



MPHA

VOICES OF PUBLIC HEALTH NEWSLETTER

The Official Newsletter of the Michigan Public Health Association
Affiliate of the American Public Health Association



President's Message

Moving Public Health Forward Together

Dear MPHA Members, Partners, and Friends,

As we enter the final quarter of 2026, I find myself wondering where the year has gone. It seems like we were just welcoming the new year, and now Thanksgiving and the holiday season are right around the corner. Time really does have a way of moving quickly.

This year has brought a significant transition for me personally. After five years, I stepped away from my role as Dean of the College of Health and Human Services at Saginaw Valley State University this summer. I haven't exactly retired—I am still working as a faculty member in public health, continuing my involvement in research and grant-funded work, and staying engaged in many of the professional and community activities that are important to me. But life does have a somewhat different pace. I have found this next chapter to be incredibly fulfilling—and, I will admit, a little less stressful. I still get to do work that I care deeply about, contribute to public health, work with students and colleagues, and stay connected to our communities, but with a little more space to appreciate the work and the people around me.

Perhaps that is one reason I have been thinking so much about time lately. It has flown by. Careers move quickly. Years move quickly. Seasons move quickly. And if we are not intentional, we can become so focused on what comes next that we forget to appreciate where we are and how much there is to be thankful for right now.

October brings the beauty of a Michigan autumn along with conferences, professional development, and opportunities to reconnect with colleagues. November brings Election Day, our advocacy work, and Thanksgiving. Then December arrives with Christmas, Hanukkah, Kwanzaa, other holiday traditions, gatherings with family and friends, and the anticipation of another new year. Amid everything that fills our calendars during these months, I hope we can make time to recognize the things for which we are thankful.

In public health, it can be easy to focus on what still needs to be done. We see the gaps. We recognize the disparities. We understand the challenges facing our communities, our organizations, and our workforce. That awareness is part of what drives us to do this work. But as we move toward Thanksgiving and the holiday season, I hope we also take time to notice what is going well—the partnerships that are making a difference, the colleagues who show up when they are needed, the communities that come together to solve problems, and the countless public health professionals whose work quietly improves lives every single day.

President's Message (Cont.)

Sometimes the things worth celebrating are the things that never happen because public health worked: the outbreak that was contained, the illness that was prevented, the family that received services before reaching a crisis, the child who was protected, or the community that was better prepared because someone planned ahead. Those successes may never make headlines, but they matter. I am especially thankful for Michigan's public health community. Across local and state public health, healthcare, academia, community organizations, research, advocacy, and our many partner organizations, people continue to bring knowledge, compassion, creativity, and determination to this work. MPHA is stronger because of the diversity of expertise and experiences represented by our members and partners. And there is still plenty happening before we close the book on 2026.

Find the things you are thankful for.

They do not have to be extraordinary. Be thankful for the colleague who makes a difficult day easier. For the student or young professional who reminds you why mentoring matters. For the community partner who answers the phone and says, "Let's figure this out together." For family and friends who support you. For a quiet morning, a walk outside, a shared meal, a good conversation, or simply an opportunity to begin another day. One thing my own transition this year has reminded me is that we spend a great deal of our lives preparing for what comes next. Sometimes we need to appreciate what is happening right now. And perhaps most importantly, remember that gratitude and public health have something in common: both ask us to notice the connections between people. None of us does this work alone. Every successful public health initiative depends upon relationships—between professionals and communities, organizations and partners, researchers and practitioners, policymakers and constituents, teachers and students, and people willing to work together toward something larger than themselves. That is something worth being thankful for.

Looking Ahead

As 2026 begins to wind down, I want to express my sincere gratitude to each of you. Thank you for your commitment to the health and well-being of Michigan's communities. Thank you for your leadership, expertise, compassion, persistence, and service. Thank you for continuing to advocate for public health and for one another. And thank you for being part of MPHA. This year has reminded me that transitions do not necessarily mean stepping away. Sometimes they simply allow us to contribute in different ways, to rediscover the parts of our work that bring us the greatest fulfillment, and perhaps to make a little more room for the people and experiences that matter most. I hope the final months of 2026 bring you opportunities to do the same—to reconnect with the people who matter to you, appreciate the accomplishments of the past year, care for your own health and well-being, and find moments of joy amid the busyness.

Whether you celebrate Thanksgiving, Christmas, Hanukkah, Kwanzaa, another tradition, or simply enjoy the opportunity to spend time with family and friends, I wish you a season filled with gratitude, connection, kindness, and hope. There will always be more work waiting for us in public health. But before we race into another year, I hope we take a little time to recognize how far we have come, appreciate the people who have traveled alongside us, and remember why this work matters.

There is much still to do—but there is also so much for which we can be thankful.

Wishing you and those you love a wonderful Thanksgiving, a joyful holiday season, and a healthy and happy New Year.

Warmly,



Marcia Mastracci Ditmyer, PhD, MS, MBA, MCHES

2026 Annual Business Meeting and Summit

HOPE TO SEE YOU THERE!!

APHA 2026

ANNUAL MEETING & EXPO

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REGISTER & LEARN MORE

apha.org/annualmeeting

As the largest public health gathering of the year, APHA's Annual Meeting and Expo will bring together more than **11,000 public health professionals and partners** from around the world. It's an incredible opportunity to connect, learn, and collaborate on advancing health for all across the lifespan.

We hope to see many of our Michigan colleagues there — let's get together to share ideas, celebrate our work, and discover new ways to move public health forward.

