AMERICAN PUBLIC HEALTH ASSOCIATION
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Executive Board Meeting Minutes
May 3-5, 2026
Washington, DC

Present	**Unable to Participate**
Melissa (Moose) Alperin, EdD, MPH, MCHES	N/A
Georges C. Benjamin, MD	
Jessica Boyer, MPH, MSW, *Vice Chair*	
Monique J. Brown PhD, MPH, FGSA	
Shontelle Dixon, MPH, CHES, *Chair*	
Aaron Guest, PhD, MPH, MSW	
Brett R. Harris, DrPH	
Claude A. Jacob, DrPH, MPH	
Robin Kimbrough-Melton, JD	
Laura Rasar King, EdD, MPH, MCHES	
Megan Weil Latshaw, PhD, MHS	
Cynthia N. Lebron, PhD, MPH	
Ashley S. Love, DrPH, DHSc, MPH, MS, CPH, CHC	
Nandi Marshall, DrPH, MPH, CHES, CLC, CDE	
Anas Khurshid Nabil, MPH, MSPH	
Shirley A. Orr, MHS, APRN, NEA-BC	
Donna-Marie Palakiko, PhD, MS, APRN	
Kaye Reynolds, DrPH, MPH	
Gopal Sankaran, MD, DrPH, MNAMS, CHES	
Jimmie Smith, MD, MPH	
Melissa Toledo-Ontiveros, MA, MCJ, MPA	
Cathy L. Troisi, PhD, MS	
Deanna J. Wathington, MD, MPH, FAAFP	
Brittan Williams, MPH, CHES	

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Sunday, May 3, 2026

Welcome – Shontelle Dixon, MPH, CHES, Chair

APHA Board Chair, Ms. Dixon called the meeting to order, called roll and made brief opening remarks. She then requested a motion to approve the Executive Board's May meeting agenda. The motion was moved by Dr. Guest and seconded by Dr. Sankaran, and with no discussion, Ms. Dixon called for a vote.

Motion:	To approve the Executive Board's May meeting agenda.
Outcome:	Approved unanimously.

Ms. Dixon called for a motion to approve the items on the consent agenda which included the January 2026 and March 2026 Executive Board meeting minutes; and new agency members. The motion was moved by Dr. Alperin and seconded by Dr. Jacob, and with no discussion, Ms. Dixon called for a vote.

Motion:	To approve the consent agenda which included the January 2026 and March 2026 Executive Board meeting minutes; and new agency members.
Outcome:	Approved unanimously.

Executive Board Engagement Activity – Jessica Boyer, MPH, MSW, Vice Chair

At the conclusion of the vote, Ms. Dixon introduced Ms. Boyer, Board Vice Chair, who led the board in a board engagement activity.

Association Update – Georges Benjamin, MD, Chief Executive Officer

Dr. Benjamin began his presentation with an Information Technology update that included the iMIS migration to the Cloud which will undergo testing over the summer and an anticipated launch in November. Training sessions have been scheduled every two months for staff focusing on different aspects of Microsoft 365; and the APHA AI policy is being drafted with an anticipated completion date of July or August 2026. Updates to the APHA Headquarters building include a new phone system (internet-based with enhanced features); automatic restroom doors on all floors to address ADA compliance; and a heating and A/C duct project to improve air flow and quality and will begin over the summer.

Dr. Benjamin then provided updates on APHA's advocacy efforts beginning with a reminder of APHA's advocacy approach which includes the following tenets: a.) make them follow the law; b.) force transparency; c.) inform the public of the impact of their actions; d.) resist anticipatory obedience; e.) do not let them define terms like DEI; f.) maintain our core values and act on them; and g.) have no fear – they only have the power they are given! Dr. Benjamin provided updates on litigation to:

- Challenge unlawful funding freezes and executive overreach (National Council of Nonprofits v. OMB; APHA v. DOGE)
- Defend science-based vaccine recommendations (AAP v. RFK Jr.)
- Push back on improper grant terminations and mass layoffs (APHA v. NIH; AFGE, AFL-CIO v. Trump)

