



AMERICAN PUBLIC HEALTH ASSOCIATION

For science. For action. For health.

Guidelines for The new APHA for Component groups

APRIL 2014

A message from APHA's executive director

The new APHA is about people – our members, staff, partners and supporters - joining together as a community. It's about better understanding our values as an organization and infusing a new energy and confidence in the pursuit of our mission. It's about ensuring that how we work and what we work on moves us closer toward achieving our mission.

Our vision: Create the healthiest nation in one generation

Our Mission: Improve the health of the public and achieve equity in health status

The new APHA is critical to our effectiveness as an organization. It helps bring attention to our work, rally people to our cause and strengthen our impact. In order to resonate with our members and supporters APHA's new brand must be applied consistently in all APHA-related communications. These guidelines have been prepared to help APHA staff, members, affiliated organizations and supporters understand APHA's new brand and apply it in a uniform manner.

Now is an exciting time of change, with the potential for great advances in the public's health. Thank you for everything you do to help APHA create the healthiest nation in one generation.

Sincerely,

A handwritten signature in black ink that reads "Georges C. Benjamin". The signature is fluid and cursive, with the first letters of each name being capitalized and prominent.

Georges C. Benjamin, MD
APHA Executive Director

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A. The new APHA: Our Value

Our value is what we deliver, our unique promise, the benefit for which others seek us out.

APHA is a global **community of public health professionals and the collective voice for the health of the public**. APHA is the only organization that **combines 140-plus years of perspective, a broad-based constituency and the ability to influence federal policy** to advocate for and improve the public's health.

APHA improves the health of all people and all communities by:

- supporting professionals in ways that help them do their jobs better;
- creating understanding, engagement and support for key public health issues; and
- directly influencing public policy to improve health globally.

B. The new APHA: Our Values

Our values convey the organization's soul and define the way we achieve our mission. They are at the heart of what we do and are the primary drivers for our work.

APHA's brand reflects these values for the organization as it exists today and where it plans to go in the future. As such, APHA's brand values blend existing values with aspirational values. The values below ground APHA's work and should be embodied in all communication and interactions.

APHA stands for:

- **Community** – We are a “home” for people who share a commitment to population health. We believe we have greater potential for impact when we create community to solve problems, share new ideas and explore different perspectives.
- **Science and evidence-based decision-making** – The best policies and practices are ones based on research, with evidence that demonstrates effectiveness. The best innovations come from testing of new ideas and approaches.
- **Health equity** – We believe in healthy people and communities – that means **all** people and **all** communities.
- **Prevention and wellness** – Preventing disease and injury, mitigating the impact of disasters through preparedness and ensuring an environment where the healthy choice is the easy choice are worthwhile investments that lead to an overall improved human condition.
- **Real progress in improving health** – Our effort must result in forward movement in health impact. Sometimes that is a leap forward and other times incremental, but always is real progress.

C. The new APHA: Our Voice

Our voice is our personality, our outward face and the lasting impression we aim to create among key audiences.

APHA's voice reflects our value as both a community for public health professionals AND a collective voice for public health. As such it is:

- **Representative** of the broad constituency within APHA as well as those outside APHA who care about the public's health;
- **Engaging, personable and passionate** about the value of who and what APHA represents;
- **Approachable** in that people see themselves within APHA and join the effort;
- **Credible** because the organization is knowledgeable and values science-based decision making; and
- **Confident and strong**, enabling effectiveness.

A. Overview

These guidelines are provided to help American Public Health Association staff, members and supporters correctly use APHA's Component logo to indicate their relationship with APHA.

All component group communication materials on behalf of, or in partnership with APHA must include the APHA Component logo or an approved version of the APHA logo. The APHA Component logo is approved for use by official components of the association including APHA Sections, APHA Special Primary Interest Groups, APHA Student Assembly and APHA Forums.

Caucuses and APHA affiliated state associations should refer to the APHA brand guidelines for affiliated organizations located at www.apha.org/guidelines.

Important: APHA approval required

APHA's logo is a registered trademark of the American Public Health Association. All uses of APHA's logo including print, video and online must receive prior APHA approval before publishing and be in adherence with these guidelines. For questions and requests for approval contact us using the online form found at www.apha.org/guidelines

B. Logo Components

The APHA logo is the most visible identification of our brand. The logo plays a critical role in ensuring that people recognize us and associate our efforts and accomplishments with the association.