Together, we thrive — and together, we lead.

Defending Democracy in the 2026 Midterms: How Michigan Can Take Action



Defending Democracy in the 2026 Midterms: How Michiganders Can Take Action

 **October 14th | 12PM**

For the first time in modern American history, the machinery of the federal government — which is meant to serve the people and protect the democratic process — is being turned against our elections.

This webinar, presented by **Protect Democracy**, will explore how **Michiganians** is positioned squarely in the crosshairs. This unprecedented power builds upon the subversion strategies developed in 2022 and 2024: deceive voters about the trustworthiness of election systems, disrupt the operation of those systems and use the ensuing chaos to deny election outcomes they don't like.



Explore analysis from Protect Democracy on the threats to the 2026 midterms in **Michigan** and strategies to address them.



We'll break down the "Deceive, Disrupt, Deny" framework being used to subvert the 2026 election cycle, with a look at how these tactics are playing out in **Michigan**.



Learn concrete actions **Michiganders** can take to get involved and protect the vote in their own communities.



This session will go beyond the national picture to cover the specific threats facing Michigan's elections and concrete, specific actions Michiganders can take to get involved and protect the vote in their own communities. **None of us can do everything, but all of us can do something. We hope you join us for this important conversation.**



To register,

either [click here](#)

or scan the QR code
above.

Hope to see you there!

Michigan Premier Public Health Conference



MICHIGAN PREMIER PUBLIC HEALTH CONFERENCE 2026

 **OCTOBER 7-9, 2026**  **BLUE WATER CONVENTION CENTER**
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 **LEARN MORE & GET INVOLVED**
malph.org/mpphc-2026

 **QUESTIONS?**
info@malph.org

Never too late to register.

[Click here](#) to register.

For more information,

[Click here](#) for the conference
brochure.

Remember: Together for
Health: Building Stronger
Communities in an Era of
Change

Your Voice Matters: Make a Plan to Vote

By: Marcia Mastracci Ditmyer, President MPHA

As public health professionals, we spend much of our time thinking about what helps people and communities thrive. We work to improve access to information and resources, reduce barriers, and create conditions that allow everyone to participate fully in their communities. Civic participation is another important part of strong, engaged communities. With General Election approaching on **Tuesday, November 3, 2026**, now is a good time to make sure you are ready to vote—and to help others find the information they need to participate.

This is not about telling anyone **how** to vote or **who** to vote for. It is about making sure people know **how, when, and where they can cast their ballot**.

Make Your Voting Plan Now

Michigan voters have several options for participating in the November election.

Check your voter registration.

Michigan residents can check their registration status and register to vote through the Michigan Secretary of State. The deadline to register **online or by mail is October 19, 2026**. After that date, eligible Michigan residents can still register in person at their local clerk's office through Election Day, with the required proof of residency.

Consider early voting.

Michigan's constitutionally required early voting period for the November election is **October 24 through November 1, 2026**. Registered voters can visit an early voting site and cast their ballot in person before Election Day. Local early voting locations and hours can be found through the Michigan Secretary of State.

Voting absentee is another option.

All registered Michigan voters have the right to vote by absentee ballot—no reason is required. Voters can request an absentee ballot or, if eligible, choose to join Michigan's permanent absentee ballot list. Completed absentee ballots generally must be received by the voter's local clerk by **8:00 p.m. on Election Day** to be counted.

Voting on Election Day.

Polls in Michigan will be open from **7:00 a.m. until 8:00 p.m. on Tuesday, November 3**. Voters who are in line when the polls close at 8:00 p.m. are still permitted to vote.

Heading to APHA? Vote Before You Go!

This year's APHA Annual Meeting & Expo will be held **November 1–4 in San Antonio, Texas**, which overlaps with Election Day. For MPHA members traveling to APHA, don't let Election Day sneak up on you. Consider voting during Michigan's early voting period or casting an absentee ballot before leaving for San Antonio. It is a small thing to add to your conference preparation list: **Register. Check your information. Make your plan. Cast your ballot. Then pack for APHA!**

Public Health Can Help Reduce Barriers

As members of Michigan's public health community, we can also help by sharing reliable, nonpartisan information about voter registration, early voting, absentee voting, polling locations, accessibility, and important deadlines.

Consider sharing official voting information through your organization, workplace, community partnerships, social media, newsletters, or other communication channels. Sometimes helping someone participate is as simple as directing them to the right information.

