

# MISSION

The Public Health Institute promotes health, well-being, and quality of life for all people through research and evaluation, training and technical assistance, and by building community partnerships.

## Innovation & Leadership: A Healthy Combination

JOSEPH M. HAFEY

Innovation is a key ingredient for a healthy society. Creative approaches to long-standing problems clear ailing ideas out of the way and make room for positive changes.

For this reason, we have tried to build a home at the Public Health Institute where people with fresh concepts have flexibility to conduct work that improves the public's health. I am proud that our efforts have spawned some of the most innovative projects in the field.

Our programs have propelled the field in new directions by focusing on a few key principles.

### Freedom & Flexibility

We have always believed that creative people need freedom—freedom to find hidden trends, try unexplored approaches and share unique visions. As a result, our programs have expanded frontiers in healthy communities, alcohol research, media advocacy, youth and reproductive health, leadership development and international health among others.

### Grassroots Approaches

Consider our Regional Asthma Management and Prevention Initiative, known also as RAMP. This project started one day when PHI leaders gathered with Kaiser and local health departments to tackle the problem of asthma. We asked ourselves: what would make a real difference at the community level in preventing and managing this chronic disease?

Today, RAMP teaches, trains and shares resources with schools, community groups, health departments, healthcare providers and environmental justice organizations. It also leads a statewide network of asthma coalitions that has succeeded in passing numerous local and state laws and policies aimed at reducing environmental triggers of asthma.

Flexibility, community engagement, and strong partnerships will remain a keystone of PHI's approach to improving the public's health.

continued on page 2

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**PUBLIC HEALTH  
INSTITUTE**

Communications Department  
555 12th Street, 10th Floor  
Oakland, California 94607-4046

phone: 510.285.5500

fax: 510.285.5501

email: [communications@phi.org](mailto:communications@phi.org)

web: [www.phi.org](http://www.phi.org)

Editors: Donna Sofaer, Vice President for  
Development, Communications &  
Public Relations

Cinderella Lee  
Communications Manager

Mary Albert Koenen  
Communications Specialist

Design: Ison Design

Printing: Lee Michele Printgraphics ♻️

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continued from page 1

The GoJoven program, which is implemented in Spanish, is another example among others of how flexibility and a grassroots approach have come together at PHI to deliver tangible results. This program trains young leaders from countries such as Honduras, Guatemala and Belize to develop and use networks to spread information about adolescent reproductive health.

### Partnerships & Collaborations

In all our work, collaborating with a broad range of individuals and organizations from different sectors has become critical. Often these are unlikely partnerships, but they have inspired a wealth of strategies that have led to replicable innovations in the field.

Our partnerships have helped bring about smoke-free environments in cities and neighborhoods throughout California during the last decade. Broad local and regional partnerships have engaged school districts to examine relationships with vendors providing unhealthy food and beverages to students. City planners are re-examining their role in safe physical activity options. Hospitals have successfully collaborated with community groups to focus on prevention. And retail pharmacies have collaborated with regulatory agencies to provide increased access to protocol-driven health screenings and pregnancy prevention efforts.

### Looking Ahead

Flexibility, community engagement, and strong partnerships will remain a keystone of PHI's approach to improving the public's health.

Although the prospect of a change in leadership may seem daunting, having a new leader of Mary Pittman's caliber who will bring fresh ideas and a clear vision offers a wonderful opportunity to test more innovative strategies and bring about a healthier future. ■

## A Personal Message from Joe Hafey

It has been my great pleasure to participate for more than 30 years in the wonderful work that takes place at the Public Health Institute (PHI).

I want to thank the leaders of partnership organizations for understanding the unique role PHI can play in bringing together the many sectors involved in public health and for making ongoing commitments to collaboration.

Above all else, I am most grateful for the wonderful friendships I have made among PHI's principal investigators, board members, administrative staff, funders and partners. I especially want to thank my assistant and dear friend Cherry Palacios for supporting me in so many ways for all those years.

Thank you all.

**Editor's Note:** Joe Hafey retires January 2008. Mary Pittman succeeds him as the next president and chief executive officer.





