



2019 Community Health Conference

Examining Roots to Build Our Healthy Future



October 3 - 4, 2019
Cragun's Conference Center
www.health.state.mn.us/chc
@mnhealth | #MNCHC2019

Conference Schedule



Thursday, October 3

6:45 AM	Main Dining Room	Breakfast (to 8:15 AM - meal ticket required)
8:30 AM	The Centre	Learning Stations and Networking (with refreshments)
10:00 AM	The Centre	Opening Flag and Drum Ceremony, Mille Lacs Band of Ojibwe
10:30 AM	The Centre	Keynote: From Separation to Relationship: How Change Happens in Living Systems, Deborah Frieze
11:45 AM	Main Dining Room	Buffet Lunch (to 12:45 PM - meal ticket required)
1:00 PM	Lakeshore & Paul Bunyan	Concurrent Sessions: Series A (see grid)
2:00 PM		Move Time
2:15 PM	Lakeshore & Paul Bunyan	Concurrent Sessions: Series B
3:15 PM	The Centre	Refreshment Break
3:30 PM	The Centre	General Session Panel: Parental Incarceration is a Shared Sentence. What is the Public Health Response?
4:45 PM		Adjourn for Day
5:00 PM	Marina and Other	Free Time Activities (see flyer)
5:30 PM	Main Dining Room	Buffet Dinner (to 7:00 PM - meal ticket required)
7:00 PM	Various	MPHA Movie Night and Center for Health Equity Bonfire

Friday, October 4

6:45 AM	Main Dining Room	Breakfast (to 8:30 AM - meal ticket required)
8:15 AM	Poolside	Refreshment Break (available 8:15 AM-9:45 AM)
8:30 AM	Lakeshore & Paul Bunyan	Concurrent Sessions: Series C
9:30 AM	Poolside	Refreshment Break (available 8:15 AM-9:45 AM)
9:45 AM	Lakeshore & Paul Bunyan	Concurrent Sessions: Series D
10:45 AM		Move Time
11:00 AM	The Centre	General Session: Lieutenant Governor Peggy Flanagan - Invited
12:00 PM	The Centre	Closing Flag and Drum Ceremony, Mille Lacs Band of Ojibwe followed by Lunch with To-Go Option

WELCOME TO THE 2019 COMMUNITY HEALTH CONFERENCE

The Community Health Conference is a long-standing, annual event for Minnesota's public health community. First held in 1978, its purpose is to strengthen the unique state-local-tribal governmental public health partnership. Designed to build knowledge, skill and capacity in Minnesota's public health system, the conference provides an opportunity to share and celebrate the innovative work occurring in communities throughout the state. Networking is a key component; conference participants are encouraged to connect with new faces and organizations (see *Participants List and maps included in your conference packet*).

Our Theme

Each year, members of the SCHSAC Community Health Conference Planning Workgroup create a theme that highlights common priorities, experiences, and goals shared by conference attendees. Our 2019 theme is: **Examining Roots to Build Our Healthy Future**.

Roots, depending on your perspective, may invoke grounding in culture and community that builds belonging and connection. Roots may prompt you to think of discovering the underlying causes that create healthy outcomes and inequities. Upstream prevention focuses on finding root causes so we can change policies, systems, or environments—rather than only addressing the symptoms.

Examining refers to the ongoing need to assess current conditions and future trends, plan, and then take action. We must know the people and communities we serve, in addition to knowing our own culture, values, and beliefs. Awareness of our own culture enables us to honor differences and respect commonalities.

Our Healthy Future describes many individual and community paths heading toward the same destination—a future where everyone has the opportunity to be healthy. As public health allies, we have a responsibility to work together and engage others in the journey to eliminate health inequities.

Our Learning Objectives

- **Honor** individual contributions and diverse collective experiences in conversations to build understanding
- **Unite** and mobilize across partnerships, communities, cultures, and organizations to improve health for all
- **Share** best practices, knowledge, and lessons learned from our successes, challenges, and failures
- **Anticipate** emerging needs and trends and be willing to adapt to shape our healthy future
- **Inspire** by encouraging each other, welcoming new ideas, celebrating our efforts, and adapting what was learned for our communities

THE COMMUNITY HEALTH CONFERENCE IS SPONSORED BY THE STATE COMMUNITY HEALTH SERVICES ADVISORY COMMITTEE

The State Community Health Services Advisory Committee, known as SCHSAC (pronounced “shack”), was created by the 1976 Community Health Services Act to advise the health commissioner. The committee provides guidance on development, maintenance, financing, and evaluation of community health services in Minnesota. SCHSAC supports the state-local public health partnership through communication and coordination between MDH and local public health agencies. SCHSAC members, representing the 51 community health boards (CHB), are local elected officials, community health services administrators, local public health directors, and community members appointed by their community health boards.

Learn more: www.health.state.mn.us/schsac

Harlan Madsen, 2019 SCHSAC Chair

Commissioner Harlan Madsen has advocated on behalf of the Kandiyohi-Renville Community Health Board for almost 25 years. Since 1996, he has been engaged in SCHSAC workgroups and leadership, including a previous term as Chair. Harlan is a dairy/crop farmer, who frames issues with common sense and engaging stories to educate, enlighten, and seek resolution. He believes SCHSAC’s key responsibilities are to strengthen public health by meeting the needs of both rural and urban community health boards and to support public policies that improve the quality of life for everyone in our state.