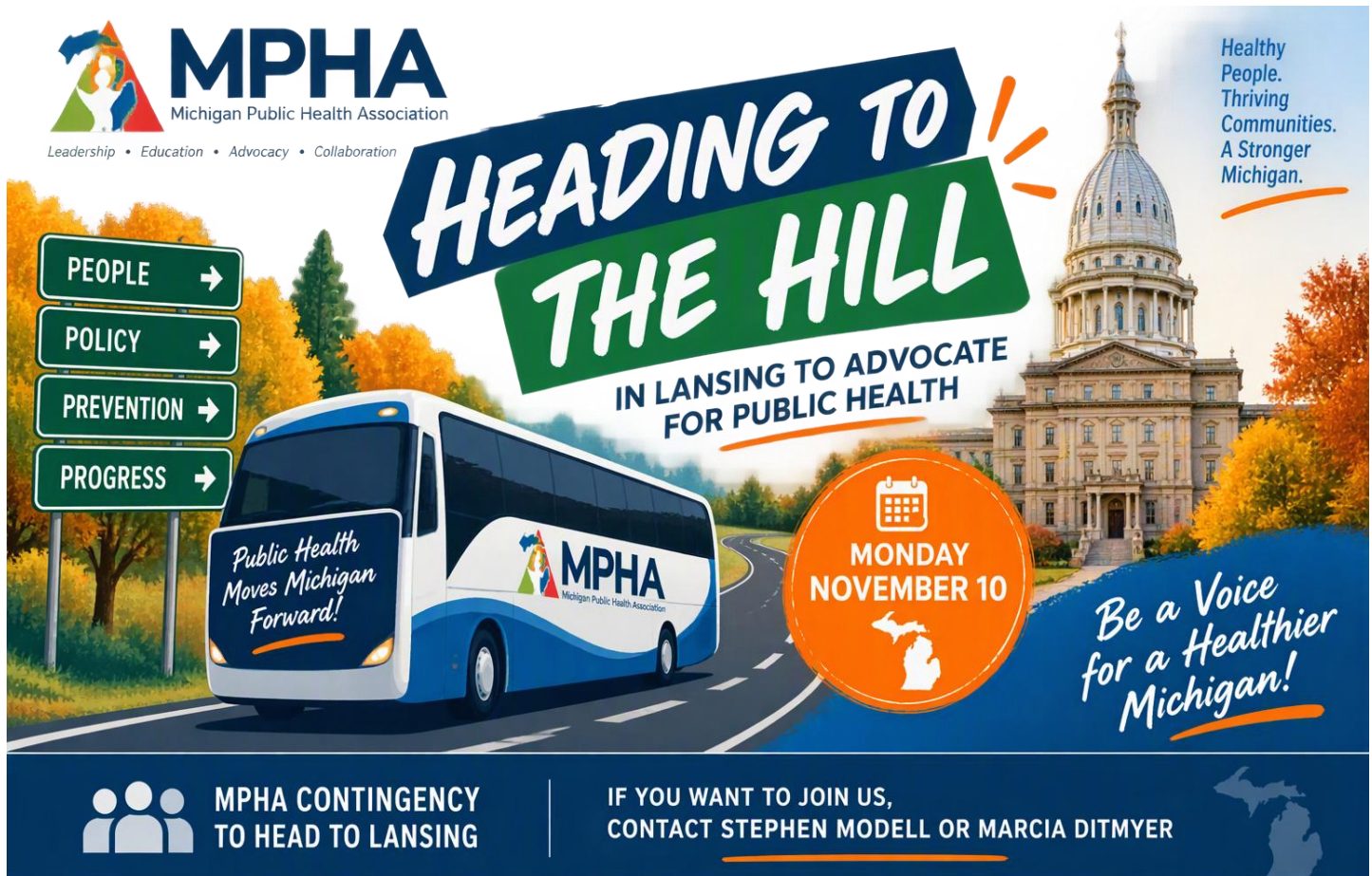
Your Voice Matters: Make a Plan to Vote (Cont.)



Whatever method you choose—early voting, absentee voting, or voting at the polls on Election Day—**make a plan that works for you.**

For official Michigan voter information, including registration status, early voting locations, absentee voting, polling locations, and sample ballots, visit the **Michigan Secretary of State's voter resources.**

Join Us for a Trip to Lansing



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MONDAY NOVEMBER 10

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IF YOU WANT TO JOIN US, CONTACT STEPHEN MODELL OR MARCIA DITMYER

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Please save the date! If you wish to join, feel free to contact Stephen Modell at mod@umich.edu or Marcia Ditmyer at mditmyer@svsu.edu. Keep your eyes open for emails from MPHA regarding this event.

Member Spotlight – Sanchita Sultana, MPH



From Clinical Practice to Population-Level Impact Epidemiologist, Washtenaw County Health Department

Sanchita Sultana's career demonstrates how curiosity, persistence, and commitment to service can transform a clinical background into a meaningful career in epidemiology. Before becoming an epidemiologist, Sanchita practiced dentistry. While caring for patients, she often saw diseases that could have been prevented with early diagnosis, health education, and improved access to care. This expanded her focus from caring for individual patients to the broader communities.

Sanchita Sultana's academic journey reflects her commitment to combining scientific expertise with leadership in public health. She earned two Master of Public Health (MPH) degrees, first with a concentration in Epidemiology from Bangladesh and later with a concentration in Public Health Practice from Central Michigan University, where she developed a strong foundation in epidemiology, disease surveillance, health promotion, and evidence-based public health. Building on that experience, she is currently pursuing a Master of Business Administration (MBA) to strengthen her leadership, strategic planning, budgeting, and organizational decision-making skills. These competencies are essential for advancing effective and sustainable public health programs. Today, Sanchita works as an epidemiologist at the Washtenaw County Health Department, where she uses surveillance data to identify emerging health concerns and support evidence-based public health action. For Sanchita, epidemiology is not simply about numbers.

"Every data point represents a person, a family, and a community," she says. "Our responsibility is to recognize meaningful signals early enough to prevent illness and protect people."

One of the most rewarding parts of her work is seeing surveillance findings lead to action. A validated case report, an unexpected trend, or a change in disease burden can strengthen prevention programs and direct limited public health resources toward communities with the greatest needs.