Dr. Benjamin then reminded the board of other legal actions:

- Defend challenges to EPA's clean cars rule via Clean Air Task Force
- Defend challenges to EPA's clean trucks rule via Clean Air Task Force
- Defend EPA's updated Mercury and Air Toxics standards via Southern Environmental Law Center
- Opposed industry challenge to stay EPA's rule for greenhouse gas emissions from the power sector via Clean Air Task Force
- Petition challenging EPA's Part 1 chrysotile asbestos rule via Asbestos Disease Awareness Organization
- Amicus Briefs
    - Support the CMS Medicare Rx drug negotiation rule
    - Preventive health benefits of ACA
    - EMTALA challenge
    - Medicaid enrollee access to reproductive health care from their provider of choice
    - West Virginia appeal on vaccine mandates

In addition to legal advocacy, there is advocacy through policy education and engagement; and media advocacy. Examples include Shelley Hearne's book Policy Engagement; the APHA Policy Action Institute; and APHA Annual Meeting and Expo. APHA is also working to expose how aggressive immigration actions impact health (e.g., premature deaths, injury, poor nutrition, exposure to infectious diseases, mental health impacts, inadequate access to care). APHA has more than 1.1 million followers across its social media platforms.

Dr. Benjamin shared the following media activity since January 1, 2026:

- 22 news releases, coverage in 95 print pieces, 17 broadcast pieces and 3 podcasts
- C-SPAN live broadcast of *AJPH* State of the Public Health Union in Feb. and NPHW Kick Off Forum in April
- Multiple stories on the ACIP lawsuit, actions of RFK, Jr., vaccines, measles, water fluoridation, climate change and more

- *USA Today* Supplements (Women in Healthcare; Community Action Protects Our Health)

Dr. Benjamin was named one of *Washingtonian* magazines 500 most influential people shaping policy (2026).

Dr. Benjamin took questions from Executive Board members. Ms. Dixon thanked Dr. Benjamin for his presentation and his leadership.

Reports of the Committee on Social Responsibility and Development Committee – Claude Jacob, DrPH, MPH, Chair, Committee on Social Responsibility and Donna Marie Palakiko, PhD, MS, RN, APRN, Chair, Development Committee

Dr. Jacob provided an update on CSR evaluations, timeline and outputs. The CSR is currently evaluating five companies and have identified additional companies for possible evaluation. The current evaluations should be completed by end of May; committee review and recommendations will happen in June; and a final report will be provided to the Executive Board in July.

Dr. Palakiko shared that as of April 2026 63% of the Executive Board has given this year (vs. 83% at this time last year); and 30% of the Governing Council has given (vs. 40% at this time last year). Dr. Palakiko also shared information about the APHA 1872 Giving Society established by Dr. Wathington (APHA Immediate Past President). The Society's goal this year is 30 members representing a 20% increase over the inaugural year. There are 23 members representing 77% towards this goal. The Policy Action Institute Fund has had 14 donors this fiscal year (8 are Executive Board members).

Drs. Jacob and Palakiko thanked the members of their committee and took questions from Executive Board members. Ms. Dixon thanked Drs. Jacob and Palakiko; and Torrey Wasserman.

Report of the President – Nandi Marshall, DrPH, MPH, CHES, CLC, CDE

Dr. Marshall began her presentation with a shout out and thank you to APHA's staff. She then shared a new partnership between APHA and Project UNITY to empower future public health leaders. Dr. Marshall then shared highlights-to-date from her presidential year which included Affiliate visits (South Carolina, Georgia, New Mexico); NPHW activity; 2026 Daniel S. Blumenthal, MD, MPH Public Health Symposium; Public Health Epidemiology Conversations Podcast; ISC/CoA Joint Midyear Meeting; and Distinguished Leaders Mentoring Series. Dr. Marshall ended her presentation with upcoming events.

Dr. Marshall took questions from Executive Board members. Ms. Dixon thanked Dr. Marshall for her service to APHA.

