



**NEW HAMPSHIRE
PUBLIC HEALTH ASSOCIATION**

*Annual Report
2007-2008*

April 23, 2008

New Hampshire Public Health Association

“Advocating for Public Health and Safety in New Hampshire”

From the President

It has been a tremendous year of growth at the New Hampshire Public Health Association (NHPHA). The Association has evolved to become a widely known and respected institution in New Hampshire thanks to the dedication and diligence of our volunteer Board of Directors, NHPHA members, the financial support of our funders, sponsors, organizational members and Partners in Public Health.

Before assuming the Presidency, I did not realize that this particular year would be a milestone in the growth of the Association's sixteen year history. The hiring of a full-time Policy Director to be the “voice” of the Association's mission and vision raised the bar for the Association's visibility and credibility. The Association was able to hire a part-time Administrative Assistant and retained a bookkeeper to oversee the Association's finances.

The talented Board of Directors have tirelessly given of their time, knowledge and expertise in the fields of public health, health law, business, finance, politics, environmental science, marketing, legal perspectives, health care management, human resources and academics. The Association's partnership with several key organizations and the NHPHA committee structure (Policy, Finance, Events, Fundraising/Membership and Communication Committees) galvanized the public health commitment. All of these dynamic confluences contributed to strengthening public health infrastructure in New Hampshire.

As we enter into a new year, the NHPHA will continue to identify new sponsors and partners as we move to become sustainable by 2010. We will continue to endorse and implement evidence based public health policies and protocols to ensure that New Hampshire remains one of the healthiest states in the country. And, we will continue to be responsive and committed to the public health needs of New Hampshire's populace.

In closing, I want to thank the Board of Directors, the NHPHA membership, our funders and our sponsors for giving me the opportunity to lead the Association for the past year. I trust that I am transitioning to the incoming Board an organization that will continue to gain strength and momentum.

Sincerely yours,

Marilyn Watson, RN, MSN, MPH, MBA
NHPHA President 2007-2008

NHPHA Board, Committees, Staff

NHPHA Board of Directors – 2007 - 2008

*Marilyn Watson, RN, MSN, MPH,
MBA*

President

Disease State Management
Population Health, Anthem
Northeast

Maureen Quinn, RN, BSN, MPH

President Elect

Public Health Analyst
HRSA/Office of Performance
Review

John B. Martin

Vice President

Attorney
NH DHHS

Suz Friedrich, MBA

Secretary

Managing Director
Senior Consultant
Community Health Institute

Tyler Brannen

Treasurer

Health Care Statistician
NH Insurance Department

Kevin Flanagan, BS, PTA

Immediate Past President

Health Management
Representative
NH Local Government Center

Betsey Andrews Parker, MPH

Executive Director
North Stafford County Health &
Safety Council

John W. Seavey, PhD, MPH
Professor

Dept. of Health Management
and Policy
University of New Hampshire

Rosemary M. Caron, PhD, MPH

MPH Program Director
Associate Professor
School of Health & Human Svcs
University of New Hampshire

Kurt J. Lucas

Dir., Community Health Access
Littleton Regional Hospital

Yvonne Goldsberry, PhD, MPH

Dir., Community Health Services
Marketing & Planning
Cheshire Medical Center

James P. Pilliod

NH State Legislator

Diane Smogor

Vice President, Program
Services
Breathe New Hampshire

Joel M. Harrington, J.D.

Director, Government Relations
The Nature Conservancy of NH

Melissa Heinen, RN, MPH

Education & Research
Coordinator
NNE Poison Center
NH Department HHS

Tom Irwin

Senior Attorney
Conservation Law Foundation

Shawn LaFrance

Executive Director
Foundation for Healthy
Communities

Nicole LaPointe, MSW

Community & Public Health
Director
North Country Health
Consortium

Richard Rumba, MPH

Administrator
Environmental Health Program
NH Dept. Environmental
Services

MaryAnn Cooney, MS, RH, C

Ex-Officio
Director
NH DHHS DPHS

Jose Montero, MD, MPH

State Epidemiologist
DHHS DPHS

NHPHA Committees

Program Planning Committee

Chairperson: John Martin

Members: Marilyn Watson, Rick Rumba, Neil
Twitchell, Jim Pilliod, Kevin Flanagan, Marcella
Bobinsky

Membership/ Fundraising Committee

Chairperson: Maureen Quinn

Members, Kurt Lucas, Kevin Flanagan, Tyler
Brannen, Joel Harrington, Marilyn Watson

Policy Committee

Chairperson: John Seavey

Members: Diane Smogor, Jim Pilliod, Melissa Heinen,
Kathy Mandeville, Tom Irwin

Outreach/Marketing/Communications

Chairperson: Tim Parsons

Co-Chair: Rick Rumba

Members, Tom Irwin, Shawn LaFrance, Rosemary
Caron, Diane Smogor, Melissa Heinen, John Seavey

Finance Committee

Chairperson: Tyler Brannen

Members: Maureen Quinn, Betsey Andrews Parker,
Marilyn Watson

NHPHA Staff

Tracy Gay, JD-Policy Director
Ginger Fraser – Bookkeeper
Gail Winkelman – Administrative Assistant

I. Organization Overview and History

The New Hampshire Public Health association (NHPHA) is the New Hampshire affiliate of the American Public Health Association. NHPHA is a nonpartisan, 501(c)(3)h membership organization founded in 1992 with the mission to strengthen the public health system to more effectively protect and improve the health and safety of our population. NHPHA has more than 200 individual and organizational members committed to the public health and safety of the citizens of New Hampshire. NHPHA has the ability to mobilize its members and partners to support policy initiatives to further the public health agenda. Its status as a 501(c)(3)h organization gives it greater ability to participate in the legislative process as it affects issues related to public health.

Statement of Mission

The Mission of the NHPHA is to strengthen the New Hampshire public health system to more effectively protect and improve the health and safety of our population.

Values

We embrace the following value statements:

- Public health's central focus is on the health of the population and the environment, ensuring healthy people in healthy communities.
- Public health programs and policies must be evidence based.
- Public health's primary focus is on health promotion and disease and injury prevention.
- Public health recognizes the biological, social, and environmental determinants of health and the right of all people to optimum health.
- The public's health requires the ongoing collaboration of public and private entities, interdisciplinary teams, and the involvement of all segments of the public.
- The public's health is directly impacted by economic conditions such as jobs with sufficient wages to support a family, education targeted towards the development of skills for a competitive market, and economic opportunity to prevent poverty and homelessness.*
- Public health requires a strong public health infrastructure including regular collection, analysis, evaluation, and dissemination of information about risks and assets in a community, definition of priorities and development of effective policies and plans to enable public health goals to be met, and programs and interventions that maintain and improve community health.*
- Public health requires educational programs which train new public health professionals, provide continuing education for those who perform core public health functions, and expand the awareness and knowledge of core public health functions and issues.