While her primary role is in public health practice, Sanchita also serves as a researcher, collaborating on research projects, publishing scientific work, and helping generate evidence that informs public health policy and practice. Her research focuses on tobacco cessation, health disparities, implementation science, and equitable access to public health interventions. She also contributes to the scientific community through abstract presentation in APHA, article reviews for annual conferences and academic journals, judging in public health competitions, editorial service, advisory board participation, conference moderator, and active mentorship through various scientific platforms. These roles allow her to support the development of emerging researchers while helping strengthen the quality and relevance of public health practice.

Her advice to aspiring epidemiologists is simple: remain curious, be willing to learn, and do not underestimate the value of your personal and professional experiences.

"You do not need to have your entire career planned from the beginning," she says. "Start by asking meaningful questions, learn how to work with data, find mentors, and volunteer for projects that allow you to contribute. Small opportunities can become important turning points when you approach them with purpose."

Her long-term vision is to integrate epidemiology, implementation science, artificial intelligence, and advanced analytics to help health agencies detect emerging threats earlier and respond before they become a crisis. Her goal is to help develop public health platforms that do more than describe what has already happened. She wants to identify early warning signals, guide timely interventions, and prevent future outbreaks.

Sanchita hopes her career encourages students, especially international students and professionals transitioning from clinical fields, to see that there are many pathways into epidemiology. With determination, mentorship, scientific integrity, and a commitment to public service, it is possible to build a career that contributes not only to academia but also to healthier, more equitable communities.

APHA Policy & Advocacy Information

APHA 2026 Advocacy Priorities

- Increase and protect funding for vital public health agencies and programs and strengthen the nation's public health infrastructure and workforce.
- Defend existing federal public health programs and the workforce in light of ongoing efforts to defund important agencies and programs and dramatically reduce the federal public health workforce.
- Uphold and strengthen the Affordable Care Act and the Medicaid program and further expand access to health coverage and services.
- Tackle the health impacts of climate change.
- Protect access to women's health services and reproductive health care.
- Strengthen and uphold critical public health laws, including defending and challenging existing public health and environmental health laws and regulations in the federal courts.
- Address the nation's gun violence epidemic by advocating for interventions to reduce firearm-related morbidity and mortality and maintaining and expanding funding for gun violence prevention research at CDC and NIH.
- Advocate for the humane treatment of all immigrants, including in detention facilities, and support access to needed health services, safe living conditions and nutritious food.

What can you do?

- [Send an action alert.](#)
- Spread the word and [Speak for Health.](#)
- Check out this [handy summary of APHA's 2025 advocacy priorities.](#)



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For science. For action. For health.

Advocacy for Public Health

Advocating for better national public health, APHA, in coordination with its members and state and regional Affiliates, works with key decisionmakers to shape public policy to address today's ongoing public health concerns. Those include ensuring access to care, protecting funding for core public health programs and services and eliminating health disparities. APHA is also working on other critical public health issues including public health and emergency preparedness, food safety, hunger and nutrition, climate change and other environmental health issues, public health infrastructure, disease control, international health and tobacco control.

Latest Updates

- ✓ **Watch: Making sense of the buzzwords and protecting public health**
- ✓ **Take Action**
- ✓ **Vote for Health:** Check out our [voting toolkit](#) for information on voter registration, voting deadlines, voting healthy guidelines and more.
- ✓ **Stay Informed**

October's Highlight Article

Community Water Fluoridation: Michigan's Public Health Legacy and Its Relevance Today

by: Marcia Mastracci Ditmyer, PhD, MBA, MS; Raymond Rawson, DDS, MS; Elisa Dack, RDH

Sometimes the most successful public health interventions are the ones we barely notice. We turn on a faucet, fill a glass of water, and rarely think about the systems, science, and public health decisions behind it. Community water fluoridation (CWF) is one of those interventions, and its American story began right here in Michigan.

On January 25, 1945, Grand Rapids became the first U.S. city to adjust the fluoride level in its public water supply as part of a major public health study. Grand Rapids was paired with Muskegon as researchers examined whether carefully adjusting fluoride in a community water system could provide protection against tooth decay similar to that observed in communities where fluoride occurred naturally in water.¹

The early findings helped shape decades of oral health policy and practice. By 1950, the U.S. Public Health Service and major dental organizations had endorsed community water fluoridation, and fluoridation subsequently expanded throughout the country.¹ In 2022, more than 209 million Americans, or 72.3% of people served by community water systems, received fluoridated water.² For Michigan public health professionals, this history is more than a milestone. Community water fluoridation is one of the few public health interventions that can trace its national origins directly to our state. The Grand Rapids demonstration project helped establish the evidence base those informed policies still in use today. Understanding this history reminds us how population-based prevention strategies are developed, evaluated, refined, and sustained over time.

What Community Water Fluoridation Actually Is

Fluoride is a naturally occurring mineral found in ground water at varying concentrations. Community water fluoridation is the controlled adjustment of fluoride in a public water supply to a concentration intended to help prevent dental caries.³

The current U.S. Public Health Service recommended concentration is **0.7 milligrams per liter (mg/L)**. In Michigan, optimal fluoridation is monitored within an operational range of 0.60-1.00 mg/L, with 0.70 mg/L as the recommended level.⁴

Fluoride helps protect teeth primarily through its topical effects in the mouth, strengthening tooth enamel and promoting remineralization after acids produced by bacteria begin to weaken the tooth surface. Because people consume water throughout the day, fluoridated water provides repeated low-level fluoride exposure that contributes to cavity prevention.

The concentration of fluoride used in community water systems is substantially lower than levels associated with known adverse effects. Public health recommendations are based on balancing cavity prevention benefits while minimizing potential risks.³⁻⁴

Why It Matters

Dental caries is largely preventable, yet tooth decay continues to affect children and adults across the lifespan. Its consequences extend well beyond a cavity.

