ASPPH Presents Webinar Series

Integrating Advocacy into the Undergraduate Curriculum

Monday, September 18, 2017
12-1:00 p.m. Eastern
Method for Submitting Questions

Join the Conversation...

- You can ask questions in writing anytime during the webinar.
- Simply type them in the “Questions” field on the right side of your screen.
Today’s 4 Part Agenda

• Health education and CPH competencies related to policy advocacy and Annual Health Education Advocacy Summit;
• National/state-specific studies on training students in policy advocacy and their impact on self-efficacy and stakeholders;
• How to integrate health policy and advocacy skills into the public health curricula and gain administrative support;
• How undergraduate students applied policy competencies to help their campus achieve tobacco-related objectives.
Undergraduate Policy Advocacy Skills:

Foundations for Effective Public Health Professionals in the 21st Century

M. Elaine Auld, MPH, MCHES
Chief Executive Officer
Society for Public Health Education
Society for Public Health Education

- **Mission**: To provide global leadership to the profession of health education and health promotion and to promote the health of society.
- 4,000 members, 21 chapters
- Professional Preparation & Practice Standards
- Advance Research/Practice
- CE for CHES/MCHES/CPH
  - **Scientific Meetings**
  - **Distance Education**
- Policy Advocacy
Public Health & Policy Advocacy

- Healthy People 2000 Objectives
- IOM Who Will Keep the Public Healthy?
- CHES Competencies
- Council on Linkages PH Competencies
- Health Impact Pyramid
- Healthy People 2030
## CHES/MCHES Competencies

### Area VII. Communicate, Promote, and Advocate for Health, Health Education/Promotion, and the Profession

<table>
<thead>
<tr>
<th>CHES Competencies</th>
<th># Sub-competencies</th>
<th>Examples</th>
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</table>
| Engage in advocacy for health and health education/promotion | 9                   | • Identify current and emerging issues requiring advocacy  
• Engage stakeholders in advocacy initiatives  
• Lead advocacy initiatives related to health |
| Influence policy and/or systems change to promote health and health education | 10                  | • Use evidence-based findings in policy analysis  
• Develop policies to promote health using evidence-based findings*  
• Use policy advocacy techniques to influence decision-makers*  
• Engage in legislative advocacy |

*Advanced-level
# Core Competencies for Public Health Professionals

<table>
<thead>
<tr>
<th>PH Competency Domain</th>
<th># Sub-competencies</th>
<th>Examples of Tier 2 and 3 Competencies</th>
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</table>
| Policy Development/ Program Planning Skills  | 6                  | • Develops options for policies, programs, and services (e.g., immunization programs, food safety programs)  
• Determines the feasibility and implications of policies, programs, and services  
• Influences policies, programs, and services external to the organization that affect the health of the community (e.g., zoning, transportation routes) |
Critical Content of the Core for the 21st Century MPH Degree*

- Legal, ethical, economic, and regulatory dimensions of health care and public health policy, the roles, influences, and responsibilities of the different agencies and branches of government, and approaches to developing, evaluating, and advocating for public health policies.

*ASPPH Framing the Future: The Second Hundred Years of Education for Public Health Task Force
Annual Health Education Advocacy Summit
Advocacy Summit Objectives

Participants will:

• Develop new advocacy knowledge & skills to become effective policy advocates at federal/state/local levels

• Articulate federal policy priorities related to school/public health education

• Develop/enhance personal relationship with policymakers

• Identify new colleagues to strengthen future advocacy efforts
2 ½ Day Summit Agenda

Saturday Afternoon

• Intensive skill building – tracks for beginner to advanced (including dedicated faculty sessions)

Sunday

• Orientation to Current Climate of Congress
• Presentation/Discussion of Priority Health Issues
• Making Hill Visits – Roll Play, Demonstrations
• Small group planning and practice

Monday

• Capitol Hill Orientation (Life on the Hill)
• Hill Visits
• Online documentation of responses
Summit Preparation

- Active emails, social media – adds to publicity, builds excitement and connections among attendees before the Summit

