



THE AMERICAN PUBLIC HEALTH ASSOCIATION

CERTIFIES THAT

NANCY STOLLER SHAW

HAS BEEN ELECTED A

MEMBER

AND IS ENTITLED TO ALL THE RIGHTS AND PRIVILEGES OF
MEMBERS OF THE ASSOCIATION

DATED: NOV 85

William H. McBeal
EXECUTIVE DIRECTOR



AMERICAN PUBLIC HEALTH ASSOCIATION

1015 Fifteenth Street, N.W., Washington, D.C. 20005 • (202) 789-5600

Dear Member:

Welcome! Your application for individual membership in the American Public Health Association has been approved. We welcome you, and hope you will take advantage of the opportunity for active participation open to all Members.

APHA's objective is to provide leadership in national health affairs. In defining the scope of the Association's interest, the broadest definition of health is used - encompassing personal and environmental factors affecting individual self-fulfillment and community betterment. You have joined APHA at a critical juncture in our Nation's health history -- your active support of the Association's activities during this period is particularly needed.

As a Member, you will receive the *American Journal of Public Health* and our newspaper, *The Nation's Health*, each month. We hope that you will find them stimulating and informative. Should you have any problems in receiving these issues regularly, or should you change your address, etc., please write the Director of Membership Services.

I am enclosing your new membership card. Attached to it is a card for you to use in giving us information to complete our records. To assist you in completing the postcard, I am also enclosing a *Codes Pamphlet*. A prepaid, return envelope is included for you to use in mailing back the information card.

To help orient you to the structure of your new Association, I am enclosing a copy of our Constitution and By-Laws.

The enclosed brochures about the Group Insurance Plans for APHA members will give you information about these optional programs. If you are interested further, you may write directly to our Insurance Administrators.

The enclosed publications pamphlet will indicate items published by your Association. You will note that Members are given a 20% discount on purchases of APHA books and pamphlets.

Your Association is continually growing and we would appreciate any suggestions you may have for improving our services to you.

Very truly yours,

William H. McBeath, MD, MPH
Executive Director

CODES PAMPHLET



for Membership Information

The Association's ability to effectively serve its members, as well as the whole health community, depends upon knowledge of the individual talents represented in our membership. The data requested on the accompanying return postcard will help APHA build and maintain a bank of talent data to provide information helpful in the selection of persons to serve on various APHA boards, committees, councils, and task forces. Becoming better acquainted with members will enable the officers and staff of APHA to communicate quickly and more relevantly, as well as to provide criteria for determining the content of future publications. We update our information on each member annually. **Present information is indicated on the left of the return postcard; spaces are provided on the right for corrected and new information.**

The information requested here is completely voluntary. It is being compiled expressly for the Association's use and will be maintained in strict confidentiality. However, if you wish to leave blank any particular category you may do so without affecting the usefulness of the other data.

This pamphlet provides the codes for completing the enclosed form. We recommend that you briefly scan each category to select the correct code. It is further suggested that you leave the first item, "Interest", to be filled in last. A committee of members from the Statistics and other Sections worked diligently on this listing and agreed that it would be impossible to be as comprehensive as we desire because of mechanical and financial limitations. These codes attempt to identify with a degree of viable accuracy the areas of interest and skills represented in APHA's membership, but the scope and size of our membership has prohibited any greater specificity. If you find difficulty in fitting your interests or occupation into these codes, please fill in the spaces provided after the word "Other".

Your time and efforts in helping us to serve you are very much appreciated.

INTEREST, MAJOR TOPICS OF (3 selections; 6 spaces)

Alphabetically Listed

It is assumed that your Primary Section will represent your prime interest. Your occupation will also be a clue to your principle area of interest. However, this additional category is provided so that we may retain cross-over and additional interests of members. The emphasis in this category is to provide a TOPICAL listing and a conscious effort was made to exclude from this list all words characterizing occupations. Please write the corresponding code numbers in the spaces provided on your update card.

- 75 Adolescent Health
- 57 Advocacy in Action
- 50 Agency Administration
- 76 Aging
- 14 Alcoholism
- 58 Behavioral Patterns
- 36 Career Development
- 12 Communicable Disease
- 51 Comprehensive Health Planning
- 59 Consumer Protection
- 46 Data Collection, Processing, Analysis
- 18 Demography
- 68 Disaster Health Services
- 13 Drug Abuse, Narcotics
- 31 Education, Training
- Environmental Protection**
- 23 Air Resources, Pollution
- 25 Food/Drug Protection
- 26 Housing
- 27 Noise Pollution
- 29 Poisons and Toxins
- 93 Environmental Radiation
- 78 Solid Waste Management
- 28 Vector Control
- 77 Waste Water Management
- 24 Water Resources
- 47 Evaluaton
- 19 Family Planning, Abortion and Sterilization
- 48 Financing and Budgeting
- 81 Health Services to Groups, Mental
- 82 Health Services to Groups, Other than Mental
- 79 Health Services to Individuals, Mental
- 80 Health Services to Individuals, Other than Mental
- 62 History of Public Health
- 83 Industrial Health
- 94 Industrial Hygiene
- 16 Injury Control
- 49 Institutional Administration
- 63 Insurance
- 69 International Programs
- Laboratory Interests**
- 84 Analysis of Food Contaminants
- 39 Clinical Laboratory (Health Care Facility)
- 85 Environmental Quality Monitoring
- 86 Laboratory Administration
- 87 Laboratory Instrumentation

- 33 Licensure, Certification, Registration
- 88 Maternal and Child Health
- 70 Military Medicine
- 89 Minority Groups
- 37 New Professions
- 10 Nutrition
- 53 Organization of Services
- 65 Poverty, Cultural Deprivation
- 54 Program Management
- 92 Radiation Protection
- 35 Recruitment
- 11 Rehabilitation
- 71 Research (indicate specific field after Other)
- 72 Rural Health Problems
- 90 School Health Programming
- 66 Social Disorders
- 15 Suicide Prevention
- 73 Urban Health Problems
- 91 Urban/Rural Area Planning
- 01 Vision Care
- 74 Other (Specify on return postcard)

INTEREST, MAJOR TOPICS OF

Numerically Listed

To assist those of you who need to check codes already on file, the previous listing of **MAJOR TOPICS OF INTEREST** are repeated in numerical code sequence. Please check the numbers given on your postcard for this category to make sure we have your interest(s) properly coded.