October's Highlight Article (Cont.)

Untreated dental disease can result in pain, difficulty eating, impaired concentration, missed school and work, and the need for more extensive and costly dental treatment.³

Community water fluoridation approaches prevention differently from many healthcare interventions. It does not require someone to make an appointment, have dental insurance, take time away from work, remember to take a medication, or purchase a preventive product. When a community water system is optimally fluoridated, that preventive resource is available simply through use of the public water supply.

That population-level reach is particularly important when considering **oral health equity**. Access to dental care and preventive services varies according to geography, income, transportation, provider availability, insurance coverage, and other social and economic factors. Community water fluoridation does not eliminate oral health disparities, but it helps ensure that a preventive resource reaches the entire population regardless of an individual's ability to access regular dental care.

Oral health remains one of the clearest examples of health inequity. Rural residents, low-income families, and communities with limited access to dental providers often experience greater barriers to preventive care. Population-based prevention strategies such as community water fluoridation can help reduce those barriers by extending preventive benefits broadly throughout a community.

Michigan's Continuing Story

Michigan's role in this history did not end with Grand Rapids. According to 2024 data from the Michigan Department of Health and Human Services, more than **6.5 million Michiganders, representing 90.69% of the population included in the state's measure, have access to fluoridated drinking water. However, approximately 76.1% have access to water maintained at optimal fluoridation levels.**⁴

That distinction is important. Community water fluoridation is not something that simply happens once a community decides to fluoridate. Maintaining optimal levels requires trained water operators, reliable equipment, ongoing monitoring, coordination among public health and drinking-water professionals, and continued investment in infrastructure. MDHHS works in partnership with Michigan's drinking-water programs and local water operators to support optimal fluoridation across the state.⁴

Public safety protections are also extensive. Water systems that adjust fluoride levels use licensed operators, certified additives, routine monitoring procedures, and engineering safeguards designed to prevent accidental overfeeds. Fluoridation equipment and system design are reviewed through regulatory oversight processes, and fluoride monitoring data are routinely evaluated.⁸

Michigan's fluoridation infrastructure has received national recognition. In 2022, 58% of Michigan water systems that adjusted fluoride levels received the CDC and American Dental Association Optimal Fluoridation Award for maintaining recommended fluoride concentrations for at least 10 of 12 consecutive months.⁸ In other words, successful public health interventions still require maintenance.

Why This Matters Now

Community water fluoridation has re-entered public discussion nationally as communities revisit long-standing public health policies and as new research on fluoride exposure receives increased public attention.

October's Highlight Article (Cont.)

Public health professionals are increasingly asked not only whether fluoridation works, but also how scientific evidence is evaluated, how risk is assessed, and how evolving research should inform public policy.

At the same time, aging infrastructure, workforce challenges, and competing public health priorities create ongoing demands on local water systems and health departments. Ensuring communities have access to accurate information, reliable monitoring systems, and evidence-based guidance remains an important public health responsibility.

What Do We Know About the Benefits?

Decades of research have established fluoride as an important tool for preventing dental caries. CDC reports that communities with fluoridated water experience, on average, approximately **25% fewer cavities** than communities without fluoridated water.⁵

There is also an economic benefit. CDC estimates that optimally fluoridated water saves approximately **\$32 per person annually in avoided dental treatment costs** and that communities of 1,000 people or more receive an estimated average return of approximately ****\$20 for every \$1 invested in fluoridation.****⁵

The evidence, however, continues to evolve, as it should in public health. A 2024 Cochrane systematic review found that contemporary studies suggest community water fluoridation may result in slightly less tooth decay in children's primary teeth and may slightly increase the proportion of children who are cavity-free. The magnitude of benefit observed in more recent studies was smaller than that reported in studies conducted before 1975, when fluoride toothpaste and other fluoride-based preventive measures were not as widely available. The review also noted limitations in the contemporary evidence and insufficient evidence regarding some outcomes, including effects in adults and the impact of stopping fluoridation.⁶

This does not mean fluoride no longer matters. Rather, it reminds us that today's oral health environment is different from that of 1945. Fluoride toothpaste, dental sealants, professional fluoride treatments, dietary patterns, access to care, and other factors all contribute to oral health outcomes. Community water fluoridation should be viewed as one important component of a comprehensive oral health strategy.

What About Concerns Regarding Fluoride?

Questions about the safety of fluoride deserve thoughtful, evidence-based answers, not dismissal.

One issue receiving considerable attention involves research examining fluoride exposure and children's neurodevelopment. In 2024, the National Toxicology Program concluded with moderate confidence that ****higher levels of fluoride exposure, such as drinking water containing more than 1.5 mg/L, are associated with lower IQ in children.****⁷

That finding deserves attention, but so does the level of exposure being studied.

The National Toxicology Program specifically noted that its review was designed to evaluate total fluoride exposure from multiple sources and was **not designed to evaluate community water fluoridation alone**. It also concluded that there were insufficient data to determine whether the **0.7 mg/L level currently recommended for U.S. community water systems** has a negative effect on children's IQ.⁷

Reviews of the National Toxicology Program report have further emphasized that its findings should not be used to draw conclusions about fluoride exposure at levels typically found in optimally fluoridated community water systems.⁸ This distinction is essential when communicating risk.

October's Highlight Article (Cont.)