II. Strategic Intent

- **Provide leadership in defining and promoting the public health priorities for New Hampshire.** Key activities include:
 - Identify public health priorities for improvement
 - Develop and promote public health policy
 - Provide expert input to public health policy forums
- **Serve as the "Voice for Public Health". Educate New Hampshire public officials and the public on health issues affecting our people and its communities.** Key activities include:
 - Educate public about public health
 - Provide educational opportunities to members and stakeholders

- Serve as resource to inform members and stakeholders about merging and existing public health issues.
- **Strengthen and sustain capacity to achieve organizational goals.** Key activities include:
 - Hire and retain qualified staff to support organization
 - Sustain expanded organizational capacity
 - Establish effective office operations and systems

III. Priorities

Key stakeholders representing the broad public health interest at the local and state levels were surveyed to identify public health issues to be targeted for improvement by the NHPHA. Results were ranked and tabulated through a survey of the Policy Committee members and Board of Directors. Following a review of the results, the Board of Directors identified the following four priority issues for the period 2007-2008. (Please visit our website for a copy of our 2008 Priorities Brochure) Although the NHPHA will respond to emerging public health issues (including the list provided as additional issues below) as they present, the focus of our programmatic activities will be targeted at these high priority issues:

- **Improve NH's public health infrastructure.**
- **Target resources on prevention and education on the leading causes of death for NH residents: tobacco use, alcohol misuse and lack of healthy nutrition and physical activity.**
- **Promote passage of a primary seat belt law that requires all NH residents to buckle up.**
- **Support the intended use of tobacco settlement funds to tobacco prevention and control or other health initiatives.**

Additional Issues for Ongoing Monitoring and Targeted Response:

- **Healthy Homes**
- **Oral Health**
- **Mental Health**
- **Global Warming**
- **Safe Foods**
- **Emergency Preparedness**

Funders of NHPHA

- Endowment for Health
- Harvard Pilgrim Health Care
- *HNHfoundation*
- Jesse B. Cox Foundation
- New Hampshire Charitable Foundation

NHPHA Partners in Public Health

- Breathe New Hampshire
- Cheshire Medical Center
- Community Health Institute
- NH AHEC – DMS
- Northeast Delta Dental
- UNH-Department of Health Management & Policy

Current organizational members

American Cancer Society, New England Division
American Lung Association of NE
Bi-State Primary Care Association
Breathe New Hampshire
Concord Hospital
Endowment for Health
Granite State Immunization Partnership
Greater Derry Community Health Services
Harvard Pilgrim Health Care Foundation
Health First Family Care Center
Lakes Region Nursing Care & Comfort, LLC
Lakes Region Partnership for Public Health
March of Dimes
NAMI New Hampshire
Nashua, City of, Div PH & Community Services
New Futures
NH Dental Hygienists Assoc., Inc.
NH Dental Society
NH DHHS - Division of Public Health Services, Bureau of Prevention Services
NH DHHS - Tobacco Prevention & Control Program
NH Healthy Kids
NH Hospital Association
NH Immunization Program
NH Local Government Center
NH Medical Society
NH Minority Health Coalition
NH Optometric Association
NH SAFE KIDS
North Country Health Consortium
Northeast Health Care Quality Foundation
The Jordan Institute
University of New Hampshire - Department of Health Management and Policy, Master of Public Health (MPH) Program
University Office of Sustainability, University of New Hampshire
Wentworth-Douglass Hospital

Sponsors 2007- 2008

Annual Meeting

- Cheshire Medical Center
- Genesis Behavioral Health
- Local Government Center, Inc
- NH Minority Health Coalition
- Northeast HealthCare Quality Foundation
- North Strafford County Health & Safety
- UNH-Dept of Health Management & Policy
- UNH-School of Health & Human Services
- Bi-State Primary Care
- The Jordan Institute
- NH Safe Kids

Sponsors 2007 – 2008

Fall Forum

- American Lung Association of New Hampshire
- UNH Master of Public Health Program
- UNH Department of Health Management & Policy
- NH Department of Environmental Services
- Anthem BC/BS
- Centrix Bank
- Community Health Institute
- Dartmouth Medical School – Health Care Improvement Leadership Development
- Elliot Hospital
- Foundation for Health Communities
- Genesis Behavioral Health
- Home Care Association of NH
- Keene State Continuing Education
- NE HealthCare Quality Foundation
- NH ANEC – Dartmouth Medical School
- NH Hospital Association
- NH Minority Health Coalition
- Northeast Delta Dental
- Northern New England Environmental Health
- Safety & Health Council
- St. Joseph Hospital
- The Jordan Institute
- UNH – Dept of Health Management & Policy – MPH Program
- UNH – NH Institute for Health Policy & Practice
- Verizon
- Watch Your Mouth

NHPHA Partners in Public Health Funding Program

Partners in Public Health are those organizations, businesses or individuals who wish to publicly support NHPHA and its mission by providing financial resources to the Association on an annual basis.

Platinum Level Partner \$10,000+ benefits include:

- Organizational membership in NHPHA
- Organization logo displayed (with link to your organization's website) on **home page** of NHPHA website
- Recognition as a NHPHA Partner in Public Health in select media releases
- Organization logo displayed in recognition as a Partner in Public Health in NHPHA Annual Report
- **Recognition at all NHPHA annual forums and special events including:**
 - ✓ Opportunity to give salutatory remarks at Fall Forum (opening/closing/etc.)
 - ✓ Sponsorship of networking reception at Fall Forum
 - ✓ Free registration for up to eight people
 - ✓ Organization recognized on prominently displayed poster
 - ✓ Organization banner prominently displayed
 - ✓ A brochure of your choice included in packet given to event attendees
 - ✓ Organization recognized as a sponsor on event save-the-date cards and promotional flyers
 - ✓ Verbal recognition as a sponsor
 - ✓ Organization recognized on a list of sponsors inserted in packet given to event attendees
 - ✓ Full exhibit table to display your organization's materials

Gold Level Partner \$5,000-\$9,999 benefits include:

- Organizational membership in NHPHA
- Website link displayed on **Public Health Partners page** of NHPHA website
- Organization listed as a NHPHA Partner in Public Health in NHPHA Annual Report
- **Recognition at all NHPHA annual forums and special events including:**
 - ✓ Free registration for up to six people
 - ✓ Organization recognized on prominently displayed poster
 - ✓ A brochure of your choice included in packet given to event attendees
 - ✓ Organization recognized as a sponsor on event save-the-date cards and promotional flyers
 - ✓ Verbal recognition as a sponsor
 - ✓ Organization recognized on a list of sponsors inserted in packet given to event attendees
 - ✓ Full exhibit table to display your organization's materials

Silver Level Partner \$2,500-\$4,999 benefits include:

- Organizational membership in NHPHA
- Website link displayed on **Public Health Partners page** of NHPHA website
- Organization listed as a NHPHA Partner in Public Health in NHPHA Annual Report
- **Recognition at all NHPHA annual forums and special events including:**
 - ✓ Free registration for up to four people
 - ✓ Verbal recognition as a sponsor
 - ✓ Organization recognized on a list of sponsors inserted in packet given to event attendees
 - ✓ Half exhibit table to display your organization's materials

Bronze Level Partner \$1,000-\$2,499 benefits include:

- Organizational membership in NHPHA
- Website link displayed on **Public Health Partners page** of NHPHA website
- Organization listed as a NHPHA Partner in Public Health in NHPHA Annual Report
- **Recognition at all NHPHA annual forums and special events including:**
 - ✓ Free registration for up to two people
 - ✓ Verbal recognition as a sponsor
 - ✓ Organization recognized on sponsor list give to event attendees

BALANCE SHEET

ASSETS

Current Assets

Checking/Savings

Merrimack CSB-Money Market 136,803.02

Merrimack CSB-Operating 2,683.73

Total Checking/Savings 139,486.75

Other Current Assets

Other Current Asset

Prepaid Insurance 471.84

Total Other Current Asset 471.84

Total Other Current Assets 471.84

Total Current Assets 139,958.59

TOTAL ASSETS 139,958.59

LIABILITIES & EQUITY

Liabilities

Current Liabilities

Accrued Payroll Taxes

Accrued - Massachusetts 212.48

Accrued - Internal Revenue 2,046.28

Accrued - State of NH 167.75

Total Accrued Payroll Taxes 2,426.51

Unearned Income-Harvard-Equip. 4,375.06

Unearned Income-Harvard Pilgrim 14,999.99

Unearned Income-Endowment 16,666.69

Unearned Income - HNH*foundation* 27,399.97

Unearned Revenue-NH Charitable 8,672.31

Unearned Revenue - Cox Found. 5,817.41

Unearned Income - Delta Dental 2,250.00

Unearned Income-Communication 1,562.51

Total Current Liabilities 84,170.45

Total Liabilities 84,170.45

Equity

Retained Earnings 47,085.08

Net Income 8,703.06

Total Equity 55,788.14

TOTAL LIABILITIES & EQUITY 139,958.59

NHPHA Committee Highlights

NHPHA MEMBERSHIP/FUNDRAISING COMMITTEE

Maureen Quinn (chair), Karla Armenti, Rosemary Caron, Angela Gosselin, Kevin Flanagan, Kurt Lucas, John Martin, James Pilliod, Marilyn Watson

NHPHA Membership & Fundraising Committee Report 2008

The 2007-2008 year has been an exciting and challenging one for the NHPHA Membership Committee. We launched the Partners in Public Health annual donation program this year. This program will serve as one of the core Association vehicles for achieving long term sustainability through annual contributions from individuals and organizations beyond the membership dues level. The program offers multiple levels of support to select from, allowing organizations and corporate entities the flexibility to tailor their support of NHPHA, with corresponding levels of benefits given to those donors. To date we have recruited four organizations to participate in the Partners in Public Health program.