- 2 1-Hour Webinars for Attendees Before Coming to the Summit

- Gathering local stories/examples; impact of program/funding

- Registration for Hill visits
Summit Priorities
Experiential Learning

- Assigned Homework
  - Research Legislator(s)
    - Committees, Priorities
    - Legislator’s History to PH issues
  - Local PH stories, experiences

- Summit role plays

- Small group planning

- Going on Hill visits

- Follow-up
  - Legislator
  - Class presentations, newsletter articles

Before

During

After
Other Post Summit Ideas

- Encourage ltr to editor, op-eds in campus/local paper
- Connect to student service initiatives
- Organize campus/local summits
- Incorporate student “case studies” in future courses
- Involve Summit graduates in presenting and/or mentoring other students at future Summits
SOPHE Advocacy Summit Impact

- CDC DASH appropriations increase
- Influence Congressional questions during testimony
- Support/recognition of opinion leaders
- Enhanced organizational training by summit sponsors
- Advocacy days on campuses/state chapters
- Summit graduates moving into politics
- Increased capacity to mobilize across profession
2017 Advocacy Summit

- October 21-23, 2017
- Washington Court Hotel
- Featured Speakers:
  - Tom Quade, APHA President
  - John Auerbach, TFAH President
  - Larry Cohen, Prevention Institute CEO
- Faculty & student skill-building sessions
- Priorities:
  - Prevention Fund
  - Funding for CDC Office on Smoking & Health
  - Funding for CDC Diabetes Program
# Upcoming SOPHE Advocacy Summit Webinars

<table>
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<tr>
<th>Title</th>
<th>Date</th>
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<tbody>
<tr>
<td>A Bipartisan Vision for Advancing Community Prevention: Communicating Stories and Successes to Influence Local and National Change</td>
<td>Wednesday, September 20, 2017</td>
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<tr>
<td>Advocacy 101- Preparing for the 2017 Advocacy Summit</td>
<td>Thursday, September 28, 2017</td>
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<tr>
<td>Applying Lessons Learned from the 2017 Advocacy Summit</td>
<td>Monday, October 30, 2017</td>
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2017 Advocacy Summit

- October 21-23, 2017
- Washington Court Hotel
- Registration & Detailed Agenda
- [www.sophe.org](http://www.sophe.org)
- Registration includes Meals, Materials, CHES/CPH Credits
- CHES Exam also available on Saturday a.m.
EMPOWERING UNDERGRADUATES WITH 21ST CENTURY POLICY ADVOCACY SKILLS

For more information; eauld@sophe.org
From Classroom to Capitol:

Building Advocacy Capacity through Federal- and State-Level Advocacy Experiences

Cicily Hampton, PhD, Society for Public Health Education
Anders Cedergren, PhD, CHES, University of Wisconsin – La Crosse
Keely Rees, PhD, MCHES, University of Wisconsin – La Crosse
Overview of Advocacy Participation

• Health Education Advocacy Summits (SOPHE and WI State)
  • Society for Public Health Education
  • University of Wisconsin La Crosse
    – Department of Health Education & Health Promotion

• Eta Sigma Gamma
  • At Large Board Member, Advocacy Committee
  • Local Beta Phi Chapter

• Leadership in Department
  • Department Chair
  • National Service (ASHA, APHA, SOPHE, ESG)
  • State Service (WPHA, WHEN, DPI)

• Local Advocacy with Courses and Projects
  • Heroin Task Force
  • Reproductive Health
  • Global Health Initiatives
  • School Districts
  • Legislative Gatherings
Departmental & College Support

Campus Advocacy
Community Advocacy
County Advocacy

All led to State and National Advocacy Involvement
Our Key to Successfully Building an Advocacy Plan

The History Of Being A Champion
From Everyday advocacy to Formal advocacy

Public Health Legislative Gatherings

Local
WI State Advocacy Experiences 2015, 2016 & 2017
Advocacy 101 Pre-Workshops on Campus & Webinars

Group of about 20-25 Travel to State Capitol in Feb or March

Partnerships are KEY

Media, Buttons, Stickers
Research Projects

- The purpose of this research is to investigate whether advocacy training and an in-person experience outside of regular academics or work improve advocacy knowledge, confidence, skills, intentions, and practices of Health Education Advocacy Summit/Experience participants.

