



Science Board 2021 Report to the Governing Council

October 23, 2021

Members of the 2020-2021 Science Board

Jeffrey E. Hall, PhD, MA, MSPH, CPH- Chair
Danielle Campbell, MPH- Vice Chair
Apryl Brown, M, MPH
Alex E. Crosby, MD, MPH
Barbara Giloth, DrPH, MPH
Jyotsna Jagai, PhD, MPH
Resa M. Jones, PhD, MPH
Ben King, PhD
Diana Kingsbury, PhD, MPH, MA
Sonia Lee, MSPH
Kusuma Madamala, PhD, MPH
Angela McGowan, JD, MPH (resigned May 2021)
Paul Meissner, MSPH
Geraldine S. Perry, MPH, DrPH, RDN
Sarah Roberts, DrPH, MPH
Kevin Sykes, PhD, MPH
Kara Suvada, BS (Student Member)

A. Description of Issues

The Science Board (SB) is pleased to submit its 2020-2021 Annual Report to the Governing Council

B. Discussion

As stated in Article VII, Section 5, of the APHA Bylaws, the Science Board is tasked with stimulating and coordinating the development of the scientific basis for the Association's professional and public policy programs. The Science Board carries out these functions through the board and its subcommittees. As an integral part of the policy development process, the Science Board ensures that proposed APHA policy statements have scientific merit. The board

also makes recommendations on the annual meeting themes, sponsors scientific sessions, and provides scientific advice to the association.

Over the course of the year, the full Science Board met four times as follows:

- October 25- Annual Meeting (virtual)
- December 14, 2020- Orientation (via videoconference)
- March 5, 2021- Business meeting (via videoconference)
- April 28-29, 2021- Policy Review/Business Meeting (via videoconference)

Policy Review

During its April 28-29 meeting, the Science Board conducted a scientific review of proposed policy statement and made recommendations to the JPC on the scientific evidence reasoning and evidence. The Science Board criteria to assess the quality and strength of the scientific evidence and reasoning were as follows:

Strength of the Evidence - Ratings in this section reflect the strength of evidence included only (i.e., all seminal works were included, strength of evidence based on the study design/findings), regardless of whether the evidence is presented in a logical manner.

1. Strong Evidence
2. Sufficient Evidence
3. Insufficient Evidence
 - a. Requires minimal additional evidence
 - b. Requires a lot of additional evidence

Strength of Scientific Reasoning - Ratings in this section reflect the quality of the scientific reasoning, or logical progression of ideas to support the claims made, regardless of the strength of the evidence presented.

1. Strong Scientific Reasoning
2. Sufficient Scientific Reasoning
3. Insufficient Scientific Reasoning
 - a. Requires minimal revision
 - b. Requires major revision

Of the 20 policies reviewed, 0 received an assessment of strong evidence, 1 received an assessment of sufficient evidence, 11 received an assessment of insufficient evidence- requires minimal additional evidence, and 8 received an assessment of insufficient evidence- requires major additional evidence.

Of the 17 policies reviewed, 0 received an assessment of strong scientific reasoning, 5 received an assessment of sufficient scientific reasoning, 6 received an assessment of insufficient scientific reasoning- requires minor revision and 9 received an assessment of insufficient scientific reasoning- requires major revision.

Group A: Prevention	
Proposed Policy Statement	Science Board Assessment
<u>A1: Supporting physical education for all youth</u>	3. Insufficient Evidence b. Requires a lot of additional 2. Sufficient Scientific Reasoning
<u>A2: Prevention of lower extremity amputations due to non-traumatic loss of sensation and loss of circulation</u>	3. Insufficient Evidence b. Requires a lot of additional evidence 3. Insufficient Scientific Reasoning b. Requires major revision
<u>A3: A Comprehensive Approach to Suicide Prevention within a Public Health Framework</u>	3. Insufficient Evidence a. Requires minimal additional evidence 2. Sufficient Scientific Reasoning
<u>A4: Advancing Public Health and Equity through Prevention and Reengagement of Opportunity Youth</u>	3. Insufficient Evidence b. Requires a lot of additional evidence 3. Insufficient Scientific Reasoning b. Requires major revision
<u>A5: An Interprofessional Approach for the Prevention and Management of Diabetes and Associated Complications</u>	3. Insufficient Evidence b. Requires a lot of additional evidence 3. Insufficient Scientific Reasoning b. Requires major revision
<u>A6: Reduce exposure to excessive level of household debt and conduct more interdisciplinary research on over-indebtedness and health</u>	3. Insufficient Evidence b. Requires a lot of additional evidence 3. Insufficient Scientific Reasoning b. Requires major revision

