



## Joint Policy Committee (JPC) Mid-year Report to the Governing Council

June 13, 2022

### **Members of the 2022 Joint Policy Committee**

#### **Action Board Representatives**

Celeste Monforton, Chair  
Eleanor Fleming  
Shirley Orr  
Cindy Sousa

#### **Science Board Representatives**

Danielle M. Campbell, Chair  
Apryl Brown  
Sarah Roberts  
Kevin Sykes

#### **Education Board Representatives**

Elaine Archie Booker, Chair  
Anthony Santella  
Kusuma Schofield  
James Wohlleb

## **2022 Proposed Policy Statements: Science Board and JPC assessments**

### ***Review***

In April 2022, the Science Board and Joint Policy Committee (JPC) reviewed 19 proposed policy statements (PPS).

The Science Board reviewed the proposals and member comments and assessed the proposed policy statements based on the strength of the evidence presented and the strength of scientific reasoning. A detailed description of the Science Board’s assessment criteria is found in Appendix A. An explanation of JPC ratings is found in Appendix B.

The JPC reviewed the proposed policy statements, member comments and Science Board’s review in preparing its assessment of each proposed policy statement. The full minutes of the JPC spring meeting, including comment tables sent to authors of each PPS are available [here](#).

The table below summarizes the Science Board and the JPC’s assessments.

<b>Proposed Policy Statement</b>	<b>Science Board Initial Assessment (Evidence, Scientific Reasoning)</b>	<b>JPC Initial Assessment</b>
<a href="#">A1: Public Health as a Bridge to Peace in Israel, the West Bank and Gaza</a>	3b, 3b	Negative
<a href="#">A2: Justice in Global Access to COVID-19 Vaccination</a>	3a, 3a	Conditional
<a href="#">A3: A Call to Cancel International Debt for Global South Nations and Increase Public Financing of Health Systems</a>	3b, 3a	Conditional
<a href="#">A4: Support Decent Work for All as a Sustainable Health Strategy for Improving Population Health and Well-being</a>	3a, 3a	Negative
<a href="#">B1: The Overlooked Public Healthcare Crisis of Healthcare Waste: A Call for Oversight Protection and Tracking</a>	3b, 3b	Conditional
<a href="#">B2: Public Health Opportunities to Address the Health Effects of Gas Stoves</a>	3a, 3a	Negative
<a href="#">B3: Ending the Practice of Conversion Therapy Among LGBTQ+ Populations</a>	3b, 2	Conditional
<a href="#">B4: Ensuring Women’s Inclusion in HIV-Related Clinical Research</a>	3b, 3b	Negative

<a href="#">C1: A Strategy to Address Racism and Violence as Public Health Priorities: Community Health Workers Advancing Racial Equity and Violence Prevention</a>	3b, 3b	Negative
<a href="#">C2: Address Threats to Public Health Practice</a>	3a, 3a	Conditional
<a href="#">C3: A Public Health Approach to Gun Violence Prevention</a>	3b, 3b	Negative
<a href="#">C4: A Public Health Approach to Firearms Prevention Policy</a>	3b, 3b	Negative
<a href="#">C5: A More Equitable Approach to the Enforcement of Commercial Tobacco Control</a>	3a, 3a	Negative
<a href="#">C6: The Misuse of Preemptive Laws and the Impact on Public Health</a>	3b, 3b	Negative
<a href="#">C7: Advancing Health Equity Through Inclusive Democracy and Access to Early Voting</a>	3b, 3a	Negative
<a href="#">D1: Defining Public Health Leadership to Achieve Health Equity: Merging Collective, Adaptive and Emergent Models</a>	3b, 3a	Conditional
<a href="#">D2: Ensuring Access to Affordable Medications</a>	3a, 3b	Conditional
<a href="#">D3: Falls Prevention in Adults Aged 65 and older</a>	3b, 3b	Negative
<a href="#">D4: Expanding Medicaid Coverage for Birthing People to One-Year Postpartum</a>	3b, 3b	Conditional

### ***Next Steps***

Revised proposed policy statements are due August 15, 2022. The JPC will then meet again to discuss whether proposed policy statement authors have corrected deficiencies and will make recommendations based on the resubmission.

Authors will be asked to submit additional changes following the resubmission review, so that final proposed policy statements may be posted in advance of the Public Hearings.