- **2016 & 2017 UWL State Experience in Madison, WI**
  - Participants
    - 23 registered; 16 attendees (plus 4 faculty)
    - Pre Test, Post Test
    - Focus Group Debriefing
    - Follow Up with Legislative Staff
    - 2017 Comparison Group & much larger group of participants

- **2016 SOPHE Summit in Washington, DC**
  - Participants
    - 120+ registrants
  - Pre Test, Post Test, 3 & 6 Month Follow Up Post Test
  - Future 2017 Summit, Comparison Group & Legislative Follow Up
Participants – 2016 WI State Experience

• How much experience do you have advocating for health or health education?
  - 1 = 4; 2 = 5; 3 = 4; 4 = 2; 5 = 1

• How comfortable did you feel advocating for health and the health education profession in your hill visits Monday 2/1/16?
  - 2 = 1; 3 = 1; 4 = 8; 5 = 5

• How well do you feel the trainings on-campus Saturday 1/30/16 and in Madison Sunday 1/31/16 prepared you for your advocacy visits on the hill?
  - 3 = 3; 5 = 5; 5 = 7
Pre-Post Test

• How comfortable do you feel identifying current and emerging health issues requiring advocacy?

• How comfortable do you feel engaging stakeholders in advocacy initiatives?

• How comfortable do you feel complying with organizational policies related to participating in advocacy?
Pre-Post Test

- How comfortable do you feel accessing resources (for example, financial, personnel, information, data) related to identified advocacy needs?

- How comfortable do you feel developing advocacy plans in compliance with local, state, and/or federal policies and procedures?

- How comfortable do you feel using strategies that advance advocacy goals?
Pre-Post Test

- How comfortable do you feel implementing advocacy plans?

- How comfortable do you feel evaluating advocacy efforts?

- How comfortable do you feel leading advocacy initiatives related to health?
**Pre-Post Test**

- How comfortable do you feel using policy advocacy techniques to influence decision-makers?

- How comfortable do you feel using media advocacy techniques to influence decision-makers?

- How comfortable do you feel engaging in legislative advocacy?
Focus Group Questions

• Introduction questions
  – Tell me how your week has been since we made it back from Madison
  – Was the advocacy experience what you thought it would be?

• Main body questions
  – What do you think of the advocacy meetings your group had at the Capitol?
  – How do you feel the training prepared you for your meetings at the Capitol?
  – Did this experience influence your understanding of advocacy?
  – Did this experience have an impact on your desire to advocate?

• Closing questions
  – What would your suggestions be to students next year?
  – What are your recommendations to organizers for next year?
Preliminary Focus Group Findings & Themes

• Program Structure
  – When/how offered, promoted (ESG), and registration processes
  – Length of time/place, sequence/place of info, role play/dry runs
  – Outside presenters (topic & interaction)
  – Team/group

• Advocacy in Action vs. Classroom Learning
  – Overcome fear; trust the process
  – Same prep, different ask
  – Conversation vs. presentation
  – Change in mindset from being educated to educating
  – Look good, feel good, am good!
  – For anyone, but better for upper level student (professional prep)
Preliminary Focus Group Findings & Themes

• **Immediate Change in Behavior & Thought**
  – Exhausted but fun
  – Personal and professional support for CHE
  – Identify actualities and welcome opportunities for advocacy

• **Personal & Professional Growth**
  – Connections and context (politics, HE/HP/PH, responsibilities)
  – Empowered and role of empowering
  – If not me, them who
Legislative Staff Evaluation

• Sent email to 12 staff (with reminder after one week)
• Received responses from 6 legislative or research aid and assistants
• 4 Democrat, 2 Republican
Legislative Staff Evaluation

- How important do you feel the public health issue that UWL HEHP students advocated for is to your office?
  - 3 = 1; 4 = 5