The question should not simply be whether fluoride can have effects at some level of exposure. Many substances have different effects at different doses. The more relevant public health questions are:

- At what level does risk occur?
- What are the benefits at recommended levels?
- What uncertainties remain?
- How should emerging evidence inform future policy and monitoring?

Those are reasonable questions, and continuing to study them is exactly what science and public health should do.

Lessons for Public Health Practice

Community water fluoridation offers broader lessons for public health professionals.

First, population-based prevention often succeeds so quietly that the public rarely notices it. When prevention works, disease does not occur, making the value of the intervention harder to see.

Second, long-standing public health programs must continually earn public trust. Historical success does not eliminate the need for transparency, communication, and ongoing evaluation.

Third, science evolves. Public health professionals should remain willing to assess new evidence, acknowledge uncertainty when it exists, and adapt recommendations when warranted.

Finally, trust is strengthened when communities receive clear explanations of both benefits and risks. Effective public health communication is not about winning arguments. It is about helping people understand evidence and make informed decisions.

Education Rather Than Division

Public conversations about community water fluoridation can quickly become polarized. That does little to improve oral health or build public trust.

People who have questions about what is in their drinking water deserve clear answers. They should know why fluoride is used, what concentration is recommended, how water systems monitor fluoride levels, what benefits have been demonstrated, what potential risks have been studied, and where scientific uncertainty remains.

Public health advocacy is strongest when it begins with education. Our responsibility is not simply to tell people that something is safe or effective. It is to help people understand the evidence well enough to see how those conclusions are reached and to be transparent when evidence evolves or questions remain.

For public health professionals, local health departments, and community partners looking for practical ways to communicate about fluoridation, the [Michigan Oral Health Coalition's Community Water Fluoridation Toolkit](#)¹¹ provides ready-to-use, evidence-based educational materials, communication tools, policy resources, and guidance to support clear and effective community education and advocacy.

For Michigan, that conversation carries special significance. Our state helped launch community water fluoridation in the United States more than 80 years ago. Today, Michigan has an opportunity to continue that leadership, not merely by pointing to our history, but by ensuring that communities have access to accurate information, appropriate monitoring, reliable infrastructure, and current scientific evidence.

Community water fluoridation is ultimately about prevention: preventing cavities, preventing pain, reducing avoidable treatment, and creating community conditions that support oral health.

October's Highlight Article (Cont.)

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Coming Mid-October!

We are thrilled to finally have this come to life!

Thank you for being part of the MPHA community. ❤️

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CHARTING YOUR *Career Path*

REFLECT • PLAN • EXPLORE • GROW

Where do you want your career to go—
and what steps will get you there?

Join **Marcia Dittmyer** on **October 13th** at **7PM** for an interactive 75-minute session designed to help you step back, assess where you are in your career, and create a practical road map for where you want to go next.



**Monday
October 13th**



**7:00 PM
(75 minutes)**



**Virtual
via Zoom**

Objectives:

1

How to identify your strengths and passions

2

Strategies to set clear career goals

3

Navigating industry trends and opportunities

4

Networking and personal branding tips to stand out



Register Today!



Please take a few minutes to register. You will receive information about the Zoom Link as we get closer to the webinar.

Voices of PH Series: Community-Led Change Across Michigan



Deanna Seemann, RN, BSN,
Community Health & Children's
Special Health Care Services Nurse,
Lead screening and education at
the Midland County Health Fair



Midland County Services Building

***Voices of Public Health** aims to inspire, inform, and connect communities statewide through a new series, **Community-Led Change Across Michigan**. We're excited to launch this series celebrating the people, organizations, and partnerships driving public health across our state. Each installment will highlight local challenges, successes, and innovative solutions—giving a platform to stories that too often go untold. As the series continues, we'll feature diverse communities from across Michigan, showcasing how grassroots efforts, meaningful partnerships, and everyday actions are shaping the health of our state. Stay tuned and join us in celebrating the individuals and communities making public health real in Michigan—one community at a time.*



Effective public health through strong community partnerships and adapting to meet community needs

The best public health is invisible. It is the disease you didn't get, the accident that didn't happen, and the disaster that didn't occur.

This common public health statement embodies what staff at the Midland County Department of Public Health (MCDPH) hope to achieve through our public health programs and services, prevention of negative health outcomes and improved quality of life.

What this statement does not capture is the fact that public health as a profession cannot be invisible, as our impact and effectiveness is achieved through visibility and consistently active involvement of MCDPH staff within our community. As a department, we see incredible value in building and maintaining strong community partnerships, and we are very fortunate to have a community that is invested and involved in the health and wellbeing of its residents. We also seek to understand the evolving needs and lived experiences of the individuals that reside in Midland County, so we can meet them where they are at as a partner in health.

Below is a sample of how strong community partnerships built and maintained by MCDPH staff, paired with a willingness to adapt to community needs have made a positive impact on public health in Midland County:

- ✓ **Accessibility.** As a department, we have made intentional efforts to create accessible spaces and services to meet the needs of all individuals within our community.

Community-Led Change Across Michigan (Cont.)