Report of the Evidentiary Review Committee – Cathy Troisi, PhD, MS, Chair

Dr. Troisi reported that 18 Intent to Write statements were approved in 2025 for submission of full Proposed Policy Briefs (PPB) in 2026. One fast track brief was submitted in January 2026 (Substance Use Disorder) and 16 regular cycle briefs were submitted in February 2026. Of these 16 regular cycle briefs, 1 was rejected and 15 moved forward to the review process. Dr. Troisi share the timelines and overarching feedback about the public hearings, member comments and SME review processes. She also shared information about the ERC Initial Reviews of the full PPB drafts and informed the Executive Board that full ERC rubric assessments with comments will be posted to the web for members to review in June after assessments have been sent to authors. Additionally, authors will also be provided all member comments and SME reviews (blinded). Based on this years' experience, Dr. Troisi shared planned future work/possible edits to the guidance and review process with the Executive Board. These included:

- Number of references allowed: Increase from 35 to 50
- Work with Education Board on training on how to write SMART action steps: major struggle in first draft of PPBs
- Revisions to ERC rubric: improve ease of use
- Greater guidance on how to incorporate context considerations into briefs
- Verification of references: expectations of ERC members; immediate rejection for plagiarism/fabricated references
- AI policy: coordinate w/ AJPH and overall APHA policy

The priority areas for 2026-27 were developed in conjunction with APHA staff. Proposed policy briefs on these areas can be fast-tracked (max 5 per year) or submitted in regular cycle:

- Importance of vaccines in preventing disease morbidity and mortality (emphasize safety and efficacy of vaccines including mRNA technology)
- Improving the health of communities to reduce prevalence of chronic disease (focused on prevention/risk reduction)
- Gun violence prevention (include background checks, assault weapons ban, research funding and red flag laws)
- Health impacts of fossil fuel/need for clean energy transition
- All hazards preparedness, including pandemic and emerging disease response
- Immigration policy (humane treatment, access to care, update and expand on2027
- Nutrition and health (dietary guidelines overhaul, SNAP/WIC)

Nine policy statements adopted in 2016 are scheduled for archiving at the 2026 Annual Meeting. These policies cover the topics of HIV/AIDs strategy, oral health care integration into medical care, highly fluorinated chemicals, compulsory pasteurization, address SDOH for on time graduation, community development in low-income neighborhoods, increase minimum wage, inclusive transgender and minority health policies and practice. Requests with rationale

to keep statements active are due July 1, 2026. The ERC will review and bring recommendations to the Governing Council at the Annual Meeting. Statements set to be archived in 2027 and 2028 are also published. Members are encouraged to review and plan to submit updates to policy brief process.

Dr. Troisi presented proposed updates to the Intent to Write process and asked the Executive Board to approve these amendments (see Motion below). The Executive Board was asked to approve the amendments because under the current schedule, the Intent to Write statements are due June 30 and the ERC would like to provide as much advance notice of changes as possible. The Executive Board can act as the Governing Council when Governing Council is not in session; and if the Executive Board approves, the ERC can alert members of changes a month earlier than waiting for the GC MYM. If the Executive Board approves, the GC will be asked to approve amendments at the MYM on June 8, 2026. Dr. Troisi made a motion to approve the proposed amendments to the public health policy brief process guidelines. No second was needed because the main motion came from a committee. Dr. Troisi and Courtney Taylor took questions from Executive Board members.

Motion: To approve the proposed amendments to the public health policy brief process guidelines

- **Aim of Intent to Write:**1) Ensure the proposed policy brief addresses a public health problem 2) Ensure there is not already a policy brief/statement that addresses the issues 3) Suggest beneficial collaboration between member units
- **Current requirements:**1) Problem Statement 2) Rationale for Consideration 3) 3 potential Action Steps 4) Connection to the Strategic Plan 5) Alignment with Public Health Code of Ethics
- **Lessons learned:** Difficult to write and evaluate action steps at this stage; unnecessarily long, posing challenges to authors and ERC reviewers
- **Proposed edits:** Cut down Intent to Write requirements to focus on 1) summary of problem (importance to public health and rationale) 2) 1 potential evidence-informed strategy (Shift due date from June to rolling submissions from July-September)
- **Benefits:** Meets need while reducing burden and providing increased flexibility for both ERC reviewers and potential authors
- **Additional proposed edits to policy brief process guidelines:**
    - Increase number of briefs that can be accepted per year from 12 to 14
    - Change the minimum number of required SME reviews (currently two) to one
    - Additional clarifying/grammatical edits

Outcome: Approved unanimously.