The APHA Component logo has been designed to carry a strong APHA look and feel with a consistent image, typeface and color scheme, while still allowing differentiation for the Component group. This synergy allows the Component to gain credibility and stature from the APHA brand, while also adding strength to the APHA brand through its association with the work and expertise of Components. This two-way re-enforcement is an important element of the new APHA branding strategy.



B. Logo Components

The APHA Component logo is comprised of three components. Unless specifically addressed in these guidelines, all three components must be present when using the APHA Component logo. The APHA Component logo cannot be changed or combined with another logo without prior approval.

Mark

The mark (the triskelion) is the pictorial element of the APHA logo. It represents the unity and diversity of APHA's membership and programs.



Logotype

APHA's logotype is the APHA acronym set in a customized typeface.

Component Name

The APHA Component name is prominently spelled out to clearly identify the group and indicate its importance within the organization.

B. Component group primary color

The mark and the APHA acronym are fixed parts of the logo and cannot be changed. These elements build the strong association between APHA and the component group.

To allow a distinctive look for the component group, each group may select the color of the component name from the six color options on this page. APHA blue (pms 300) is reserved for the APHA acronym only.

The choice of color is intended to be a long-term selection for each component. A color change will only be allowed after a minimum of three years.



C. Logo Colors

The APHA Component logo can be produced in four color, black, and white. Do not assign any other colors to the logo. When printing one-color documents, use the black-only version of the logo in your layouts.



D. Minimum Size

It is preferred that the APHA Component logo be used in its full spelled out form. To ensure legibility, the logotype should be a minimum of one inch. In unique situations, when small space limitations do not allow for the use of the full logo, a section acronym may be used. APHA approval is required.

Preferred use (minimum size):



**Logotype width 1 inch or greater:
Use complete logo with component name**

If space does not allow a logo of the above minimum size, use the acronym version:



E. Clear Space

To enhance presentation and ensure readability, leave sufficient clear space around the logo. As a general rule of thumb, the clear space surrounding the logo on all four sides should be at minimum the full diameter of the triskelion at whatever size the logo is used. Do not place photos, typography or other graphic elements inside the minimum clear space.

Full diameter of the triskelion



F. Incorrect Use

1. Don't reposition, re-size or separate parts of the logo.
2. Don't recolor the logo.
3. Don't make a pattern or texture out of the logo.
4. Don't apply any effects to the logo.
5. Don't overlap text or other graphics on the logo – follow clear space requirements.
6. Don't alter the transparency of the logo.
7. Don't rotate the logo.



G. Logo files

It is critical that the proper art file of the logo is used on all materials. Do not copy the logo from a website or other online materials as it may become distorted when used in another application.

APHA staff will help you identify the correct art file for your project. Requests can be submitted using the online request form found at www.apha.org/guidelines. Requests will typically be fulfilled within 3 business days.

Art files for APHA Component logos are provided in TIFF, GIF, EPS, and PNG formats. If you need to re-size the logo only use the EPS file to ensure clear replication at the desired size.

If you have questions or need help developing the correct size logo in the file format you require please contact us using the online form found at www.apha.org/guidelines.

H. Social media treatment

Social media platforms often offer very small spaces for branding. Where possible use the full APHA Component logo somewhere on the platform to ensure the best branding. In smaller space situations use specially designed Component icons. It is important that social media platforms both clearly identify the sponsoring APHA Component and ensure a clear distinction from general APHA sponsored social media platforms. Component icons will be provided upon request. You may use the page design noted below or design a look more specific to your Component. To request materials use the online request form located at www.apha.org/guidelines.

Component social media page design example:



Component icon for use as identifier on posts:

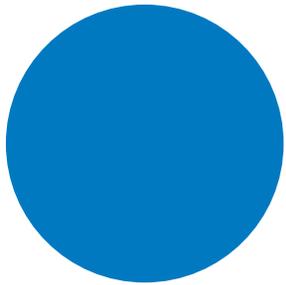


A. Visual design considerations overview

Visual design plays an important role in the communicating the APHA brand beyond the use of the logo. Colors, photography and document design all work together to make a lasting impression of the APHA brand. Consistent application of the visual design makes materials immediately recognizable as APHA work.

