Building a competitive advantage for the future of health education will require a range of innovative and strategic cross-cutting capital investments. As we convene in Charlotte, a banking capital of the nation, health promotion researchers and practitioners must re-think ways to preserve and optimize financial resources, explore new sources of funding, and demonstrate a return on investment. We must strengthen our political capital with key decision makers in the public and private enterprises that influence health of individuals and communities. We must expand our inter-professional capital in working across disciplines and our social capital to engage and empower populations in effecting change. This scientific conference will expand the knowledge capital and skills of our health promotion workforce, one of the most powerful and promising investments for effective research and practice in 2016 and beyond.

**Effective Health Education Leadership in the 21st Century**

Now more than ever, health education specialists have the opportunity to lead the way in organizing initiatives, guiding teams, and mentoring others for improving health and addressing social determinants of health. Abstracts are sought that include: building teams and collaboration with multiple stakeholders, characteristics of a good leader and follower, setting a vision, accountability, conflict resolution, and transforming professional preparation & development for 21st century challenges. Recognizing the leadership role that educators serve, abstracts are also sought that address pedagogy, teaching techniques and curriculum planning for traditional and non-traditional audiences.

**Collaboration and Collective Impact in the Changing Health Environment**

Abstracts are sought that address health education’s role in achieving the aims of the Affordable Care Act to improve access, quality and outcomes, and reduced cost. Working and communicating with key stakeholders in federal/state/local government, insurance, health care organizations, philanthropy and other settings is tantamount. Additional topics include collaboration at the various intersections of public health; community health improvement teams/care teams; community health workers; ethics/bioethics; and planning, forecasting, performance reporting and governance processes to sharpen decision-making speed and effectiveness. New initiatives in policy and systems change should be addressed.

**Game Changers: Innovations in Research & Practice**

To remain relevant and effective, health promotion must continually search for both evolutionary and revolutionary innovations in our increasingly global and changing environment. Abstracts are sought that demonstrate innovative approaches to research or
practice that address the changing norms and demands of consumers, especially related to technology, program planning, and evaluation. Entrepreneurial approaches to changing policy/systems and new ways of engaging various subsets of the population in creating positive change are sought in relation to both non-communicable and communicable diseases, emergency preparedness, violence/injury prevention, tobacco, healthy aging, mental health, and other areas.

*Amplifying the Role of Health in Schools*

Promoting health in Pre K-12 schools and on college campuses remains one of the most promising avenues for improving health and academic outcomes of future generations. Topics in this subtheme will cover initiatives related to child, adolescent, and young adults’ health delivered in school and university settings, including approaches to improve physical activity and diet, injury prevention, alcohol/substance abuse, sexual health, and the effects of toxic stress on physical and mental health. Additional topics include: integrating the Whole School, Whole Community, Whole Child model into schools, interacting with state/local education agencies and college administrators, classroom design, and policies directed to improve outcomes for children, adolescents, and young adults.

*Health Equity and Social Justice*

Disparities in health are driven by complex factors operating at the levels of individuals, interpersonal networks, organizations, communities, and society. Abstracts are sought that address health inequities related to access to care, education, environment, exercise, family and social support, housing, transportation, access to healthy food, and criminal justice. Abstracts are also sought that exemplify best practices and research in addressing the health of underserved and disadvantaged populations, particularly the changing US demographics.

**WHO SHOULD SUBMIT ABSTRACTS**

- Health Education & Promotion Professionals
- School Health Educators/School Health Education Coordinators
- Behavioral/Social Scientists
- Patient Educators
- Health Education/Promotion Students
- Community Health & Public Health Education Faculty
- Tribes and Tribal Organizations
- Public Health Practitioners
- Mental Health Professionals
- Chronic Disease Directors
- Dental Hygienists/Community Oral Health Coordinators
- Community-Based Organizations and Staff
- Epidemiologists
- Allied Health Professionals
- Social Marketers
- Informatics Professionals
- Health Communication Professionals
- Pharmacists
- Dietitians & Nutritionists
- Health/Social Policy Experts Focusing on Health Promotion
- Social Workers
- Health Administrators
• Nurses, Nurse Midwives & Nurse Practitioners
• Clinicians
• Ethicists
• Community Members

