Dear Friends and Colleagues:

This year MPHA leaped forward with a bold vision for Massachusetts — a vision where every community has the resources for a healthy population, where concern for the prevention of disease and injury is integrated into all social policy, and where we have a health system—not just a healthcare system.

When I joined MPHA as Executive Director a year ago, the economy was in a serious downturn, families were struggling, and basic public services were strained. The H1N1 flu pandemic hit. Like so many other organizations, we faced—and continue to face—a tough fundraising climate.

But MPHA keeps leaping. As a hurdler from a long way back, I know about leaping over obstacles, as does our dedicated team of staff, board and partners.

This year — working together with you — we helped form or re-ignite coalitions, moved important policies, trained local leaders, and built a strong base of support among policymakers.

MPHA’s key accomplishments this year include:

- **Built strong partnerships with new allies** working in hunger prevention, agriculture, transportation, planning, and education;
- Helped to pass a **public health budget $24 million higher** than that proposed by Governor Patrick and to win new state revenues;
- Formed the **Worcester Coalition to Protect Public Health**, saving public health jobs and increasing community input on the municipal budget;
- Helped pass the **first-in-the-nation Healthy Transportation Compact**;
- Led efforts to ensure **public health is integrated into payment reform**;
- Won the **elimination of the alcohol sales tax exemption**;
- Helped organize the first annual conference of the **Community Outreach Workers Network and Training (COWNT) Coalition**;

We are proud of our successes in 2009 - and ready for the work ahead to make our vision a reality. **Please join us.**

Sincerely,

Valerie Bassett
Executive Director
GROWING HEALTHIER NEIGHBORHOODS

POLICY AND ORGANIZING

This year, MPHA built on our track record of successful legislative advocacy, media work, and statewide organizing on school nutrition to launch an ambitious policy agenda to make neighborhoods and schools healthier and prevent chronic disease, overweight and obesity.

MPHA is working for statewide and local systems changes that create better access to healthy, affordable food and opportunities for physical activity—and to engage residents in decisions that affect the health of their communities.

We’ve had several policy victories this year, and we are building momentum toward a major three-year public policy campaign for the years ahead, to be developed jointly with a broad set of partners.

To cook up this year’s agenda, we mixed one part lessons learned from community organizing efforts over the last five years, one part ongoing coalition initiatives, then added in the newest science and a dose of successful efforts across the country. The result is an agenda that addresses health in schools, workplaces, and communities through creating new incentives and supports, higher standards and better health assessment, and new partnerships.

Thanks to our past track record, more representatives and senators than ever before—86 in total—signed on as co-sponsors to the legislation we filed or supported in January 2009.

New partnerships are key to our work on food policy, and MPHA is proud to be playing a strong role in the newly-forming Massachusetts Food Policy Alliance, a collaboration among the public health, anti-hunger, agricultural, and environmental sectors.

Holyoke activist Hazel Rosario and her sons Matthew, Marcus, and Messiah visited the State House to urge action from the Public Health Committee. Afterward, they posed with Chairman Jeffrey Sánchez.
MPHA has worked closely with the Alliance to develop and hone legislation to create a statewide Food Policy Council, following a successful model used in many other states to improve local food systems, including improving the availability and affordability of healthy local food.

We are poised for significant victories this legislative session. Both the Local Farm Products Bill and the Food Policy Council Bill were endorsed by legislative committees in the early fall and have moved onto the House Committee on Ways and Means. In addition, many of the provisions of MPHA’s Healthy Transportation Bill were incorporated into a larger bill to overhaul the state’s transportation system that passed in June, including a movement toward “complete streets” that fully integrates cycling and pedestrian use.

While MPHA activists have been busy promoting state policy change, they’ve been equally busy working for local changes in their own backyards.

A few highlights include:

**HOLYOKE**— MPHA is a founding member of the Holyoke Food and Fitness Policy Council (HFFPC), where we remain an active member of the Steering Committee. The group recently completed a three-year Action Plan to improve access and affordability of healthy food and opportunities for physical activity in Holyoke. MPHA is also providing technical support to analyze public policy and school health policies for the members of the Council.

Over the last year MPHA has worked closely with HFFPC and the Western Massachusetts Center for Healthy Communities to offer a six-part training for youth and community activists. The idea for these workshops arose out of the need expressed by youth activists to build skills to more effectively advocate and mobilize for a healthier community. The trainings have inspired the youth participants to stand up and claim their voice in the political process.