- How much did you know about the public health issue UWL HEHP students advocated for before today’s meeting?
  - 1 = 1; 2 = 2; 3 = 2; 4 = 1

- How well put together do you feel the advocacy message was that UWL HEHP students delivered to your office?
  - 4 = 2; 5 = 4

- How well do you feel UWL HEHP students were able to deliver their advocacy message during their meeting in your office?
  - 4 = 3; 5 = 3
Legislative Staff Evaluation

• Overall, how much of an impact do you feel UWL HEHP student advocacy for reimbursement for community based preventive services will have on how your office chooses to deal with this issue in the future?
  – 3 = 2; 4 = 4

• How supportive would you be to having UWL HEHP students visit your office on an annual basis to advocate for a current public health issue?
  – 4 = 2; 5 = 4

• Following this advocacy visit, how likely are you to consider contacting the UWL HEHP department for collaboration on public health issues of interest to your office?
  – 2 = 2; 3 = 1; 4 = 2; 5 = 1

• In your opinion, what makes for an effective advocacy hill visit (including setting up a meeting and following up with a representative or staff person after a meeting)?
SOPHE Health Education Advocacy Summit 2016 (October)

- Research Participants
  - Fall 2016 Summit Attendees (18 years and old)
  - Voluntary

- Electronic Pre & Post Test
  - Pre Test sent prior to the Summit (Oct 2016)
  - Post Test sent immediately after the Summit (Oct 2016)
  - 3 and 6 month Post Test Sent (Feb & June 2017)
Preliminary Results – SOPHE Summit 2016

• Pre and Immediate Post
  – Pre (49), Post (45)
  – Subjects Matching Pre/Post (32)

• Advocacy Comfort Level Improved
  – 13 items, pre/post
  – All improved over time, combined into scale score
  – paired t-test was significant at a .05 level, large effect size

• Intent to Advocate
  – 4 items, improved Pre to Post

• The Summit is fulfilling a need and the purpose.
Conclusions & Future Recommendations

• Effective advocacy is one way to further define health education role within public health

• “Opportunities” with program structure & content
  – National summit
  – Number of students

• Intended to be combination of 3 faculty responsibilities & be translational
  – Program improvement
  – Community involvement
  – Future student involvement

• Immediate & sustained impact

• Experience related to higher level cognitive dimensions on Bloom’s Taxonomy (advocacy as part of the curriculum & faculty responsibilities)

• Ongoing collaboration
  – Come again vs. using as resource
Integrating Policy Advocacy into Undergraduate Curricula in Public Health

Keely Rees, PhD, MCHES, Professor, Health Education & Health Promotion
University of Wisconsin - La Crosse
Preparing the Next Generation of Health Advocates
The Need for the Skill & Intervention

Bloom’s Taxonomy

- **Remember**: Recall facts and basic concepts (define, duplicate, list, memorize, repeat, state)
- **Understand**: Explain ideas or concepts (explain, identify, locate, recognize, report, select, translate)
- **Apply**: Use information in new situations (execute, implement, solve, use, demonstrate, interpret, operate, schedule, sketch)
- **Analyze**: Draw connections among ideas (differentiate, organize, relate, compare, contrast, distinguish, examine, experiment, question, test)
- **Evaluate**: Justify a stand or decision (appraise, argue, defend, judge, select, support, value, critique, weigh)
- **Create**: Produce new or original work (design, assemble, construct, conjecture, develop, formulate, author, investigate)

http://ceph.org
http://hs.boisestate.edu/hep/what-are-health/
https://cft.vanderbilt.edu/guides-sub-pages/blooms-taxonomy/
## Curriculum Process

**2+ Years**

### Skills Based

### Driven by Workforce

### Accreditation

### Faculty Workload

### Policy & Advocacy

### Course - Required

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### Table: B.S. in Public Health, Community Health Education Concentration