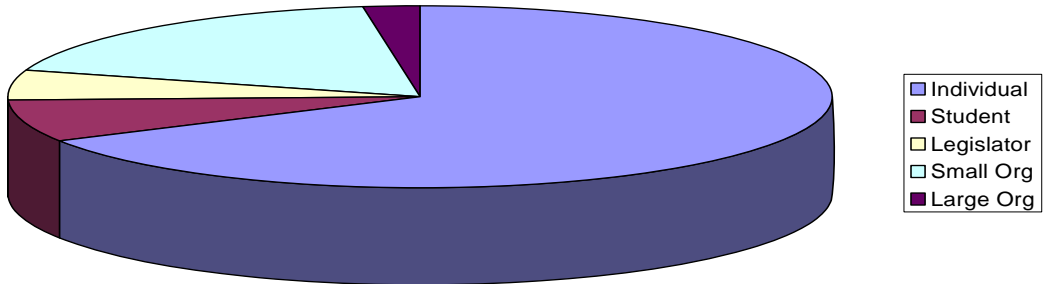
The Partners in Public Health program is essential to our long term success and must interface seamlessly with the membership development work that is ongoing. Therefore, the decision was made to combine the Membership and Fundraising Committees, so that all recruitment and development activities could be well coordinated and to promote efficiencies of operation. There were proposed by-laws amendments submitted to the NHPHA membership for approval that will formalize this change.

Efforts to recruit existing organizational members and new organizations and businesses began in 2007. The majority of this outreach is being conducted by NHPHA Board members, although the Committee is interested in building this capacity in its Association members. Many of our long-time supporters have responded enthusiastically to the invitation to become Partners in Public Health with commensurate recognition on our website and publicly disseminated documents. The Membership and Fundraising Committee is excited at the prospects of broadening support for NHPHA in a variety of public health related sectors, thereby reflecting the full scope of public health issues and impact.

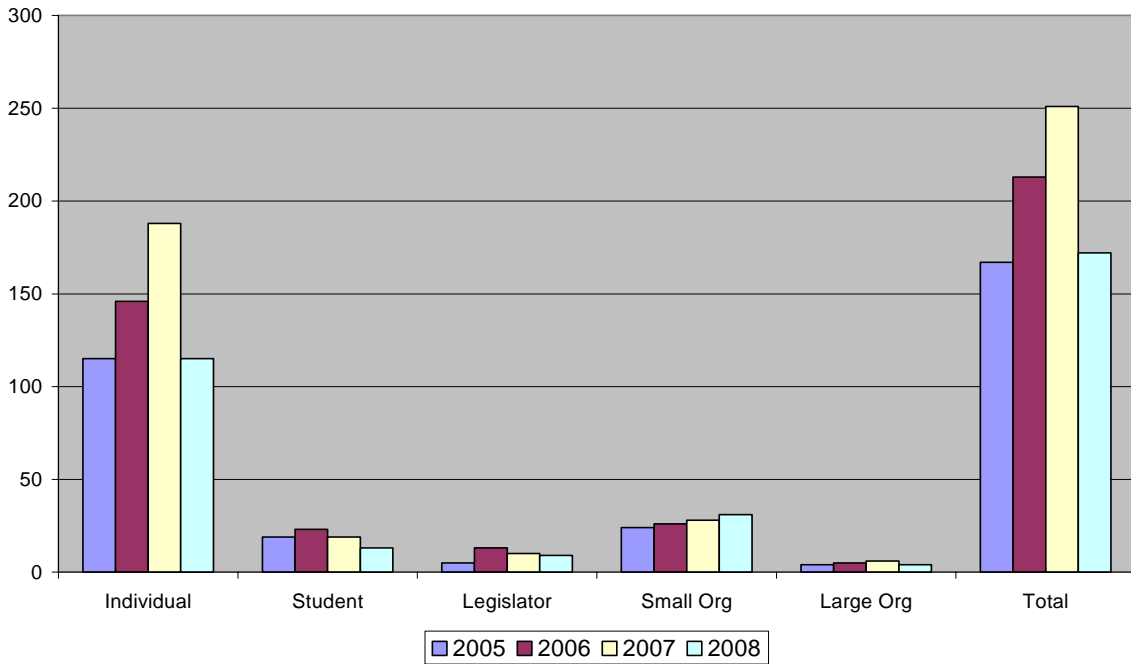
The Committee has been reaching out to several groups of individuals to recruit people from new sectors in of the state to become members of NHPHA. Letters of invitation have been sent to many statewide public health and other related groups to increase and broaden the membership. The Association has seen a drop in its individual membership numbers from 2007 to 2008. The Committee is researching the reasons behind this recent change. To that end, the Membership and Fundraising Committee supports the membership survey currently being conducted by the Communications Committee, which will provide additional information about what members value in their NHPHA relationship.

The Membership and Fundraising Committee is seeking new NHPHA members to become active membership and fundraising efforts. Given the pivotal role this Committee's work plays in the financial health of NHPHA as well as its relationships with our longtime friends and supporters; the work of this committee is exciting, creative and full of impact. Initiatives to enrich the Association's membership are being developed, including an evening social networking event and recruitment efforts in new segments of public health, such as behavioral health professionals.

NHPHA Membership 2008



NHPHA Membership by Category 2005-2008



NHPHA POLICY COMMITTEE

Tom Irwin (co-chair), John Seavey (co-chair), Melissa Heinen, Jim Pilliod, Diane Smogor, Marilyn Watson

NHPHA Policy Committee Report, 2008

This year, the Policy Committee took on the important task of helping NHPHA prioritize the key public health issues that will inform its future efforts. As part of this process, John Seavey created and circulated to all Committee members a survey to determine what NHPHA's highest priorities should be. The process generated important dialogue among Committee members, which helped the Board establish the organization's highest policy priorities. The top priorities selected are: 1) the development of a comprehensive plan to build a public health system; 2) the commitment of tobacco settlement funds for tobacco prevention and cessation programs; 3) the passage of a mandatory seatbelt law; and 4) the promotion of healthy behaviors and practices [i.e. tobacco prevention and cessation, healthy eating and active living (HEAL), alcohol education to prevent abuse and misuse].

At the beginning of the year, the Committee decided to update and supplement NHPHA's policy statements with a list of resources to provide evidence-based support for the existing 25 statements posted on our web site. These will provide greater credibility for our statements, as well as to provide resources to our members. To view NHPHA's policy statements, please visit our website at nhpha.org

The Committee worked closely to identify key legislation for NHPHA to address in the 2008 legislative session. Using NHPHA's policy statements for guidance, and applying the top organizational priorities adopted by NHPHA (*see above*) as criteria, the Committee worked closely with Policy Director, Tracy Gay, to determine which bills warranted NHPHA's attention and advocacy. The Committee selected five Priority 1 bills that they considered to reflect the priorities of NHPHA for 2008. The Policy Director and NHPHA will focus major attention on those bills through direct lobbying, hearing testimony, and collaboration with key stakeholders, public communication and grass roots activity. Priority 2 bills will be tracked through the legislative process. Priority 3 bills will be listed, but not tracked. Several of the bills identified and pursued as Priority 1 include:

HB1435, which requires that the sale of food and beverages (sold outside United States Department of Agriculture school meal guidelines) to pupils in public schools comply with nutritional standards developed by the Centers for Disease Control and Prevention and the Institute of Medicine (IOM). This change in the law will benefit children who attend public schools by incorporating improved nutritional standards in the schools.