CHECKLIST FOR PREPARING ABSTRACTS  
Submit abstracts online by August, 16, 11:59 pm (EST). If you experience difficulty with your submission, please contact Jeanine Robitaille (jrobitaille@sophe.org)

1. Clarify type of session requested (e.g., Single Presenter, Panel, Workshop, Ignite, Think Tank, Roundtable, Poster).
2. Limit abstract to 400 words for peer-review. Also prepare a brief version of the abstract for print (125 word maximum).
3. If submitting for a panel, include required information for each presentation and presenter.
4. Include disclosure information for presenting author.
5. PRINT a copy of the submission for your files.

NOTE: Work that has been previously published or presented at a national conference will not be accepted. Submission of multiple abstracts that present the same data in different ways is also prohibited and will result in the abstract(s) being rejected.

NOTIFICATION AND COMMUNICATION
You will be notified by email when your proposal has been received. All communication concerning multiple-presenter proposal submissions will be directed to the presenting author who will be responsible for sharing information with other presenters. Primary presenting authors will be notified by email whether their proposal was accepted or declined in November 2015. All primary presenting authors will receive a formal letter of acceptance from the SOPHE office along with conference registration information.

CRITERIA FOR JUDGING ALL PROGRAM ABSTRACT SUBMISSIONS

1. Relationship to conference theme: Does the abstract relate to the theme or any of the subthemes?
2. Sound conceptual framework: Does the abstract indicate the development and implementation of a theory-based intervention or research project?
3. Methodology: Are objectives clearly stated? Are findings included and do they correspond to the objectives?
4. Usefulness: Can the research, program, or plan be applied elsewhere? Is it useful to practicing health educators, researchers, and/or academicians?
5. Innovation: Does the abstract represent research or a program or project that is unique, new, different, or creative?
6. Clarity of content: Is the abstract well-written? Does it clearly outline what the presentation is about, such as project type, target audience, setting? Does the abstract clearly identity the entry-level Area(s) of Responsibility or advanced-level sub-competencies?
7. Overall reaction: Considering the above criteria, what is your overall reaction?

Abstract Submission Site: Information that will be Requested Online
Abstract Type Checkbox (Check one)
Research
Practice

Abstract Title
Provide Appropriate Conference Sub-Theme: Checkbox (select all that apply)
Effective Health Education Leadership in the 21st Century
Collaboration and Collective Impact in the Changing Health Environment
Game Changers: Innovations in Research & Practice
Amplifying the Role of Health in Schools
Health Equity and Social Justice

Indicate if primary author is a National SOPHE Member: Checkbox (select one)
SOPHE member
Non-SOPHE member

Student Status Checkbox (select one)
Student
Non-student

Indicate if you are an Eta Sigma Gamma (ESG) member submitting for consideration in an ESG session/poster:
Checkbox (select one)
Submitting for ESG session
Not submitting for ESG session

**Please note that ESG poster submissions are open to students only**

Type: Rank your three choices:
Presentation 1: (required)
Presentation 2: (optional)
Presentation 3: (optional)

If you are not selected for a presentation, would you be able to present your abstract as a poster?
Yes
No

Single-presenter session: This type of presentation is 15-20 minutes long. Single-presenter abstracts on a related subject are combined into 75 or 90 minute concurrent sessions. Proposals must include: title, 2-3 learning objectives, abstract for peer-review (400 word maximum), brief version of abstract for publication (125 word maximum), and a brief biosketch for the author(s).

Panel: The total length of this session will be 75 or 90 minutes and may include up to 4 individual presentations around a common subject. The format of this type of session can vary at the presenting author’s discretion (i.e., 1-2 presenters with 30 minutes of discussion; 4 presenters with less time for discussion). Submit one abstract for peer-review (400 word maximum) for the entire panel session, one brief version of abstract for publication (125 word maximum) for the entire panel session, and proposals must include: title, a brief biosketch for each presenting author, and 2-3 learning objectives.