Ms. Dixon thanked Dr. Troisi, members of the ERC and Courtney Taylor.

Report of the Governance Committee – Jessica Boyer, MPH, MSW, Vice Chair

- **Code of Conduct Policy and Procedures**

Ms. Boyer reminded the Executive Board of the Governance Committee's responsibilities and thanked members of the committee. She then reminded the board that the Code of Conduct process is under the management of the Executive Board per APHA's Bylaws; and that the Code of Conduct Policy and Procedures document is regularly reviewed by the Governance Committee. As part of this review, Ms. Boyer presented proposed updates to the Executive Board for their review and approval. Ms. Boyer made a motion to approve the updates to the Code of Conduct Policy and Procedures (see Motion below). No second was needed because the main motion came from a committee. Ms. Boyer took questions from Executive Board members.

Motion: To approve the proposed changes to the Code of Conduct Policy and Procedures document.

- Concerns to be submitted within 45 days of Conduct Concern
- Ability to administratively consolidate Concerns
- Language change from "Preliminary Review" to "Investigation" to more accurately reflect the process and actions
- Summary of the Concern to be sent to Respondent when requesting meeting
- Added 30-day limit to respond the request for meeting for both Reporting Member and Respondent
- No retaliation section covers all person associated with the Code of Conduct process
- Added expectation for Reporting Members and Respondents to adhere to Confidentiality Clause

Outcome: Approved unanimously.

Concluding Remarks and Adjournment – Shontelle Dixon, MPH, CHES, Chair

Ms. Dixon made concluding remarks and adjourned the meeting for the day.

<u>Monday, May 4, 2026</u>

Welcome – Shontelle Dixon, MPH, CHES, Chair

Ms. Dixon welcomed Executive Board members and called the meeting to order.

Government Relations – Don Hoppert, Director, Government Relations

- **Laurie Mignone, Professional Staff Member, Committee on Appropriations, U.S. House of Representatives**
- **Jeff Reczek, Partner, FGS Global**
- **Mark Mioduski, Senior Consultant and Founder, Cornerstone Consulting**

Mr. Hoppert introduced guests: Laurie Mignone, Jeff Reczek and Mark Mioduski. He then facilitated a Question-and-Answer Panel with guests and the Executive Board. Questions addressed FY27 appropriations process; influence of Presidential budget; loss of staff at federal agencies and ability to get grant funding to grantees; and importance of litigation in which APHA has been involved.

Ms. Dixon thanked Mr. Hoppert and guests.

Advocacy Training – Jordan Wolfe, MPH, Government Relations Manager

Mr. Wolfe provided an advocacy training for the Executive Board. He began by sharing APHA's 2026 Advocacy Priorities and talking about Speak for Health. Mr. Wolfe reminded the board of three annual advocacy opportunities: a.) NPHW; b.) Policy Action Institute (PAI); and c.) the Congressional recess in August. Executive Board members were reminded of the following advocacy actions:

- APHA Action Alerts (share with APHA member units, family and friends – you do not have to be an APHA member to send Action Alerts)
- Plan a Congressional meeting – steps of how to do this and APHA resources were shared
- PAI Hill Day
- Attend a Town Hall
- Write an Op-Ed
- Hold your Congressional members accountable – 2025 Congressional Vote Record

Board members were encouraged to stay in the loop through APHA Legislative Updates; Letters to Congress and Agencies; and Testimony Comments and Briefs. Mr. Wolfe took questions from Executive Board members. Ms. Dixon thanked Mr. Wolfe.