- 01 Vision Care
- 10 Nutrition
- 11 Rehabilitation
- 12 Communicable Disease
- 13 Drug Abuse, Narcotics
- 14 Alcoholism
- 15 Suicide Prevention
- 16 Injury Control
- 18 Demography
- 19 Family Planning, Abortion and Sterilization
- 23 Air Resources, Pollution
- 24 Water Resources
- 25 Food/Drug Protection
- 26 Housing
- 27 Noise Pollution
- 28 Vector Control
- 29 Poisons and Toxins
- 31 Education, Training
- 33 Licensure, Certification, Registration
- 35 Recruitment
- 36 Career Development
- 37 New Professions
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- 46 Data Collection, Processing, Analysis
- 47 Evaluation
- 48 Financing and Budgeting
- 49 Institutional Administration

- 50 Agency Administration
- 51 Comprehensive Health Planning
- 53 Organization of Services
- 54 Program Management
- 57 Advocacy in Action
- 58 Behavioral Patterns
- 59 Consumer Protection
- 62 History of Public Health
- 63 Insurance
- 65 Poverty, Cultural Deprivation
- 66 Social Disorders
- 68 Disaster Health Services
- 69 International Programs
- 70 Military Medicine
- 71 Research
- 72 Rural Health Problems
- 73 Urban Health Problems
- 74 Other
- 75 Adolescent Health
- 76 Aging
- 77 Waste Water Management
- 78 Solid Waste Management
- 79 Health Services to Individuals, Mental
- 80 Health Services to Individuals, Other than Mental
- 81 Health Services to Groups, Mental
- 82 Health Services to Groups, Other than Mental
- 83 Industrial Health
- 84 Analysis of Food Contaminants
- 85 Environmental Quality Monitoring
- 86 Laboratory Administration
- 87 Laboratory Instrumentation
- 88 Maternal and Child Health
- 89 Minority Groups
- 90 School Health Programming
- 91 Urban/Rural Area Planning
- 92 Radiation Protection
- 93 Environmental Radiation
- 94 Industrial Hygiene

OCCUPATION (YOUR OCCUPATION) (1 selection, 2 spaces)

Please choose the *one* closest to your major occupational area. Only major occupations are listed and no differentiation of specialty (i.e., public health or mental health) is desired. If you are unable to select from this list, you may designate your occupation by entering code 68 or 69 in the spaces provided on your postcard and indicating the specific after "other". Please do not use codes 68 or 69 if you fall into one of the other listed categories. Transfer the code in front of your selection to the return postcard.

- 01 Anatomist
- 02 Anthropologist
- 03 Biomedical Engineer
- 04 Botanist
- 05 Chemist¹
- 14 Chiropractic Physician
- 06 Community Health Worker²
- 07 Demographer

- 08 Dental Assistant
- 09 Dental Hygienist
- 10 Dental Laboratory Technician
- 11 Dentist
- 12 Dietitian, Nutritionist
- 13 Dietetic Technician, Food Service Supervisor
- 15 Ecologist
- 16 Economist
- 17 Emergency Health Technician, Attendant
- 18 Entomologist
- 19 Environmental Engineer
- 20 Environmental Scientist (Chemist, Physicist, etc.)
- 21 Environmental Technologist, Sanitarian
- 22 Epidemiologist
- 23 Food Technologist
- 24 Food-and-Drug Analyst, Inspector, Technician
- 25 Geneticist
- 26 Health Administrator, Officer, Planner, Health Facility Administrator²
- 27 Health Educator, School Health Educator
- 28 Health Information Specialist, Writer, Illustrator
- 71 Health Physicist
- 29 Health Program Analyst, Representative
- 30 Health Systems Representative
- 31 Immunologist
- 71 Industrial Hygienist
- 32 Inhalation Therapist/Technician, Respiratory Therapist
- 33 Laboratory Scientist (Chemist, Microbiologist, etc.) •
- 34 Laboratory Technologist/Technician
- 35 Librarian (Hospital, Medical, Patients')
- 36 Mathematician
- 37 Medical-machine Technician (EEG, EKG, etc.)
- 38 Medical Record Administrator, Librarian, Technician
- 39 Microbiologist¹
- 40 Midwife
- 41 Nurse, Practical
- 42 Nurse, Registered
- 43 Nursing Personnel, Other (incl. Home Health Aides)
- 72 Nuclear Engineer
- 44 Nuclear Medical Technologist/Technician
- 45 Occupational Therapist
- 46 Office Assistant (to Physician, Dentist, etc.)
- 47 Optician, Vision Care Technician
- 48 Optometrist
- 49 Orthotist, Prosthetist
- 50 Pharmacist
- 51 Pharmacologist
- 52 Physical Therapist
- 53 Physician, Medical
- 54 Physician, Osteopathic
- 55 Physician Assistant/Associate/Extender
- 56 Physicist¹
- 57 Physiologist
- 58 Podiatrist
- 59 Psychologist
- 73 Radiological Health Specialist
- 60 Radiologic Technologist/Technician
- 61 Social Worker
- 62 Sociologist

- 63 Specialized Rehabilitation Therapist (corrective, educational, music, recreation, etc.)
- 64 Speech Pathologist, Audiologist
- 65 Statistician, Vital Record Registrar
- 66 Veterinarian
- 67 Vocational Rehabilitation Counselor
- 68 Other Health Occupations (specify after other on postcard)
- 69 Occupation not limited to health; for example, accountant or lawyer (specify after other on postcard)
- 70 None

1 Other than those in laboratory or environmental control.

2 Exclusive of specified health occupations.

ORGANIZATION *(includes 5 spaces for 5 codes)*

(PLACE OF EMPLOYMENT, 2 spaces on the left; EMPLOYMENT STATUS, 2 spaces in middle. If you are not employed, please skip this question.)