HB1309 clarifies the definition of a cigarette and closes the loophole for products that are currently sold with the intent of being smoked as cigarettes. This is particularly an issue for youth, who smoke these products with increasing regularity, because they are less expensive to buy. These products are sometimes referred to as "cigarillos." The bill would define any roll for smoking that is packaged, priced, marketed, or labeled like a cigarette and that is offered or purchased by consumers as cigarettes, to be taxed at the same rate as cigarettes.

Legislative updates are prepared and distributed weekly by the Policy Director for all public health legislation being monitored.

The Policy Committee provided support in organizing NHPHA's annual Policy Makers' Conference for New Hampshire Legislators. The conference took place on January 24, 2008. The conference focused on our three main priorities for the year: tobacco use, alcohol misuse and HEAL. Speakers included: *Mary Ann Cooney, RN, MS* – Director, Division of Public Health Services, NH Department of Health and Human Services; *Rosemary M. Caron, PhD, MPH* – Director, MPH Program and Associate Professor, University of New Hampshire Department of Health Management and Policy; *Kathy Mandeville, RN, MS, MPH* – Senior Public Health

Specialist, Manchester Health Department; *Sandi Van Scoyoc* –President, *HNHfoundation*; *John F. Bunker, ScD, MHS* – President, New Futures; and *Diane Smogor* – Vice President of Program Services, Breathe NH.

Seventy legislators attended, including several committee chairs and the deputy speaker. Feedback regarding the event was positive, with suggestions to make the program more targeted in the future. The Policy Committee formed a subcommittee to plan a future event.

John Seavey developed a searchable phone tree to be used by the organization to match legislators with NHPHA members. When key issues are identified with particular legislators, the phone tree can be used to match NHPHA members who live in particular legislative districts (House and Senate).

NHPHA OUTREACH/MARKETING/COMMUNICATIONS COMMITTEE

Rick Rumba (chair), Rosemary Caron , Melissa Heinen, Shawn LaFrance, John Martin, Tim Parsons, Diane Smogor, Marilyn Watson

NHPHA Communication Committee Annual Report

During the period of April 2007 through March 2008 the Communication Committee has actively worked to improve and enhance both the internal and external communications of the Association. These efforts have focused on the following achievements:

Internal Communications:

- The committee acquired the services of a new, more secure website host.
- The committee established a new electronic forum to enhance internal communications of the NHPHA Board of directors
- The committee began work to establish a membership e-newsletter to keep members informed on current NHPHA activities and other public health related events around the state.
- The committee established a protocol for updating and posting new information on the NHPHA website

External Communications:

- Committee members began work on a new poster contest focused on oral health similar to the successful NHPHA handwashing poster contest conducted previously.
- The committee began work on other outreach activities designed to reduce childhood obesity by promoting nutrition and exercise for kids.
- The committee also began work to on serving as a clearinghouse and repository of public health outreach materials that others can use for health fairs, etc.

Over the next year the Committee plans to begin publishing the new membership e-newsletter, work on enhancing the website to possibly allow for on-line registration and payment for NHPHA sponsored events, and to continue work on new external communication initiatives. The Association would especially like to thank David LaFlamme, Melissa Heinem, Diane Smogor and other communications members for all of their dedication and hard work over the past year, and we look forward to continued success in 2009!

NHPHA PROGRAM PLANNING COMMITTEE

John Martin (chair), Marilyn Watson, Rick Rumba, Neil Twitchell, Jim Pilliod, Kevin Flanagan, Marcella Bobinsky

NHPHA Program Planning Committee Report

Annual Meeting

The Annual Meeting took place on Wednesday April 25, 2007, in the middle of National Public Health Week. The Theme for the meeting was "Reaching New Milestones for Public Health." The meeting took place at the Manchester Millyard Museum. The agenda included:

- UNH Master of Public Health Field Project poster exhibits
- Self-guided tours of the Millyard Museum
- Significant time for networking
- A guest speaker
- Presentation of the Roger Fossum Award and the Friend of Public Health Award

The guest speaker was Dr. James McCarthy. Dr. McCarthy was the Dean of the School of Health and Human Services and Professor of Health Management and Policy at the University of New Hampshire. He previously served as the Director of the Center for Population and Family Health at Columbia University. The topic of his presentation was "Public Health Milestones in the Untied States and in New Hampshire: Past and Future."

Kate Hartnett was presented with the 2007 Roger Fossum Award. The Roger Fossum Award is a "lifetime achievement award" that is presented to a senior public health individual who has made significant contributions to public health throughout their career.

Dr. McCarthy was presented with the 2007 Friend of Public Health Award. The Friend of Public Health Award is presented to a person or group who has been instrumental in practicing and promoting public health in the state.

A special thanks to our 2007 Annual Meeting Sponsors:

- Bi-State Primary Care Association
- Cheshire Medical Center
- Community Health Institute
- Genesis Behavioral Health
- New Hampshire Hospital Association
- New Hampshire Local Government Center
- New Hampshire Minority Health Coalition
- Northern Strafford Country Health Y Safety Council
- Northeast HealthCare Quality Foundation
- The Jordan Institute
- UNH-Department of Health Management & Policy – MPH Program
- UNH-New Hampshire Institute for Health Policy & Practice

Fall Forum

The Fall Forum took place on October 24, 2007 at the Bedford Village Inn in Bedford, NH. The theme of the Fall Forum was environmental issues. The title of the program was "Public Health in A Changing Environment." The purpose of the event was to examine a number of emerging environmental issues and their interrelationships to public health in New Hampshire. The forum focused on three topic areas:

- Health Homes, Schools and Workplaces
- Climate Change and Health
- Creating Health Communities

This program included a Keynote Speaker and five session speakers. The five session speakers and their topics were as follows:

1. "Eliminating Environmental Barriers for the Elderly and People with Disabilities".
Representative Trinka Russell, Rockingham, District 13

2. "Designing for Health: The Promise of High Performance Schools in NH", Kirk Stone, Coordinator, NH Partnership for High Performance Schools, The Jordan Institute
3. "New Hampshire's Efforts to Minimize the Impacts of Growth on Water Quality", Carolyn Russell, Office of the Commissioner, NH Department of Environmental Services
4. "Restricting Smoking in the Workplace: Implications for Restaurant Owners, Restaurant Workers and the Public" Daniel Fortin, President & CEO, Breathe New Hampshire
5. "The NH Lead Poisoning Prevention Program's Efforts at Lead Safe Rental Properties and Beyond". Laura Vincent Ford, Public Health Program Manager, Childhood Lead Poisoning Prevention Program, NH Department of Health and Human Services.

Dr. Michael A. McGeehin gave the Keynote Address. The title of his presentation was "climate Change and Human Health: The Public Health Response." Dr. McGeehin is the Director of the Division of Environmental Hazards and Health Effects in the National Center for Environmental Health, U.S. Centers for Disease Control and Prevention (CDC). Dr. McGeehin has been a scientist with the CDC for over 28 years and has spent most of that time working on environmental health issues including lead poisoning in children, asthma, drinking water contamination, air pollution, radiation exposures, environmental health tracking, cancer clusters and morbidity and mortality related to heat waves, hypothermia, and extreme weather events.