Skill-Building Workshop: By design, this proposal should emphasize skills development and incorporate interactive, hands-on learning. The total length of a workshop will be between 2 and 4 hours. The Planning Committee will determine assignment as pre-or post-conference or embedded conference workshop. Workshop proposals must include: title, 2-3 learning objectives, health education competencies to be addressed, method(s) of presentation, abstract for peer-review (400 word maximum), brief version of abstract for publication (125 word maximum), and a brief biosketch for each presenting author(s).
NEW - Ignite session: Ignite presentations use rapidly progressing PowerPoint slides in a 5-10 minute period. Ignite slides tend to incorporate excellence in slide design in support of a very clearly articulated message. These presentations should be innovative, e.g. offering a new way to look at old concepts, building non-traditional partnerships, and spark new ideas for discussion. Presenters need to practice in order to get their timing down and quality up. Ignite presentations are challenging, exciting, fun to create, and to attend. At the end of the presentations, rather than a formal question and answer session, time is set aside for attendees to connect with individual presenters.

NEW - Think Tank: A think tank is a 45-90 minute session focusing on a single issue or question. A chairperson orients attendees to the issue or question and provides context. Attendees break into small groups to explore the issue and reconvene to discuss their enhanced understanding through a conversation facilitated by the chairperson. The abstract should succinctly identify the question or issue to be addressed, the relevant contextual factors, and the roles of the individual breakout groups (To address the overall topic or question; A particular facet of the topic or question; A particular perspective) Proposals must include title, 2-3 learning objectives, abstract for peer-review (400 word maximum), brief version of abstract for publication (125 word maximum), and a brief biosketch for the chairperson.

NEW - Roundtable: Roundtables are 45-minute oral presentations with discussion with attendees seated around a table. Roundtable discussions typically include 15 minutes of presentation, followed by 30 minutes of discussion and feedback. Roundtable presenters should bring targeted questions to pose to others at the table in order to learn from and with those attending. Roundtables are an ideal format for networking and in-depth discussion on a particular topic. The abstract should detail the focus of the presentation and the way(s) in which it contributes to the body of knowledge in the field. Proposals must include: title, 2-3 learning objectives, abstract for peer-review (400 word maximum), brief version of abstract for publication (125 word maximum), and a brief biosketch for each presenting author.

Poster Session: Poster sessions allow participants to view research/project findings at will and interact with poster session author(s). Posters will be displayed throughout the conference with a designated time for authors to be present. Proposals must include title, 2-3 learning objectives, abstract for peer-review (400 word maximum), brief version of abstract for publication (125 word maximum), and a brief biosketch for each presenting author.

STUDENT NOTICE: SOPHE especially encourages students to submit abstracts. Student submissions will be peer-reviewed using the same criteria as all other submissions. Students whose abstracts are accepted for presentation are bound by the same agreements as all other submissions.

Presenting Author (Designated point of contact for notification of abstract status)
First Name:
Last Name:
Role (i.e. presenting author, co-author):
Author Order:
Degrees/Certifications:
CHES# (if applicable):
MCHES # (if applicable):
Job Title/Student Status:
Division/Department/University:
Address:
City:
State: 
Zip: 
Country: 
Telephone (Day): 
Telephone (Evening): 
Fax: 
Email: 
Alternate Email: 
**Coauthors** First name, last name, degrees/certifications, CHES# (if applicable), MCHES# (if applicable), author role, author order, division/department/university, address, city, state, zip, country, email 

**Biosketch(es)** 
Each author is required to provide a brief description of their background relevant to the proposed presentation (e.g. practicing professionals should include their education, training, work experience, publications, past presentations, research, and memberships in relevant professional organizations). Student authors should describe relevant professional preparation, experience, and/or coursework. 100 word maximum per author 

**A-V Needs** 
Please Note: An LCD projector and podium microphone will be standard in all sessions. SOPHE will be providing more information on A-V needs such as laptop availability upon acceptance 

**Presenter Objectives:** 
Presenter Objectives: List objectives that specify learner outcomes to be achieved by the participants at the event. Identify the specific Area(s) of Responsibility for the entry-level participant OR the Subcompetency(ies) for the advanced level participant for the objective listed. The presentation is either entry-level or advanced-level, but not both. If the objectives are entry-level, document the specific Area of Responsibility below. If the objectives are advanced-level, document the specific Subcompetency below. 