Group B: Access to Care and Equity	
Proposed Policy Statement	Science Board Assessment

<u>B1: Ensuring Support for and Access to Self-Managed Abortions</u>	3. Insufficient Evidence a. Requires minimal additional evidence 3. Insufficient Scientific Reasoning a. Requires minimal revision
<u>B2: Call for Urgent Action to Address Health Inequities in the U.S. Coronavirus Diseases 2019 Pandemic and Response</u>	3. Insufficient Evidence a. Requires minimal additional evidence 2. Sufficient Scientific Reasoning
<u>B3: Adopting a Single-Payer Health System</u>	3. Insufficient Evidence a. Requires minimal additional evidence 3. Insufficient Scientific Reasoning a. Requires minimal revision
<u>B4: Addressing Coercion in Contraceptive Access to Promote Reproductive Health Equity</u>	3. Insufficient Evidence a. Requires minimal additional evidence 3. Insufficient Scientific Reasoning a. Requires minimal revision
<u>B5: Sexual and Gender Minority Demographic Data: Inclusion in Medical Records, National Surveys, and Public Health Research</u>	3. Insufficient Evidence b. Requires a lot of additional evidence 3. Insufficient Scientific Reasoning b. Requires major revision
<u>B6: The Importance of Universal Healthcare in Improving our Nation's Response to Pandemics and Health Disparities</u>	3. Insufficient Evidence a. Requires minimal additional evidence 3. Insufficient Scientific Reasoning b. Requires major revision
<u>B7: An Equitable Response to the Ongoing Opioid Crisis</u>	3. Insufficient Evidence b. Requires a lot of additional evidence

	3. Insufficient Scientific Reasoning b. Requires major revision
B8: Structural Racism Is a Public Health Crisis: Impact on the Black/African American Community	3. Insufficient Evidence a. Requires minimal additional evidence 3. Insufficient Scientific Reasoning b. Requires major revision
B9: The Role of Health Departments in Activities Related to Abortion	3. Insufficient Evidence a. Requires minimal additional evidence 2. Sufficient Scientific Reasoning

Group C: Environment and the Built Space

Proposed Policy Statement	Science Board Assessment
C1: Environmental Noise Pollution Control	3. Insufficient Evidence a. Requires minimal additional evidence 3. Insufficient Scientific Reasoning a. Requires minimal revision
C2: Ensuring Equity in Transportation and Land Use Decisions	2. Sufficient Evidence 2. Sufficient Scientific Reasoning

Group D: Human Rights and Education

Proposed Policy Statement	Science Board Assessment
D1: Advancing Public Health Interventions to Address the Harms of the Carceral System	3. Insufficient Evidence b. Requires a lot of additional evidence 3. Insufficient Scientific Reasoning b. Requires major revision
D2: Preparing the US Public School System for the Next Public Health Emergency:	3. Insufficient Evidence a. Requires minimal additional evidence

Lessons Learned from COVID-19	3. Insufficient Scientific Reasoning a. Requires minimal revision
D3: A Call to Investigate and Prevent Further Violations of Sexual and Reproductive Health Rights in Immigration Detention Centers	3. Insufficient Evidence a. Requires minimal additional evidence 3. Insufficient Scientific Reasoning a. Requires minimal revision

Throughout the year, the Science Board also met, as needed, as one of three committees, Joint Policy Committee, Annual Meeting Scientific Session, and Annual Meeting Program Emphasis.

Joint Policy Committee (JPC)

Four Science Board representatives served on the Joint Policy Committee. Three served a full year- Dr. Jeffrey Hall, Ms. Danielle Campbell and Mr. Ben King. Ms. Angela McGowan served through May 2021 and Dr. Barbara Giloth served from May 2021-October 2021. Science Board representatives on the JPC appropriately participated in JPC functions and meetings.