To demonstrate our commitment to accessibility:

- We earned certification from the Michigan Vaccination Partners as a Most Valuable Provider (MVP) in 2024.
 - We consulted resources such as our local Disability Network for evaluation of site accessibility and identification of improvement opportunities.
 - We created sensory friendly space in our clinic, and social stories to describe the process for immunizations and lead screening.
 - We assembled mobile sensory kits for community clinics.
 - We activated web-based scheduling requests and visitor feedback options.
 - We added accessibility information about our location to our website to prepare individuals for their visit to our location.
 - We have numerous agreements at partner sites throughout the county for distribution of no-cost sexual health and harm reduction supplies.
- ✓ **Community outreach.** Active community outreach provides an opportunity to share information about our programs and services, educate on public health topics, learn about the lived experiences and needs of our residents, and build rapport and credibility in the public health profession. Some examples of our outreach efforts:
- We host events such as our annual Back to School Health Clinic and our annual Countywide Baby Shower.
 - We facilitate public health education sessions with community members:
 - Newborn Parenting Group
 - School-based maturation education
 - We contribute to development and public health awareness for professionals employed with partner organizations:
 - Educating local Emergency Medical Services (EMS) on infant safe sleep
 - Public health presentations by our Medical Director
 - Active Immunizations Coalition meetings with local healthcare providers
 - We staff public health education tables at multiple partner events throughout the year.
 - Our Medical Director prepares a monthly article for our County Newsletter, and we actively share public health information on social media.
- ✓ **Community Vaccine Clinics.** Through partnerships with numerous organizations within Midland County, accessibility to flu and COVID-19 vaccine protection at the start of respiratory virus season is greatly improved. The department coordinates an average of 30 community flu and COVID-19 vaccine clinics each year at locations throughout the county, in addition to weekly walk-in opportunities, and scheduled appointments. This approach helps ensure there is a convenient option to take advantage of vaccine protection, no matter where in the county a resident lives or how complex their schedule is.
- ✓ **Harm Reduction.** Through our active involvement in the Midland County Coalition for Substance Free Resiliency, we've participated in efforts to support youth substance use avoidance, provide a wide range of accessible harm reduction supplies and services, and contribute to supportive programs and services for individuals in treatment and recovery from substance use disorder.

Community-Led Change Across Michigan (Cont.)

✓ ***Mentoring the Next Generation.*** We are honored to help shape the incoming generation of public health professionals and nurses. We work closely with local educational institutions and routinely host students completing field time for their education program, or students contemplating their future career goals. Students have an opportunity to see public health in action, and nearly every student we host is amazed at the scope of work a local public health department does within their community. We appreciate the opportunity to inspire and expand awareness about the public health fields and the work of public health professionals.

✓ ***Newborn Hearing Screening and Follow-Up.*** We recognize the importance of supporting new parents and removing barriers to completing newborn health screening. For these reasons, the department enthusiastically established a partnership with the University of Michigan (U of M) Audiology Department in Ann Arbor. This partnership enables us to host and facilitate follow-up Auditory Brainstem Response (ABR) testing for newborns that did not pass their initial hospital hearing screening. Families in the region and northern portions of the state can come the Midland County Department of Public Health instead of traveling to Ann Arbor. The family meets virtually with a U of M Audiologist to complete follow-up testing, while a member of our staff facilitates the process. This partnership helps to significantly reduce the amount of travel time needed for families with a newborn and improves the likelihood of follow-up for a newborn that requires testing.



(Left) Jennifer Fosgitt, RN, BSN, Children's Special Health Care Services & Childhood Lead Poisoning Prevention Program; (Right) Kelly Bauer, LMSW, IMH-E (II), Children's Special Health Care Services; Sharing information about Children's Special Health Care Services at the Midland Stroll for Epilepsy,

These examples are meant to demonstrate that a key ingredient to public health success for the MCDPH is community partnerships and meeting the community needs through innovation and adapting. Midland County Department of Public Health staff take great pride in the work we do, the public health profession, and our committed community partners. To achieve our mission of health promotion and disease prevention it truly takes everyone, everywhere, and every day.



Katie Romo, MPH, CPH, CHES, Public Health Preparedness Coordinator, Educating on substance use prevention and harm reduction with community partners from the Coalition for Substance Free Resiliency and the Midland County Health Fair.

Closing Message & Quote Opportunities



Nicole Swanton, RN, BSN, Clinical Services Director, Providing handwashing education and interactive demonstrations at The Arc of Midland.



Shelley Kruskie, RN, Immunizations Clinic & Julie Baker, CPC, RMS, CMRS, Health Data Specialist; Providing vaccines and oral health education at the Coleman Walk Through Town.

Skin Cancer Prevention: Increasing Access to Free Sunscreen

Skin cancer is the most common type of cancer and includes melanoma, basal cell and squamous cell carcinoma. Melanoma is the least common type of skin cancer, but has a higher mortality rate.^{1,2} Exposure to ultraviolet (UV) radiation is a significant risk factor for skin cancer, including melanoma and other preventable skin conditions.³ Increasing public access to sunscreen is a practical and evidence-based strategy to promote sun safety and reduce the risk of skin cancer.⁴ IMPACT Melanoma is a non-profit organization dedicated to sun safety education and skin cancer prevention, with a particular focus on the deadliest type of skin cancer, Melanoma.⁵ The Michigan Public Health Association (MPHA) partnered with IMPACT Melanoma to provide sunscreen on university campuses in Michigan.

The Michigan Public Health Association (MPHA) recognizes the importance of skin cancer prevention, heat-related illness prevention, and the promotion of sun safety practices as essential public health strategies. In alignment with MPHA's mission to improve the health of Michigan communities and support evidence-based prevention initiatives, the MPHA purchased sunscreen dispensers, and one sunscreen insert per dispenser for three locations at Michigan Universities:

1. Saginaw Valley State University College of Health and Human Services in University Center
2. Grand Valley State University (GVSU) in Grand Rapids, Michigan on the downtown health campus
3. Allendale, Michigan on the main GVSU campus.