In writing a behavioral objective the first step is to start with the key phrase. Use the following objective template for creating a quality learning objective: 

“By the end of the session the participant will (be able to): select verb from the “Writing Objectives” tip sheet (complete the objective with a measurable element and specifics to your session).” Enter text for up to 3 objectives.

1. 
2. 
3. 

**CHES/MCHES Areas of Responsibility** 
Note you must designate at least one choice from either the entry-or advanced-level set of competencies. Your selection will not affect the reviewers’ rating of your abstract and will be used only by the CE Committee. To obtain more detailed information on competency and/or sub-competency(ies), please click here: http://www.nchec.org/ 

Select whether the presentation is entry-level or advanced-level: 
Checkbox (check only one) 
Entry-Level 
Advanced-Level 

If Entry-Level is selected: 
Entry-level continuing education contact hours (CECH) for CHES, please mark the Areas of Responsibility for Health Educators that are met by the behavioral/learning objectives for this session. A single one-hour event needs to address at least one Area of Responsibility. Checkbox (select all that apply)
If Advanced-Level is selected: Advanced-level continuing education contact hours (CECH) for MCHES, please mark the Advanced level Sub-competencies for Master Health Educators that are met by the behavioral/learning objectives for this session. A single one-hour event needs to address at least one Advanced-level Sub-competency.

Checkbox (select all that apply)

**Competencies highlighted are MCHES only**

**Area I: Assess Needs, Resources, and Capacity for Health Education/Promotion**

1.1.2 Identify existing and necessary resources to conduct assessments
1.1.3 Engage priority populations, partners, and stakeholders to participate in the assessment process
1.1.4 Apply theories and/or models to assessment process
1.2.2 Establish collaborative relationships and agreements that facilitate access to data
1.2.3 Implement quantitative and/or qualitative data collection
1.5.1 Identify and analyze factors that foster or hinder the learning process
1.5.3 Identify and analyze factors that foster or hinder attitudes and beliefs
1.5.4 Identify and analyze factors that foster or hinder skill building
1.6.3 Assess the effectiveness of existing health education/promotion programs and interventions
1.7.1 Synthesize assessment findings

**Area II: Plan Health Education/Promotion**

2.2.1 Identify desired outcomes using the needs assessment results
2.2.3 Develop mission statement
2.2.4 Develop goal statements
2.2.5 Formulate specific, measurable, attainable, realistic, and time-sensitive objectives
2.3.1 Select planning models for health education/promotion
2.3.2 Assess efficacy of various strategies to ensure consistency with objectives
2.3.3 Apply principles of evidence based practice in selecting and/or designing strategies/interventions
2.3.7 Tailor strategies/interventions for priority populations
2.3.9 Conduct pilot test of strategies/intervention
2.4.3 Organize health education into a logical sequence
2.4.4 Develop a timeline for the delivery of health education
2.4.8 Develop a process for integrating health education/promotion into other programs when needed
2.5.1 Identify and analyze factors that foster or hinder implementation

**Area III: Implement Health Education/Promotion**

3.2 Train staff members and volunteers involved in implementation of health education/promotion
3.2.1 Develop training objectives
3.2.3 Identify training needs
3.2.4 Develop training using best practices
3.2.6 Provide support and technical assistance to those implementing the plan
3.2.7 Evaluate training
3.2.8 Use evaluation findings to plan future training
3.3.2 Apply theories and/or models of implementation
3.3.6 Deliver health education/promotion as designed
3.3.7 Use a variety of strategies to deliver plan
3.4 Monitor implementation of health education/promotion
3.4.6 Evaluate sustainability of implementation