### ***Public Hearings***

Public hearings on the proposed policy statements will be held virtually, ahead of the Annual Meeting programming, on Tuesday, November 1 and Wednesday, November 2<sup>nd</sup> (time TBD).

Virtual hearings will be held via Zoom. At least one author of each proposed policy statement being considered by the Governing Council will need to be present. The author(s) will be given two minutes to provide a brief overview of the proposed policy statement. Following this, members will have the opportunity to make comments and ask questions either on behalf of their member unit or themselves. The hearings will be moderated by JPC representatives and staff who will unmute the microphones of members who indicate they wish to ask a question. Any substantive comments or proposed revisions made during this session must also be submitted to [policy@apha.org](mailto:policy@apha.org) at the end of the hearing. Staff will also help to connect commenters and authors following the public hearing, should additional discussion be required. Following the hearing, authors are required to submit a revised version of their policy statements with agreed upon edits in track changes to [policy@apha.org](mailto:policy@apha.org).

***Late Breaker Proposed Policy Statements***

Late breaker proposed policy statements are due to [policy@apha.org](mailto:policy@apha.org) by 11:59PM ET on October 17, 2022. Submissions must include, the 1) proposed policy statement, as well as 2) a 250-word cover letter explaining rationale for why proposed policy statement qualifies as a late-breaker, addressing, in particular, the relevance and utility of the proposal 3) the [Policy Statement Proposal Checklist](#) (Word file) 4) An [Author Disclosure Statement](#) (Word file) for each author and 5) [Sponsorship](#) and/or [Endorsement Letters](#) (if applicable)

A late-breaker is a proposed policy statement that is related directly to events that occur after the regular policy statement proposal submission deadline has passed. Late-breakers are reviewed based on the following criteria:

- Emergent event: Does the evidence/arguments represent a development since this year’s policy statement deadline (in February)?
- Necessity: Does APHA have an existing policy statement that already addresses the issue?
- Utility: Are the action steps in the proposed policy statement directly related to, and appropriate for addressing the issue/ problem outlined in the policy statement?
- Format: Late-breakers are held to the same format guidelines as other policy statements. (Please review the [APHA Proposed Policy Statement Submission Guidelines](#))

***Archiving***

There are 13 policy statements adopted in 2002 scheduled for archiving at the close of the 2022 Annual Meeting (see list below).

#	Title
20021	<a href="#">The Role of Genomics in Public Health</a>
20022	<a href="#">Endorsing Caring For Our Children National Health and Safety Performance Standards: Guidelines for Out-of-Home Child Care Programs</a>

20023	<a href="#">Support of Healthy Aging through Health Promotion and Prevention of Disease and Injury</a>
20024	<a href="#">Reducing Sodium Content in the American Diet</a>
20025	<a href="#">Preserving the Right to Know Information and Encouraging Hazard Reduction to Reduce Risk of Exposure to Toxic Substances</a>
20026	<a href="#">Access to Safe Water, Sanitation, and Hygiene Promotion in Developing Countries</a>
20027	<a href="#">Protecting the Health and Safety of Workers Who Respond to Disasters</a>
20028	<a href="#">Alert on the Use of Tobacco Settlement Funds (2002)</a>
20029	<a href="#">Promoting Evidence Based Smoking Cessation Interventions for Women Before, During, and After Pregnancy</a>
200210	<a href="#">Maternal and Child Health (MCH) Data Capacity through the National Action Agenda</a>
200211	<a href="#">Opposing War in Central Asia and the Persian Gulf</a>
200212	<a href="#">Syringe Prescription to Reduce Disease Related to Injection Drug Use</a>
200213	<a href="#">Call for United States to Support a Strengthened Biological Weapons Convention</a>

All APHA members are asked to review the statements relevant to their constituencies and consider three potential options for each policy statement of interest:

- **Allow the policy statement to remain on the archiving consent agenda.**
- **Update a policy statement scheduled for archiving.** Governing Councilors and APHA members will have two cycles to submit updated policy statements during the annual policy statement development process before the original policy statement is archived. Policy statements submitted to update an existing policy statement scheduled to be archived will follow the regular [policy statement development guidelines and process](#).
- **Request to keep active a policy statement proposed for archiving.** If a Governing Councilor or APHA member believes that a policy statement scheduled for archiving is still current, he or she can submit a special request to the Science Board for review of the science, references and action steps of the policy statement set to be archived. A rationale for keeping the policy statement active and removing it from the consent agenda for archiving must accompany the request. The deadline for such requests has been extended to June 30, 2022. Requests must be sent to [policy@apha.org](mailto:policy@apha.org). Each request will receive a recommendation from the Science Board as to whether the statement should be kept active

or archived as scheduled. The results of the Science Board's review will be forwarded to the JPC and presented by the Science Board chair to the Governing Council in November 2022.