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<thead>
<tr>
<th>Requirement</th>
<th>Courses</th>
<th>Credits</th>
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<tbody>
<tr>
<td><strong>1. PRE-Admission Courses (IDC)</strong></td>
<td>BIO 100/105 Intro/General Bio (4 cr) GE05</td>
<td>4</td>
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<td>MTH 145 Elementary Statistics (4 cr) GE02</td>
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<td>PRE - req Math placement level</td>
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<td>HRP 105 Creating a Healthy, Active Lifestyle (GE09)</td>
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<td>OR HP 105 Health, Wellness &amp; Dis Health Care Consumer</td>
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<td>OR HED 201 Health Education</td>
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<td></td>
<td>ONE Social Behavioral Science course</td>
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<td>Check catalog for possible courses (psy, soc, pol, anth)</td>
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<td></td>
<td>MIC 130 Global Impact of Infectious Disease (Lab) GE06</td>
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<td></td>
<td>OR MIC 100 Microbes and Society (4 cr) GE05</td>
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<td></td>
<td>ESS 205 Human Anatomy *pre req Bio 100/105 or MIC 100</td>
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<td>OR BIO 312 *pre req BIO 100/105 &amp; HED 201</td>
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<td>ESS 206 Human Physiology *pre req ESS 205</td>
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<td>OR BIO 313 *pre req BIO 312</td>
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<td>PH 200 Public Health for the Educated Citizen (GE06)</td>
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<td>PH 204 Introduction to Global Health</td>
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<td>HED 210 Foundations of Health Education</td>
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<td><strong>2. Public &amp; Community Health Core</strong></td>
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<td>HED 320 Last Semester on Campus (LSOC)</td>
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<td>CHE 430 Grant Writing &amp; Resource Management</td>
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<td>CHE 450 Implement, Admin., and Evaluation</td>
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<td>CHE 480 Senior Capstone</td>
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<td><strong>Content #1</strong></td>
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<td><strong>Content #4</strong></td>
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<td><strong>3. Public &amp; Community Health Core</strong></td>
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<td>HED 416 Mental &amp; Emotional Health</td>
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<td>HED 425 Violence &amp; Injury Prevention</td>
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<td>HED 449 Drugs, Society, and Human Behavior</td>
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<td>HED 472 General Health Promotion</td>
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<td>HED 473 Health Aspects of Aging</td>
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<td>HED 474 Nutrition Education</td>
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<td></td>
<td><strong>HED 409 Stress Management</strong> <strong>Spring Semester Only</strong></td>
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<td></td>
<td><strong>HED 407</strong> <em>One Credit Course</em></td>
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<td><strong>4. Preceptorship – Capstone Experience at an Off-Campus Site</strong></td>
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<td></td>
<td>Preceptorship in Public Health Setting (15 Credits)</td>
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<td><strong>Content Courses: 12 Credits</strong></td>
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<td><strong>Successful completion of sections 1, 2, 3, 4</strong></td>
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<td>HED 405 Mental &amp; Emotional Health</td>
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<td><strong>5. Preceptorship – Capstone Experience at an Off-Campus Site</strong></td>
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<td><strong>If interested in Youth Health Issues. – Take HED 207 (GE 09)</strong></td>
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*NOTE: This is a summary of the curriculum requirements. For more details, please refer to the full document.*
Health Policy, Advocacy & Community Organization Course

- Project Based Learning
  - Competency Driven

- **Program Student Learning Outcomes/NCHEC & Council on Linkages:**
  - Assessment of these two PSLO’s will occur during this course for Proficiency:
  - **By the end of this course, students will be able to:**
    - PSLO 2: Apply public health concepts to policy development and program planning
    - PSLO 15: Communicate and advocate for health and health education

- Local Legislative Gathering
  - Fall and Spring

- State Advocacy Summit
  - Plan, Coordinate with Eta Sigma Gamma, Implement, Evaluate

- Policy

- Local Community Development
Implications & Next Steps

• Research Protocols
  – Comparison group at National level

• Campus Wide Efforts
  – Partnership with other departments

• Graduate Level Course

• Graduate Assistant Project & Research
  – Coordination

• Teaching others how to make this work on their campus & state
Challenges & Barriers to Advocacy

Amy Thompson, PhD, MSEd, CHES
Professor, Health Education
The University of Toledo
National SOPHE Advocacy Trustee

Presented by Jennifer Glassman, PhD, CCC-SLP, CHES
Assistant Professor
University of Toledo
Tobacco 21 Overview

• Some 95% of adult smokers begin smoking before they turn 21.