Approximately 80 people attended the Forum. The attendees who submitted evaluations provided overwhelmingly positive feedback regarding the Forum. All of the speakers received good to excellent ratings (3's and 4's on the evaluation sheet). Attendees generally felt that the topics were timely and well presented. Dr. McGeehin received excellent evaluations as the Keynote Speaker. Attendees generally liked the agenda in terms of the time allotted for speakers and especially the time allotted for networking. They also liked the venue in which the event took place. For this reason, the 2008 Fall Forum will also take place at the Bedford Village Inn.

A special thanks to our 2007 Fall Forum sponsors:

- American Lung Association of New Hampshire
- Community Health Institute
- Endowment for Health
- Harvard Pilgrim Health Care
- HNH*foundation*
- Home Care Association of New Hampshire
- Jesse B. Cox foundation
- National Alliance on Mental Illness NH (NAMI NH)
- New Hampshire Charitable Foundation
- New Hampshire Department of Environmental Services
- New Hampshire Hospital Association
- New Hampshire Institute for Health Policy and Practice
- New Hampshire Local Government Center
- New Hampshire SAFE KIDS
- NH Area Health Education Center (AHEC) – Dartmouth Medical School
- NH DHHS- Tobacco Prevention and Control Program
- North Country Health Consortium
- The Jordan Institute
- UNH – Department of Health Management and Policy
- UNH – Master of Public Health Program

NHPHA FINANCE COMMITTEE

Tyler Brannen (chair), Maureen Quinn, Betsey Parker-Andrews, Marilyn Watson

NHPHA Finance Committee Report

In Calendar Year 2007-2008, the NHPHA tracks expenses and income along three tracts: policy related activities, operations and events.

The generous support of our funders - Jesse B. Cox Charitable Trust, the Endowment for Health, Harvard Pilgrim Health Care Foundation, HNH*foundation* and the New Hampshire Charitable Foundation - has enabled the New Hampshire Public Health Association (NHPHA) to increase our visibility to advocate and communicate our public health role in NH. Fiscal agent arrangements are considered operations. The majority of our operational expenses include:

- NHPHA staffing and benefit costs for our Policy Director, Administrative Assistant and bookkeeper.
- The Annual Meeting
- Our Annual Fall Forum
- NHPHA's Annual Policy Makers Conference

With the exception of the policy maker conference, the NHPHA anticipates that event revenues will offset the expenses for the other two events.

Although the Policy Director is currently funded by grants, we anticipate future funding to come from a variety of sources which include donations, fiscal agent agreements, organizational and individual memberships and additional grants.

Looking forward, the NHPHA is on solid financial ground and planning for the long term success of the responsibilities of the NHPHA Policy Director to maintain this position indefinitely.

It should be noted that due to the volunteer nature of our organization and our mission, it is not our intention to compete for grants with the same organizations we are supporting on the public health front.

POLICY DIRECTOR OVERVIEW 2008

Current Key Activities

- Increasing NHPHA's visibility and advocacy role with government, stakeholders, and the general public
- Directing the establishment of legislative priorities with the Policy Committee to actively advocate and lobby for important prioritized public health legislation
- Building partnerships with key stakeholders – coordinating legislative priorities with tobacco, alcohol, access and health care coalitions
- Developing relationships with key lawmakers in the House, Senate and Governor's office
- NHPHA's representation on the various committees and task forces below is an affirmation of the organization's important role and contribution to the health community in the State. NHPHA is a voice for the advocacy of public health in all venues.
- **Member of the HEAL Steering Committee**
Healthy Eating and Active Living (HEAL) is a plan to improve health and quality of life for all New Hampshire residents through implementation of healthy eating and active living interventions. Nearly one quarter (22.4%) of New Hampshire adults are obese and 38% are overweight; nearly 13% of New Hampshire children and adolescents 10–17 years old are overweight. To address this health challenge, concerned citizens from the public and private sectors joined together in a collaborative effort to develop this HEAL Action Plan. Schools, health care industry, communities and municipalities, businesses and worksites, and food and recreation industries can provide an environment that

supports individuals and families to eat healthy and be physically active. The HEAL home will oversee grants to interested communities.

- **Member of the Voices Leadership Team**

New Hampshire Voices for Health Care - is a network of organizations allied in the commitment to see quality, affordable health care for all in New Hampshire. The organizations within the network regularly work together on specific policy reforms. The network meets monthly to share information and strategies to collaborate on communications and seek ways to collaborate on health-related policies.

- **Represent NHPHA on Public Health Improvement Services Council and the Regional Public Health Task Force –**

HB 491 established the Public Health Improvement Services Council (PHISC), signed into law on June 28, 2007. The council is tasked with sustaining the oversight of the public health improvement efforts that began with the Public Health Improvement Action Plan Advisory Committee (PHIAP).

Chair the PHISC Communications Subcommittee that is developing a statewide public health communication strategy. The purpose of the strategy is to communicate the value and importance of public health to various audiences that will lead to an increased awareness and support for a stronger public health system and ultimately, improved health outcomes.

Since July 2007, the Division of Public Health Services has been convening the Public Health Regionalization Initiative task force with the goal to develop a performance-based public health delivery system, which provides the 10 essential public health services throughout New Hampshire.

- **Member of the NH Oral Health Coalition Steering Committee**

The Coalition for New Hampshire Oral Health was designed to be broadly representative of the individuals and entities concerned with oral health. Its charge is to develop a plan that will address the oral health needs of all New Hampshire residents and communities and the conditions and opportunities specific to New Hampshire, and create a model for action that builds upon the oral health improvement activities already underway across the state.

- **Member of the Citizen's Health Initiative Health Promotion and Disease Prevention Policy Team and its Tobacco and Alcohol Workgroups**

The New Hampshire Citizen's Health Initiative is a ten-year, collaborative effort to improve the health of New Hampshire's citizens. The Initiative consists of three policy teams, each working to define, implement, and evaluate a specific area of focus. The Health Promotion and Disease Prevention Policy Team was developed to create initiatives to help individuals sustain and improve health, focusing on the leading causes of illness and death in our state.

The tobacco workgroup comprises New Hampshire organizations that see tobacco prevention and control as a priority area. During the legislative session, the workgroup has a weekly conference call to stay informed and coordinate the 2008 established policy priorities. In addition, the work group meets quarterly to work on long term projects.

The alcohol workgroup comprises New Hampshire organizations that see unhealthy alcohol use as a priority area. During the next several months, the workgroup will meet to plan and facilitate its agenda for 2008

**NH PUBLIC HEALTH ASSOCIATION
POLICY STATEMENTS**

Air, Water and Land (9/07)

(Revised by NHPHA Policy Committee, February 22, 2008; Approved by NHPHA Board, April 4, 2008)

The New Hampshire Public Health Association (NHPHA) recognizes that clean air, water and land are essential to the public's health, and that hazardous substances or harmful conditions in our air, water, and land negatively impact individuals, animals, and ecological systems. By supporting initiatives that protect our air, water and land, we can protect and improve the public's health.

For these reasons, the NHPHA supports the following efforts that will make our water, air and land healthier:

- Find creative and cost effective means to reduce, abate, or eliminate hazardous Chemicals and pollutants in our air, water, and land from all sources;
- Support comprehensive surveillance of environmental hazards, exposures, and health effects in which results are reported to citizens in a rapid, simple and high-quality format in order to identify and reduce toxic agents in the environment; and
- Increase participation of public health experts in establishing and enforcing standards for sound environmental policies.

Resources:

Bhatia, Rajiv, "Protecting Health Using an Environmental Impact Assessment: A Case Study of San Francisco Land Use Decisionmaking," *American Journal of Public Health* 97:3 (March 2007) 406-413.

Dreyling, Erin, et al., "Tracking Health and the Environment: A Pilot Test of Environmental Public Health Indicators," *Journal of Environmental Health* 70:5 (December 2007):9-16.