PLACE OF EMPLOYMENT

If you are gainfully employed, please select the code closest to the one describing the place where you are employed and transfer code to your postcard.

Health-care Facility:

- 01 Hospital
- 02 Extended care facility, nursing home, convalescent institution
- 03 Custodial care institution
- 04 Clinic, health center, outpatient department

Health-related Facility*:

- 11 Laboratory
- 12 Pharmacy
- 13 Practitioner's office
- 14 Other (specify on return postcard)

21 Health Agency, association, department, organization

Educational Institution:

- 31 School of Public Health
- 32 School of another health profession
- 33 Non-health program

41 Manufacturing

42 Wholesale and retail trade

43 Other industry (specify on return postcard)

* Other than those in health-care facility

EMPLOYMENT STATUS

Please select the *one* item closest to indicating your current employment status. If more than one is applicable, designate your major source of remuneration.

01 Self employed

Salaried employee-nongovernment:

- 11 Non-profit agency or organization
- 12 For-profit agency or organization
- 13 Another health professional

Salaried employee-government:

- 21 International government agency, not U.S. Federal Agency
- Federal agency, U.S.:
 - 31 Department of Defense
 - 32 Environmental Protection Agency
 - 33 Department of Health and Human Services
 - 34 Veterans Administration
 - 35 Other (specify on return postcard)

41 State or interstate government agency

51 City or county government agency

TYPE OF ACTIVITY *(1 selection; 2 spaces)*

Please choose the *one* item closest to indicating your principal type of work activity, that is, the type that usually takes the major part of your time. For example, a physician engaged in solo private practice who also teaches one class of students would designate the first item listed below.

- 01 Patient Care: Solo Practice
- 02 Patient Care: Other than Solo Practice
- 03 Administration
- 04 Consultation
- 05 Teaching
- 06 Research and Development
- 07 Production
- 08 Sales
- 09 Other (Specify on return postcard)

Not Gainfully Employed:

- 10 Student
- 11 Retired
- 12 Other (Specify on return postcard)

PRIMARY SECTION *(1 selection; 2 spaces)*

Please do not fill these two spaces (four spaces for SPIGs) unless you wish to **CHANGE** your Primary Section affiliation. If you wish a change of your Primary Section, please enter the appropriate code from the following list of Sections and SPIGs (Special Primary Interest Groups).

- 01 Community Health Planning
- 02 Dental Health
- 03 Environment
- 04 International Health
- 05 Epidemiology
- 06 Food and Nutrition
- 25 Gerontological Health
- 07 Health Administration
- 09 Laboratory
- 10 Maternal and Child Health
- 11 Medical Care
- 13 Mental Health
- 14 New Professionals
- 15 Occupational Health and Safety
- 18 Podiatric Health
- 12 Population and Family Planning
- 16 Public Health Education
- 17 Public Health Nursing
- 19 Radiological Health
- 20 School Health Education and Services
- 21 Social Work
- 22 Statistics
- 23 Veterinary Public Health
- 26 Vision Care
- 24-0 Unaffiliated (not a Section)
- 24-2 Alcohol and Drug Abuse Forum
- 24-4 Forum on Bioethics
- 24-3 Health Law Forum
- 24-5 Injury Control and Emergency Health Services Forum

RACIAL/ETHNIC GROUP

- 01 Asian
- 02 Black
- 03 American Indian
- 04 Latino/Hispanic
- 05 Other

Sex

- F Female
- M Male

PHONE(YOUR PHONE NUMBER) (10 spaces)

Depending where you are more easily reached during normal business hours, please list either your office phone OR your home phone, starting with the area code, in the spaces provided. At a future time, programs will be expanded so that we can list both your business phone and your home phone. Until a specific space is provided on our cards, you may list the additional phone at the bottom of the card. Please indicate the number(s) you provide for us with a "B" for business or an "H" for home.

BIRTH YEAR (2 spaces)

Please enter the last two digits of the year in which you were born. At a future time we will be able to record your month as well as your year.

DEGREES AND CERTIFICATIONS

On the left of "Non-PH Degree" and "Public Health Degree" you will find codes for the limited listing of degrees on our old computer. On the right of "Non-PH Degree" you will find two boxes and on the right of "Public Health Degree" you will find one box. Please ignore the codes given and the boxes on the right.

We are combining the "Non-PH Degree" and the "Public Health Degree" listings into one listing of Degrees and Certifications. There is now room for us to list three for each member.

To the right of the postcard form, please give us your degrees and certifications (up to three) and we will code them. When the new design of the postcard is completed, spaces will be provided accordingly.

PUBLIC HEALTH SCHOOL (2 spaces)

Please choose the code for the school of public from which you received your degree and enter that code on the postcard.

- 23 Boston University
- 02 Columbia University
- 03 Harvard University
- 05 Johns Hopkins University
- 06 Loma Linda University
- 16 Tulane University
- 25 University of Alabama
- 22 University of California, Berkeley
- 01 University of California, Los Angeles
- 04 University of Hawaii
- 19 University of Illinois
- 21 University of Massachusetts
- 07 University of Michigan
- 08 University of Minnesota
- 09 University of Montreal
- 10 University of North Carolina
- 11 University of Oklahoma
- 12 University of Pittsburgh
- 13 University of Puerto Rico
- 24 University of South Carolina
- 14 University of Texas
- 15 University of Toronto
- 17 University of Washington
- 18 Yale University
- 20 Other (Specify on return postcard)

APHA REMINDS YOU OF IMPORTANT MEMBERSHIP BENEFITS:

GEICO Preferred PROGRAMS FOR LOW-COST AUTO AND HOME INSURANCE

The form attached is special. Because we arranged to have GEICO Preferred programs available to you, you can use the form to request a free rate quotation from GEICO. If you qualify, you may save money on auto and home insurance. As a member, you are entitled to extra consideration for advantages like these:

LOW RATES FOR QUALIFIED DRIVERS.

GEICO insures those members of preferred groups—like ours—whose driving cost GEICO less. And these savings result in low rates.