Each university is responsible for a stand for displaying the dispenser and for maintaining each dispenser. Additional sunscreen can be purchased by universities from IMPACT Melanoma as needed.

College and university campuses provide opportunities to reach large populations of students, faculty, staff, and visitors through visible and accessible prevention initiatives. This initiative aligns with MPHA's collaborative public health efforts with the American Public Health Association and the Michigan Cancer Consortium in advancing prevention-focused community health strategies. The sunscreen dispensers display the MPHA logo and a QR code directing individuals to the MPHA website, thereby increasing public awareness of MPHA and its public health mission.



Skin Cancer Prevention: Increasing Access to Free Sunscreen (Cont.)

This work is in conjunction with Sarah Nechuta and Suzanne Keep's project, "West Michigan Skin Cancer Prevention Initiative", which is a community-based project to support free sunscreen and education on sun-protective behaviors in public spaces in West Michigan. Below are pictures from the project, which was implemented at John Ball Zoo in Grand Rapids this past summer. The project included nursing students from Aquinas College (Zach Somsel and Allison Edwards) and Bella Andreski, an MPH student from GVSU, and MPHA member.



Pictured (left to right): Zach Somsel, Sarah Nechuta, Bella Andreski



Pictured (left to right): Zach Somsel, Bella Andreski, Allison Edwards



Pictured (left to right): Allison Edwards, Suzanne Keep, Zach Somsel

References

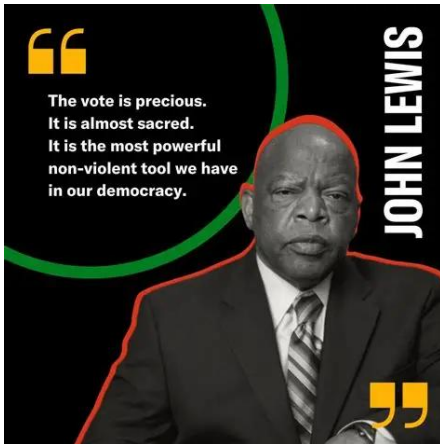
1. Saginala K, Barsouk A, Aluru JS, et al: Epidemiology of Melanoma. *Med Sci (Basel)* 9, 2021.
2. Aggarwal P, Knabel P, Fleischer AB, Jr.: United States burden of melanoma and non-melanoma skin cancer from 1990 to 2019. *J Am Acad Dermatol* 85:388-395, 2021.
3. Watson M, Thomas CC, Massetti GM, et al: CDC Grand Rounds: Prevention and Control of Skin Cancer. *MMWR Morb Mortal Wkly Rep* 64:1312-4, 2015.
4. Sandhu PK, Elder R, Patel M, et al: Community-wide Interventions to Prevent Skin Cancer: Two Community Guide Systematic Reviews. *Am J Prev Med* 51:531-9, 2016.
5. IMPACT Melanoma. Overview. <https://impactmelanoma.org/>. Last Accessed 09-26-26.



Rowan Nechuta Schmitz
Dispenser at GVSU!

Closing Message & Quote

As we move toward the close of another year, I hope we remember that each of us has a voice—and how we choose to use that voice matters. We use our voices when we vote. We use them when we advocate for policies and resources that improve health. We use them when we speak for communities whose needs may otherwise go unheard. And sometimes, we use them simply by listening, showing up, and making room for others to be heard.



That is part of what makes public health so powerful. Our work is ultimately about people and the communities in which they live, work, learn, and grow. As we enter the holiday season, I hope you find time to reflect on the people and experiences for which you are grateful, to reconnect with those who matter to you, and perhaps to think about how you will use your own voice in the year ahead. Thank you for continuing to lend your voice, your expertise, and your energy to public health in Michigan. Together, those individual voices can become something much larger, a collective commitment to healthier, stronger, and more connected communities. A voice matters when it is heard. A community changes when those voices become action.

Looking Ahead to 2027

As we close out the fourth quarter of 2026, I want to take a moment to wish each of you and your families a safe, healthy, and joyful holiday season. However you celebrate the coming months, I hope you find time for the people and traditions that matter most to you—and perhaps a little time to rest, recharge, and reflect on all that this year has brought.

As public health professionals, we spend so much of our time focused on the health and well-being of others. As we enter this season, I hope we remember to extend some of that same care to ourselves and to one another.

And then, before we know it, we will welcome a new year. May 2027 bring new possibilities, meaningful connections, renewed energy, and plenty of reasons to be hopeful. There is much work ahead for public health, but there is also tremendous opportunity. I continue to believe that our greatest strength is found in the people who make up our public health community and in what becomes possible when we learn from one another, support one another, and work together.

The first-quarter edition of *Voices in Public Health* will arrive in early January, and we would love your help in telling the stories of our members. We will be looking for our next Member Highlight, so if there is someone whose work, leadership, service, or contribution to public health deserves recognition, please send their name my way. And if you would like to be highlighted, please reach out! We also welcome your ideas about people, programs, partnerships, accomplishments, or public health topics you would like to see featured in next year's newsletters. *Voices in Public Health* should truly reflect the voices and work of our members across Michigan.

Thank you for everything you have contributed to public health and to our association throughout 2026. I am excited about what we can continue to build together in the year ahead. Wishing you a wonderful holiday season and a happy, healthy, and hope-filled New Year. Here's to all that awaits us in 2027!