Moorman, Jeanne E., et al. "National Surveillance for Asthma—United States 1980-2004,"

Morbidity and Mortality Weekly Report, Surveillance Summaries, 56:SS08 (October 19, 2007) 1-14, 18-54.

U. S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Environmental Health, *Third National Report on Human Exposure to Environmental Chemicals*, NCEH Publication No. 05-0570, July 2005.

<http://www.cdc.gov/exposurereport/pdf/thirdreport.pdf>

U.S. Environmental Protection Agency, *Draft Report on the Environment 2003*,

http://www.epa.gov/roe/roe/pdf/EPA_Draft_ROE.pdf

Alcohol and Other Drugs (2/06)

(Revised by NHPHA Policy Committee, 3/28/2008; Approved by NHPHA Board, 4/4/2008)

The New Hampshire Public Health Association (NHPHA) recognizes that alcohol and other drug problems negatively impact individuals, families, and communities throughout the state. Abuse of alcohol and drugs not only results in suffering by individuals and families, but also impacts the broader community through problems such as fetal alcohol syndrome, domestic violence, reductions on worker productivity, highway fatalities, increases in chronic illness, crime, and homelessness. All of these issues associated with the use of alcohol and other drugs cause major financial burdens for the residents of New Hampshire. The NHPHA supports:

- Strengthening the enforcement of laws and regulations that prohibit the sale or other provision of alcohol beverages to youth under the age of 21;
- Efforts to educate, intervene with, and treat alcohol and other drug problems among All New Hampshire residents, but especially with our youth and pregnant women; and
- Encouraging all health care providers to screen and educate patients about "risky drinking" and other inappropriate drug use.

Resources:

Champion HL, KL Foley, RH DuRant, R Hensberry, D Altman, and M Wolfson, "Adolescent Sexual Victimization, Use of Alcohol and other Substances, and Other Health Risk Behaviors," *Journal of Adolescent Health* 35:4 (October 2004) 321-328.

Dietz Tracy L. "Predictors of Reported Current and Lifetime Substance Abuse Problems among a National Sample of U.S. Homeless." *Substance Use & Misuse* 42:11 (2007) 1745-1766.

Kindelberger, John, "Calculating Lives Saved Due to Minimum Drinking Age Laws," *Traffic Safety Facts Research Notes*, National Highway Traffic Safety Administration, March 2005. <http://www.nrd.nhtsa.dot.gov/Pubs/809860.pdf>

Miller TR, DT Levy, RS Spicer, and DM Taylor, "Societal Costs of Underage Drinking." *J Stud Alcohol* 67: 4 (July 2006) 519-528.

U.S. Department of Health and Human Services, National Institutes of Health, Substance Abuse and Mental Health Services Administration. "Healthy People 2010: Substance Abuse"

<http://www.healthypeople.gov/document/HTML/Volume2/26Substance.htm>

U.S. Department of Health and Human Services, "The Surgeon General's Call to Action To Prevent and Reduce Underage Drinking: A Guide to Action for Communities." U.S. Department of Health and Human Services, Office of the Surgeon General, 2007.

<http://www.surgeongeneral.gov/topics/underagedrinking/CommunityGuide.pdf>

US Department of Health and Human Services, Centers for Disease Control and Prevention (CDC). "Enhanced Enforcement of Laws to Prevent Alcohol Sales to Underage Persons—New Hampshire, 1999-2004," *Morbidity and Mortality Weekly Report* 4:53 (June 2004) 452-454.

<http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5321a2.htm>

U.S. Department of Labor, "General Workplace Impact"

<http://www.dol.gov/asp/programs/drugs/workingpartner/stats/wi.asp>

Climate Change (9/07)

(Revised by NHPHA Policy Committee 3/28/2008; Approved by NHPHA Board 4/4/2008)

The New Hampshire Public Health Association (NHPHA) recognizes the world-wide scientific community's consensus that the earth's temperature is rising at a rate faster than any other time in history as a result of humankind's contribution of increasing levels of "greenhouse gases" in the earth's atmosphere. The increased concentration of greenhouse gases in our atmosphere has effects, both current and future, on our environment and on our health.

The NHPHA supports the following actions:

- Research and public policy that strengthens the climate change science, technology, and institutions;
- Support local, state, regional, national and international initiatives to prevent and reduce greenhouse gases that contribute to climate change; such measures to include energy conservation, reduction in the use of fossil fuels for our energy needs, shift to renewable energy sources, and sustainable land use and transportation policies and practices; and
- Responsible adaptive and community resilient strategies from the unavoidable impacts of climate change.

Resources:

Intergovernmental Panel on Climate Change, Fourth Assessment Report; Climate Change 2007: Synthesis Report,

<http://www.ipcc.ch/ipccreports/ar4-syr.htm>

Jackson, Richard and Kyra Naumoff Shields, "Preparing the U.S. Health Community for Climate Change," *Annual Review of Public Health* 29:25 (2008) 25.1-25.17.

Patz, Jonathan, Diarmid Campbell-Lendrum, Holly Gibbs, and Rosalie Woodruff, "Health Impact Assessment of Global Climate Change: Expanding on Comparative Risk Assessment Approaches for Policy Making," *Annual Review of Public Health* 29:13 (2008) 13.1-13.13.

Shea, Katherine M. and the Committee on Environmental Health, "Global Climate Change and Children's Health," *Pediatrics*. 120:5 (November 2007): e1359-e1367.

US Department of Health and Human Services Centers for Disease Control and Prevention. "CDC Policy on Climate Change and Public Health." <http://www.cdc.gov/nceh/climatechange/>

Wilkinson P, Smith KR, Joffe M, Haines A. "A Global Perspective on Energy: Health Effects and Injustices," *Lancet*. 370: 9591 (September 15, 2007)965-978.

Disease Management (2/06)

(Revised by NHPHA Policy Committee 3/28/2008; Approved by NHPHA Board 4/4/2008)

The New Hampshire Public Health Association (NHPHA) recognizes that disease management systems, when properly developed, have the potential to improve treatment outcomes and promote cost effective delivery of care. The NHPHA supports the evolving development of disease management programs that emphasize:

- Evidence-based medicine;
- A multidisciplinary approach involving all appropriate health professionals;
- Coordinated systems approach with defined implementation strategy;
- Patient education and involvement in self-care;

- Objective, data-driven measurement devices;
- Continued outcome evaluation and improvement; and
- Mobilization of community resources to meet treatment and risk reduction needs of patients and families

Resources:

Bodenheimer, Thomas, Edward H. Wagner and Kevin Grumbach. "Improving Primary Care for Patients with Chronic Illness," *Journal of the American Medical Association* 288:14 (October 9, 2002) 1775-1779.

Denberg, Thomas D. et al. "Improving Patient Care through Health Promotion Outreach," *Journal of Ambulatory Care Management* 31:1 (January-March, 2008) 76-87.

Krumholz, Harlan M. et al. "A Taxonomy for Disease Management; A Scientific Statement from the American Heart Association Disease Management Taxonomy Writing Group," *Circulation* 114:13 (September 26, 2006) 1432-1445.

Mattke, Soeren, Michael Seid, and Sai Ma. "Evidence for the Effect of Disease Management: Is \$1 Billion a Year a Good Investment?," *American Journal of Managed Care* 13:12 (December 2007) 670-676.

Mattke, Soeren, et al. *Measuring and Reporting the Performance of Disease Management Programs*. Santa Monica, CA: Rand Corporation August 2006.