GUARANTEED ONE-YEAR RATE ON YOUR AUTO POLICY AS WRITTEN.

Many auto insurance companies now offer only 6-month auto policies. But as long as you don't change the conditions of your policy, GEICO Preferred rates are guaranteed to remain the same for a full year—so you don't risk having your rate increased after just 6 months.

LOW-COST HOME INSURANCE, TOO.

Just check the appropriate box at the bottom of the form, and you will also receive free information on low-cost insurance for homeowners, renters and owners of condominiums. Your application will receive special consideration.

GEICO MEANS SECURITY AND FINANCIAL STRENGTH.

GEICO is one of the largest private passenger automobile insurance companies operating nationwide without a traditional sales force. When you insure with GEICO, you're with a company that is financially strong, has over forty years of solid experience, enjoys a Best's "A+" (excellent) rating, and is thoroughly dedicated to the idea of constantly improving customer service. GEICO auto insurance is not available in New Jersey and Massachusetts. Homeowner insurance is not available in New Jersey.

YOU GET GEICO Preferred TREATMENT.

All member inquiries receive prompt, preferential service by a GEICO Preferred Insurance Counselor.

**FOR FREE RATE QUOTATION
CALL TOLL FREE (800) 368-2734
IN MARYLAND (301) 986-3500 COLLECT.**

Your membership entitles you to special consideration for low-cost auto and home insurance. Good drivers, find out how much you may save.

SM-27APHA

727



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Inquiry Services Division
GEICO Plaza
Washington, D.C. 20076



YOU HAVE THE OPPORTUNITY TO ENJOY LOW RATES... AND ALL THE OTHER ADVANTAGES OF GEICO Preferred!

The advantages of GEICO Preferred's auto and home insurance plans include:

- Competitive rates
- Free, no-obligation rate quotations, if you qualify
- Customized policies, utilizing a variety of coverage combinations
- Outstanding, country-wide claim service
- 12-month auto policies (many other insurers have switched to 6-month policies in recent years with the risk of a rate increase in just six months)
- Good driver discounts, available in most states, for those with accident-free driving records or who have taken driver's training
- Inflation protection for homeowners
- Discounts on homes under six years of age and for installation of smoke detectors/fire alarms or burglar systems, available in most states
- Recognition of your membership

And don't forget, GEICO Preferred's homeowners services include insurance plans for renters and condominium owners, too. So whatever your insurance needs are, we feel confident that GEICO can provide you with comprehensive protection.

Over the course of the coming year, you will receive by mail more information about our GEICO Preferred program. But if you'd like to find out right now how much GEICO could save you on your auto and home insurance if you qualify, just complete and mail the attached rate quotation form. Or if you'd rather apply for a rate quote by phone, simply call GEICO Preferred TOLL FREE on (800) 368-2734 or in Maryland (301) 986-3500 collect.

FREE AUTO RATE QUOTATION REQUEST FORM

PLEASE PRINT ANSWERS TO ALL QUESTIONS

Please mail me your free quotation showing exact rates to insure my car(s). I understand there is no obligation and no salesman will call on me.

Name and address of member:

Name _____
Address _____ Apt. # _____
City _____ County _____
State _____ Zip _____
PHONE () _____
MEMBERSHIP NUMBER (if any) _____

1. DATE PRESENT INSURANCE EXPIRES/MO. _____ YR. _____
2. NAME OF CURRENT INSURANCE COMPANY _____
3. EMPLOYER _____ # YRS. _____
4. IF EMPLOYED IN GOVERNMENT OR MILITARY, INDICATE GRADE _____
5. HAVE YOU PREVIOUSLY BEEN INSURED WITH GEICO? ☐ YES ☐ NO
6. If you are currently a GEICO customer, please check box and list policy number and your social security number.
☐ Policy Number _____ Social Security # _____

LIST ALL DRIVERS (Including yourself)	RELATION	BIRTH DATE Mo. Day Yr.	MALE FEMALE	MARITAL STATUS	OCCUPATION	Years Driving	% OF USE			Driver Training	
							Car #1	Car #2	Car #3	Yes	No
1	Self										
2											
3											
4											

If student is away at school give distance from home: _____ miles

CAR	YEAR	MAKE (Buick, Dodge, etc.)	MODEL (Skylark, Omni, etc.)	BODY TYPE (2 Door, Conv., etc.)	Cost New	# Cylinders	Annual Mileage	Days a week driven to work, school or depot	One way distance	Is car used in employment except to and from work (Yes)* (No)	Car location if different than mail address (City) (State) (Zip)
1											
2											
3											

*If yes, Explain _____

Has any driver had a license suspended or revoked, or been convicted of driving under the influence of drugs or alcohol? Yes ☐ No ☐

Has any driver had any accidents and/or traffic convictions in the past five years? Yes ☐ ** No ☐

**IF YES, EXPLAIN DETAILS INCLUDING: DATE; TYPE VIOLATION; DRIVER INVOLVED; AMOUNT OF FINE; DAMAGE TO YOUR VEHICLE(S); DAMAGE TO OTHER VEHICLES; PROPERTY (\$); BODILY INJURY; FAULT & DESCRIBE EVENTS LEADING TO ACCIDENT.

EXPLANATIONS:

Check for Information on ☐ Home/Renters/Condominium Insurance.

to request coverage in the Group Insurance Program for APHA Members

One of the benefits of membership in the American Public Health Association is that eligible members may request coverage in the Group Insurance Program for APHA members.

The Program provides an opportunity for eligible members to help protect themselves and their families against loss of life, loss of income due to a disabling accident or illness and loss resulting from accidental death, dismemberment or paralysis.

This Program is offered solely as a service to our membership. APHA incurs no expense or financial responsibility and receives no financial benefit.

As a member of APHA you can request coverage immediately.