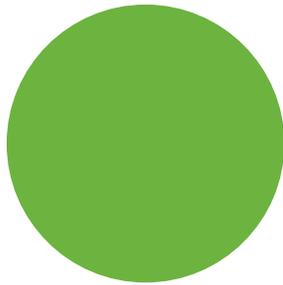
B. APHA Color Palette

Color creates instantaneous impressions that are, to a large degree, universally understood on a subliminal and emotional level. Consistent use of color will help reinforce the APHA brand. Tints of the colors can extend the palette visually. For greatest impact, use the colors at 100% opacity.



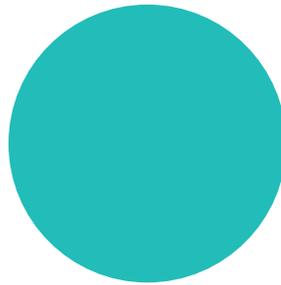
PMS 300

R 0 G 101 B 189
C 100 M 42 Y 0 K 0
HTML 0065BD



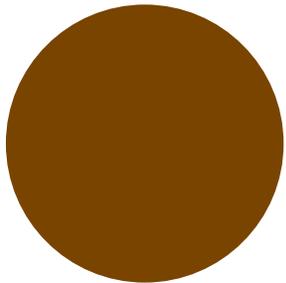
PMS 369

R 88 G 166 B 24
C 67 M 0 Y 98 K 5
HTML 58A618



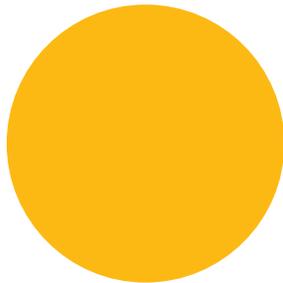
PMS 3262

R 0 G 192 B 181
C 78 M 0 Y 32 K 0
HTML 00C0B5



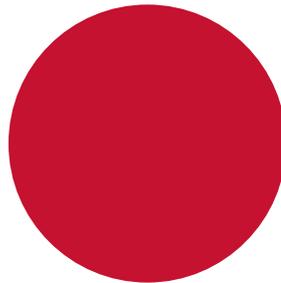
PMS 469

R 96 G 53 B 29
C 21 M 70 Y 92 K 70
HTML 60351D



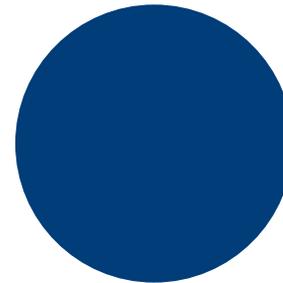
PMS 130

R 240 G 171 B 0
C 0 M 30 Y 100 K 0
HTML F0AB00



PMS 187

R 167 G 25 B 48
C 5 M 100 Y 71 K 22
HTML A71930



PMS 654

R 0 G 44 B 95
C 100 M 73 Y 10 K 48
HTML 002C5F

C. APHA photography style guidance

Photography plays an important role in telling a powerful story, creating an emotional connection and making a lasting impression with our audience. For APHA materials, including e-newsletters, emails, fact sheets, reports, briefs, brochures, social media, etc., photography should be carefully selected to be consistent with our brand voice.

Photos should be:

- Representative of the broad constituency within APHA as well as those outside APHA who care about the public's health;
- engaging, personable and passionate about the value of who and what APHA represents;
- approachable in that people see themselves within APHA and join the effort;
- credible because the organization is knowledgeable and values science-based decision making; and
- confident and strong, enabling effectiveness.

Where possible, we should choose photography that are, or include:

- Positive situations – When possible, show realistic people engaging in good health behaviors, not negative. Look for the positive angle on the topic. For a report on obesity, show people walking or biking, for example. For tobacco show a person proudly wearing a nicotine patch, etc. In the right context it is ok to show a negative situation if it brings greater emotion and power to the communication, but overall we are striving for more positive than negative portrayals in our work.

- Simple visuals – Choose clean, simple photography, without complex backgrounds and situations. Allow the audience to take in the message of the photo in a quick glance.
- Emotional contact – Close-up shots with people looking at the camera can or where we can see their faces as they interact with each other help the audience connect emotionally with the photograph.
- Choose people, and choose realistic – Photos with people in them are preferable over pictures of landscapes or scenery. When evaluating photos, avoid overly styled models often found in stock photography. Try to pick everyday people who reflect our audience.
- Diversity – Photos should portray a range of diversity, including age, gender, race/ethnicity, ability and sexual orientation. Every picture does not need to include everyone, but if you have multiple pictures in your materials, include a cross-section. If you only have one picture in your materials, make sure the next piece you produce is different so that we give the impression of diversity over time.
- Avoid stereotypes – Mix people up in roles and situations to show true diversity. Be aware of stereotypes.
- True to public health – APHA follows science-based health recommendations, and so should our photos. For example, if you show a baby sleeping, it should be on its back. If people are riding bikes, they should be wearing helmets, and wearing them correctly. Avoid baby bottle feeding, mainstreaming alcohol, tobacco or other drugs and scenes that imply violence or war.