• If a person starts smoking by 18, they are almost twice as likely to become lifetime smokers compared to those who start after the age of 21.

• Increasing the minimum legal sale age for tobacco products to 21 years is a promising strategy to reduce smoking and other tobacco-related use among youth and young adults.
Tobacco 21 Overview

• This ordinance complements other strategies to reduce tobacco use, including higher tobacco taxes, smoke-free laws that include workplaces and public places, and well-funded sustained tobacco prevention and cessation programs. Currently, there are over 200 municipalities that have passed a Tobacco 21 ordinance and several states.

• Successes include partnering with local health and tobacco coalitions, hosting a community forum to educate the community on Tobacco 21, engaging the media by being interviewed on TV, newspaper, and radio stations, and providing testimony at city councils.
Advocacy Strategies

1) Select Cities
2) Identify gatekeepers and community stakeholders
3) Partner with local health and tobacco coalitions
4) Write Letters of Support
5) Provide testimony at city council meetings
6) Host educational community forum
7) Engage media
8) Write Op-Eds to newspapers
Recommendations

- Advocates should partner with additional organizations to provide greater leverage and support in the community toward this policy.
- Obtain letters of support from local agencies, hospital systems, and medical professionals prior to meeting with city council members.
- Select a small number of cities when you begin your advocacy efforts.
Recommendations

- Be aware of other health initiatives or ordinances that are currently in committee with your city council.
- Find a committed advocate in a leadership role in government.
- Identify gatekeepers in your community early on in the process.
- Appoint several advocates in the community to be present at code committee meetings to offer their support.
Policy Development Considerations

- Point of sale ordinance
- It is recommended not to grandfather people in
- Tobacco and nicotine products including e-cigarettes and hookah are included
- Fines for underage sales
- Enforcement of policy by law enforcement
Lessons Learned……

- Include media from the beginning and gain their support; media is to produce positive commentaries and articles supporting T21.
- Write op-eds to newspapers for support.
- Expect initial opposition from retailers, policy makers and community members.
Prepare to answer any questions

*Regarding military age of 18,
*Financial costs,
*Community and law enforcement responsibility.
Tailored Advocacy is Important

- Local business owner
- Teacher
- Fire Chief
Conclusions

- Students are an integral part of advocacy at a local level.
- Use existing partnerships and don’t be afraid to make new partnerships with different groups.
- Advocacy takes time and dedication.
Questions or Comments?

Join the Conversation...
Thank you to today’s Presenters

Now taking questions.

Elaine Auld
Society for Public Health Education

Cicily Hampton
Society for Public Health Education

Keely Rees
University of Wisconsin La Crosse

Jennifer Glassman
University of Toledo
See the webinar event page on the ASPPH website for a link to the archived webinar:

http://www.aspoph.org/event/aspph-presents-integrating-advocacy-into-the-undergraduate-curriculum/

Contact: webinars@aspoph.org
Coming Attractions...

UNDERGRADUATE
Public Health and Global Health Education

SUMMIT

MARCH 7, 2018 • ARLINGTON, VA

Call for abstracts open
Submissions due Sunday, October 22

http://www.aspph.org/event/2018undergraduatepublichealthsummit/
Coming Attractions...

ASPPH Presents Public Health Students and DACA
Friday, September 22, 12 – 1:00 p.m. Eastern
http://www.aspph.org/event/aspph-presents-public-health-students-and-daca/

ASPPH Presents WEBINAR

ASSOCIATION OF SCHOOLS AND PROGRAMS OF PUBLIC HEALTH
Thank You!

See the webinar event page on the ASPPH website for a link to the archived webinar:

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Contact: webinars@aspph.org

CPHCE Credits