2021 Sponsored Scientific Session

The Science Board planned and will host a virtual scientific session entitled We Shall Overcome- Exploring Constructs of Social Connectedness in a Post-Pandemic Landscape on Tuesday, October 26, 2021, from 4-5:30PM. MT.

The goal of this session is to engage key stakeholders in a discussion about strategic frameworks, research, policies, and other initiatives aimed to support strengthening social cohesion. The interactive session will: discuss public health emergency preparedness as a tool to develop community partnerships and reduce health disparities, explore intersectionality as a framework to address structural racism and its impact on social cohesion, and examine the implications of social science research and collective action

Moderators: Dr. Jeffrey Hall and Ms. Danielle Campbell, APHA Science Board Chair and Vice-Chair

Speakers/Panelist: Dr. Joseph West, University of Miami and Florida Institute for Health Innovation; Dr. Lisa Bowleg, George Washington University

Archiving Review

There are 26 policy statements adopted in 2001 scheduled for archiving at the close of the 2020 Annual Meeting (see list below).

#	Title
20012	Reducing Maternal-Fetal HIV Transmission with Rapid HIV Tests
20018	Establishment of a Medicare Prescription Drug Benefits
200124	Trust Fund for Developing Countries to Meet National Commitment under the WHO Framework Convention for Tobacco Control
200110	Support for National Nutrition Monitoring and Continuation of CSFII Food and Health Behavioral Data
200125	Participation of Health Professionals in Capital Punishment
200111	Support of the Labeling of Genetically Modified Foods
200116	Global Campaign to Eliminate Avoidable Blindness
200117	Research and Intervention on Racism as a Fundamental Cause of Ethnic Disparities in Health
200126	Condemnation of Pharmaceutical companies Retaliatory Tactics
200119	Opposition to National Missile Defense and the Militarization of Space
200122	Opposition to Coercion in family Planning Decision Making
200120	Support for Culturally and Linguistically Appropriate Services in Health and Mental Health Care
200121	Threats to Global Health and Equity: The General Agreement on Trade in Services (GATS), and the Free Trade Area of the Americas (FTAA)
200123	Protection of the Health of Resident Immigrants in the United States
200114	APHA Supports the Health and Human Services Blueprint for Action on Breastfeeding
20013	APHA Resolution on Overweight in Childhood

20015	Recognition and Support for Community Health Workers' Contributions to Meeting our Nation's Health Care Needs
200116	Recognizing the Role of Veterinarians in the Public Health Workforce
200118	Support for Curricular in Firearm Related Violence Prevention
200117	Support for the Framework for Action on Oral Health in America: A Report of the Surgeon General
20019	Protection of Child Adolescent Workers
200112	Discontinuing the Use of Fluoroquinolone Antibiotics in Agriculture
20011	Improving Early Childhood Eyecare
20014	Hospital Emergency Department Closures
20013	Increasing Access to Out-of-Hospital Maternity Care Services through State-Regulated and Nationally-Certified Direct-Entry Midwives
20015	APHA Position Paper on the Health Status of American Indians and Alaska Natives

APHA members were asked to review these policy statements and consider three potential options for each policy statement of interest:

1. Allow the policy statement to remain on the archiving consent agenda
2. Update a policy statement scheduled for archiving
3. Request to keep active a policy statement proposed for archiving

No requests were received, so all 26 policy statements will automatically archive at the close of the 2021 Annual Meeting.

2023 Annual Meeting Themes

The Science Board submitted 2 themes for consideration by the Governing Council for 2023. The recommended themes are:

1. Creating the Healthiest Nation- Building Public Health Capacity to Address Contemporary Issues and Plan for the Future
2. Creating the Healthiest Nation- Addressing longstanding and emergent social and ethical challenges to public health

Ex Officio Representation on Executive Board

The Chair of the Science Board served as an Ex Officio member of the Executive Board, as outlined in the APHA bylaws. He represented the Board on the Membership Committee of the Executive Board.

Respectfully submitted,

Jeffrey E. Hall, PhD, MA, MSPH, CPH
2021-2022 Chair, Science Board