2019 SCHSAC CONFERENCE PLANNING WORKGROUP

Sheila Kiscaden*, *Chair, Olmsted County*

Kelsey Andrews, *Des Moines Valley CHB*

Dawn Beck, *Olmsted County*

Barbara Burandt*, *Sherburne County*

Mark Campbell, *YWCA, Minneapolis*

Amy Caron, *Dodge-Steele CHB*

Tarryl Clark*, *Stearns County*

Mayra Davila, *CLUES (Comunidades Latinas Unidas En Servicio)*

Jackie Dionne, *American Indian Health, MDH*

Matt Flory, *Minnesota Public Health Association*

Laura Guzman-Corrales, *Child and Family Health, MDH*

Bobbie Harder*, *Sibley County*

Mohamed Hassan, *Center for Health Equity, MDH*

Chelsie Huntley, *Center for Public Health Practice, MDH*

**indicates Local Elected Official*

Ann Kinney, *Center for Health Statistics, MDH*

Joan Lee*, *Polk County*

Dave Lieser*, *Chippewa County*

Roxana Linares, *Centro Minnesota*

Moses Moe, *Karen Organization of Minnesota*

Bonnie Paulsen, *Bloomington CHB*

Bridget Pouladian, *Center for Health Equity, MDH*

Maggie Rothstein, *Aitkin-Itasca-Koochiching CHB*

Liana Schreiber, *OSHII, MDH*

Becky Sechrist, *Center for Public Health Practice, MDH*

Stan Shanedling, *Health Promotion and Chronic Disease, MDH*

Amy Smith, *Center for Emerg. Preparedness and Response, MDH*

Christine Smith, *OSHII, Tribal Health, MDH*

Duzong Yang, *Environmental Health, MDH*

Jennifer Zipprich, *IDEPC, MDH*

MDH Conference Staff: Liz Arita & Becky Buhler, *Public Health Practice, MDH*



STATE COMMUNITY HEALTH SERVICES ADVISORY COMMITTEE
MDH CENTER FOR PUBLIC HEALTH PRACTICE

HELPFUL INFORMATION

ACCESSIBILITY ASSISTANCE

Please stop by or contact Cragun's Front Desk for assistance with shuttle service, disability parking, and other concerns.

CEUs & CONFERENCE EVALUATION

Continuing education hours will be available for dietitians, health educators, nurses, sanitarians, and general attendees. To receive a certificate of attendance, please complete the online conference evaluation. You will receive the evaluation link via email after the conference.

COFFEE SHOP

Specialty espresso drinks and food will be available for purchase at the poolside Cabana Café. Ask Cragun's Front Desk for café hours. Regular/decaf coffee and tea will be offered at no charge during conference refreshment breaks.

FREE TIME ACTIVITIES

Stop by the Marina on Thursday, 5:00 – 6:00 PM. Cragun's staff will provide paddle boats, canoes and bicycles at no charge for your use. The walking track in the Centre (2nd Floor) will be open on Thursday and Friday, 6:00 AM, for morning strolls.

LIMIT FRAGRANCES

Some individuals have allergies and/or may be sensitive to chemicals found in fragrances. Please respect them by limiting your use of products with fragrances.

MEAL TICKETS

You must show your meal ticket to enter the Dining Room. Individual meal tickets are available at the Front Desk for conference attendees and/or guests who have not purchased a lodging/meals package.

MOTHER'S ROOM

A room is available for use as a lactation room; please pick up the key at Cragun's Front Desk.

PHOTOGRAPHS

Photographs will be taken throughout the conference. If you do not want your photo used, please sign a Photo Opt-out form, available at the Conference Registration Desk.

PRAYER ROOM

The Dutch Room is available for private prayer. Please inquire at Cragun's Front Desk for more information.

PRESENTATION HANDOUTS

Concurrent Sessions and Learning Station presentation slides and handouts are online as presenters have made them available. They will remain on the conference website after the event.

REGISTRATION DESK HOURS

Assistance is available at the Conference Registration Desk in the Main Lobby:

Wednesday: 8:00 AM-6:00 PM

Thursday: 7:30 AM-4:30 PM

Friday: 7:30 AM-11:00 AM

SOCIAL MEDIA

Connect to the conference on Facebook, Twitter and Instagram by using the hashtag **#MNCHC2019**. If you wish to message or mention MDH on any of these platforms, we are @mnhealth.

Funding for this conference was made possible (in part) by the Centers for Disease Control and Prevention. The views expressed in written conference materials or publications and by speakers and moderators do not necessarily reflect the official policies of the Department of Health and Human Services, nor does the mention of trade names, commercial practices, or organizations imply endorsement by the U.S. Government.

Opening Flag and Drum Ceremony

THURSDAY, October 3, 10:00 AM, the Centre

Mille Lacs Band of Ojibwe

Singers from the Mille Lacs Band of Ojibwe will perform an honor song during a procession by the Native American Veteran Color Guard. The flags will remain installed until the singers and guard return on Friday to close the conference.

Learn more: millelacsband.com



Keynote Speaker

THURSDAY, October 3, 10:30 AM-11:45 AM, the Centre

From Separation to Relationship: How Change Happens in Living Systems, Deborah Frieze

Many of our big systems - education, healthcare, government, business - are failing our communities because they no longer have the capacity to fix the problems they were created to solve. These failures persist despite valiant efforts by people of good intent to fix them. What can we do to promote systems that value relationship and well-being over separation, silos, and individual goals?

In this interactive talk, we'll explore the underlying beliefs in our culture about how change happens. It's not always a straight line from start to finish; sometimes it's a curve. Deborah Frieze will share the "two loops" model of change to explain the complexity we face every day. She will help us identify and visualize roles inside and outside of dominant systems. There is a purpose for each of us; we don't all have to be "trailblazers" to influence systems. Deborah will lead us through conversation about ways you can choose to support new ideas, preserve public health values, and transition to new ways of doing things in your own system.



Deborah is an author, entrepreneur, and activist. Her award-winning book (co-authored with Margaret Wheatley), *Walk Out Walk On: A Learning Journey into Communities Daring to Live the Future Now*, profiles pioneering leaders who walked out of organizations failing to contribute to the common good - and walked on to build resilient communities. She is a founding partner of the Boston Impact Initiative, an impact investing fund focused on economic justice. Deborah is also founder of the Old Oak Dojo, an urban learning center where neighbors gather to rediscover how to create healthy and resilient communities.

Learn more: deborahfrieze.com

General Session Panel

THURSDAY, October 3, 3:30 PM-4:45 PM, the Centre

Parental Incarceration is a Shared Sentence. What is the Public Health Response?

Everyone knows someone who has spent at least a night in the county jail. What do you know about the people in Minnesota's county jails and their families? What effects do incarceration and separation have on their children? Children of incarcerated parents are concealed by stigma and lack of awareness about this commonplace adverse childhood experience (ACE).

To give a voice to the child's experience with incarceration, our speakers, who include members of the SCHSAC Children of Incarcerated Parents Workgroup, will share their lived experiences - as an adult child of an incarcerated parent, a caregiver of children with an incarcerated parent, a community leader, and a law enforcement professional.

Public health colleagues, partner agencies, and community organizations will be challenged to take action to mitigate and prevent the negative effects of parental incarceration on children. Hear how the Minnesota Sheriffs' Association is partnering with local public health to initiate changes across systems to increase family resiliency.



Dawn Beck, *Associate Director, Olmsted County Public Health*

Dawn has worked for Olmsted County Public Health Services since 2002. For the past 8 years, she has overseen Environmental Health, Disease Prevention & Control, and Emergency Preparedness. She participates in and leads collaborative efforts aimed at addressing public health concerns including vaccine preventable diseases, water quality, air quality and public health emergencies. She has a keen interest in advocating for children impacted by incarceration. Dawn strives to include those whose lives have been impacted by incarceration in addressing the unique challenges that they encounter.