US Department of Health and Human Services, Agency for Healthcare Research and Quality. *The Guide to Clinical Preventive Services, 2007*. Washington, D C: Agency for Healthcare Research and Quality, 2007.
<http://www.ahrq.gov/clinic/pocketqd07/pocketqd07.pdf>

US Department of Health and Human Services, Centers for Disease Control and Prevention. "Strategies for Reducing Morbidity and Mortality from Diabetes Through Health-Care System Interventions and Diabetes Self-Management Education in Community Settings; A Report on Recommendations of the Task Force on Community Preventive Services," *Morbidity and Mortality Weekly Report Recommendations and Reports* 50: RR-16 (September 28, 2001).
<http://www.cdc.gov/mmwr/pdf/rr/rr5016.pdf>

Food Safety and Defense

(Revised by NHPHA Policy Committee, February 22, 2008; Approved by NHPHA Board 4/4/2008)

The New Hampshire Public Health Association (NHPHA) recognizes the need to expand and strengthen initiatives to protect the public from intentionally and unintentionally contaminated food, in order to prevent illness and outbreaks of food-borne disease. As indicated by the CDC, 76 million people get sick, 300,000 are hospitalized, and 5,000 Americans die each year from food-borne illnesses. (<http://www.cdc.gov/foodsafety/default.htm> accessed 02/2008). Priority activities include:

- Proactively addressing threats to the food supply
- Frequent monitoring of food service establishments to ensure compliance with regulations;
- Educating consumers, the food service industry, and health care professional about preventing food-borne illness;
- Educating health care professionals to diagnose and treat food-borne illness;
- Improving surveillance and investigation of food-borne disease, and investigation and control of food-borne outbreaks when they occur; and
- Educating the food service industry about improving the security of the food supply.

Resources:

Almanza Barbara A. and Melissa S. Nesmith, "Food Safety Certification Regulations in the United States," *Journal of Environmental Health*. 66:9 (May 2004) 10-4, 20.

Sobel, Jeremy, Ali S. Khan and David L. Swerdlow. "Threat of a biological terrorist attack on the US food supply: the CDC perspective," *Lancet*.359 (March 9, 2002) 874-880.

Sobel, Jeremy et al. "Investigation of multistate food borne disease outbreaks," *Public Health Reports* 117:1 (January/February 2002) 8-19.

US Department of Health and Human Services, Centers for Disease Control and Prevention, Food Safety Office.
<http://www.cdc.gov/foodsafety/pfse.htm>

US Department of Health and Human Services, Food and Drug Administration. "Food Protection Plan: An Integrated Strategy for Protecting the Nation's Food Supply,"
 November 2007. <http://www.fda.gov/oc/initiatives/advance/food/plan.pdf>

US Department of Health and Human Services, Food and Drug Administration, "Establishment and maintenance of records under the Public Health Security and Bioterrorism Preparedness and Response Act of 2002. Final Rule," *Federal Register*, 69:236 (December 9, 2004) 71561-7165.

HIV and AIDS

(Revised by NHPHA Policy Committee February 22, 2008; Approved by NHPHA Board 4/4/2008)

The New Hampshire Public Health Association (NHPHA) is committed to a comprehensive approach to control HIV/AIDS including education, prevention, treatment and research. In serving this public health interest, governmental public health organizations should take a leadership role in funding and implementing these activities. These activities include:

- education to promote public understanding of HIV/AIDS;
- effective prevention education programs for at-risk populations with an emphasis on responsible individual behavior;
- promotion of strategies which have been proven effective including clean needle exchange, condom distribution programs, and universal precautions for health care workers and others specified by the Centers for Disease Control and Prevention (CDC); and
- basic health and supportive services including the delivery of life-extending medications, which should be accessible to all persons living with HIV/AIDS through both private and public sector health providers.

Resources:

US Department of Health and Human Services, Centers for Disease Control and Prevention.

Comprehensive HIV Prevention. Essential Components of a Comprehensive Strategy to Prevent Domestic HIV, 2006.

http://www.cdc.gov/hiv/resources/reports/comp_hiv_prev/pdf/comp_hiv_prev.pdf

US Department of Health and Human Services, Centers for Disease Control and Prevention. *Evolution of HIV/AIDS prevention programs--United States, 1981-2006.*

<http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5521a4.htm>

US Department of Health and Human Services, Health Resources and Services Agency, *A Guide To Primary Care For People With HIV/AIDS, 2004.*

<http://www.hab.hrsa.gov/tools/primarycareguide/index.htm>

US Department of Health and Human Services Centers for Disease Control and Prevention. "Advancing HIV prevention: new strategies for a changing epidemic--United States, 2003. *Morbidity and Mortality Weekly Report* 52:15 (April 18, 2003) 329-332.

<http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5215a1.htm>

US Department of Health and Human Services, Centers for Disease Control and Prevention. Updated U.S. Public Health Service Guidelines for the Management of Occupational Exposures to HBV, HCV, and HIV and Recommendations for Postexposure Prophylaxis, *Morbidity and Mortality Weekly Report*, 50: RR11 (June 29, 2001)1-42.

<http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5011a1.htm>

US Department of Health and Human Services, National Institutes of Health. Interventions to Prevent HIV Risk Behaviors, NIH Consensus Statement Online, February 11-13, 1997.

<http://consensus.nih.gov/1997/PreventHIVRisk104html.htm>.

Infectious Diseases (2/06)

(Revised by NHPHA Policy Committee 3/28/2008; Approved by NHPHA Board 4/4/2008)

The New Hampshire Public Health Association (NHPHA) recognizes that infectious diseases such as tuberculosis, HIV, influenza, and chicken pox continue to threaten the health of the public. The NHPHA recognizes that cooperation and coordination among a wide range of public and private organizations is needed to effectively prevent, detect and respond to emerging and reemerging infections. Priorities in this area include:

- Increased support for disease prevention and control activities including improved surveillance for emerging and reemerging diseases;
- Support for laboratory detection of emerging and reemerging diseases;
- Transparent and ethical policies for the distribution and administration of vaccines and other medications;
- Transparent and ethical policies regarding the utilization of isolation and quarantine
- Adoption of antibiotic resistance reduction policies ; and
- Ongoing public education on effective prevention of infectious disease

Resources:

Fidler David P, Lawrence O. Gostin and Howard Markel, "Through the Quarantine Looking Glass: Drug-resistant Tuberculosis and Public Health Governance, Law, and Ethics," *Journal of Law Medicine and Ethics* 35:4 (Winter 2007) 616-28.

Fiore, Anthony E., et al., "Prevention and Control of Influenza. Recommendations of the Advisory Committee on Immunization Practices (ACIP), 2007," *MMWR* 56:RR06 (July 13, 2007) 1-54.
<http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5606a1.htm>

Hamilton, Carol Dukes, et al., "Extensively Drug-Resistant Tuberculosis: Are We Learning from History or Repeating It?," *Clinical Infectious Disease* 45:3 (August 2007) 338-342.

Kroger, Andrew T., et al. "General Recommendation on Immunization" *MMWR* 55:RR15 (December 1, 2006) / 1-48. <http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5515a1.htm>

US Department of Health and Human Services, Centers for Disease Control and Prevention, "Summary of Notifiable Diseases-United States, 2005" *MMWR* 54:53 (March 30, 2007).
<http://www.cdc.gov/mmwr/PDF/wk/mm5453.pdf>

US Department of Health and Human Services, Centers for Disease Control and Prevention, Comprehensive HIV Prevention; Essential Components of a Comprehensive Strategy to Prevent Domestic HIV, 2006," http://www.cdc.gov/hiv/resources/reports/comp_hiv_prev/pdf/comp_hiv_prev.pdf

Lo, Bernard and Katz Mitchell H., "Clinical Decision Making during Public Health Emergencies: Ethical Considerations," *Annals of Internal Medicine* 143:7 (October 2005):493-498.

Sexual and Reproductive Health (3/06)

(Revised by NHPHA Policy Committee on February 22, 2008; Approved by NHPHA Board 4/4/2008)

The New Hampshire Public Health Association (NHPHA) holds that age appropriate, consensual sexual expression is normal, healthy human behavior. In order to assist individuals to maintain their sexual and reproductive health and reduce the risk of sexually transmitted diseases and unwanted pregnancy, the NHPHA supports efforts to provide:

- Access to comprehensive age appropriate, evidence-based information and Education on sexual and reproductive health; and
- Access to high-quality, client-centered reproductive health care that recognizes the privacy of the patient/provider relationship.