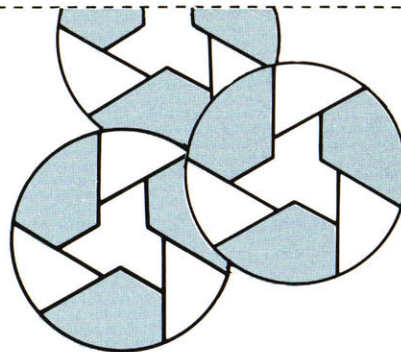
If you wish additional information, please fill out the coupon below and send to: Administrator, APHA Group Insurance Program, 1255 23rd Street, N.W., Suite 300, Washington, D.C. 20037. Telephone: 202-296-8030.

(Please tear off here)

Check one:

- ☐ I am a member of APHA. Please send me insurance information.
☐ I am not a member of APHA.

Please Print



NAME _____
First Middle Last

ADDRESS _____
Number Street

City State Zip Code

DATE _____



ADMINISTRATOR
APHA GROUP INSURANCE PROGRAM
1255 23rd Street, N.W., Suite 300
Washington, D.C. 20037-9990

POSTAGE WILL BE PAID BY ADDRESSEE

BUSINESS REPLY MAIL
FIRST CLASS PERMIT NO. 10330 WASHINGTON, D.C.

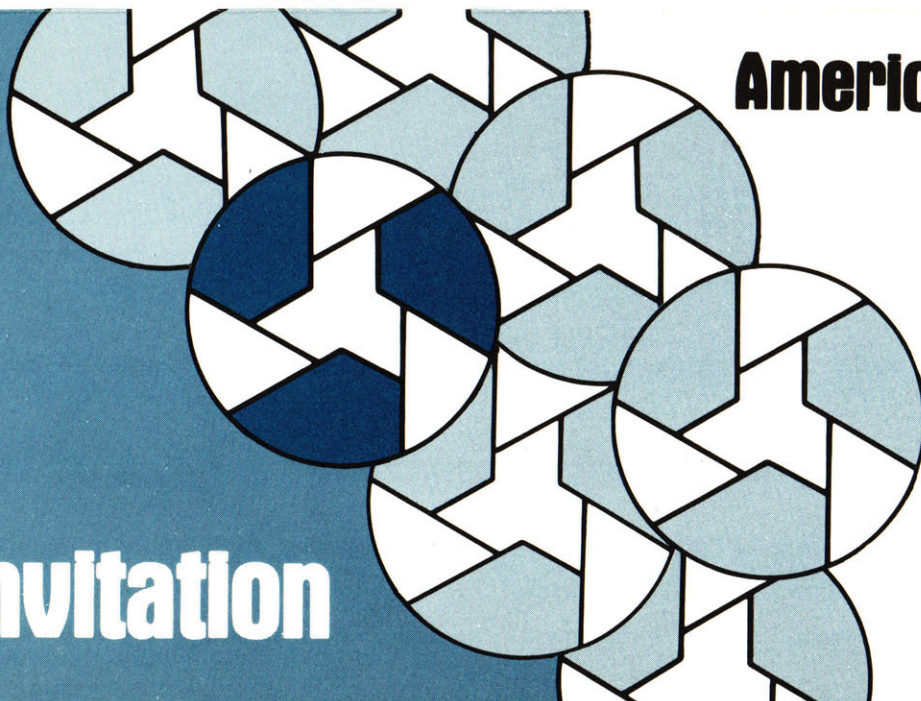
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**American Public Health
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Invitation



Publications

'86		

**AMERICAN PUBLIC HEALTH ASSOCIATION
EFFECTIVE JANUARY 1, 1986**

	Prices for US and Canadian Customers Only	

ALL ABOUT APHA

Founded in 1872, the American Public Health Association, with its 50,000 members representing over 45 disciplines in public health — comprised of 30,000 individual members as well as 20,000 more health professionals within its network of state and local affiliates — is the oldest and largest organization of public health professionals in the world. Its broad scientific, professional and administrative competence in a wide variety of health fields provides a unique capability for effective action and technical accomplishment in the health arena.

Throughout its history, APHA has been in the forefront of national and local activities related to health manpower and the educational qualifications of health professionals. The Association has directed its considerable resources and expertise toward the development of a health care system and manpower pool that would function optimally in providing health services to the American public. APHA's ongoing as well as cumulative efforts in this important arena have had considerable impact on the evolving field of health care delivery. Because of its multi-faceted composition, and the diverse capabilities of its membership, APHA is regarded as an organization which understands how the complex health care system functions, with all of its intricacies and components which span the preventive, research, and curative spectrum of medical care.

For information on joining APHA, call (202) 789-5675 or write APHA Membership Services, 1015 15th St., NW, Washington, DC 20005.

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* **NEW**

Standards for Health Services in Correctional Institutions

Ed.: Nancy Neveloff Dubler, LLB

Second Edition, 1985

Available March 15, 1986

These standards were developed by the APHA Task Force on Health Care in Prisons and Jails under the auspices of the Program Development Board, to insure that the elements of constitutionally mandated care for inmates in prisons and jails are reflected in designs for service delivery.

Incarcerated populations have a constitutional right to health care; "Deliberate indifference to the serious medical needs" of inmates is a violation of the Eighth Amendment. Experts in public health, law, medicine and correctional health care reviewed contemporary standards of medical care for non-incarcerated populations, nationally recognized programs of quality in correctional health care, and Federal court opinions and consent decrees defining and describing the constitutional right to care. The result is a set of standards based in principles of public health and primary care, responsive to the special needs of the correctional setting and guided by constitutional law.

The Standards are invaluable to health care professionals in prisons and jails, correctional health and facility administrators, public health professionals, legislators, prisoners' rights advocates, inmates and public policy makers.

Contents:

- Primary Health Services
- Secondary Care Services
- Health Care Services for Women Offenders
- Mental Health Care
- Dental Care
- Environmental Concerns
- Nutrition and Food Services
- Pharmacy Services
- Health Records
- Evaluation of Services
- Staffing

—Approx. 144 pages

Price: \$12.00, softbound (Stock No. 014)

APHA Member Price: \$9.60

ISBN 0-87553-082-6

NEW

Control of Communicable Diseases in Man

Ed.: Abram S. Benenson, MD
Fourteenth Edition, 1985

Each of 133 chapters (covering over 200 communicable diseases) presents identification and clinical nature of the disease, laboratory diagnosis, and differential diagnosis from allied or related diseases. Infectious agent, occurrence, reservoir, mode of transmission, incubation period, period of communicability, and susceptibility and resistance are discussed for each disease. The final section of each chapter deals with methods of control: preventive measures; control of patient, contact and the immediate environment, including the reporting system for each disease; epidemic measures; disaster implications; and international measures.