**Area IV: Conduct Evaluation and Research Related to Health Education/Promotion**

4.1.1 Determine the purpose and goals of evaluation
4.1.2 Develop evaluation/research questions
4.1.3 Create logic model to guide the evaluation process
4.1.7 Select a model for evaluation
4.1.9 Develop data analysis plan for evaluation
4.2.2 Assess feasibility of conducting research
4.2.6 Assess the merits and limitations of qualitative and quantitative data collection for research
4.3.6 Create new items to be used in data collection
4.4.4 Use available technology to collect, monitor and manage data
4.5.5 Use technology to analyze data
4.6.7 Draw conclusions based on findings
4.6.8 Develop recommendations based on findings
4.7.1 Communicate findings to priority populations, partners and stakeholders
4.7.3 Evaluate feasibility of implementing recommendations from evaluation
4.7.5 Disseminate research findings using a variety of methods

Area V: Administer and Manage Health Education/Health Promotion
5.1.1 Develop financial plan
5.1.2 Evaluate financial needs and resources
5.1.3 Identify internal and/or external funding sources
5.1.6 Manage program budgets
5.1.7 Conduct cost analysis for programs
5.1.8 Prepare budget reports
5.1.13 Apply ethical principles when managing fiscal resources
5.2.1 Assess technology needs to support health education/promotion
5.2.4 Evaluate emerging technologies for applicability to health education/promotion
5.3.1 Assess capacity of partners and stakeholders to meet program goals
5.3.5 Elicit feedback from partner(s) and other stakeholders
5.3.6 Evaluate relationships with partners and other stakeholders
5.4.1 Demonstrate how programs align with organizational structure, mission, and goals
5.4.3 Create a rationale to gain or maintain program support
5.4.4 Use various communication strategies to present rationale
5.5.1 Identify potential partner(s)
5.5.8 Conduct program quality assurance/process improvement
5.6.7 Develop strategies to enhance staff member and volunteer professional development
5.6.9 Develop and implement strategies to retain staff members and volunteers
5.6.10 Employ conflict resolution strategies

Area VI: Serve as a health education/health promotion resource person
6.1.1 Assess needs for health related information
6.1.3 Evaluate resource materials for accuracy, relevance, and timeliness
6.1.4 Adapt information for consumer
6.1.5 Convey health-related information to consumer
6.2.1 Assess training needs of potential participants
6.2.3 Identify resources needed to conduct training
6.2.2 Develop a plan for conducting training
6.2.4 Implement planned training
6.2.6 Use evaluative feedback to create future trainings
6.3.3 Provide expert assistance and guidance
6.3.4 Evaluate the effectiveness of the expert assistance provided
Area VII: Communicate, Promote, and Advocate for Health, Health Education/Promotion, and the Profession

7.1.8 Evaluate the impact of the delivered messages
7.2.5 Use strategies that advance advocacy goals
7.2.7 Evaluate advocacy efforts
7.2.9 Lead advocacy initiatives related to health
7.3.2 Assess the impact of existing and proposed policies on health education
7.3.6 Develop policies to promote health using evidence-based findings
7.3.7 Identify factors that influence decision makers
7.3.8 Use policy advocacy techniques to influence decision-makers
7.3.9 Use media advocacy techniques to influence decision makers

7.4.1 Explain the major responsibilities of the health education specialist

Keywords (minimum of 2 required; 3rd keyword optional):