Resources:

Johnson, Kay, et al., "Recommendations to Improve Preconception Health and Health Care," *Morbidity and Mortality Weekly Report, Recommendations and Reports* 55:RR06 (April 21, 2006) 1-23.

http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5506a1.htm?s_cid=rr5506a1_e

U.S. Department of Health and Human Services, Centers for Disease Control and Prevention. "Trends in Reportable Sexually Transmitted Diseases in the United States, 2006; National Surveillance Data for Chlamydia, Gonorrhea, and Syphilis," November 2007.

<http://www.cdc.gov/std/stats/trends2006.htm>

McElderry D.H. and H. A. Omar, "Sex Education in the Schools: What Role Does It Play?," *International Journal of Adolescent Medicine and Health* 15:1 (January 2003), 3-9.

Majer, L.S., J. S. Santelli, and K. Coyle, "Adolescent Reproductive Health: Roles for School Personnel in Prevention and Early Intervention," *Journal of School Health* 62:7 (September 1992) 294-7.

Mueller, T.E., L.E. Gavin, and A. Kulkarni, "The Association between Sex Education and Youth's Engagement in Sexual Intercourse, Age at First Intercourse, and Birth Control Use at First Sex," *Journal of Adolescent Health* 42:1 (January 2008) 89-96.

Unintentional Injury

(Revised by Policy Committee, February 22, 2008; Approved by NHPHA Board 4/4/2008)

The New Hampshire Public Health Association (NHPHA) supports statewide and community-based efforts to reduce the risk and incidence of unintentional injury. "Injuries are not 'accidents'; injuries are predictable and preventable" (Healthy NH 2010). In New Hampshire, injuries are the leading cause of death and disability for people between one and thirty-four years of age and a major cause for the entire population. Injury control efforts should focus on the leading causes of unintentional injuries as well as on those for which effective prevention measures are known.

These include:

- Acute traumatic injuries resulting in Traumatic Brain Injuries (TBIs) or spinal cord injuries;
- Choking and strangulation;
- Drowning;
- Falls;

- Fire and burns;
- Motor vehicle crashes;
- Pedestrian and bicycle incidents;
- Poisoning;
- Sports and recreation injuries; and
- Work-related injuries.

Resources:

Healthy New Hampshire 2010 Leadership Council and the New Hampshire Department of Health and Human Services. *Healthy New Hampshire 2010; Improving Health—and Quality of Life—for the People of New Hampshire*.

<http://www.healthynh2010.org/>

Masten, Scott V. "Do States Upgrading to Primary Enforcement of Safety Belt Laws Experience Increased Daytime and Nighttime Belt Use? *Accident Analysis & Prevention* 39:6 (November 2007) 1131-1139.

Schieber, Richard A. and Maria E. Vegega (Eds.). *National Strategies for Advancing Child Pedestrian Safety*. Atlanta, GA: Centers for Disease Control and Prevention, October 2001.

<http://www.cdc.gov/ncipc/pedestrian/newpedbk.pdf>

US Department of Health and Human Services, Centers for Disease Control and Prevention, Injury Center.

<http://www.cdc.gov/ncipc/factsheets/adultfalls.htm>

US Department of Health and Human Services, National Institute for Occupational Safety and Health. <http://www.cdc.gov/niosh/>

Violence (Revised 11/06)

(Revised by NHPHA Policy Committee 3/28/2008; Approved by NHPHA Board 4/4/2008)

The New Hampshire Public Health Association (NHPHA) recognizes that violent behaviors include the full continuum: bullying, assault, domestic violence, child and elder abuse, sexual assault and suicide and can result in deaths as well as in long term physical and psychological disability. The reduction of violence and intentional injuries is a key step toward improving the health and well-being of individuals and our communities. The NHPHA supports multidisciplinary efforts to address violence through comprehensive preventive strategies. These efforts should:

- Be evidence-based or based on best available information;
- Recognize the interconnectedness of violence, socioeconomic status, mental health status, alcohol and substance use, accessibility of firearms and other factors ; and
- Involve the collaboration of health, mental health, law enforcement, criminal justice, education, and social services.

Resources:

Kaiser Family Foundation, State Health Facts. Org. *Number of Deaths Due to Injury by Firearms per 100,000 Population, 2003*. <http://www.statehealthfacts.org/comparemaptable.jsp?ind=113&cat=2>

Hines, Denise and Murray A. Straus. "Binge Drinking and Violence Against Dating Partners: The Mediating Effect of Antisocial Traits and Behaviors in a Multinational Perspective", *Aggressive Behavior* 33:5 (September/October 2007) 441-457.

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<http://pubpages.unh.edu/~mas2/VB48.pdf>

US Department of Health and Human Services, Centers for Disease Control and Prevention, Injury Center. *The Public Health Approach to Violence Prevention*, January 22, 2008.

http://www.cdc.gov/ncipc/dvp/PublicHealthApproachTo_ViolencePrevention.htm

US Department of Health and Human Services, Centers for Disease Control and Prevention. *Sexual Violence Fact Sheet*.

Atlanta, Georgia: Centers for Disease Control and Prevention, April 2007. <http://www.cdc.gov/ncipc/factsheets/svfacts.htm>

US Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Injury Prevention and Control. *Child Maltreatment: Facts at a Glance*. Atlanta, GA: Centers for Disease Control and Prevention, Summer 2007.

http://www.cdc.gov/ncipc/dvp/CM_Data_Sheet.pdf

US Department of Health and Human Services, Center for Disease Control and Prevention, Injury Center. *The Social-Ecological Model: A Framework for Prevention*, August 29, 2007.

http://www.cdc.gov/ncipc/dvp/Social-Ecological-Model_DVP.htm

US Department of Health and Human Services, Centers for Disease Control and Prevention. *Violence Prevention at CDC, August 31, 2007*. http://www.cdc.gov/ncipc/dvp/prevention_at_CDC.htm

NHPHA publications

2008 Priorities Brochure (included at end of report)

Please visit the NH Public Health Association website at www.nhpha.org for the following information:

- Today's conference PowerPoint presentations
- State, regional, and national public health resources

Thank You to our Distinguished Funders in Public Health for their Generous Support

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UNH-Dept of Health Management & Policy

The screenshot shows the website for the New Hampshire Public Health Association. The browser window title is "The New Hampshire Public Health Association - Mozilla Firefox". The address bar shows "http://www.nhpha.org/". The website features a navigation menu on the left with links such as Home, About NHPHA, NHPHA Policy Positions, NHPHA Initiatives, Links to Resources, Press Releases, Join NHPHA, FAQs, Contact Us, and Get Involved!. The main content area includes a welcome message, a news section titled "NHPHA Annual Meeting" with details about the 2008 meeting (Wednesday, April 23, 5:00 PM at the Manchester Historical Museum), and a public health events calendar for April 2008. A photo of a woman is also visible, labeled "2007 Annual Meeting".

New Hampshire Public Health Association

WELCOME TO THE NEW HAMPSHIRE PUBLIC HEALTH ASSOCIATION

The mission of the New Hampshire Public Health Association (NHPHA) is to strengthen the public health system to more effectively protect and improve the health and safety of our population.

NEWS

NHPHA Annual Meeting

SAVE THE DATE

WHAT: The NHPHA Annual Meeting

WHEN: Wednesday April 23, 2008 5:00 PM

WHERE: The Manchester Historical Museum

[Click here for the Annual Meeting brochure in PDF format.](#)

Guest Speaker: Oglesby H. Young, MD

PUBLIC HEALTH EVENTS

< April, 2008 >

S	M	T	W	T	F	S
30	31	01	02	03	04	05
06	07	08	09	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	01	02	03