# Public Health Should Not Be Limited by Borders, says Bob Minnis

An Interview with former director of International Health Programs

Third from left, Bob Minnis with wife Julie Minnis and residents of Balakot, Pakistan after an earthquake destroyed much of that town on October 8, 2005.

MARY ALBERT KOENEN

After 35 years of service to the International Health Programs (IHP) at PHI, Robert Minnis has retired from his post as program director. Minnis helped found IHP in 1972 and worked for the organization overseas and at the University of California training center in Santa Cruz. Throughout his career at IHP, he provided technical assistance to government and private agencies in several Asian and African countries to help them develop their training and service delivery capabilities. We asked him to share what he had learned during his accomplished career.

**Q: What is the most important issue facing international reproductive health workers today?**

A: The availability of reproductive health services accompanied by open policies that allow people to access these services. Leaders need tools to influence and persuade officials regarding barriers to service.

**Q. Which area of the field needs the most attention going forward?**

A: Many things need to be addressed. There is the problem of service delivery and access to services. In addition, people need to be educated and messages need to be communicated in a consistent manner so that people understand the importance of health to their economic well-being.

**Q: Why should we be concerned about public health issues in the international community?**

A: With the global community as it is—where people travel freely—bird flu in Hong Kong can become a problem

in San Francisco. AIDS is spread the same way. Plus, we are in the helping profession. Public health should not be limited by borders.

**Q: If you had another 30 years to work at IHP, where would you take the organization?**

A: There are a lot of programs we have been involved in and all kinds of things that should be addressed. The institution of primary health care programs, for example. Healthy communities—where we take a select number of villages and try to improve them—is another area we should spend more time on.

**Q: What do you plan to do in your retirement?**

A: I am going to give up the mantle of director to Jim Williams because we have worked together so long and because he is extremely qualified for the job, but I am not going to leave entirely. Ten to 20 percent of the time I will continue working on development ideas for international health programs. ■

# Diversity of Focus

Locally and globally, PHI shares evidence, promotes prevention, and builds community in a broad range of public health areas, including:

- Healthy Aging
- Alcohol / Tobacco / Substance Abuse
- Chronic Diseases: Asthma, Cancer, Diabetes, Cardiovascular and Tuberculosis
- Communicable / Infectious Diseases, including HIV/AIDS
- Community Health
- Disability
- Environmental Health
- Family Planning / Reproductive Health
- Genetics
- Health Policy Research
- Homelessness / Indigent Care
- International Health
- Lead Poisoning Prevention
- Leadership Development
- Managed Care
- Maternal & Child Health
- Media Advocacy
- Mental Health
- Nutrition / Physical Activity / Obesity Prevention
- Organizational Development
- Occupational Health
- Pharmaceutical Access
- Program Evaluation
- Rural Health
- Social & Behavioral Science

## DOMESTIC Network for a Healthy California — Worksite Program Takes Action

CURTIS GRANGER

The *Network for a Healthy California* Champions for Change campaign is tackling the growing problem of inactivity, obesity and overweight in California. Formerly known as the California 5 a Day program, the network launched the field component of its worksite program in January.

This program, which is administered by PHI and directed by the California Department of Public Health, aims to: help employers develop a workplace environment that supports healthy eating and exercise; improve workers' access to produce and physical activity; and establish public policies that bolster health promotion efforts.

Since January, regional worksite coordinators have assisted more than 60 worksites and 3,000 employees.

Thirty-three sites have participated in the California Fit Business Take Action! Employee Wellness Program, which includes two 10-week "modules" in which workers build teams that support increasing produce consumption and physical activity. More qualifying worksites are scheduled to come online in coming months. ■



## INTERNATIONAL Global Health Fellows Program Grows in 30 Countries

ROBERT LEONE

The Global Health Fellows Program (GHFP) at PHI has had a busy first year transitioning fellows from other programs and recruiting new ones into the United States Agency for International Development. GHFP now supports 70 fellows in 30 countries. These fellows focus on family planning, reproductive health, HIV/AIDS, avian influenza and malaria.