Executive Session to Discuss Personnel Matters - Jimmie Smith, MD, MPH, Chair, Personnel Committee and Ilka Cameron, MPS, PHR, SHRM-CP, Director, Human Resources

Ms. Dixon called for a motion for the Executive Board to enter a period of executive session to discuss personnel matters. The motion was moved by Dr. Marshall and seconded by Dr. Jacob, and with no discussion, Ms. Dixon called for a vote.

Motion:	To enter a period of executive session.
Outcome:	Approved unanimously.

Upon exiting the period of executive session, Ms. Dixon moved to the next agenda item.

Staff Appreciation Activity – Jimmie Smith, MD, MPH, Chair, Personnel Committee

Dr. Smith facilitated a staff appreciation event that provided an opportunity for Executive Board members and APHA staff to meet and have conversation with each other. Board members and staff then ate lunch together.

APHA Strategic Plan Update – Monique Brown, PhD, MPH, FGSA, Chair, Strategic Planning Committee; Celeste Philip, MD, MPH, Senior Public Health Advisor – Health and Medical Affairs; Liz Scott, PhD, Chief Executive Officer, Brighter Strategics, LLC

Dr. Brown introduced Dr. Scott and Dr. Philip. Dr. Scott provided a high level summary of the strategic planning process and noted that APHA is in the "doing mode" with activities on the plan underway. Dr. Scott reminded that Executive Board members that all APHA staff serve on one of the strategic planning workgroups. Each workgroup has a team lead as well as a senior staff liaison assigned who attends all meetings. Dr. Scott invited each workgroup lead to provide a short update on the progress of their workgroup. Workgroup leads are working together to ensure there is collaboration among the workgroups. Drs. Brown, Scott and Philip invited members of the Board to ask questions about the strategic planning process and progress. Ms. Dixon thanked Dr. Brown, Dr. Scott, Dr. Philip and all the APHA workgroup leads for their participation.

Report of the Speaker of the Governing Council – Aaron Guest, PhD, MPH, MSW

Dr. Guest shared Speaker activities to date including a.) Governing Council Speaker Series: The Policy Brief Process; b.) Orientation Part 1: Governing Council Orientation; and c.) Caucus Collaborative, ISC and CoA Engagement. He also shared the following important Governing Council dates:

- Orientation 2: Parliamentary Procedure: May 14,1-2 PM ET
- Mid-Year Meeting: June 8, 2-4:30 PM ET
- Proposed Policy Brief Public Hearing #2: October 22-23, Time TBD
- GC Speaker Series #3: Governing Councilors Prep for the Annual Meeting: October 14, 2-3 PM ET
- APHA Annual Meeting
    - Annual Meeting GC Orientation: October 31, 2PM-2:45 PM CT

  - Annual Meeting Session 1: October 31, 3-6 PM CT (Registration opens at 1:30 PM CT)
  - Annual Meeting Session 2: November 3, 8:30 AM-1:30 PM CT (Registration opens at 7:30 AM CT)
- Dates TBD
  - ISC/CoA Candidates Roundtable
  - GC Speaker Series: Member Unit Engagement
  - Office Hours at Annual Meeting
  - Governing Council Roundtable

Dr. Guest shared the Governing Council's MYM draft agenda and let the Executive Board know that the Committee on Bylaws will be presenting bylaws amendments. Dr. Guest also shared slides for the revised Governing Council Orientation that delineate the differences between the Executive Board and the Governing Council.

Next, Dr. Guest reminded the Executive Board of the 2025 Governing Council Motion to establish a study group for the Governing Council to review the Code of Conduct and policies and procedures and to make recommendations to the GC prior to the 2026 Annual Meeting. The following actions have occurred to date:

- Linda Rae Murray and Tom Kane serve as co-chairs
- 37(ish) Members
- Moose Alperin Serves as Liaison between the Governance Committee of the Executive Board and the Ad Hoc Committee
- 2 Meetings: Introduction and March Meeting
- Group has divided into three working groups:
  - Instrument: A draft Instrument has been created with the recommendation that it be used to collect de-identified information on the APHA's previous consideration and disposition of cases arising under the APHA Code of Conduct and the Code of Conduct Policies and Procedures.
  - Schematic: A draft schematic diagram depicting the process flow for the APHA Code of Conduct procedures has been created.
  - Scoping: A list and links to the codes of conduct and related policies and procedures of similarly situated member organizations have been created.