**SPRINGFIELD**— MPHA Community Organizer AJ Juarez was recently appointed by Mayor Anthony Sarno to serve on the Mass in Motion/
**STATE PUBLIC HEALTH FUNDING**

As Massachusetts, the nation, and the world struggled with the worst economic downturn since the Great Depression, MPHA played a key leadership role in ensuring that resources remain dedicated to important public health functions, even as the Massachusetts Department of Public Health (DPH) experienced severe budget cuts. MPHA consistently sounded the alarm against cutting prevention and services for the state’s most vulnerable residents. Strong budget advocacy resulted in the passage of a budget for DPH community-based programs that was $24 million higher than that proposed by Governor Patrick.

In late 2008, MPHA reconvened the United We Stand for Public Health (UWS) Coalition, a group of more than 80 public health organizations, to speak with one voice for public health funding. UWS held a press conference and rally at the State House in January and another rally to “Save Public Health” in April, both with more than 200 participants. Shortly after the April rally, the House voted to partially restore funding to several public health programs.

MPHA members and partners again mobilized this fall with a call to the Governor to protect an already-decimated DPH. When the Governor announced another round of emergency budget cuts, the total cuts to DPH were dramatically lower than expected, a powerful sign that our message was heard.
LOCAL PUBLIC HEALTH FUNDING: WORCESTER

In April, facing serious budget constraints, Worcester City Manager Michael O’Brien proposed near elimination of the City’s Division of Public Health, with a goal of relying on non-governmental partners to help deliver services. In response, MPHA formed and led the Coalition to Protect Public Health in Worcester, which became a central part of the City’s budget process. MPHA continues to work with all partners to ensure strong public health in Worcester.

**MPHA organized:**

- A letter signed by 30 organizations urging the City Manager to **appropriately fund the Division of Public Health**, to allow for more community input, and not to privatize core government functions;
- An April **press conference** where **MPHA members and allies spoke**;
- In early May, MPHA and the MA Nurses Association (MNA) joined together to hold a **rally of more than 100 people** in front of City Hall and then join a budget hearing on public health;
- In May, **MPHA and MNA members again packed the Council Chambers** to hear the City Manager’s plan for establishing a task force to rebuild the Public Health Department.

As a result of this intensive organizing, the City Council voted to recommend restoration of funding for some public health nurses. When the City Manager announced the members of the task force to rebuild the public health department, MPHA members and allies represented about three-quarters of those appointed. MPHA Central Massachusetts Community Organizer Sara Kanevsky was named to the Community Resources Subcommittee to ensure strong community input.

**NEW EQUITABLE REVENUE**

This year, MPHA has played a leadership role in advocacy for new, equitable revenue so that public agencies have the funds available to carry out those functions that we do better collectively than alone – including public health.
In April, MPHA organized 35 of our allied organizations to sign onto a call for new revenues dedicated to public health — including removing an exemption on alcohol, closing a loophole on tobacco, and instituting a new tax on soda and junk food. This effort aimed to generate new funds that could be devoted to public health.

MPHA is also an active member of the Stop the Cuts Coalition, a group of labor and human service organizations working for new, equitable revenue. Along with Stop the Cuts, MPHA worked to support revenues pending in the legislature, including local tax options for cities and towns, removing certain tax exemptions, and an increase to the sales tax.

In July, Governor Patrick signed several of these measures into law, including the removal of the sales tax exemption on alcohol. These measures helped to mitigate the worst of the possible cuts and—in the case of the alcohol tax exemption—is expected to reduce underage drinking, as similar measures have consistently done in other states.

STRENGTHENING THE PUBLIC HEALTH INFRASTRUCTURE

MPHA plays a critical role in protecting and improving the public health infrastructure in Massachusetts. With the emergence of the H1N1 pandemic this year, the importance of this work is all the more urgent. Our advocacy for proper DPH funding is vital to a well functioning public health system, including the State Laboratory, Environmental Health functions, Immunizations, and core DPH staffing.

In addition, MPHA took the following actions this year:

- We pushed for passage of the All-Hazards Preparedness Bill to modernize public health law in the case of a public health emergency and provide liability protection to volunteers who assist public health professionals during an emergency. The Legislature is now poised to pass this critical bill!

