**The New Mexico Public Health Association**

**Annual 2015 Conference**

***Redefining Public Health: Building Sustainable Communities***

**Call for Abstracts**

**The face of public health is changing. While still encompassing the essential public health functions, current public health practice emphasizes *upstream* causes and interventions and these require incorporating new partners and new approaches. It is widely recognized that the most effective way to improve public health for the most people is to address the environmental and institutional roots of problems, through policy change.**

**Sustainable communities: provide transportation choices, promote affordable, equitable, housing; enhance economic competiveness through employment and education; support existing communities; coordinate and leverage investment by removing barriers to collaboration; promote effective planning for growth, value and empower communities and neighborhoods and develop equitable and compassionate law enforcement and crime prevention strategies. Building sustainable communities requires inter-sectorial engagement of agencies that deal with health, housing, environment, public finance, criminal justice, planning and transportation (http://www.whitehouse.gov/sites/default/files/uploads/SCP-Fact-Sheet.pdf).**

**The 2015 annual meeting of the New Mexico Public Health Association (NMPHA), *Redefining Public Health: Building Sustainable Communities*, will bring together researchers, health service providers, public health practitioners, and community members from across the country and across the state to share strategies, engage partners, and create solutions to build on our collective efforts to strengthen communities that are empowered and able to address health and environmental hazards from many directions. We encourage abstracts from research and experience that highlight interdisciplinary and inter-sectorial linkages that result in better policy, healthier populations, and sustainable communities.**

|  |  |
| --- | --- |
| **ABSTRACTS MAY ADDRESS ANY OF THE FOLLOWING:*** Creating New Alliances
* Improving Health Equity and Diversity
* Environmental Health and Justice
* Promoting Health in all Policies analysis
* Social and Economic Justice
* Equitable treatment of minorities
* Social Determinants of Health
* Epidemiology, statistics, mapping
* Promotoras, CHWs, traditional

 Care-givers. | * Education that leads to employment
* Adequate and Affordable Housing
* Community Capacity Building
* Complimentary, Alternative &

 Traditional Medicine* Strengthening Public Health Infrastructure
* Innovative Models of Public Health Practice
* Equitable criminal justice
* Legislative strategies, Health in all Policies

  |
| **THROUGH:** Public Health Practice Research Innovations Healthcare Delivery Community Collaboration | Policy Intervention and ReformCulturally Relevant PracticeMediaPrevention & Intervention Science | EducationAdvocacyTechnologyPublic Health Alliances |

**ABSTRACT FORM**

**New Mexico Public Health Association**

Redefining Public Health: Building Sustainable Communities

# **March 31st-April 1st, 2015**

# **Embassy Suites in Albuquerque**

####  Deadline for submission of abstracts: February 3, 2015

**Please send your completed application as an attachment to:** **nmphasubmissions@gmail.com**

**You will be notified the status of your application no later than Friday February 13, 2015.**

**We would like all of our sessions to be offered for continuing education units (CEUs, CHES, etc.) to nurses, social workers and health educators. For this reason, all applicants are required to complete all sections for presentations to be eligible for continuing education units.**

Additional guidelines for completing the presentation outline and for poster submissions are attached to this form. *(Helpful hint: to check a box, double-click on it.*

***IMPORTANT:******All presenters listed on the abstract must register for the conference and complete the biographical data form and financial disclosure form****.*

**Incomplete applications will not be accepted.**

For questions, please contact **Conference Co-Chair David Broudy at** **broudy.david****@gmail.com** or

505-265-5591 or **Leona Woelk at** **lw.nmpha@gmail.com**or505-272-5145.

**APPLICATION CHECKLIST (Send this complete application as an attachment to:** **nmphasubmissions@gmail.com****)**

[ ]  1. Presentation Description – including format, contact name, title, presenters and description

[ ]  2. Audiovisual Equipment Needs

[ ]  3. Presentation Outline – MUST BE COMPLETE AND IN REQUIRED FORMAT

[ ]  4. Biographical Form; Page 8 – MUST BE COMPLETE FOR **EACH PRESENTER**

[ ]  5. Pages 9-10 – MUST BE COMPLETE FOR **EACH PRESENTER**

 (On page 10, please remember to “sign” your name by just typing it in.)