Bill Hutton, *Executive Director, Minnesota Sheriffs' Association*

Bill is a 33-year veteran law enforcement officer; retiring as the elected Washington County Sheriff after 10.5 years serving the citizens of Washington County. Bill held the positions of patrol officer, detective, sergeant of investigations and patrol, as well as captain of investigations and patrol. Bill has a Master of Arts degree from the University of St. Thomas and is a graduate of the Federal Bureau of Investigations National Academy. Bill joined the Minnesota Sheriffs' Association as the executive director in May of 2017. He co-chairs the SCHSAC Children of Incarcerated Parents Workgroup with Commissioner Sheila Kiscaden, Olmsted County.



John Soghigian, *Early Childhood Resources Advocate and Parent Consultant*

John, a grandfather of children with an incarcerated parent, will share the perspective of caregiver. Currently, he is project facilitator for the Early Childhood Mental Health Initiative in Northern St. Louis County (NSLC), its Relationships First Initiative, and a parent consultant for Minnesota Communities Caring for Children. He is a member of the Northland Healthy Minds NSLC Chapter, the St. Louis County Public Health & Human Services Advisory Committee, the Arrowhead Behavioral Health Initiative Board, the regional Family Home Visiting Advisory Board, and the Early Childhood System Reform Advisory Committee of the Governor's Children's Cabinet.



Tierre Webster, *Executive Director, Next Chapter Ministries*

Children's likelihood of having an incarcerated parent varies by race and ethnicity - 1 in 9 African American children, 1 in 28 Hispanic children, and 1 in 57 white children. As a licensed graduate social worker and an ordained minister in the Church of God in Christ, Tierre has spent much of his professional career in non-profit leadership with an emphasis in human services. His work includes over 15 years of ministering in an urban context with a focus on community development, re-entry, and leadership development. Next Chapter Ministries builds lasting relationships with people impacted by crime and takes an evidence-based, multi-generational, trauma-informed approach.

Learn more about the SCHSAC Workgroup: www.health.state.mn.us/schsac

General Session

FRIDAY, October 4, 11:00 AM-12:00 PM, the Centre

Lieutenant Governor Peggy Flanagan – *Invited*

Peggy Flanagan is Minnesota's 50th Lieutenant Governor. The principle of Peggy's career is giving back, particularly to children, families, communities of color, American Indians, and low-income and working people. As a former State Representative and community organizer, Peggy brings her experiences of building coalitions and advocating for children and families to the Lieutenant Governor's Office, as she works in close partnership with Governor Tim Walz to build One Minnesota. A citizen of the White Earth Nation of Ojibwe, Peggy lives in St. Louis Park with her daughter Siobhan and far-too-energetic dog Reuben.



Learn more: mn.gov/governor/about/peggyflanagan.jsp

Learning Stations

8:30-9:45 AM Thursday

The Centre

Kick off the conference with learning stations and networking! Explore a variety of topics, practices and partnerships focused on building our healthy future. Introduce yourself. Ask questions. Gather ideas. Share your perspective. Enjoy conversation and move at your own pace. Refreshments provided. Use map insert.

STATION 1 - REACHING CHILDREN THROUGH READING: PUBLIC HEALTH STORIES

Susan Metoxen, Jillian Toppari, and Carlene Lange, Minnesota Oral Health Project.

Teach important public health lessons to children and their caregivers by creating an engaging children's book. Each time the book is read, the story and its messages to improve health are reinforced. The Minnesota Oral Health Project team wrote a children's book about tooth brushing, which is available for bulk purchase and online. Techniques and lessons learned during their project will be shared as you go through a truncated process of writing a book. Use the template to get the creative juices flowing for your own story. Presenters will share their experience with the entire process - writing, illustrating, editing, revisions, printing and distribution options. Receive the book, *Bye, Bye Germs*.

STATION 2 - YOUTH TOBACCO CRISIS

Cassandra Stepan, Laura Oliven, and Sharrilyn Helgertz, Minnesota Department of Health.

Minnesota is facing a crisis. With a 50 percent increase in youth e-cigarette use, public health needs new tools and strategies to prevent youth from being exposed to highly addictive and concentrated amounts of nicotine.

Compared to youth who have never used them, youth who have tried e-cigarettes are twice as likely to start smoking in the future. Learn about how you can prevent youth use through public policy and school systems change. Get acquainted with the latest products and receive the School Tobacco Prevention Toolkit.

STATION 3 - TOO MANY MINNESOTANS CAN'T GET DENTAL CARE

Deborah Jacobi, Apple Tree Dental; Crystal Yang, Community Dental Care.

More Minnesotans struggle with access to dental care than to medical care. Tooth decay and periodontal /gum disease are preventable, treatable and effect overall health. Lack of access to dental care results in great disparities in oral health by age, race, income and geography. Representatives from Dental Access Partners, formed by Apple Tree Dental, Community Dental Care, and Hennepin Health, will describe their innovative care delivery models and advocacy efforts. Empower advocates, public employees, community leaders and anyone interested in improving community health. Understand the root causes of oral health disparities. Learn to advocate for improved access to care for your community.

STATION 4 - INTRODUCING HEALTH CONSIDERATIONS INTO A LOCAL POLICY CONVERSATION

Kirsten Kennedy, Chisago County; Dorothy Bliss and Jeannette Raymond, Minnesota Department of Health.

The work of the Healthy Minnesota Partnership is opening up new conversations about what and who creates health. When these conversations center on the conditions in which people can be healthy—such as having a place to call home, supporting families, belonging in school, and shaping healthy environments—they help to advance health equity. Learn about ways to connect issues such as housing, transportation, incarceration, income, paid leave, and other topics to health. How do these "narrative frames" connect to shared values? Explore how this approach could bring a powerful health lens to one of your own local issues. Learn about tools and technical support.

STATION 5 - HEALTHY ENVIRONMENTS FOR CHILDREN

Kathleen Norlien, Anna Schliep, Frieda von Qualen, and Liz Robertson, Minnesota Department of Health.

Because children are still growing and developing, they are uniquely susceptible to health threats from environmental exposure to such things as unsafe drinking water, lead, radon, and asthma-inducing substances. Children may be exposed to harmful chemicals in the air they breathe, the water they drink, or the soil they touch or swallow. *Choose Safe Places Minnesota* identifies and addresses potential

environmental concerns, such as safe drinking water, at or around child care locations. As children grow, they spend about 15,000 hours in school environments with health challenges related to lead, radon, and asthma. Explore best practices and resources to assess and implement solutions to create healthy environments for children of all ages.

