREFORE BE IT RESOLVED that the Missouri Public Health Association supports full implementation of the Affordable Care Act and any other access-related legislation and coverage; and will support and advocate for such issues if brought before the Missouri General Assembly.

Social Determinants of Health

NOW THEREFORE BE IT RESOLVED that the MPHA will advocate and actively support legislation in the Missouri General Assembly that is aimed at reducing predatory lending and the enactment of mandatory foreclosure mediation.

Tax Proposals

NOW THEREFORE BE IT RESOLVED that the MPHA will oppose any effort to amend the Missouri Constitution to eliminate the State's current general revenue tax structure and replace it with a greatly expanded sales tax in the next session of the Missouri General Assembly.

Prevention and Public Health Fund

NOW THEREFORE BE IT RESOLVED that the MPHA will strongly oppose any efforts to decrease the federal commitment to prevention and public health. Support for this fund holds great promise to improve the capacities of state and local health departments to protect their communities from health threats and increase the numbers of highly skilled scientists and public health professionals.

Aid to Local Public Health Funding

NOW THEREFORE BE IT RESOLVED that the Association will work with local partners throughout the state with two goals: 1) to petition Governor Jay Nixon to release all GR funds (\$3.3 million) withheld from the FY 14 appropriation; and 2) to advocate for the State of Missouri's General Assembly to restore the funding level for aid to local public health essential services to that of \$7.2 million, and

Statewide Comprehensive Tobacco Control

NOW THEREFORE BE IT RESOLVED that the MPHA supports communities in their efforts to adopt tobacco control legislation and support a comprehensive statewide clean indoor air law; and

Food Safety and Supply

NOW THEREFORE BE IT RESOLVED that the MPHA will oppose any effort to amend the Missouri law to reduce or limit the state's current food safety guidelines and replace it with an inadequate ability to ensure a safe food supply in the next session of the Missouri General Assembly.

(Continued on page 7)

MPHA Resolutions continued

Lead Removal

NOW THEREFORE BE IT RESOLVED that the Missouri Public Health Association will support efforts to expand enforcement of the Environmental Protection Agency’s Renovation Repair and Painting Rule.

Recreational Marijuana use:

NOW THEREFORE BE IT RESOLVED: that the Missouri Public Health Association is against the legalization of marijuana for recreational purposes: **BE IT FURTHER RESOLVED,** That the Missouri Public Health Association will:

- Educate its members and, if possible, the general public of its endorsement of this Resolution.
- Educate the Governor and members of the state legislature of its endorsement of this Resolution, to the extent permitted by law, and urge its members to do the same.

E-Cigarettes:

NOW THEREFORE BE IT RESOLVED that the MPHA supports communities in their efforts to adopt E-Cigarette control legislation; and **BE IT FURTHER RESOLVED** that the MPHA resolves to oppose any efforts by the General Assembly to pre-empt current or future local ordinances related to E-Cigarettes.

New MPHA Members

August 2014

*Brenda Buschjost, MO Dept. of Health and Senior Services
Cindy McKeon
Rachelle Collinge, MO Dept. of Health and Senior Services
Melissa Egan, MO Dept. of Health and Senior Services*

September 2014

*Ashley Ray, Jackson County Health Department
Alicia Wodika, Truman State University
MO Dept. of Health and Senior Services/EPHP*

October 2014

*John Alden, University of Missouri
Rebecca Tritz, University of Missouri*



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:

- Quarterly newsletter 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 attached membership form and return to the MPHA office.

Affiliate Representative to the Governing Council (ARGC)

Denise Strehlow, RD, LD, MPH, MSW

BJC School Outreach and Youth Development

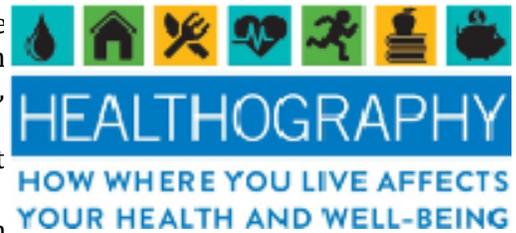
Missouri Affiliate Representative to the Governing Council (MO ARGC)



APHA's Region VII Affiliate Representatives (MINK-Missouri, Iowa, Nebraska, Kansas) meet monthly via conference call. Here is the update from the most recent meetings:

- Missouri's own Patricia Parker is the current Council of Affiliates (COA) Chair-elect and will move into the office of Chair following the APHA 142 Annual Meeting, November 15-19 in New Orleans.
- MINK's Eldonna Chestnut, Kansas ARGC is running for COA Chair-elect with the election to be held at the APHA Annual meeting.
- MINK's Jeneane Moody, Iowa Executive Director will receive the Award for Excellence at the APHA Annual meeting.

