



Partnering with public health professionals

IT'S A WIN-WIN!

Session objectives

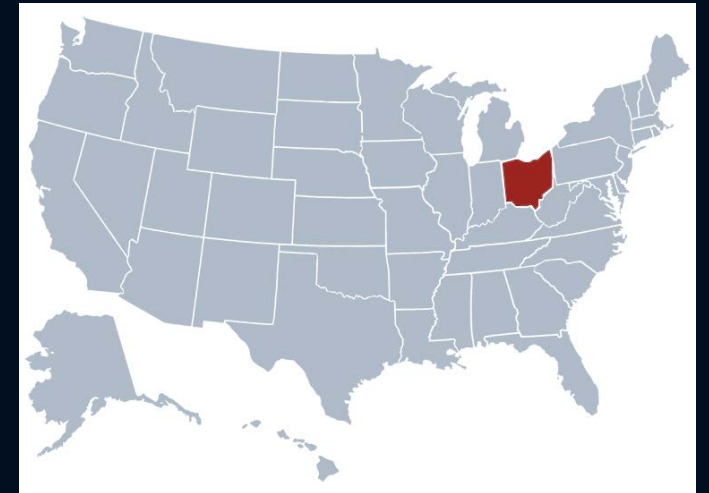
- Identify 3 strategies for developing partnerships with public health practitioners
- Discuss methods for involving local health departments in K-12 health curricula
- List at least 3 reasons for partnering with public health practitioners

Abstract

- A partnership between schools and local public health practitioners can be beneficial for several reasons. Emerging diseases like Ebola and Zika lead to many student questions in the health classroom. Public health is a growing field, and many K-12 students are not aware of public health content or careers. There are many strategies that can help make a school-public health partnership more successful. Benefits of this type of partnership include K-12 student knowledge of public health careers, knowledge of public health content and topics, and enhanced professional skills and knowledge of the K-12 health teacher. Ideas for engaging public health practitioners will be shared. Sample videos of and lesson plans for public health practitioners will be shared. The presenter has brought public health content and careers to several areas of K-12 education and has ideas for practice that have served both public health and school health education students (as well as herself) well in engaging K-12 students for the past 10 years. Participants will be able to share their experiences during the session.

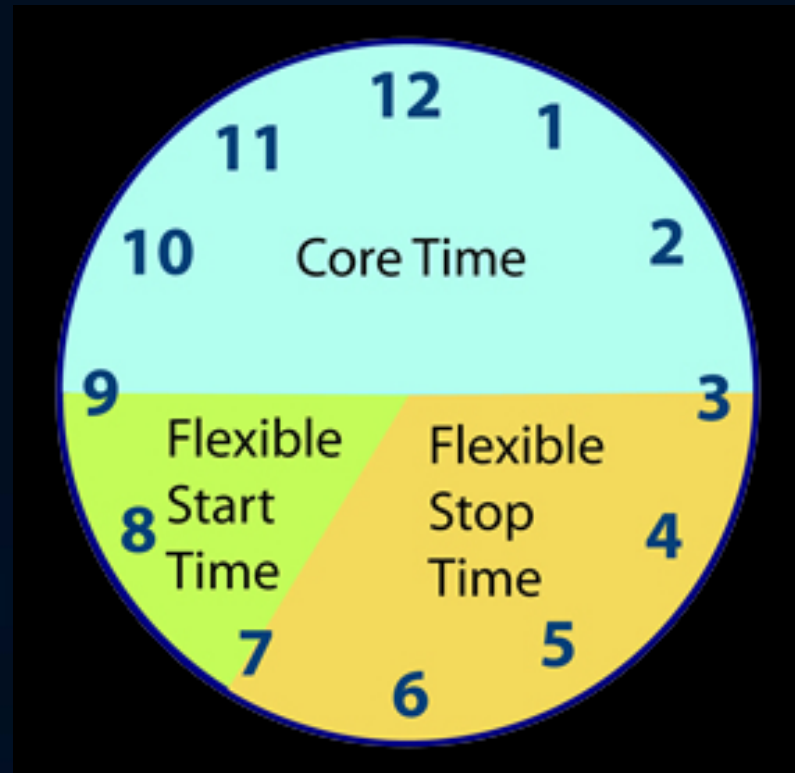
Public health

- Local control with state oversight
- Superintendent – health commissioner head of health department
- Differs by state
- Ohio