<table>
<thead>
<tr>
<th>Access to Health Care</th>
<th>Breast Cancer</th>
<th>Community Intervention</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acculturation</td>
<td>Cancer Prevention &amp; Control</td>
<td>Community Organization</td>
</tr>
<tr>
<td>Adolescence</td>
<td>Cardiovascular Disease</td>
<td>Computer-Mediated Health Promotion</td>
</tr>
<tr>
<td>Adolescent health</td>
<td>Career Development/Professional Preparation</td>
<td>Consumer Health</td>
</tr>
<tr>
<td>Advocacy</td>
<td>Child/Adolescent Health</td>
<td>Continuing Education</td>
</tr>
<tr>
<td>Aging</td>
<td>Chronic Disease</td>
<td>Cultural Competence</td>
</tr>
<tr>
<td>Aging &amp; Health</td>
<td>Clinical Trials</td>
<td>Diabetes</td>
</tr>
<tr>
<td>Alcohol &amp; Substance abuse</td>
<td>Coalitions</td>
<td>Diet</td>
</tr>
<tr>
<td>Anthropology</td>
<td>College Health</td>
<td>Disaster &amp; Emergency Preparedness</td>
</tr>
<tr>
<td>Behavior Change</td>
<td>Community-Based Participatory Research</td>
<td>Dissemination and Implementation</td>
</tr>
<tr>
<td>Behavioral theories</td>
<td>Community Health</td>
<td>Empowerment</td>
</tr>
<tr>
<td>Environmental and Systems Change</td>
<td>Partnerships / Coalitions</td>
<td>Social Ecology</td>
</tr>
<tr>
<td>Environmental Health</td>
<td>Patient Education</td>
<td>Social inequalities</td>
</tr>
<tr>
<td>Epidemiology</td>
<td>Physical Activity/Exercise</td>
<td>Social influence</td>
</tr>
<tr>
<td>Ethics</td>
<td>Physical Disabilities</td>
<td>Social Marketing / Health Communication</td>
</tr>
<tr>
<td>Evaluation</td>
<td>Program Planning and</td>
<td>Strategic Planning</td>
</tr>
<tr>
<td>Family Health</td>
<td>Evaluation</td>
<td>Substance Abuse</td>
</tr>
<tr>
<td>Genetics / Genomics</td>
<td>Public Health Laws /</td>
<td>Substance Use</td>
</tr>
<tr>
<td>Global health</td>
<td>Policies</td>
<td>Systems Science</td>
</tr>
<tr>
<td>Health Behavior</td>
<td>Qualitative Methods</td>
<td>Technical Assistance</td>
</tr>
<tr>
<td>Health Communication</td>
<td>Quality Assurance /</td>
<td>Technology</td>
</tr>
<tr>
<td>Health Disparities</td>
<td>Quality Improvement</td>
<td>Theory</td>
</tr>
<tr>
<td>Health Education</td>
<td>Quantitative methods</td>
<td>Tobacco Prevention and Control</td>
</tr>
<tr>
<td>Health Literacy</td>
<td>Race/Ethnicity</td>
<td>Training Health Professionals</td>
</tr>
<tr>
<td>Health Policy</td>
<td>Religion &amp; Health</td>
<td>University / College Health</td>
</tr>
<tr>
<td>Health Promotion</td>
<td>Reproductive Health</td>
<td>Violence Prevention</td>
</tr>
<tr>
<td>Health Research</td>
<td>Research Design</td>
<td>Violent Behavior and Prevention</td>
</tr>
<tr>
<td>HIV/AIDS</td>
<td>Resource Development</td>
<td>Women’s Health</td>
</tr>
<tr>
<td>--------------------------</td>
<td>----------------------</td>
<td>---------------------------------</td>
</tr>
<tr>
<td>Immigration Health</td>
<td>Rural Health</td>
<td>Workforce Development</td>
</tr>
<tr>
<td>Immunization</td>
<td>School Health</td>
<td>Worksite Safety &amp; Health</td>
</tr>
<tr>
<td>Injury Prevention / Safety</td>
<td>School-based health care</td>
<td></td>
</tr>
<tr>
<td>International/Crosscultural Health</td>
<td>Sex Behavior</td>
<td></td>
</tr>
<tr>
<td>Lay Health Advisors / Community Health</td>
<td>Sexual Health</td>
<td>Sleep</td>
</tr>
<tr>
<td>Workers</td>
<td>Smoking &amp; Tobacco Use</td>
<td></td>
</tr>
<tr>
<td>Lead</td>
<td>Social Capital</td>
<td></td>
</tr>
<tr>
<td>Lesbian, gay, transgender, bisexual (LGBT)</td>
<td>Social Determinants of Health</td>
<td>Social Ecology</td>
</tr>
<tr>
<td>Maternal and Child Health</td>
<td>Social inequalities</td>
<td></td>
</tr>
<tr>
<td>Measurement Issues</td>
<td>Social influence</td>
<td></td>
</tr>
<tr>
<td>Media</td>
<td>Social Marketing / Health Communication</td>
<td></td>
</tr>
<tr>
<td>Medical Care</td>
<td>Social Policy</td>
<td></td>
</tr>
<tr>
<td>Men’s Health</td>
<td>Strategic Planning</td>
<td></td>
</tr>
<tr>
<td>Mental Health</td>
<td>Substance Abuse</td>
<td></td>
</tr>
<tr>
<td>Men-who-have-sex-with men</td>
<td>Substance use</td>
<td></td>
</tr>
<tr>
<td>Minority Health</td>
<td>Systems Science</td>
<td></td>
</tr>
<tr>
<td>Motivational Interviewing</td>
<td>Technical Assistance</td>
<td></td>
</tr>
<tr>
<td>Nutrition</td>
<td>Technology</td>
<td></td>
</tr>
<tr>
<td>Obesity</td>
<td>Theory</td>
<td></td>
</tr>
<tr>
<td>Oral Health</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Parenting</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Special Topic Area (select one):**