STATION 6 - MINNESOTA'S UNINSURED: COMMUNITY DATA

Kathleen Call, University of Minnesota; Meghan Kimmel, Portico Healthnet; Rolanda Mason, Mid-Minnesota Legal Aid.

Discover the MN Uninsured Profile, which provides information about the uninsured in Minnesota one community at a time. Sort and filter basic information by census defined ZIP code and view a profile of the uninsured and the community in which they live. An online companion map helps you orient to the geography. The profile supports targeted outreach and enrollment activities of health insurance navigators, and provides information about the uninsured to Minnesota policymakers as they develop strategies to reach the remaining uninsured in Minnesota.

STATION 7 - IMPROVING PREPARATION OF PUBLIC HEALTH PRECEPTORS

Kathryn Frie, Winona State University; Tammy Fiedler, Wabasha County Public Health.

Students in a baccalaureate nursing program are required to complete public health clinical hours as part of their education. They pair with public health nurses (PHNs) and others who serve as preceptors. Preceptors are role models

who enhance the link between theoretical knowledge and the practice of public health nursing. The Dedicated Education Unit (DEU) is an innovative model that better prepares PHNs and other professionals to serve as preceptors. Its purpose is to create a better experience for preceptors and students, which in turn may increase nursing students' interest in entering the PHN role after graduation. Learn about this innovative opportunity for the professional development of public health staff.

STATION 8 - FOOD, POOLS, AND LODGING PROGRAM EVALUATIONS: MOVING FORWARD IN PARTNERSHIP

Kim Carlton, Minnesota Department of Health; Jason Kloss, Southwest Health and Human Services; Mike Melius, Olmsted County Public Health.

The SCHSAC Environmental Health Continuous Improvement Board (EHCIB) was chartered by the Local Public Health Association and MDH to advance Minnesota's state-local partnership in Environmental Health. The EHCIB's first priority was improving the Food, Pools, and Lodging Services (FPLS) program evaluation process. The evaluation workgroup, a partnership of state and local stakeholders, developed improved performance metrics and evaluation tools, identified minimum required criteria, and identified steps for programs to make improvements. The improved evaluation process will be implemented in 2020. In this learning station, discover the collaborative work done by the workgroup, and learn how to prepare for the new evaluation process.

STATION 9 - ESTABLISHING A YOUTH ADVISORY BOARD

Kirsten Fagerlund and Sarah Reese, Polk County Public Health; Caidyn Johnson, Youth Advisory Board Member

As a youth-serving organization, public health values input from local youth. The Youth Advisory Board, developed last year, provides an opportunity for young people to become involved in governmental public health services. It merges civic engagement and leadership development for high school students. By engaging youth, we are bringing new energy, information, and knowledge into our mission-based work. Learn about board pre-planning/assessment, governance board action, board structure, membership and application process, meeting logistics and agendas and other resources for exploring and establishing your own youth advisory board.

STATION 10 - A DEEPER DIVE INTO PARTNERSHIP: THE MDH HEALTH REGULATION DIVISION

Michelle Larson and Martha Burton-Santibanez, Minnesota Department of Health.

The Health Regulation Division (HRD) monitors compliance with laws and rules designed to protect the health and safety of many of Minnesota's most vulnerable citizens. HRD's sections include Licensing and Certification, Office of Health Facility Complaints, Home Care and Assisted Living Program, Engineering, Case Mix, Health Occupations Program, and Mortuary Science. The division works with other state agencies and local partners to ensure

Minnesotans are well cared for. One of HRD's goals is to provide data, data trends, information, and prevention strategies that help create healthy and positive outcomes for the people who we serve. Bring your questions and let's work together.

STATION 11 - SUPPORTING FAMILIES OF CHILDREN WITH SPECIAL HEALTH CARE NEEDS: A WIN-WIN PARTNERSHIP

Renae Allen, Dakota County Public Health; Heather Pint and Nicole Brown, Minnesota Department of Health.

Children with special health care needs may need extra support to reach their maximum potential and families may be unaware of the services and resources available to help their child. Through collaborative efforts, the MDH and local public health agencies have successfully partnered to help ensure that more children in Minnesota with special health needs have the support and services they need to be healthy and successful. Improved partnerships and data sharing have helped both MDH and local agencies identify the needs of these families and the public health nursing interventions provided as a result.

STATION 12 - ENGAGING BUSINESSES IN BREASTFEEDING INITIATIVES

Megan Hruby, U of M Extension; Tammy Conn, Polk County Public Health; Terri Heggie, Crookston Area Chamber of Commerce & Visitors Bureau.

Polk County Breastfeeding Coalition and partners implemented the Anytime, Anywhere Breastfeeding Initiative by engaging area businesses, restaurants, and other community entities to sign a pledge

supporting breastfeeding mothers throughout their establishments. The committee began with one business in Crookston; the Crookston Chamber became involved, and their representative has taken this initiative to new heights. Businesses agree to educate their staff about the Anytime, Anywhere Breastfeeding law, and a "breastfeeding welcome here" window cling is displayed. Businesses are highlighted on county social media sites and will be mapped on the Public Health website. Be inspired and leave with tools to create the initiative in your own communities.

STATION 13 - YELLOW ZONE: PROMOTING A FLOURISHING COMMUNITY

Brittany Pfannenstien and Danielle Protivinsky, Stearns County Public Health.

Discover the Yellow Zone, an initiative created by Stearns County Public Health to empower schools, work sites, and the community to establish an environment that supports the positive well-being of healthy, productive and flourishing individuals. To flourish means to live within an optimal range of human functioning, one that has high levels of emotional well-being, psychological well-being, and social well-being, according to Dr. Corey Keyes. According to Keyes' research, only 17% of individuals are truly flourishing. Obtain Yellow Zone tools and resources to establish environments that promote well-being through five basic pillars to nurture the psychological, emotional, and social aspects of mental health.

STATION 14 - LOCAL COALITIONS IN ACTION TO REDUCE OPIOIDS, ALCOHOL, TOBACCO, AND OTHER DRUGS

Sue Thompson, Polk County; Kimberly Myers and Sarah Kjono, Norman-Mahnomen Public Health.

Explore coalition building and community engagement strategies for reducing opioids, alcohol, tobacco, and other drugs. Coalitions and communities can be more successful in achieving community-level change related to preventing substance use when strategies are part of a comprehensive plan that targets individuals and impacts the shared community environment. Local assessment (ex. Norman-Mahnomen youth survey), coalition community engagement strategies (ex. engaging your local banker), framework (ex. Polk County), infographic and call to action will be shared with participants. Discover seven strategies for community change and the National Safety Council Community Action Toolkit for cross-sectoral collaboration.