Produced by APHA with the collaboration of the World Health Organization (WHO), the Pan American Health Organization (PAHO), health agencies of the English-speaking countries and experts from a variety of nations, this book is designed to be a handy reference manual in pocketbook form for practitioners, teachers, and students of medicine and public health.

Each chapter has been updated based on information in the current literature. New chapters have been prepared for potentially communicable diseases which have come to light since the last edition. Over one million copies are in use throughout the world.

—Approx. 480 pages

Price: \$9.00, softcover (Stock No. 080)

APHA Member Price: \$7.20

ISBN 0-87553-130-X

El Control de las Enfermedades Transmisibles en el Hombre

(Only available in the 13th Edition, 1980)

Spanish language edition of Control of Communicable Disease in Man now available for our U.S. customers from APHA. Overseas customers may obtain the publication through the Pan American Health Organization.

Price: \$10.00 (Stock No. 083)

APHA Member Price: \$8.00

Model Standards: A Guide for Community Preventive Health Services

**APHA Project Task Force
Second Edition, 1985**

This volume provides community leaders with a set of goals and objectives to help them work together to improve health, the environment and the quality of community life. As a complement to the 1990 national objectives, the volume presents a framework, or model, to translate these national objectives to community specific standards for health outcomes and preventive service availability.

Covered are 34 program areas of preventive public health activity. The book employs a fill-in-the-blank approach to encourage local and state units to describe precise health achievements and the dates of completion. To aid public health leaders interested in Model Standards and the Objectives for the Nation, appropriate 1990 objectives have been identified at the end of each program area.

An appendix cross-references Model Standards to the 1990 Objectives for the Nation. The project is a cooperative effort among APHA, Centers for Disease Control, Association of State and Territorial Health Officials, National Association of County Health Officials, and United States Conference of Local Health Officers.

—288 pages

Price: \$10.00, softcover (Stock No. 031)

APHA Member Price: \$8.00

ISBN 0-87553-135-0

NEW

Monitoring Children's Health: Key Indicators

Eds.: C. Arden Miller; Amy Fine; Sharon Adams-Taylor; Lisbeth B. Schorr

First Edition, 1986

Available January, 1986

A report of the Child Health Outcomes Project at the University of North Carolina, School of Public Health. The book is designed to enhance understanding of trends in the health of children. It attempts to strengthen the foundation of solid data on which sound policy matters of children's health can be built.

Twelve indicators of child health are full described, and data sources are identified. Policy implications for each indicator are reviewed.

The book is intended for use by community service organizations, public health agencies, schools of public health, and advocacy organizations.

Contents:

- Description and Use of Indicators
- Indicators of Special Importance to Newborns and Infants
- Indicators of Special Importance to Children
- Indicators of Special Importance to Adolescents and Young Adults

There is no counterpart to this book. No other comprehensive, single source is available for the information compiled here.

— 168 pages

Price: \$15.00, softcover (Stock No. 023)

APHA Member Price: \$12.00

ISBN 0-87553-136-9

NEW

Housing and Health: APHA-CDC Recommended Minimum Housing Standards

Ed.: Eric W. Mood, MPH, LLD
Available February, 1986

This publication includes a 1985 revision of the former APHA-CDC Recommended Housing Maintenance and Occupancy Ordinance which now is called the APHA-CDC Recommended Minimum Housing Standards. Also included is a treatise on the health agency's responsibility for achieving minimum health standards in existing housing, and a brief history of housing and health in the U.S.A.

The minimum housing standards have been extensively revised to reflect new knowledge about housing conditions which may affect adversely the health of occupants. They are in a form which permits them to be adopted as legal minimum requirements or as a model for the enactment of a housing code.

The information is of great value to directors of health of state and local agencies, environmental health specialists, real estate personnel and others who are concerned about the quality of housing in which we live.

—Approx. 75 pages
Price: \$7.50, softcover (Stock No. 076)
APHA Member Price: \$6.00
ISBN 0-87553-138-5

NEW

Sex and Status: Hierarchies in the Health Workforce

**Eds.: Irene Butter, PhD; Eugenia Carpenter,
MPH; Bonnie J. Kay, PhD;
Ruth Simmons, PhD**

First Edition, 1985

Differences between men and women in the health labor force are pervasive in the United States and have major implications for the field of public health: for teaching and research, for the delivery of health care services, and for public action to promote health and prevent disease.

This monograph focuses on the unique contribution of gender to the human resource profile of the health system. It provides an overview of the composition and structure of the health labor force with emphasis on the role of men and women, and will review and analyze three distinct gender-based policy issues: (1) comparable worth, (2) the integration of women into elite positions and (3) credentialing.

—80 pages, tables, figures

Price: \$5.00, softcover (Stock No. 087)

APHA Member Price: \$4.00

ISBN 0-87553-134-2

NEW

Laboratory Methods for the Diagnosis of Sexually Transmitted Diseases

Eds.: Berttina B. Wentworth, PhD and
Franklyn N. Judson, MD

First Edition, 1984

This book brings together under one cover laboratory methods for the diagnosis of sexually transmitted diseases from syphilis to AIDS. It is a "how-to-do" book to be used by the laboratorian at the bench and by the clinician for the collection and handling of specimens and the interpretation of laboratory findings. There are detailed procedures for syphilis serology, rapid methods for identification of herpes simplex virus, methods for detection of Acute Urethral Syndrome, and methods for isolation and identification of such agents as *Neisseria gonorrhoeae*, *Chlamydia trachomatis*, *Gardnerella vaginalis*, *Haemophilis ducreyi*, *Mycoplasma hominis*, *Ureaplasma urealyticum* and *Pneumocystis carinii*.