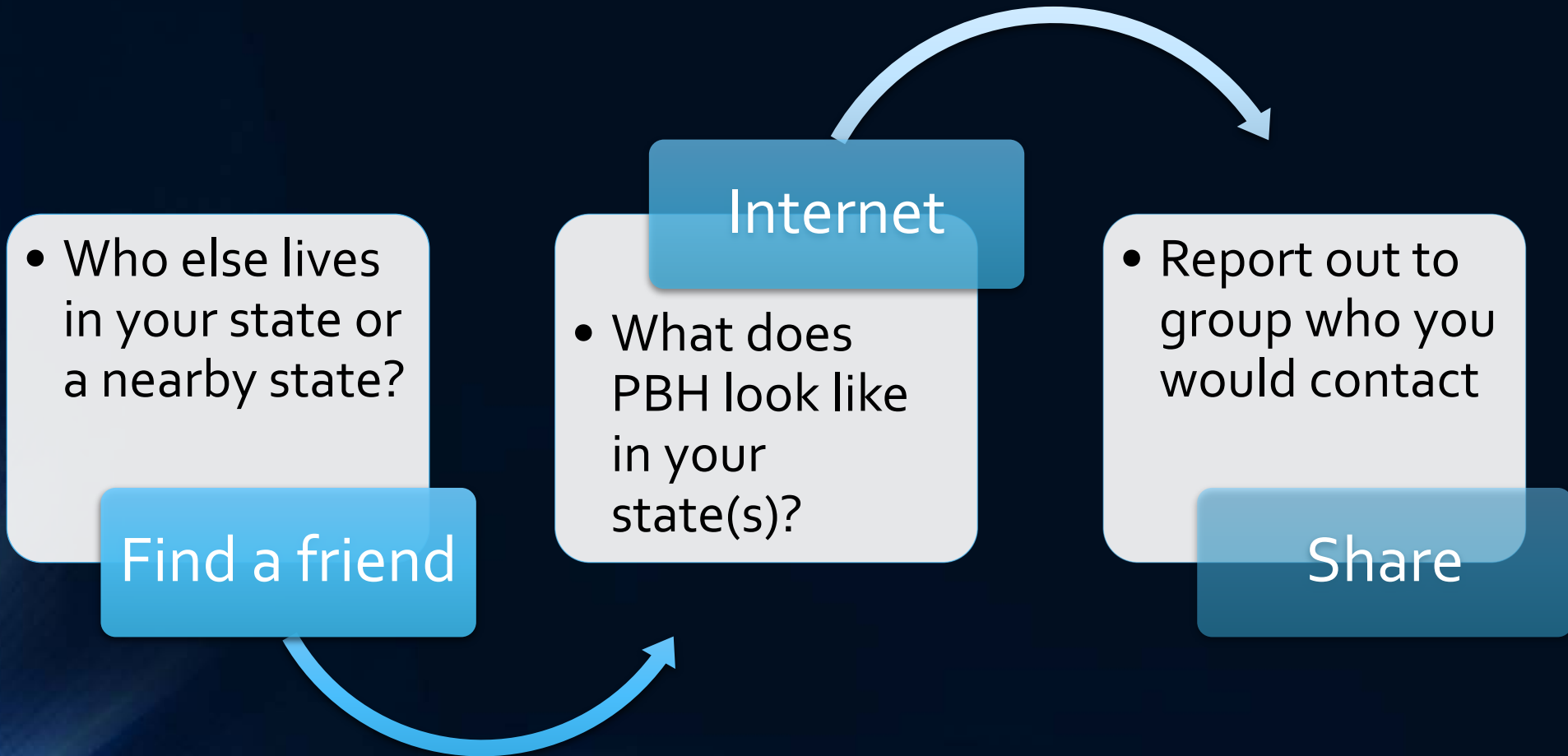


<http://www.50states.com/ohio.htm>

Flex time!



How does public health work in your state?