STATION 15 - CONNECTING FAMILIES TO EARLY CHILDHOOD AND PRENATAL RESOURCES

Katy Schalla and Shawn Holmes, Minnesota Department of Health.

How do you support connection and equity for pregnant and parenting families in Minnesota, and help them learn about and access all the different types of services that are available? A foundational piece is a one-stop, up-to-date, searchable by need, online navigator of existing public resources. Minnesota is developing this through engagement with statewide early childhood community and tribal partners,

and building on existing systems for efficiency. Learn about the innovative work of Minnesota's Preschool Developmental Grant to support families with young children who are experiencing racial, geographic and economic inequities so they can be born healthy and thrive within their families and community. Test out the navigator.

STATION 16 - TAKING RIDESHARE! EXPANDING TRANSPORTATION OPTIONS ONE PERSON AT A TIME

Jess Luce and Robyn Bernardy, Dakota County.

Transportation options provide independence and allow for community access and more successful Aging in Place/Community. rideshare options (Uber/Lyft) are a valuable, on-demand transportation option that can open up many possibilities for individuals and lead to encouraging outcomes. Learn about Dakota County's partnership with Lyft and how that has positively impacted individuals. Find out more about the travel training program to help support riders to learn how to use rideshare options. Explore community partnerships that could support riders in your community.

STATION 17 - NONTRADITIONAL PARTNERSHIPS IN COMMUNITY GARDENS

Anna Oldenburg and Pa Houa Moua, Olmsted County Public Health.

Connecting people to food promotes health equity. Learn how one county health department is using community gardening to advance public health practice through unique partnerships and place-based strategies. Walk away with fresh ideas for

expanding their own community gardens. Learn about Seed Savers Program, community gardens for diverse gardeners, a chemical dependency recovery center, school garden produce delivered to low income communities via the bookmobile, and residential gardens at public housing locations. Think about one location in your community to implement a place-based garden strategy.

STATION 18 - SUICIDE PREVENTION LIFELINE AND MENTAL HEALTH IN RURAL AREAS

Maggie Wick, Soniya Coutihn, and Leah Guy, Minnesota Department of Health.

Suicide is the eighth leading cause of death in Minnesota. Minnesota has implemented a prevention plan based on the National Strategy for Suicide Prevention with the ultimate goal of achieving zero deaths by suicide. Closely associated with these efforts is the establishment of a Minnesota based National Suicide Prevention Lifeline (NSPL). Minnesota currently has zero NSPL certified in-state call centers. Establishing a local NSPL presence will provide access to local crisis counselors and resources necessary to combat suicide risk. A new, innovative methodology to define and describe farm-related suicide will allow MDH to recommend prevention strategies specific to farmers and their families.

STATION 19 - BUILDING AUTHENTIC PARTNERSHIPS IN STRATEGIC PLANNING: MATERNAL AND CHILD HEALTH POPULATIONS

Amanda Larson, Sherburne County Health and Human Services; Joan Brandt and Sarah Dunne, Minnesota Department of Health.

Over the past year, the MDH Child and Family Health Division has engaged with the community to conduct a comprehensive assessment of the health and well-being of the state's maternal and child health (MCH) populations. Our next step is a community-focused process for setting and implementing strategies, which will be incorporated into a statewide strategic plan that will guide work on improving MCH systems going forward. From December 2019 – March 2020, community partners will participate on "strategy teams" to address the priority needs identified during the assessment. If you are interested in participating on a Strategy Team, stop by to learn more about our strategy development process and sign up.

STATION 20 - PLANNING SHIP 2021-2026: SHARING UPDATES AND GATHERING INPUT

Susan Michels, Minnesota Department of Health.

The next Statewide Health Improvement Partnership (SHIP) contract begins Nov. 1, 2020. Per statute language, SHIP will "address the top three leading preventable causes of illness and death such as tobacco use or exposure, poor diet, and lack of regular physical activity, and other issues as determined by the commissioner through the statewide health assessment." While there are many layers to this plan, we will begin with three work groups: Diet, Activity, and Commercial Tobacco Exposure. Additional groups to address technical assistance, communication, and technical requirements including the funding formula will begin in January 2020. Stop by to learn about the planning process.

Concurrent Sessions Series A 1:00-2:00 PM Thursday

Use the concurrent session insert, organized by time and theme, to help you plan the sessions you will attend. Find materials online for presentations as speakers have made them available: www.health.state.mn.us/chc.

A1 LAKESHORE 1

HOME VISITING PERSPECTIVES IN AFRICAN-AMERICAN AND AMERICAN INDIAN COMMUNITIES

Sharon Cross, Saint Paul-Ramsey County Public Health; Karen Gray and Nora Hall, GrayHall LLP; Laura Dorn and Barbara Fairbanks, American Indian Family Center.

Funded by an MDH Evidence-Based Family Home Visiting Grant, Saint Paul-Ramsey County Public Health formed an authentic, community-engaged planning partnership with the American Indian Family Center and GrayHall to explore and identify barriers to participation with African-American and American Indian families. Information was gathered from 698 mothers, fathers, elders, youth, and community members. The results shared suggest new directions and opportunities for home visiting programs to offer services which are consistent and representative of the beliefs and desires of these communities. Learn how you might apply these findings to your own health equity work.

A2 LAKESHORE 2

THE ELECTED OFFICIAL PLAYBOOK FOR A PUBLIC HEALTH CRISIS

Commissioner Susan Morris, Isanti County; Commissioner Dave Lieser, Chippewa County; Cheryl Petersen-Kroeber and Deb Radi; Minnesota Department of Health.

Explore the role of local elected officials during a public health crisis. Learn how public health emergencies differ from traditional emergencies. Review and provide input on a playbook for local elected officials. Through this project with the National Governors Association, Minnesota has reviewed legal, administrative, and jurisdictional issues that impact rapid and effective response to public health emergencies. County commissioners with state agency partners participated on the "Minnesota Team" to develop a public health emergencies playbook for elected officials. Join us and share your input to finalize this resource.

A3 LAKESHORE 3

CONCURRENT SESSION CANCELLED

A4 LAKESHORE 4

MAKING ALZHEIMER'S THE NEXT PUBLIC HEALTH SUCCESS STORY IN MINNESOTA

Prasida Khanal, Minnesota Department of Health; Beth McMullen, Alzheimer's Association Minnesota-North Dakota Chapter.