Contents:

- Syphilis
- Gonorrhea
- Chlamydial Infections
- Herpes Simplex Virus
- Genital Mycoplasmata
- Vaginitis
- Cervical Cytology
- Genital Warts and Molluscum Contagiosum
- Chancroid and Granuloma Inguinale
- Intestinal Infections
- Acquired Immune Deficiency Syndrome (AIDS)
- Ectoparasites: Scabies and Pediculosis Pubis

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ISBN 0-87553-128-8

Methods for Quality Control in Diagnostic Microbiology

Eds.: J. Michael Miller, PhD and Bertina B. Wentworth, PhD

First Edition, 1985

This volume is a manual of methods for quality control in all areas of microbiology—bacteriology, virology, chlamydiology, mycology and parasitology. It brings together in one place quality control procedures for all aspects of the microbiology laboratory, including the operation of a quality control program, from preparation of a procedure manual and control of bacteriologic media through specific control measures for virus isolation, serologic testing, fungal isolation, and parasite identification. It is a book for both supervisors and bench technologists.

Contents:

- Procedure Manual
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- Media and Reagents
- Antimicrobial Susceptibility Testing
- Mycoplasma and Ureaplasma
- Parasitology
- Fungal Isolation and Identification
- Fungal Serology
- Viral Isolation and Detection
- Viral and Rickettsial Serology
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- Recordkeeping
- Equipment and Instrumentation
- Laboratory Safety

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Price: \$40.00, softcover (Stock No. 074)

APHA Member Price: \$32.00

ISBN 0-87553-121-0

Standard Methods for the Examination of Water and Wastewater

Eds.: Arnold E. Greenberg, R. Rhodes Trussell, and Lenore C. Clesceri
Sixteenth Edition, 1985

This new edition presents methods that have been extensively evaluated by experts within the *American Public Health Association*, *American Water Works Association* and the *Water Pollution Control Federation*, and by academic, government and industrial professionals. The first edition was published in 1905.

Copies of the previous edition are being used throughout the world, in the analysis and protection of water supplies and treatment and disposal of wastewater.

Content is organized with an emphasis on practical application of the methods. Extensive references also make this work an essential research tool.

Contents:

- General Information
- Physical Examination
- Determination of Metals
- Determination of Inorganic Non-Metallic Constituents
- Determination of Organic Constituents
- Examination of Water and Wastewater for Radioactivity
- Bioassay Methods for Aquatic Organisms
- Microbiological Examination of Water
- Biological Examination of Water

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Price: \$90.00 hardcover (Stock No. 038)

APHA Member Price: \$72.00

ISBN 0-87553-131-8

Glossary of Water and Wastewater Control Engineering

Eds.: Bob G. Rogers, WPCF; William T. Ingram, AWWA; Emanuel H. Pear, APHA; and Lloyd W. Weller, ASCE

Third Edition, 1981

A joint effort of the Water Pollution Control Federation, the American Water Works Association, the American Public Health Association and the American Society of Civil Engineers, the glossary presents up-to-date definitions of several thousand terms regularly used or having special meaning in water and wastewater engineering. The focus of the third edition is: reflection of the grant impact that chemistry and chemical engineering have had in the field, inclusion of appropriate terms related to regulatory agency involvement, and provision of metric unit equivalents as needed.

—441 pages

Price: \$25.00, hardcover (Stock No. 037)

APHA Member Price: \$20.00

ISBN 0-87262-262-2

Viruses in Water

Eds.: Gerald Berg, PhD; Howard L. Bodily, PhD; Edwin H. Lennette, MD, PhD; Joseph L. Melnick, MD; Theodore G. Metcalf, PhD

1976

This volume is designed to bring into perspective the implications to health and welfare derived from the role of viruses in the use of scarce water resources.

Contents:

- Part 1, Introduction to Viruses in Water
- Part 2, Epidemiology
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- Part 6, Perspectives

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Diagnostic Procedures for Bacterial, Mycotic and Parasitic Infections

**Eds.: Albert Balows, PhD, and
William J. Hausler, Jr., PhD**
Sixth Edition, 1981

The discussion of operation and management of laboratories includes a new chapter on the role of the laboratory in epidemiology, nosocomial infections, opportunistic infections, and infection control. New material on bacterial diseases includes cell wall defective organisms and their relation to infection, mycoplasma infections, antibiotic susceptibility testing and immunodiagnostic technics. The mycotic diseases section now covers opportunistic mycotic infections and antifungal susceptibility tests. The section on parasitic diseases has new chapters on malaria, protozoan and helminth infections. The book gives an authoritative discussion of the agent involved in "Legionnaires' disease."

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Eds.: Edwin H. Lennette, MD, PhD,
and Nathalie J. Schmidt, PhD
Fifth Edition, 1979

Recent breakthroughs in knowledge of the herpes viruses, followed by an explosion of research, have brought a new understanding of viral hepatitis, viral gastroenteritis, and Epstein-Barr viral disease. The book contains the latest information in these areas and also on viral immunology—cell-mediated immunity, immune complexes, and the relation of immunoglobulin classes to laboratory diagnosis. New chapters on radioimmunoassay and immunoenzymatic technics have been added and the chapter on fluorescent antibodies expanded. Finally, the new title reflects the increasing recognition of the *chlamydiae* as important disease agents.

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Compendium of Methods for the Microbiological Examination of Foods

Ed.: Marvin L. Speck, PhD
Second Edition, 1984

Prepared by a distinguished Technical Committee of scientists working in this field, the manual presents a comprehensive selection of proven methods, in one volume, with an emphasis on accuracy, relevance, and reliability. The material was developed under contract with the Food and Drug Administration.

In the second edition, all chapters have been updated where needed. Four new chapters have been added on 1) laboratory quality assurance, 2) water activity, 3) campylobacter, and 4) bottled water. The chapter on injured microorganisms has been completely revised due to the increased importance of debilitated microbial cells in foods.