Note\* Presentations will be on March 31st and April 1st.

**1. Description – please check whether you are submitting for a presentation or for a poster or for both**

**Presentation** (Total time including Q&A): [ ]  25 minutes [ ]  55 minutes [ ]  1.25 hour panel

**Faculty-Led Student Presentation** (Total time including Q&A): [ ]  25 minutes [ ]  55 minutes

Would you be willing to present your presentation or faculty-led presentation as a poster if your abstract is not selected for a full presentation? Yes [ ]  No [ ]

**Poster:** [ ]  Poster Session If yes, please check one: [ ]  Student Poster [ ]  Other

If Student Poster: [ ]  Undergraduate [ ]  Graduate

Student Poster Category: [ ]  Field Experience/Practicum [ ]  Requirement of a Course [ ]  Research

**Awards will be given for student presentations and posters judged best by a panel of public health researchers and practitioners.**

**General Topic:** [ ]  **Social Determinants of Health** [ ]  **Access to Healthcare** [ ]  **Environmental Health & Justice**

**Subcategory: (You may select more than one)**

|  |  |
| --- | --- |
| [ ]  Creating New Alliances [ ]  Improving Health Equity and Diversity[ ]  Immigration and refugee health[ ]  Environmental Health & Justice[ ]  Public Health Policy[ ]  Social and Economic Justice[ ]  Racial Equity[ ]  Health Equity for People with Disabilities | [ ]  Equity in Education[ ]  Equitable Housing[ ]  Capacity Building[ ]  Expanding Public Health Through New Alliances[ ]  Strengthening Public Health Infrastructure[ ]  Public Health Models of Practice[ ]  Epidemiology, Statistics, Mapping[ ]   |

**Title of Presentation/Poster:**

**Name of main contact for presentation or name of faculty for faculty-led student presentations**:

**Name:       Contact E-mail:       Contact Phone:**

**Name(s) of ALL Presenter(s) with credentials (if any) as you’d like it to appear in the program:**

**Describe your presentation/poster in 150 words or less.**

**Please provide a 50-word description using words that will appeal to the audience you want to reach. If your application is approved, that is what will be used in the program booklet to describe your presentation.**

1. **Audio Visual equipment needs**

[ ]  LCD projector (for PowerPoint)

 [ ]  Laptop computer

[ ]  Flipchart and markers

 **\*NOTE: If you are showing a video clip or need sound, please note the following:**

* **You will need to provide your own speakers.**
* **We are not guaranteed internet, so you will need to save your video on your jump drive or embed it in your PowerPoint (e.g. you may not be able to stream from videos on line).**
* **If you have a Mac, please bring necessary adaptors to connect to projectors to ensure that the technology works together.**

**3. Presentation Outline**

***REFER TO GUIDELINES ON PAGE 5 FOR AN EXAMPLE OF HOW TO COMPLETE THIS FORM.***

Make as many copies of this form as necessary to provide the information required.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Objectives** | **Content**  | **Time Frame** | **Presenter(s)** | **Teaching/ learning Strategies** |
| List the learner objectives in behavioral and measurable outcomes for evaluation. | Provide an outline/description of the content presented and indicate to which objective(s) the content/topic is related. It must be more than a restatement of the objective. | Provide time frame for each objective/ content area. State in minutes | List the presenter for each objective, topic or content area in presenter-directed activities. | List the teaching strategies for each objective, topic or content area—such as resources, materials, delivery methods & evaluation. |
|       |       |       |       |       |