A distinctive ring of communities in Greater Minnesota has a high proportion of older adults living in their homes. These naturally-occurring retirement communities are likely to have many adults with Alzheimer's disease or other related dementias. To respond to these impending needs, the

Alzheimer's Association and CDC recently released the Healthy Brain Initiative Road Map, which provides public health agencies with 25 actions to quickly and strategically prepare communities as the prevalence of Alzheimer's grows. The Minnesota Department of Health is actively implementing this road map. Learn about ways to identify naturally-occurring retirement communities throughout Minnesota, and about a project to train community health workers in basic oral health care for adults with dementia.

A5 PAUL BUNYAN 2**CARLTON COUNTY JAIL: BUILDING BRIDGES TO A MORE SUCCESSFUL TOMORROW**

Holly Compo, Carlton County Public Health & Human Services; Stephanie Upton, Carlton County Jail.

Across Minnesota, jails are struggling for new ways to reach their inmate population and create lasting change. By building working relationships with community partners, including the Fond du Lac Band of Lake Superior Chippewa, the Carlton County Jail and Carlton County Public Health & Human Services ensure that county inmates are able to access a variety of innovative programs while incarcerated. Presenters will share many of the programs facilitated by this partnership and discuss the long-term effects they hope to have on the inmate population. One featured program is the Family Friendly Visiting Initiative, which allows for closer interaction of inmates and their children made possible in part with support from local partners. Note: Fond du Lac staff participated in developing this session but cannot attend.

A6 PAUL BUNYAN 1**HEALING FROM TRAUMA: TIPS AND TECHNIQUES FOR RESILIENCE**

Suzanne Koepplinger, Catalyst Initiative of The Minneapolis Foundation; Marnita Schroedl, Marnita's Table.

The convening series, Healing from Trauma, allows community-based problem solving through authentic cross-cultural and intergenerational engagement. Presenters will share what they have uncovered addressing stress and trauma through culturally appropriate methods. This process welcomes those who are typically left out of the conversation and mostly talked to, about or at. Learn Catalyst's approach to building a culture of integrative health and healing in community along with the strategic partnership with Marnita's Table and its Intentional Social Interaction (IZI) model. Practice some new tools to activate and foster relationships built on respect and reciprocity to increase health outcomes and decrease disparities.

A7 PAUL BUNYAN 3 & 4**PREVENTING TEEN DATING VIOLENCE**

Traci Thomas-Card and Maret Banks, Standpoint.

One-third of adolescents in the U.S. is a victim of physical, sexual, emotional or verbal abuse from a dating partner. Working in all 87 Minnesota counties, Standpoint sees an increased need to provide education around the violence that youth experience, not only to youth themselves, but also to the guardians, parents, and professionals that engage with young people on a daily basis. Presenters

have extensive experience doing direct service work with victims and doing prevention training across the state. They have experience with LGBTQ2SIA+ college student population, intersectionality, mental health support, advocacy, suicide prevention, and crisis intervention.

Concurrent Sessions Series B 2:15-3:15 PM Thursday

Use the concurrent session insert, organized by time and theme, to help you plan the sessions you will attend. Find materials online at www.health.state.mn.us/chc.

B1 LAKESHORE 3

TRIBAL WISDOM PROJECT: ACES AND TRAUMA-INFORMED PRACTICES

Chris Matter, Center for Prevention at Blue Cross and Blue Shield of Minnesota; Linsey McMurrin, Minnesota Communities Caring for Children; Briana Michels, U of M Extension.

Minnesota Communities Caring for Children worked to increase awareness of Adverse Childhood Experiences (ACEs) in American Indian communities and to engage community members in building resilience strategies to address the intergenerational transmission of ACEs and related health impacts. Addressing healing from historical trauma is a necessary precursor to any intervention targeting specific health behaviors. Even with persistent health disparities, American Indian communities possess cultural assets that can improve health outcomes including extended family and kinship ties; a shared sense of collective community responsibility; retention and reclamation of traditional language and cultural practices; and indigenous generational knowledge and wisdom. Learn about solutions to interrupt the harmful cycle of toxic stress across generations.

B2 LAKESHORE 4

COLLABORATING TO PREVENT, RESCUE, AND TREAT OPIOID USE DISORDER

Julie Bauch, Hennepin County; Nathan Erickson, Hennepin Healthcare Addiction Medicine Clinic.

Collaborations made by the local health department with community, city, and state stakeholders are important for responding to the opioid crisis. In Hennepin County, opioid overdoses have killed over 700 people since 2012. Learn about Hennepin County's Opioid Prevention Strategic Framework and its strategies. County Public Health, Human Services, and Public Safety share data to inform decisions regarding their shared intersections with the opioid crisis. Community engagement is critical to the success of the Framework. Relationships with governmental, non-governmental, non-profit, and community partners have greatly influenced the prioritization of strategies, and have assured successful implementation of opioid response interventions.

B3 LAKESHORE 2**#LOVEYOURSKIN: SKIN LIGHTENING'S
SOCIAL AND HEALTH HARMS**

Michelle Gin, Minnesota Department of Health; Jameson Liu, HmongTown Marketplace; Michael Xiong, Minnesota Pollution Control Agency.

Some "beauty" products have more toxic chemicals than other consumer products and are predominately used by communities of color. Understand the root cause of why communities of color are often unknowingly exposed to harmful and toxic chemicals in the process of trying to lighten their skin. Learn about the efforts, represented by the social media hashtag #LoveYourSkin, to protect these communities. Look at how multiagency, community, and academic efforts have coalesced to discuss the health and social impacts within communities of color, focusing on the educational efforts within the Hmong community. Hear about a funding opportunity to increase awareness.

B4 PAUL BUNYAN 3 & 4**WHY AND HOW RURAL TOBACCO USE IS
DIFFERENT: DEVELOPING SPECIALIZED
RESPONSES**

Sharrilyn Helgertz and Cassandra Stepan, Minnesota Department of Health.

The Minnesota Youth Tobacco Survey shows long-standing differences in tobacco use between rural and non-rural youth. Tobacco maintains its hold in rural areas due to decades of targeted marketing by the industry, leading to the integration of use into rural culture. Rural public health practitioners face a dual challenge—they

must combat the public health threat of e-cigarettes while finding new ways to drive down use of smokeless tobacco. Learn more about a social branding campaign that authentically addresses the unique values and interests of rural youth to shift social norms by separating tobacco use from popular activities, like hunting and "mudding."

B5 LAKESHORE 1**TEACHING CHILDREN COPING STRATEGIES
FOR CHRONIC STRESS**

Janet Guderian and Carrie O'Neill, Olmsted County Public Health.