- MINK states continue to collaborate on funding opportunities. We were not funded for the Factors influencing Public Health Accreditation Efforts: Barriers and Facilitators of PHAB accreditation in a four-state, Midwest region.
- Regional dues of \$200.00 for each affiliate to be paid annually to the host state for the MINK conference (Missouri is the 2015 host state).
- MINK 2015 Regional Meeting will be in Missouri. Planning continues on this effort to secure funding, a location and finalize the dates.



Missouri Public Health Association,

When facing a threat like Ebola, it is critical to make decisions based on facts, not fear. However, lately the public is seeing ill-advised quarantine decisions and a discourse that strays from the science-based response proven to be effective.

APHA's Get Ready campaign has produced an Ebola fact sheet (<http://www.getreadyforflu.org/EbolaFacts.htm>) to help the public easily understand the risks of Ebola and how to stay safe. Help us get the facts out. Please share this with your family, friends and community.

APHA will continue speaking out in a variety of ways to keep the focus on a consistent and evidence-based response to Ebola. You can see some of my recent contributions to the public discussion on APHA's Public Health Newswire. (<http://www.publichealthnewswire.org/?p=11511>) We also have a late-breaking session on Ebola at our Annual Meeting next month to discuss the latest progress.



Together, we can help guide an effective response to Ebola in the U.S. and in West Africa. Thank you for everything you do to keep the public healthy.

Sincerely,

Georges C. Benjamin, MD
APHA Executive Director

APA Official Actions

Position Statement on Marijuana as Medicine

Approved by the Board of Trustees, December 2013
 Approved by the Assembly, November 2013

"Policy documents are approved by the APA Assembly and Board of Trustees...These are...position statements that define APA official policy on specific subjects..." – *APA Operations Manual*

- There is no current scientific evidence that marijuana is in any way beneficial for the treatment of any psychiatric disorder. In contrast, current evidence supports, at minimum, a strong association of cannabis use with the onset of psychiatric disorders. Adolescents are particularly vulnerable to harm, given the effects of cannabis on neurological development.
- Further research on the use of cannabis-derived substances as medicine should be encouraged and facilitated by the federal government. The adverse effects of marijuana, including, but not limited to, the likelihood of addiction, must be simultaneously studied.
- Policy and practice surrounding cannabis-derived substances should not be altered until sufficient clinical evidence supports such changes.
- If scientific evidence supports the use of cannabis-derived substances to treat specific conditions, the medication should be subject to the approval process of the FDA.

Regarding state initiatives to authorize the use of marijuana for medical purposes:

- Medical treatment should be evidence-based and determined by professional standards of care; it should not be authorized by ballot initiatives.
- No medication approved by the FDA is smoked. Marijuana that is dispensed under a state-authorized program is not a specific product with controlled dosages. The buyer has no way of knowing the strength or purity of the product, as cannabis lacks the quality control of FDA-approved medicines.
- Prescribers and patients should be aware that the dosage administered by smoking is related to the depth and duration of the inhalation, and therefore difficult to standardize. The content and potency of various cannabinoids contained in marijuana can also vary, making dose standardization a challenging task.
- Physicians who recommend use of smoked marijuana for "medical" purposes should be fully aware of the risks and liabilities inherent in doing so.

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- Richard N. Rosenthal, M.D.
- John A. Renner, Jr., M.D.
- Herbert D. Kleber, M.D.
- Robert Milin, M.D.

See the related APA resource document [HERE](#).

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Annual Conference

September 22, 2015

Stoney Creek Inn

Columbia, MO

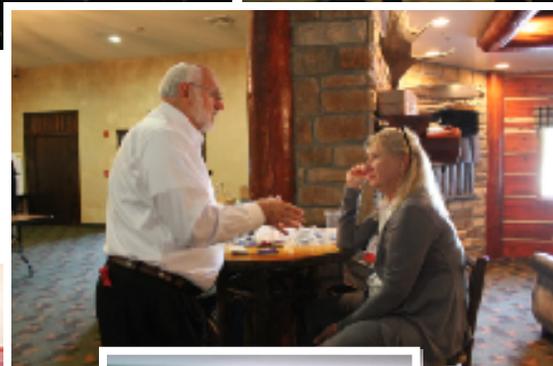


“Joint Annual Conference”

September 23-25, 2014 at Stoney Creek Inn, Columbia

The Joint Annual Conference committee wishes to thank all the organizations for their participation through the years. It is your involvement with the public health community that makes these events possible.





Foundation Scholarships

Cindy Leuthen, MPHA Education Foundation Chair

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.

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 coursework.

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.

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.

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.

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/>

MPHA awarded two scholarships at the Annual Conference in September. Marjorie Cole (right) received the Edna Dell Weinel Scholarship and Amanda Grodie (left) received the Health Professional Scholarship.



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