- MPHA continues to support the work of the Coalition for Local Public Health (CLPH), which includes statewide associations.

Worcester activists Dawn Clark and Dr. Christine David meet with Senator Harriette Chandler.
representing boards of health, health officers, environmental health officials, and public health nurses.

- Executive Director Valerie Bassett serves on the DPH H1N1 Advisory Council, and MPHA distributes information to our members on how to protect themselves and their families from the flu.

MPHA was also a partner in the American Public Health Association (APHA) Get Ready! Campaign, distributing information in multiple languages to help Massachusetts residents prepare themselves, their families and their communities for all hazards, including pandemic flu, infectious diseases and other health emergencies.

**ENVIRONMENTAL HEALTH**

MPHA continues to play a leadership role in the Alliance for a Healthy Tomorrow (AHT), a coalition of health, labor, environmental, and religious organizations working to prevent exposure to toxic chemicals in the workplace, environment, and from consumer products. The top priority of AHT is passage of the Safer Alternatives Bill which would establish a pragmatic approach to phasing out dangerous toxic chemicals when safer alternatives are available.

In March, MPHA organized a meeting with newly-elected Senator Michael Moore of Worcester County to educate him about the Safer Alternatives Bill. MPHA staff and volunteers around the state provided the people power to recruit AHT and MPHA members to support the bill at a November hearing before new chairs of the Environment, Natural Resources, and Agriculture Committee. As a result, the Committee and legislative leadership received extremely strong testimony in person and through letters, calls, and emails.
PUBLIC HEALTH IN HEALTH REFORM

In a year when the high cost of health care has dominated policy deliberations as well as the news in the Commonwealth, MPHA worked to make sure that the role of public health and prevention is included in the discussion. MPHA promotes a comprehensive health system that begins with community-based prevention, and includes health care access, with attention to reaching vulnerable populations and connecting people to all the resources needed for health. A health system should also promote clinical prevention and the role of community health workers throughout.

MPHA made a powerful case that health reform must include public health and that payment reform should not supplant public health programs and the state’s commitment to financing them.

During the past year, MPHA:

- Convened a Working Group on Public Health in Health Reform, which developed policy recommendations;
- Brought our message to numerous governmental bodies deliberating the issue — including the Payment Reform Commission, the Healthcare Financing Committee, and the Health Care Quality and Cost Council;
- Worked with our partners in the ACT!! Coalition to promote comprehensive, affordable health reform.

ADVANCING THE COMMUNITY HEALTH WORKER FIELD

MPHA worked on multiple fronts to promote the diverse workforce of community health workers (CHWs) this year. MPHA collaborated with the Massachusetts Association of Community Health Workers (MACHW) and the Community Outreach Network and Training (COWNT) Coalition to strengthen the advocacy voice of CHWs and to promote adequate funding to support CHW positions. For the second year, MPHA played a leadership role in the Community Health Worker Initiative of Boston.
Some highlights of this year include:

- Helped build support among legislators and allied organizations to create a state Board of Certification for CHWs;
- Assisted with MACHW-organized “CHW Day at the State House” by leading a group of CHWs who educated lawmakers about the importance of state funding to their work to build healthy communities;
- Advocated for inclusion of CHW funding in state payment reform;
- Helped design and implement a forum for employers of CHWs to keep them abreast of developments in the field and new opportunities to pursue training and funding for CHWs;
- Helped to organize the first annual COWNT Coalition conference in Springfield;
- As a part of the COWNT Coalition, held four legislative breakfasts to educate lawmakers about timely public health issues;
- Provided trainings for CHWs around the state on policy advocacy for community wellness;
- Continued to provide organizational development support for MACHW.

MPHA EVENTS

MPHA’s two signature events are the fall Annual Meeting and Spring Awards Breakfast. In addition, MPHA led the planning of an Elder Care Conference in Springfield.

More than 300 people attended the 2008 Annual Meeting, participating in a lively discussion of the theme, Food, Fuel, and the Future: Sustainable Strategies for Healthy Communities. The meeting featured a keynote address by “America’s #1 Populist” Jim Hightower, and was MPHA’s most successful
and exciting ever, as it brought together new and old constituents for public health to share solutions, building energy for action.