Resiliency education helps children learn about their brain along with coping strategies to help foster social and emotional awareness. Data shows that Adverse Childhood Experiences (ACEs) put youth at risk for alcohol and drug misuse, mental health problems, and suicidal behaviors. However, protective factors, such as empowerment and social competency, can buffer risk factors even among youth with high ACE scores. Learn how the Olmsted County School Public Health Nurses adapted and implemented MindUp curriculum in their schools. Discover how your community could employ this preventive mental health approach to reduce the significant mental health crisis seen from childhood through adulthood.

BUILDING THE CAPACITY OF GRASSROOTS AGENCIES TO PREVENT COMMUNITY VIOLENCE

Coral Garner and Erin Sikkink, Minneapolis Health Department; Nikki McComb, Art is My Weapon.

The Blueprint Approved Institute (BPAI) is a capacity building initiative aimed at strengthening community-based agencies' ability to deliver effective and community-driven violence prevention work. Recently selected as a Model Practice by the National Association of County and City Health Officials (NACCHO), BPAI demonstrates exemplary and replicable qualities in response to a local public health need. It reflects collaboration and innovation with demonstrated value through evaluation. The Institute builds capacity for small organizations and individuals working with urban youth and families at higher risk of exposure to community violence. Learn from an agency that participated in BPAI about the skill-building and organizational development opportunities.

B7 PAUL BUNYAN 1**HOMELESS? FORMERLY INCARCERATED? RUN WITH MILE IN MY SHOES**

Monica Nilsson, Homeless Advocate/Mile in My Shoes Board Member, with Mile in My Shoes participants.

Mile in My Shoes brings people from different races, socioeconomic classes and abilities together to change perceptions and change lives through the power of running. Through teams at shelters and re-

entry sites for people experiencing homelessness or re-entry from incarceration, MIMS participants set goals, build connection, finish races and improve health. So many health initiatives are created to do for someone with health disparities instead of with them – MIMS teams are proving that community engagement through a shared goal changes lives. Hear from a panel about the success and challenges of 1000 runners in this six-year-old program.

Concurrent Sessions Series C 8:30 - 9:30 AM Friday

Use the concurrent session insert, organized by time and theme, to help you plan the sessions you will attend. Find materials online at www.health.state.mn.us/chc.

C1 PAUL BUNYAN 1

AN INDIGENOUS-DRIVEN EVALUATION FRAMEWORK: STRENGTHENING TRIBAL AND STATE COLLABORATION

Ann Zukoski and Christine Smith, Minnesota Department of Health; Ryan Eagle and Vanessa Tibbitts, American Indian Health Resource Center, NDSU.

New frameworks and practices are needed to support the design and evaluation of effective and culturally appropriate approaches that promote health and equity. The Minnesota Department of Health (MDH) partnered with the American Indian Public Health Resource Center, North Dakota State University, and Minnesota Tribes to apply an indigenous evaluation framework to evaluate the Tribal Statewide Health Improvement Partnership (Tribal SHIP) and Tribal Tobacco Program evaluation. This groundbreaking work is setting the stage for how a state agency will support and co-create evaluations with tribal and community partners in the future. Learn how this collaborative process has identified new pathways to achieving population-level health improvements.

C2 LAKESHORE 2

STATE REGULATORY ACTION IMPACTS ON COUNTY GOVERNMENT

Susan Winkelmann, Minnesota Department of Health.

Tensions can exist between a state regulatory agency and county government during a state regulatory action even though everyone has the same goals to protect the health and safety of vulnerable adults. This presentation will explain the MDH's Health Regulation Division's overall authority and specifically inform about nursing home receiverships and home care license restrictions. Learn more about the state's perspectives and challenges around the topics of understanding roles and legal boundaries, data protection and sharing, identifying the stakeholders, and making decisions that will protect the vulnerable adults involved. Finally, please join a conversation about how we can teach each other about our roles, laws, and perspectives in advance of the emergencies that bring us together.

C3 LAKESHORE 1

COLLABORATING TO PREVENT HEPATITIS A

Genny Grilli and Kristin Hardy, Minnesota Department of Health; Jenny Barta and Holly Compo, Carlton County Public Health & Human Services.

Minnesota declared a hepatitis A outbreak in early August. Since 2016, there have been numerous hepatitis A outbreaks occurring across the U.S. primarily affecting persons who use injection and non-injection drugs, persons experiencing homelessness, persons with current or recent incarceration, and men who have sex with men. Hepatitis A is a serious liver disease,

which can lead to hospitalization and even death. Carlton County and the Minnesota Department of Health collaborate to address unique risk factors for these outbreaks through vaccinations in the jail and other high impact settings. Discuss the strategies used, success, challenges, and lessons learned. Identify opportunities at the local level to collaborate on prevention efforts for hepatitis A in at-risk communities.

C4 PAUL BUNYAN 2**DARING TOBACCO POLICIES IN GREATER MINNESOTA'S SMALL COUNTIES**

Jason McCoy, PartnerSHIP4Health; Kelly McIntee and Pat McKone, American Lung Association.

Minnesota communities have begun engaging in bold tobacco policies such as Tobacco 21 and flavor restrictions. Engage with people from the American Lung Association and Local Public Health. Learn about the successes and challenges of organizing volunteers, working with decision makers and media. Presenters represent Greater Minnesota working in communities with populations between 1,000 and 50,000. Learn strategies your community can use to engage community members and how to work with local opposition. See how the communities moved forward with implementation strategies after a successful policy adoption.

C5 PAUL BUNYAN 3 & 4**SUPPORTING CHILDREN OF INCARCERATED PARENTS IN WASHINGTON COUNTY**

Roger Heinen, Washington County Sheriff

If you are inspired to take action by Thursday's afternoon general session, delve into the work that Washington County Jail has been doing to better support the children of parents incarcerated in the jail. The work is a great example of implementing promising practices and capitalizing on cross-sector partnerships. The working relationship between the sheriff's department and the county public health department is a model worth highlighting to emphasize the value of partnerships to address the challenges of families impacted by incarceration.

C6 LAKESHORE 3**NURTURED PARTNERSHIPS GROW STRONG**

Renee Frauendienst and Becky Bales Cramlet, Stearns County Human Services; and Katy Kirchner, CentraCare.

Just like trees, strong and productive partnerships do not just appear. They both begin with a seed that must be nurtured in the right conditions. Creating partnerships and connecting partners is a role for public health. Discover what community initiatives have grown or flourish from that initial seed. Stearns County and CentraCare will share lessons learned and how their partnership supported projects such as: community health assessments/community health improvement plans, WIC services, ACEs Collaborative, SHIP electronic health record data analysis project, a mental health initiative, and the creation of an electronic process for home visiting referrals in a four county expansion project. Learn how you can create partnerships in your community.