D. Typography

Frutiger

Primary use: head and subheads

Slimbach

Primary use: body copy



GET THE FACTS

Gun Violence Prevention

Guns have potential to greatly amplify violence, as they can inflict serious—often deadly—injuries on many individuals in a short time. In the United States, gun violence is a major public health problem and a leading cause of premature death.

BURDEN OF GUN VIOLENCE

The burden of gun violence in the United States vastly outpaces that in comparable countries:

- 80 percent of all firearm deaths in about two dozen populous, high-income countries—including Australia, France, Italy, Spain, the United Kingdom and 18 others—occur in the U.S., and 87 percent of all children ages 0 to 14 killed by firearms in this group of nations are U.S. children killed in the United States.¹
- In 2010, 30,000 people in the United States died as a result of gun violence and nearly an additional 60,000 suffered from non-fatal gun related injuries.²

Gun violence affects people of all ages and races in the U.S., but has a disproportionate impact on young adults, males and racial/ethnic minorities:

- Among U.S. residents ages 10 to 29, homicide is the fourth leading cause of death for non-Hispanic Whites, the second leading cause of death for Hispanics and the leading cause of death for non-Hispanic Blacks.³

Mass shootings at schools are horrific tragedies yet most homicides among children occur away from school:

- In 2009-10, there were 17 homicides among children ages 5 to 18 that occurred at school, compared with about 1,630 that occurred outside of school.⁴

Gun violence cost the U.S. \$174 billion in 2010 or an average of \$645 per gun in America:⁵

- The societal cost per firearm assault injury—including work loss, medical/mental health care, emergency transportation, police/criminal justice activities, insurance claims processing, employer costs and decreased quality of life—was \$5.1 million for each fatality and \$433,000 for each hospital-admitted patient.

A. Overview

APHA's brand is built upon both what we say and how we say it. The next several pages provide guideline messaging statements that will help us provide a consistent description of who we are and what we do, as well as writing style guidelines to ensure we speak with a common and consistent style that brings both credibility and passion to our work.

B. What we say

Boilerplate

The boilerplate is to be used verbatim in all press materials, such as news releases, fact sheets, on the website and in any other venue where APHA is represented and space is limited.

Preferred version:

The American Public Health Association champions the health of all people and all communities. We strengthen the profession of public health; share the latest research and information, promote best practices and advocate for public health issues and policies grounded in research. We are the only organization that combines a 140-plus year perspective, the ability to influence federal policy to improve the public's health and a member community from all public health disciplines and over 40 countries. APHA publishes the American Journal of Public Health and The Nation's Health, convenes an Annual Meeting and Exposition where thousands of participants share the latest public health research and leads public awareness campaigns such as Get Ready and National Public Health Week. Learn more at www.apha.org.

Shorter version:

The American Public Health Association champions the health of all people and all communities. We strengthen the profession of public health, promote best practices and share the latest public health research and information. We are the only organization that combines a 140-plus year perspective, the ability to influence federal policy to improve the public's health and a member community from all public health disciplines and over 40 countries. Learn more at www.apha.org.

Essential version:

The American Public Health Association champions the health of all people and all communities. We are the only organization that combines a 140-plus year perspective, the ability to influence federal policy to improve the public's health and a member community from all public health disciplines and over 40 countries. Learn more at www.apha.org.

C. How we say it

APHA's voice reflects our value as the community for public health professionals and the collective voice for public health.

Our voice is...

Representative of the broad constituency within APHA as well as those outside APHA who care about the public's health.

Engaging, personable and passionate about the spirit and intent of who we are and what APHA represents

Approachable in that people see themselves within APHA and join the effort

Credible because APHA is knowledgeable and values science-based decision-making

Confident and strong, enabling effectiveness

Avoid language like

"APHA is the oldest..." which sounds stale/out of touch

"APHA is the largest..." implies cumbersome/overwhelming

"APHA aims to..." which is less confident

How we use it...