The committee's next steps are to continue to meet and refine its work; and to present at the upcoming MYM.

The Executive Board discussed the history of Caucuses. Dr. Guest began by providing the members of the executive board with a brief history of the Caucuses. Dr. Guest noted that there are two types of Caucuses, the first allows members to coalesce around shared identities and the other group focuses on special interests, worksite issues and social justice issues. Dr. Guest said each Caucus must sign an annual Memorandum of Understanding,

have 25 APHA members, provide the membership list to APHA staff for verification and they are provided with sessions at the APHA Annual Meeting. Dr. Guest said there are 17 Caucuses affiliated with APHA. Dr. Guest reminded executive board members that Caucuses are External to APHA, they are independent bodies and that the APHA executive board provides recognition of each Caucus.

Dr. Guest noted that although the board previously voted to explore a transition process, deeper review exposed broader governance, legal, operational, and financial concerns. These include inconsistent oversight, unclear alignment between caucuses and forums, unequal presentation slots at the annual meeting, staffing concerns, accounting and process complications, and questions about whether APHA's current relationship with caucuses is sustainable or appropriately structured.

Dr. Guest said that APHA needs a clearer vision for the future of caucuses. Dr. Guest said APHA has often acted as if everything is fine, when there are systemic problems that need to be discussed openly. Dr. Guest emphasized that the board must decide what role caucuses should play in the association going forward, especially since some caucuses function more like outside organizations using APHA for meeting visibility rather than as fully integrated internal groups.

Dr. Guest also notes that staff capacity is stretched. Supporting current caucuses already requires significant effort, and a full transition process would likely require additional staff resources. Because of that, any transition cannot just be symbolic; it has real operational implications.

In terms of next steps, Dr. Guest discussed revising the memorandum of understanding, increasing membership requirements, enforcing firm deadlines, reconsidering how presentation slots are allocated, and reevaluating the caucus collaborative and APHA's broader relationship with caucuses. While a limited transition for a small number of caucuses may be possible, the larger outcome of this review is that it has raised more fundamental questions about governance and structure that the board now needs to resolve.

The members of the executive board then discussed Dr. Guest's presentation. Hearing no further questions, Ms. Dixon thanked Dr. Guest for his presentation and introduced the next item on the meeting agenda.

Report of the Treasurer (Part 1) – Shirley Orr, MHS, APRNA, NEA-BC, Georges Benjamin, MD and Kemi Oluwafemi, Chief Financial Officer

- **FY2026 Budget Update**

Ms. Orr provided a FY 2026 financial update as of March 31, 2026. Ms. Orr reported that the total revenue is $21,701,995 (88% of budget), which is over budget by $663,345. Total

expenses are $21,907,819 (81% of budget), which is over budget by $257,529 (expenses always lag revenue). The Income **(loss)** from operation ($205,824) is over budget by $405,816; and the **Income** (loss) **including investment** is $166,793.

Ms. Orr shared that as of the end of March 2026, we project to end the year with a loss of ($2,659,929) from operations; and with intermediate and long-term investments the loss is projected to be around (2,275,702). In May 2025, the Executive Board approved the current year's budget. That budget authorized going into reserves by $2,463,650 from operation and $2,181,210 with investment income and appreciation. This is higher than the budgeted deficit by $94,492. The FY 2027 budget is still being worked on.

Ms. Orr took questions from the Executive Board. Ms. Dixon thanked Ms. Orr and Ms. Oluwafemi.

Generative Discussion: Executive Board and Governing Council Roles and Responsibilities

The Executive Board had a robust discussion about the roles and responsibilities of the Executive Board and Governing Council and how to improve the relationship between these Association bodies.