ROOT CAUSES OF COMMERCIAL SEXUAL EXPLOITATION

*Noelle Volin, Men As Peacemakers;
Caroline Palmer, Minnesota Department of
Health; Lauren Martin, University of
Minnesota School of Nursing.*

Minnesota established itself as a national leader in addressing sex trafficking through Safe Harbor for Sexually Exploited Youth law and No Wrong Door statewide response model. Now the conversation is expanding to include adult victims. Using a primary prevention approach to commercial sexual exploitation goes beyond changing Minnesota's criminal statutes. Identify the next steps to protect the safety, health, and dignity of victims and survivors of all ages. Stigma, racialized oppression, and poverty are among the root causes to address. Get ready-to-implement, primary prevention tools to help communities connect with those most impacted by exploitation and oppression to create tangible community-level change.

Concurrent Sessions Series D 9:45 - 10:45 AM Friday

Use the concurrent session insert, organized by time and theme, to help you plan the sessions you will attend. Find materials online at www.health.state.mn.us/chc.

D1 LAKESHORE 1

PROMOTING HEALTHY SEXUALITY: A TRAUMA-INFORMED APPROACH

Tamika-Jo Andy and Anna Goldtooth, Planned Parenthood North Central States.

Sexuality is one aspect that makes up a person's well-being, but we do not often have the safe space to talk about it. Planned Parenthood North Central staff will share their experience of promoting healthy sexuality in the native community. Both presenters are native and can share their perspective. Discover how sexuality discussions happen with youth and adults using a trauma informed approach. Explore your own values around sexuality and gain an understanding of holistic sexuality. Leave with concrete tools and resources to help facilitate conversations around sexuality with communities they serve.

D2 PAUL BUNYAN 1

MOVING REGIONAL PARTNERSHIPS FORWARD: FULL-SCALE EXERCISE PLANNING

Eric Weller, South Central Health Care Coalition; Michelle Steinbeisser and Karen Moritz, Brown County Public Health.

Partnerships are key to successful public health emergency preparedness and response. Local Public Health, health care partners, MDH and other partners are planning a full-scale exercise in 2020. In the South Central Region, planning for this

exercise has created opportunities for new partnerships, including local colleges and long-term care providers. Preparation for 2020 has provided opportunities to explore new dimensions in relationships with existing partners such as hospitals. Presenters will share approaches and lessons learned through our planning for this exercise that could apply to your region and its health care coalition. Know the advantages of having regional partners when responding to a public health emergency.

D3 LAKESHORE 4

COMMUNITY-INFORMED POLICY APPROACHES TO RETHINK YOUR DRINK

Mary LaGarde-Agnew, Minneapolis American Indian Center; Teresa Ambroz, Minnesota Department of Health; Patty Bowler, Minneapolis Health Department.

Look at new community-informed ways to promote "Rethink Your Drink," an initiative to address a root cause of obesity—sugary drink consumption in low-income communities. Discuss a range of policies to promote healthier beverage consumption and reduce health disparities. Learn about the CHOICES study examining the potential impact of a statewide excise tax on sugary drinks. Discuss the Minneapolis Healthier Beverage Leadership Team's community capacity building campaign to change beverage consumption policies in community settings such as the Minneapolis American Indian Center and North

Minneapolis agencies. Examine perceptions about tap water safety in refugee and immigrant communities that deter water consumption.

D4 PAUL BUNYAN 3 & 4**HEALTHY AGING: MINNESOTA'S NEW ASSISTED LIVING PROGRAM**

Mary Absolon and Lindsey Krueger, Minnesota Department of Health; Sean Burke, Minnesota Elder Justice Center.

In June 2019, Minnesota Governor Walz signed the Minnesota Assisted Living bill. This new, formal assisted living program is the result of over two years of intense stakeholder partnership between MDH, legislators, provider groups, and advocates. Learn more about how the new program serves our aging population including its implementation plan and a comparison to the homecare program. Ask questions and participate in a discussion about potential local impacts in your community.

D5 PAUL BUNYAN 2**IMPLEMENTING PUBLIC HEALTH 3.0: RESOURCES FOR SMALL, MEDIUM AND LARGE PUBLIC HEALTH DEPARTMENTS**

Julie Hatch and Graham Briggs, Olmsted County Public Health.

Public Health 3.0 is a national model and major upgrade in public health practice to emphasize cross-sectoral environmental, policy, and systems-level actions that directly affect the social determinants of health and advance health equity. What this looks like and how it is implemented in local public health departments varies depending on resource availability. Join Olmsted County as they share their

progress, tools, and lessons learned on their Public Health 3.0 journey and join the dialogue about challenges and resources needed to strengthen public health practice in small, medium, and large public health departments.

D6 LAKESHORE 2**THE YOUTH E-CIGARETTE EPIDEMIC: POLICY AND EQUITY APPROACHES**

Natalie Hemmerich and Rachel Callanan, Public Health Law Center.

Minnesota is experiencing a youth e-cigarette epidemic threatening to erase years of progress towards reducing commercial tobacco harms. Many Minnesota communities have responded with strategic policy initiatives such as regulating minimum price or package size for commercial tobacco products, prohibiting discounts, and restricting the sale of flavored products. Simultaneously, but perhaps less well-known, a sweeping number of communities also determined that outdated approaches penalizing addicted youth had to be eliminated because they are inconsistent with health equity, modern science, and social justice. Discuss the history of penalties for youth in commercial tobacco control and new policies that focus on health equity and effectiveness.

**BOLD! DEVELOPING INNOVATIVE
SOLUTIONS IN RESPONSE TO CHANGING
COMMUNITY NEEDS**

*Michelle Basham and Christina Woodlee,
The Bridge for Youth.*

Nightly in Minnesota, over 6,000 youth experience homelessness. More than one-third of these youth—over 2,000—are pregnant or parenting, and there are less than 10 site-based units designated as age-appropriate and safe, specifically for homeless teen parents. Learn how The Bridge for Youth, which serves homeless, runaway and abandoned youth, ages 10-22 years old, employs bold leadership and collaboration across sectors to interrupt the cycle of intergenerational homelessness disproportionately affecting individuals of color. The Bridge recently opened Marlene's Place to house homeless and parenting youth. Learn how they leveraged innovative investment to prevent crisis and promote healthy communities. Be inspired to take action to drive community change.

Notes