**GUIDELINES FOR PRESENTATION OUTLINE**

|  |
| --- |
| Sample |
| **Objectives** | **Content**  | **Time Frame** | **Presenter(s)** | **Teaching/ learning Strategies** |
| List the learner objectives in behavioral/ measurable outcomes for evaluation. | Provide an outline/description of the content presented and indicate to which objective(s) the content/topic is related. It must be more than a restatement of the objective. | Provide time frame for each objective/ content area.  | List the presenter for each objective/ topic or content area in presenter-directed activities. | List the teaching strategies for each objective, topic or content area—such as resources, materials, delivery methods & evaluation. |
| 1. Explain in your own words what health literacy is
2. List at least 4 things one can do in designing educational materials to make them more comprehensible to low-literate readers
3. Describe in your own words how the SAM+CAM is useful in developing materials for low-literate audiences
 | 1. The process for developing and testing a health literacy assessment tool
2. Elements of creating more effective health education materials for low-literate readers
3. How to use the SAM+CAM assessment tool to improve one’s health education materials (those one makes or buys)
 | 5 min. 10 min.10 min.5 min. for Q&A /Discussion | John SmithJohn Smith & Mary JonesMary JonesBoth | PowerPoint presentation with much question and answerPowerPoint presentation with question/answer and discussionActivity with SAM + CAM toolQuestion/answer and discussion |

**NOTE: Using these Guidelines for Presentation Outline provided above is critical for us to obtain approval for CEUs for nurses, social workers and health educators.**

### GUIDELINES FOR POSTERS

Your poster can be no more than 4 ft. high x 8 ft. wide. Remember that your text and illustrations will be viewed from distances of 3-8 feet and should be easily visible from that distance. At the top of the poster there should be a banner indicating the title, authors and institutions. The lettering should be not less than 1 inch high. Text in the body of the poster should be at least 3/8 inch high, preferably in bold font. Keep everything as simple as possible. Block lettering may be used to add clarity and emphasis.

Captions should be brief; labels should be few and clear. Lettering of the titles and text in the poster should be large enough so it can be read from a distance of 3-8 feet. It is helpful if the sequence to be followed in studying your material is indicated by numbers, letters or arrows. Simple but prominent sub-headings like “Introduction”, “Methods”, “Discussion”, and “Conclusions” are very helpful.

Complex graphs are too difficult to read and comprehend; lettering on a graph should be at least ¼ inch high and lines on the graph should be bold and thick enough to be easily seen. Photographs should have good contrast and sharp focus. Source references should be given. Copies of the poster are sometimes helpful as handouts for interested viewers.

You may wish to put your email address onto the poster and your handout as an easy point of contact for interested viewers. Authors are requested to be available at their poster during specified breaks the day of your poster session to discuss it with interested conference attendees. If the author is not available, an alternate who understands the poster should be present.

**GUIDELINES FOR EXHIBITORS**

**(Please find the form with additional guidelines and fees online at:** [**www.nmpha.org**](http://www.nmpha.org)**)**

Exhibitors are invited to be participants and attend all the conference events on April 1st and April 2nd, including lunch and the awards ceremony. There will be time set aside for participants to see all the exhibits and it will not be necessary to staff your table at all times.

**The fee includes lunch for one person; one 6’ x 30” table draped and skirted, 2 chairs, wireless internet access and electricity.** Power strips and / or extension cords will be an additional charge. You are welcome to bring your own. Organizations are welcome to share a table. Please contact us for more information about this.

Set up will begin at 8:00 a.m. on March 31st and take down will be on April 1st at 4:00 p.m. You can choose to participate on one day or both days.

**The following forms are required for each author/presenter listed on your abstract in order to be considered for any continuing education credit approval. Every person presenting, or listed as a presenter, is considered FACULTY for this conference and must complete this bio form and the Disclosure Declaration (signing by typing in your name) in order for your presentation/panel to be considered for presentation. Additional forms for additional presenters can be found online at:** [**www.nmpha.org**](http://www.nmpha.org)

# **Biographical Data**

(Complete one form for each presenter/narrator/author. Please DO NOT send curriculum vitae or resumes.)

|  |  |
| --- | --- |
| Name and degrees: |       |
| Present position and description:  |       |
|  |
|  |
| Employer: |       |
| Address: |       |
| E-mail: |       |
| Telephone: |       |

|  |
| --- |
| Education (include basic preparation through highest degree held) |
| Degree | Year Awarded | Institution (Name, City, State) | Major Area of Study |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |

Briefly describe your professional experience or areas of expertise (including publications) which contribute to your qualification to present at the NMPHA 2015 Annual Meeting:

**Presenter Disclosure Declaration**

*To be completed and signed by each presenter/narrator/author.* ***E-mail this form to*** ***nmphasubmissions@gmail.com*** ***to obtain continuing education approval.***

|  |  |
| --- | --- |
| Today’s date: |       |
| Presenter: |       |
| Title of Event: | *2015 NMPHA Conference: “Redefining Public Health: Building Sustainable Communities”* |
| Date of activity: | *March 31-April 1, 2015* |
| Location: | *Embassy Suites Hotel and Spa* |
| City: | *Albuquerque, NM* |

Please disclose all relevant financial relationships with any commercial interest (see the following page for definitions). Should it be determined that a conflict of interest exists as a result of a financial relationship you may have, this will need to be resolved prior to the activity. If you refuse to disclose relevant financial relationships, you will be disqualified from being a part of the planning and implementation of this activity.

**First**, list the names of proprietary entities producing health care goods or services, with the exemption of non-profit or government organizations and non-health care related companies with which you or your spouse/partner have, or have had, a relevant financial relationship within the past 12 months. For this purpose we consider the relevant financial relationships of your spouse or partner that you are aware of to be yours.

**Second**, describe what you or your spouse/partner received (example: salary, honorarium, etc.). NMPHA does NOT want to know how much you received.

**Third**, describe your role.

Please **check the appropriate box**, supply any commercial interest information in the table on the following page, sign and date. To assist you, an example is provided in the first row. Also, below the table are examples of what might have been received or roles.

|  |  |
| --- | --- |
| [ ]  | I do not have any relevant financial relationships with any commercial interests. |
| [ ]  | I have the following relevant financial relationships with commercial interests. (complete table on the next page) |

**You do not have to complete this table if you checked the box above indicating that you have no financial interest. However, you MUST sign and date the form by typing in your name and date.**

| Commercial Interest | Nature of Relevant Financial Relationship(Include all those that apply) |
| --- | --- |
| What I Received | My Role |
| *Example: Company ‘X’* | *Honorarium* | *Speaker* |
|       |       |       |
|       |       |       |
|       |       |       |
|       |       |       |
| **Electronic Signature (type name)** |  |
| Date |       |
| **What was received**: Salary, royalty, intellectual property rights, consulting fee, honoraria, ownership interest (e.g., stocks, stock options or other ownership interest, excluding diversified mutual funds), or other financial benefit. | **My role(s):** Employment, management position, independent contractor (including contracted research), consulting, speaking and teaching, membership on advisory committees or review panels, board membership, and other activities. |

**Glossary of Terms**

The following definitions are from the Accreditation Council of Continuing Medical Education (ACCME)

**Commercial Interest**

The ACCME defines a “commercial interest” as any proprietary entity producing health care goods or services, with the exemption of non-profit or government organizations and non-health-care-related companies.

**Financial Relationships**

Financial relationships are those relationships in which the individual benefits by receiving a salary, royalty, intellectual property rights, consulting fee, honoraria, ownership interest (e.g., stocks, stock options or other ownership interest, excluding diversified mutual funds), or other financial benefit. Financial benefits are usually associated with roles such as employment, management position, independent contractor (including contracted research), consulting, speaking and teaching, membership on advisory committees or review panels, board membership, and other activities from which remuneration is received, or expected. ACCME considers relationships of the person involved in the continuing education event to include financial relationships of a spouse or partner.

**Relevant Financial Relationships**

ACCME focuses on financial relationships with commercial interests in the 12-month period preceding the time that the individual is being asked to be presenter (faculty) in a continuing education event. ACCME has not set a minimal dollar amount for relationships to be significant. Inherent in any amount is the incentive to maintain or increase the value of the relationship. The ACCME defines “relevant financial relationships” as financial relationships in any amount occurring within the past 12 months that create a conflict of interest.

**Conflict of Interest**

Circumstances create a conflict of interest when an individual has an opportunity to affect CME content about products or services of a commercial interest with which he/she has a financial relationship

*Updated January 2015*