The GHFP partnership, led by PHI, includes Harvard's School of Public Health, Management Systems International and Tulane's School of Public Health and Tropical Medicine. It represents a distinguished network of academic mentors, outreach and fellowship support professionals, and experts in organizational and professional development.

As the program moves into its second year, staff will focus on developing an international internship program, a diversity initiative to increase minority representation, support for organizational development and learning, and a comprehensive orientation and support for fellows' on-site managers. ■



# PROFILES

In this issue, we feature two PHI leaders whose innovative work has shaped public health in California and abroad.



**Curtis Granger** is program manager of the *Network for a Healthy California-Worksite Program*. Before joining the California Department of Public Health, which directs this PHI-administered program, Granger spent 17 years in the produce industry. He served as a vice president of marketing and business development for Ripe N Ready Tree Fruit, executive vice president of the Chilean Fresh Fruit Association's North America

office, and director of marketing for the California Kiwifruit Commission's U.S./Canada campaigns. He also served on the executive committee of the national 5 a Day Campaign and was chairman in 2003.

**James Williams** is the new director of PHI's International Health Programs (IHP), where he shapes policy decisions and the program's direction, coordinates program activities and evaluates results. He joined IHP in 1976 as a training program coordinator. Since then, he has held several leadership positions that include director of IHP's Family Planning Technical Assistance Program. In addition, he served as director of the Population Leadership Program, a former PHI project funded by the United States Agency for International Development (USAID). Williams managed the program and supervised senior fellows assigned to USAID's Office of Population in Washington D.C. and missions overseas.



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555 12th Street, 10th Floor  
Oakland, California 94607-4046

tel: 510.285.5500  
fax: 510.285.5501  
email: [communications@phi.org](mailto:communications@phi.org)  
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# NEWS

### New Awards

#### ■ California Cancer Registry to Pilot Technology Improvements

Principal Investigator:  
Rosemary Cress

Funded by: Centers for Disease Control and Prevention (CDC)

Occupational exposures are an important cancer risk factor. Yet workplace information collected by cancer registrars is not being used to conduct cancer surveillance because the technology is not in place to do so. With funds from the National Occupational Research Agenda, a partnership program of the CDC, the California Cancer Registry at PHI is launching a three-year pilot project to assess the feasibility of using an auto-coding software program to help researchers evaluate cancer incidence among construction workers.

#### ■ Center for Collaborative Planning to Lead Community Training

Project Director:  
Connie Chan Robison

Funded by: First 5 Sacramento Commission

The Center for Collaborative Planning at PHI will lead a series of training sessions for grantees of the three-year Community Building Initiative (CBI). Topics to be addressed likely will include: community building, social capital, advocacy, collaborative leadership, group facilitation and other community change tools and processes. The program will culminate in the development of tool kits to support the ongoing work of CBI and the community building movement throughout Sacramento County.

#### ■ PHI to Assess California Family Planning Program

Principal Investigator:  
Sue Holtby

Funded by: University of California at San Francisco  
Sue Holtby and colleagues Christy McCain and Nicole Lordi will participate in an evaluation of California's Family PACT program, which provides family planning services to low-income uninsured residents. The researchers will conduct 1,500 exit interviews with PACT clients from throughout the state to better understand clients' satisfaction with care and whether providers are maintaining the program's standards. The researchers will ask clients about: 1) their experiences using the program, 2) their access to services, and 3) the referrals they received for primary care.

### Recent Publication

#### ■ Youth ALIVE! Evaluators Publish New Paper

PHI Senior Scientist Elaine Zahnd, lead author Dr. Daniel Shibu and colleagues at Highland Hospital and Youth ALIVE! placed an article about Youth ALIVE!'s Caught in the Crossfire project in the *Journal of the American College of Surgeons*. In their evaluation of this hospital-based violence intervention program, researchers found that the service, which was designed to reduce retaliation, re-injury, and arrest among violently injured youth, is cost effective and reduces the risk of criminal involvement. The article is slated for publication in winter 2007.