Consider your audience. Know who you're talking to, which may include APHA members and others beyond public health.

We are in the business of protecting and saving lives. Reflect that passion. Encourage conversation. Engage in dialogue. Balance scientific rigor with drive and desire.

Use inclusive language: we, us, our. Show there is a place, a role for the reader. Include a "call to action" — something they can do related to what they're reading. Use shorter, simpler sentences and avoid industry jargon – could your parents understand?

With age comes wisdom. Speak with authority and safeguard our trust. Be accurate and maintain high standards.

Use strong language. APHA partners with many others, but take credit where we can. With more than 140 years of experience and over 20,000 members, we deliver results.

Instead use

"APHA has over 140 years of perspective..." which implies experience and credibility

"APHA is national/global..." which speaks to reach and influence

"APHA strengthens the profession..." which is more confident

D. APHA Style (09/10/13)

Generally speaking, this is the style followed by all APHA staff in public communication. It is based on Associated Press style with some changes. Additional exceptions are made in consultation with communications staff.

accident: There are no car ac- cidents. There are car crashes.

Acronyms OK on second ref- erence: ACA, AJPH, ASTHO, CMS, HHS, NACCHO, NPHW, OSHA, PAHO, SPIG, VA, WHO

Affiliates: use this language when explaining the role of Affiliates within APHA: “APHA-affiliated state and regional public health associations”

American Indians and Alaska Natives

American Public Health Association, APHA is OK in all references if primary audience is our members. The Association is OK on second reference.

APHA’s 140th Annual Meeting and Exposition (first reference), Annual Meeting or meeting thereafter

assisted suicide: When referring to this type of self-determined end of life (such as deaths that fall under Oregon’s Death with Dignity Act) do not use the term “assisted suicide” or “suicide.” Aid in dying, physician-aided death, assisted death, are acceptable. (2008APHA policy)

Association when referring to APHA

attorneys general

breastfeeding

Capitalize Affiliates, Caucus, Executive Board, Forum, Governing Council (council on second reference), Section, Special Primary Interest Group, Student Assembly (assembly on second reference)

Centers for Disease Control and Prevention, CDC on second reference

chair, not chairman or chairwoman

commas: In a series, no comma before “and”

Dates: Use hyphen to express date ranges: Jan. 1-April 13 [no longer en dashes]

D. APHA Style (continued)

decision-maker

day care

Degrees: Use a comma between each: MD, PhD, MPH. No periods, descending order

email, but **e-reader**, **e-newsletter**

first-aid (adj) but **first aid (n)**

firsthand (adj and adv)

foodborne

fundraiser

Georges C. Benjamin, MD: include middle initial, only MD [recent change]

Get Ready campaign

hand-washing

Headlines, subheads: Capitalize only the first word and any proper nouns

health care

health reform: not health care reform

HIV/AIDS

human papillomavirus, HPV on second reference

Italicize newspapers, journals, magazine titles, including *The Nation's Health* but quotes around book titles, studies and reports, "America's Health Rankings"
"Veteran Suicide: A Public Health Imperative"

D. APHA Style (continued)

JAMA Dermatology and other JAMA publications, but the original is Journal of the American Medical Association on first reference

kick off (v) but kickoff (n)

lifesaving

long-standing

-ly words: no hyphen

Money: Use all necessary words. \$4-\$5 billion means anywhere between \$4 and \$5 billion. Use the extra “billion” for accuracy: \$4 billion to \$5 billion

multidrug-resistant tuberculosis

nonprofit

Occupational Safety and

Health Administration

Party affiliation: no parentheses. Instead, Sen. Jim DeMint, R- S.C., said (note commas around affiliation)

Percent: Express percents using the word, not the sign. For ranges, 10 to 20 percent is fine.

Phone numbers: Use dashes, not parentheses to set off area codes: 800-266-5354

policymaker

postgraduate, postdoctoral

secondhand smoke

socioeconomic

Spacing: one space after a period

D. APHA Style (continued)

Times: Use figures, except for noon and midnight: 8 a.m.- noon; 8:30 a.m.-9 p.m.

Titles: capitalize before a name, but not after

Type 1, Type 2 diabetes

underserved

underway

UNICEF: OK in all references

URLs: http:// is not needed unless the address does not contain www. URLs should start with either http:// or www., not both

West Nile virus

workforce, workplace