Concluding Remarks and Adjournment – Shontelle Dixon, MPH, CHES, Chair

Ms. Dixon made concluding remarks and adjourned the meeting for the day.

<u>Tuesday, May 5, 2026</u>

Welcome – Shontelle Dixon, MPH, CHES, Chair

Ms. Dixon welcomed Executive Board members and called the meeting to order.

Report of the Treasurer (Part 2) – Shirley Orr, MHS, APRNA, NEA-BC, Georges Benjamin, MD and Kemi Oluwafemi, Chief Financial Officer

- **FY2027 Budget Presentation**

Ms. Orr shared the timeline for finalizing the proposed FY2027 budget and approval by the Executive Board. She also shared the outline of the Budget Booklet; and encouraged Executive Board members to think about how they can financially support the Association.

Ms. Dixon thanked Ms. Orr and Ms. Oluwafemi.

Update from Student Assembly – Anas Khurshid Nabil, MPH, MSPH

Mr. Nabil provided an overview of the Student Assembly including challenges (e.g., filling vacant positions on the Executive Leadership Council, pausing mentorship program). He also shared recent and upcoming activity of the Student Assembly: a.) updating Student Assembly Handbook; b.) professional development – webinars, media meeting, National Student Meeting; c.) swag boxes sent to Campus Liaisons during NPHW; d.) scholarships for Annual Meeting; e.) Student Assembly Newsletter; and f.) need to update Student Assembly webpage. Mr. Nabil took questions from Executive Board members.

Ms. Dixon thanked Mr. Nabil and congratulated him on the work on the Student Assembly.

Event Operations – Jolene McNeil, CMP, DES, CEM, Director, Event Operations

- **APHA 2026 Annual Meeting and Expo**

Ms. McNeil began her presentation by introducing the Annual Meeting team. She let the Executive Board know that APHA Now, the Association's digital library of events is free for members; and that registration for the Policy Action Institute is now open. She then shared the following advantages of San Antonio: a.) it's walkable; b.) the Riverwalk; c.) great food; and d.) mild to warm with sunny conditions.

Ms. McNeil shared the following highlights of the upcoming Annual Meeting:

- General Sessions:
  - Opening Session theme: Together We Thrive
  - Monday theme: The Quest for Universal Health Coverage
  - Closing Session theme: Together Towards Better Health: The Future of Public Health
- 11 Champion Conversations
- Expanded Women's Leadership Institute
- Up to additional 300 poster presentations
- 9,218 abstracts submitted (8,265 in 2025)
- Digital meeting to include livestream of general sessions and champion conversations; oral session recordings; on-demand films; on-demand emerging scholar presentations
- Public Health Expo: 215 booths and 149 companies (176 booths and 123 companies in 2025)
- Housing and Registration opens May 28 (deadline: August 1)

When asked about meeting locations, Ms. McNeil shared that APHA books Annual Meeting locations 10 years in advance and that there are only ~10 cities in the U.S. that can accommodate the APHA meeting which needs 80 concurrent rooms for presentations; and 4500 room block for sleeping rooms. Ms. McNeil took questions from Executive Board members.

Ms. Dixon thanked Ms. McNeil and the entire Annual Meeting team.

Generative Discussion: Future of Public Health/Rebuilding the Public Health Infrastructure

The Executive Board had a robust discussion about the future of public health and rebuilding the public health infrastructure. Issues that were discussed included providing health insurance coverage for all; how should we reimagine the health system; enumeration of public health workforce; how do we build a better system than we had; Campaign for the Public's Health and other initiatives.

Concluding Remarks and Adjournment – Shontelle Dixon, MPH, CHES, Chair

Ms. Dixon made closing announcements and called for a motion to adjourn the meeting, the motion was made by Dr. Alperin and seconded by Dr. Sankaran. Ms. Dixon called for a vote. The motion was approved unanimously. The meeting was adjourned.

The next meeting of APHA Executive Board will take place at 2 p.m. Eastern on July 6, 2026, via Zoom