Partnerships

- Find common ground!
- <https://www.healthypeople.gov/2020/topics-objectives>

A

Access to Health Services

Adolescent Health *New*

Arthritis, Osteoporosis, and Chronic Back
Conditions

B

Blood Disorders and Blood Safety *New*

C

Cancer

Chronic Kidney Disease

D

Dementias, Including Alzheimer's Disease
New

Diabetes

Disability and Health

E

Early and Middle Childhood *New*

Educational and Community-Based Programs

G

Genomics *New*

Global Health *New*

H

Health Communication and Health
Information Technology

Health-Related Quality of Life & Well-Being
New

Healthcare-Associated Infections *New*

Hearing and Other Sensory or
Communication Disorders

Heart Disease and Stroke

HIV

I

Immunization and Infectious Diseases

Injury and Violence Prevention

L

Lesbian, Gay, Bisexual, and Transgender
Health *New*

N

Nutrition and Weight Status

O

Occupational Safety and Health

Older Adults *New*

Oral Health

P

Physical Activity

Preparedness *New*

Public Health Infrastructure

R

Respiratory Diseases

S

Sexually Transmitted Diseases

Sleep Health *New*

Social Determinants of Health *New*

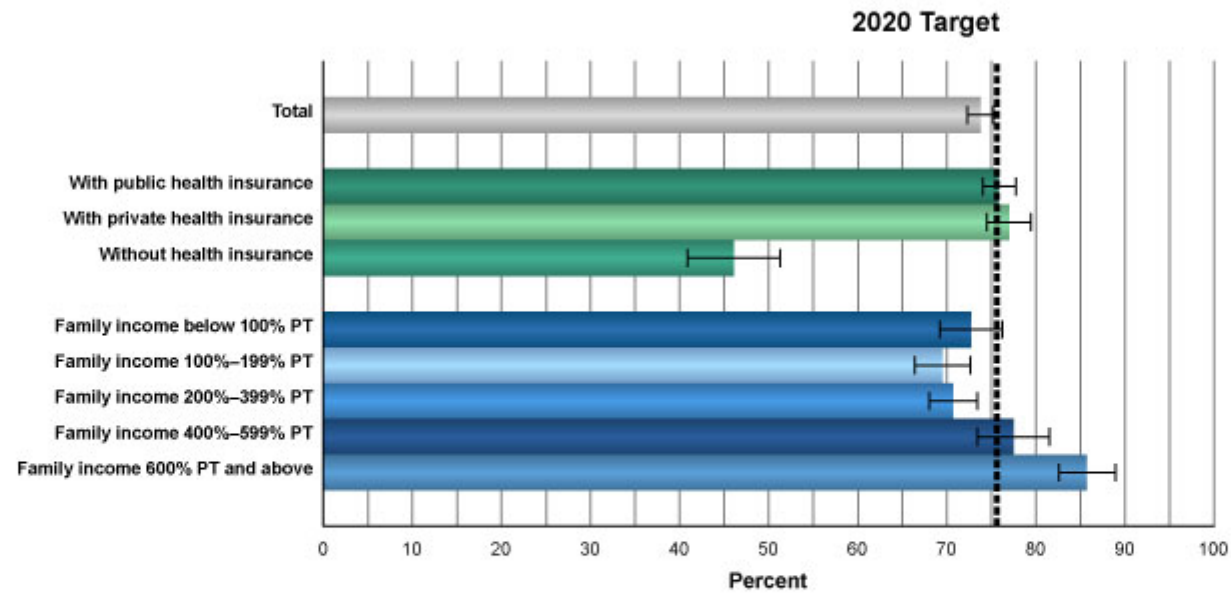
Substance Abuse

AH-2	Increase the proportion of adolescents who participate in extracurricular and/or out-of-school activities	Revised
AH-3	Increase the proportion of adolescents who are connected to a parent or other positive adult caregiver	
AH-3.1	Increase the proportion of adolescents who have an adult in their lives with whom they can talk about serious problems	Revised
AH-3.2	Increase the proportion of parents who attend events and activities in which their adolescents participate	
AH-4	Increase the proportion of adolescents who transition to self-sufficiency from foster care	
AH-4.1	Increase the proportion of adolescents in foster care who exhibit positive early indicators of readiness for transition to adulthood	Revised
AH-5	Increase educational achievement of adolescents and young adults	
AH-5.1	Increase the proportion of students who graduate with a regular diploma 4 years after starting 9th grade	LHI Revised
AH-5.2	Increase the proportion of students who are served under the Individuals with Disabilities Education Act who graduate high school with a diploma	Revised
AH-5.3	Increase the proportion of students whose reading skills are at or above the proficient achievement level for their grade	

Wellness checkup in past 12 months, adolescents, 2012



→ Increase Desired



Objective [AH-1](#)

SOURCE: National Health Interview Survey (NHIS), CDC/NCHS.

NOTE: Data are for the proportion of adolescents aged 10-17 years whose parents reported that they received a wellness checkup during the past 12 months (when not sick or injured).

PT = Poverty Threshold

— = 95% confidence interval.

Our experiences



Public health

- Guest speakers
- Fact finders
- Answer student questions
- Career day – nurses, medical directors, health directors/commissioners, sanitarians, health educators
- Grant funds to teach units (ie, nutrition, consumer health, sexuality)
- HECAT review boards

University programs

- Teaching opportunities for students and professors
- CDC's SHI
- School-based health fairs and other programs (perfect for intro planning classes)
- Help with K-12 health education grants
- Special programs (Dress drive)

Conclusion

- Communication
- Collaboration
- Healthier students, healthier public



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