***Recommendation re: archiving of policy statements adopted in 2021 related to the COVID 19 pandemic***

At the October 2021 meeting of the Governing Council, the JPC motioned that the Governing Council archive three statements- 2021-11 Lessons Learned from the COVID-19 Pandemic: The Importance of Universal Healthcare in Addressing Healthcare Inequities, 2021-18 Preparing Public Schools in the United States for the Next Public Health Emergency: Lessons Learned from COVID-19 and 2021-08 Call for Urgent Actions to Address Health Inequities in the U.S. Coronavirus Disease 2019 Pandemic and Response- after 3 years vs. the standard 10 years given the rapidly evolving evidence and experience in the pandemic in order to ensure the science, evidence and action steps remain up to date. Following debate, the Council moved to suspend consideration of the motion at the October 2021 meeting and revisit the recommendation at the June 2022 meeting.

Considering the debate in October 2021, the 2022 JPC revisited the three policy statements recommended for archiving after three years and found that 2021-11 and 2021-18 address pandemics broadly with evidence and action steps that are likely to remain relevant in years to come. Therefore, the JPC recommends these statement be archived after 10 years as is standard practice. 2021-08 however, is largely specific to the COVID-19 pandemic and requires more frequent updating of the evidence base and action steps to reflect current science and environment and appropriately guide APHA policy and practice. Therefore, the JPC maintains its recommendation that policy statement 2021-08 be archived in 2024. While the JPC recognizes the possible need for narrow, targeting policy statements when dealing with emergent public health problem, rapidly evolving evidence bases support more frequent updating of these statements. Therefore, in addition to consideration of early archiving, in preparing the yearly gaps in policy statements APHA will work to identify policy statements that were originally written with a narrow scope that would benefit from an update with a broader lens.

While archived statements no longer guide APHA policy or practice, they remain available to members as historical documents. APHA members are encouraged to update policy statements scheduled for archiving with the latest evidence and rationale in support of priority policy areas. However, policy statements can also be updated by any APHA member following archiving.

## **Appendix A: Science Board Assessment Criteria**

### **PROPOSAL ASSESSMENT**

**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** - Evidence includes consistent results and/or conclusions from well-designed, well-conducted studies in representative populations that directly address/reflect the relevant considerations and/or outcomes associated with the proposed policy.
- 2. Sufficient Evidence** - The available evidence is sufficient to support the scientific basis of the proposed policy, but the strength of the evidence is limited by:
  - The number or size of the studies included
  - The quality (minor flaws in study design or methods) of the studies included
  - Minor inconsistency of findings across the studies included
  - Lack of coherence in the chain of evidence
  - Limited generalizability of findings to the associated populations
  - Limited information in regard to important considerations or associated outcomes
- 3. Insufficient Evidence**- The evidence included in the proposed policy is insufficient because of:
  - The substantially limited number or size of the studies included
  - The quality (moderate or major flaws in study design or methods) of the studies included
  - Substantial inconsistency of the studies included
  - Gaps in the chain of evidence
  - Study findings are not generalizable to the associated populations
  - Lack of information in regard to important considerations or associated outcomes

Rate the proposal:

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- A testable and refutable problem is logically and clearly explained. Opposing arguments are presented and well refuted. Strategies and actions to address the problem are explicit and replicable and their impact is demonstrated/ testable.
2. Sufficient Scientific Reasoning
3. Insufficient Scientific Reasoning
  - a. Requires minimal revision
  - b. Requires major revision

## **Appendix B: Joint Policy Committee Assessment Explanation**

**Proposed policy statements are rated as one of the following:**

- **Positive** - Policy statement meets all guidelines, is scientifically sound and concisely written; any changes necessary are minor and can be addressed in the copyediting phase
- **Conditional** – Policy statement meets most guidelines but requires some revision to strengthen the arguments and evidence presented and improve minor grammatical and formatting issues
- **Negative** - Policy statement does not meet guidelines, lacks or improperly cites scientific evidence, arguments presented are biased or one-sided; contains major grammatical and formatting errors.