MPHA’s **Spring Awards Breakfast**, held in May at The State Room in downtown Boston, was a rousing success. More than 320 public health professionals, leaders, community activists and public officials from across the Commonwealth gathered to **honor four public health champions** from different sectors—**Dr. Paula Johnson**, Director of the Mary Connors Center for Excellence in Women’s Health; **Helen R. Caulton-Harris**, Springfield Director of Health and Human Services; **Roger Berkowitz**, founder and CEO of Legal Seafoods; and **Derek Brindisi**, Director of the Worcester Division of Public Health. The breakfast raised nearly $230,000 for MPHA and provided the perfect setting for celebrating our achievements and highlighting our collective strength as we face the challenges before public health.

The **Western Massachusetts Elder Care Conference** began as a collaboration between MPHA and the Massachusetts Department of Public Health and has grown to include a number of the major organizations and providers of elder services in the region. This year marked the **twentieth anniversary** of the conference and more than 360 were in attendance.

Springfield Mayor Domenic J. Sarno attended and proclaimed the day as **Western Massachusetts Elder Care Conference Day** in Springfield, citing the impressive educational accomplishments of this event over the years.
Who needs public health?
By Valerie Bassett
April 29, 2009

AS THE Legislature and Governor Patrick confront a budget deficit for next year, they will need to find new revenues as well as decide which state programs will survive and which programs will be cut beyond recognition. They should not gut public health. We all need it.

The state is grappling with a new public health threat: swine flu. The strain that has killed over 150 people in Mexico, and is affecting several US states, has the potential to unleash a pandemic. Does the state have the capacity to organize preventive measures—and a response if swine flu breaks out here?

What is needed to respond to this threat are strong state and local health departments with the staffing and systems essential to a coordinated response and with the ability to reach people at the community level.

State and local health departments must be able to communicate with healthcare providers regarding possible cases, symptoms to watch for, and recommended treatments. There also needs to be a state laboratory with the equipment and staff to test the samples that come in to determine whether swine flu has landed here. Trained public health nurses with community relationships should identify people with symptoms, talk to those who may be infected to help them get treatment, find out where they have been and who else they may have infected, and help them make arrangements to stay home. Local health departments need to support schools and businesses that may need to close down as a precaution. Public health workers must also distribute anti-flu medications - and, if necessary, implement quarantines. For tasks such as setting up vaccine distribution centers, there needs to be community partners, whose roles must be coordinated by health departments.

These tasks will be especially challenging in communities with only a part-time or volunteer board of health. Many smaller towns lean heavily on
the work of the state health department and regional coalitions for help. Emergency preparedness funds have helped to strengthen local planning and coordination, but it's not enough. The budget cuts that have eroded local and state health department capacity have diminished our preparedness.

Some consider public health "easy" to cut, compared with more visible services with clearly defined populations. And indeed, both the governor's budget and the House Ways and Means budget cut public health disproportionately. The town of Amesbury eliminated its health department and the City of Worcester left its health department a skeleton. This kind of thinking is shortsighted. Cuts to public health will put every resident at risk. Consider who is actually affected by the programs and services of public health - and what is at stake in cutting them almost 25 percent, as proposed by the House Ways and Means Committee.

The mother preparing breakfast for her children needs public health to ensure that the public water supply she relies on is clean -- so that her kids' oatmeal and hot chocolate are uncontaminated.

How about the businessperson hosting clients for lunch? Public-health funding ensures that the restaurant has been inspected and complies with health codes and anti-smoking laws - and that there is follow-up on reports of food-borne illness.

People at risk for cancer, stroke and heart disease, diabetes, addiction, HIV, and Hepatitis C need information to prevent these diseases, to get screened, and to find out where to go for treatment. Community health workers, funded by public health, provide information to members of their communities and connect them to services.

Who needs public health? We all do. Every resident of the Commonwealth - whether aware of it or not - relies on a strong, functioning public health system - a system that is greatly endangered. Without public health, there is no way for the Commonwealth to succeed in education, economic growth, environmental innovation, or civic engagement. In this time of new strains of viruses and costly public health problems like obesity and diabetes, the Legislature - and administration - should think twice before cutting our public health system so deeply that it puts us all at grave risk.

Every resident of the Commonwealth—whether aware of it or not—relies on a strong, functioning public health system—a system that is greatly endangered.

Valerie Bassett is executive director of the Massachusetts Public Health Association and chair of United We Stand for Public Health.
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