<table>
<thead>
<tr>
<th>Access to care</th>
<th>Continuing education</th>
<th>Food safety</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adolescent and school health</td>
<td>Diabetes</td>
<td>Genomics</td>
</tr>
<tr>
<td>Advocacy</td>
<td>Disability and secondary conditions</td>
<td>Global and cross cultural health</td>
</tr>
<tr>
<td>Anthropology and public health</td>
<td>Environmental health promotion</td>
<td>Health communications/information technology</td>
</tr>
<tr>
<td>Cancer</td>
<td>Family planning</td>
<td></td>
</tr>
</tbody>
</table>

**Primary Health Education Setting (Select One):**

Community-based settings  Patient Education Settings  Other Professional  Global settings  Pre-K through 12th Grade Organizations  Health Care Setting Worksite  Other (Describe):  Non-Governmental Setting  SOPHE and SOPHE Chapters
Special Populations (Select All That Apply):
Adolescent Health
LGBT
Maternal, Infant, Child Health
Minority Populations
Older Adults
Students/Young Adults
New Professionals
Seasoned Professionals
University Faculty

Other (Describe):

Abstract Body (for review): Provide a detailed abstract for review purposes. 400 word maximum. Please use correct grammar, including appropriate capitalization (do not type in all caps).

Brief Abstract (for printing, if selected): Provide a brief version of your abstract for printing in the conference program. 125 word maximum. Please use correct grammar, including appropriate capitalization (do not type in all caps).

Disclosure Statement
SOPHE policy requires potential presenters to disclose any proprietary, financial, professional or other personal interests in the material to be presented. This includes past employment, serving as a consultant, conducting clinical trials, serving on an advisory committee, inclusion in a speaker’s bureau, owning stock, holding patents, etc. As a condition of submission, SOPHE requires that the presenting author check TRUE or FALSE to the following statement:

*I declare that I – and, to the best of my knowledge, any co-authors – have no proprietary, financial, professional or other personal interest of any nature or kind in any product, service and/or company that could be construed as influencing the position presented in, or the evaluation of, the material proposed for presentation in my/our abstract.

True  False
If False: Specify conflict:

Abstract Agreement

If your abstract is accepted for a workshop, concurrent or poster session, you agree to the following: (Click to agree to terms)
Present the work in the session format assigned to you by the Planning Committee and the work described in the abstract.

Register for the conference and assume responsibility for your own registration, lodging and transportation costs. Please note that if an accepted abstract author withdraws with late notice or fails to show, this will impact future opportunities to present at SOPHE meetings.

If selected for an oral presentation, a copy of the presentation must be provided to SOPHE so that it can be made available to attendees as a PDF.
Use clear audiovisuals to support learning objectives.

Understand your presentation may be video & audio taped and made available for continuing education purposes.