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- General Laboratory Procedures (3 Chapters)
- General Enumeration Procedures (4 Chapters)
- Special Procedures (1 Chapter)
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- Indicator Microorganisms and Pathogens (13 Chapters)
- Microorganisms and Food Safety, Food-Borne Illness (4 Chapters).
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Standard Methods for the Examination of Dairy Products

Ed.: Gary H. Richardson, PhD
Fifteenth Edition, 1985

Contains many important revisions including the APHA system for classification of methods. A new chapter on safety and quality assurance has been added and the material previously included in appendices has been incorporated in appropriate chapters. Microbial testing of dairy products has been combined in one chapter. Direct microscopic methods have also been combined. Current chemical and physical methods for analyses of dairy foods are included in addition to traditional microbiological techniques. This text contains all of the methods approved by regulatory agencies for microbiological and somatic cell counts.

Contents:

- Standard Methods
- Significant Pathogens in Dairy Products
- Laboratory Quality Assurance and Safety
- Sampling Dairy and Related Products
- Media
- Microbiological Count Methods
- Alternative Microbiological Methods
- Coliform Bacteria
- Tests for Groups of Microorganisms
- Microbiological Methods for Dairy Products
- Direct Microscopic Methods for Bacteria or Somatic Cells
- Methods to Detect Abnormal Milk
- Reduction Methods
- Detection of Antibiotic Residues in Milk and Dairy Products
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Methods of Air Sampling and Analysis

Ed.: Morris Katz, PhD
Second Edition, 1977

Developed under contracts with the Environmental Protection Agency (EPA) and the National Institute of Occupational Safety and Health (NIOSH) by an Intersociety Committee representing thirteen professional societies, this text sets forth standardized methods of sampling and analysis of ambient and workplace air.

In the second edition of this comprehensive manual, 130 methods are recognized for their reproducibility. Included are methods from the first edition, a variety of methods published in APHA's quarterly, *Health Laboratory Science*, as well as previously unpublished manuscripts. The methods are preceded by a discussion of precautions, techniques, reagents and equipment.

Contents:

- Part I—General Precautions and Techniques
- Part II—Carbon Compounds: Halogen and Halogen Compounds; Metals; Inorganic Nitrogen Compounds and Oxidants; Particulate Matter; Radioactivity; Sulfur Compounds
- Part III—Methods for Chemicals in Air of the Workplace and in Biological Samples
- Part IV—State-of-the-Art Reviews
- Part V—Recommended Factors and Conversion Units.

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ISBN 0-87553-079-6

Laboratory Procedures for the Examination of Seawater and Shellfish

Ed.: Arnold E. Greenberg and Daniel A. Hunt
Fifth Edition, 1984

Formerly entitled Recommended Procedures for the Examination of Sea Water and Shellfish, this first new edition in more than a decade contains updated bacteriological, chemical and physical tests for seawater and shellfish, as well as procedures for measurement of shellfish toxins and virus contaminants. The text continues to place special emphasis on the tests for coliform and fecal coliform bacteria, by both the multiple tube fermentation and the membrane filter techniques.

Combined, these tests can indicate pollution probabilities in shellfish-growing areas and potentially dangerous contamination of the product during harvesting, washing, packing and marketing.

The plate count gives an indication of general sanitation and of adverse conditions during processing, storage and transportation. Such chemical and physical tests as temperature, salinity and dissolved oxygen are important in defining the shellfish environment. Naturally occurring toxins that affect humans may be present in some seasons, in some locations, and mouse bioassay procedures for them are included. Virological techniques have been newly added for measurement of human enteric viruses.

Contents:

- Apparatus and Media
- Field Methodology
- Procedures for the Bacteriological Examination of Seawater and Shellfish
- Bioassay Procedures for Shellfish Toxins
- Procedures for the Virological Examination of Seawater, Shellfish and Sediment
- Appendix

—144 pages, tables, figures

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APHA Member Price: \$12.00

ISBN 0-87553-119-9

Quality Assurance Practices for Health Laboratories

Ed.: Stanley L. Inhorn, MD
First Edition, 1978

An invaluable asset for information gathering and processing in the laboratory, this book is written specifically to help laboratory professionals manage quality assurance procedures. The text presents preventive, assessment, and corrective activities for laboratory processes.

Over a period of six years, APHA, together with the Centers for Disease Control, compiled ideas from 100 experts, plus 29 professional and 8 governmental agencies active in the health laboratory field to prepare this comprehensive methodology.

Contents:

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- Laboratory Facilities and Services
- Measurement Evaluation
- Data Transmission

Part II—Ambient Air Testing

- Anatomic Pathology
- Blood Banking
- Clinical Chemistry
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- Analytical Food Chemistry
- Food Microbiology
- Hematology
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- Clinical Microbiology
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- Clinical Toxicology
- Virology
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- Index.

—1244 pages.

Price: \$50.00, hardcover (Stock No. 010)

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ISBN 0-87553-083-4

Public Health Law Manual

Ed.: Frank P. Grad, PhD
First Edition (revised), Seventh Printing, 1981

Designed as a reference text and for use in schools of public health and courses of continuing education, this manual is concerned with basic legal procedures and principles applicable to public health.

Contents:

- Purpose of the Manual
- The Constitutional and Legal Bases for the Regulation of Public Health
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- The Place of Public Health Law in State and Federal Government
- Public Health Enforcement and the Bill of Rights—Protection of the Individual against Improper Interference with His Person and Property
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- Violation Orders, Orders to Abate, and to Cease and Desist
- Civil Sanctions; Injunctions
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—234 pages; citations

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Local Health Departments Fifteen Case Studies

**Eds.: C. Arden Miller, MD, and
Merry-K. Moos, BSN, MPH**
1981

Miller and Moos present case studies of 15 highly successful local health programs that represent a wide range of urban and rural settings. All have combined skillful management with flexibility, ingenuity, and creativity. Miller and Moos analyze these 15 exemplary public health programs and draw out their common and unique elements.

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- Noteworthy Health Departments: Characteristics and Interpretations
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Ambulatory Maternal Health Care and Family Planning Services Policies, Principles, Practices

Ed.: Florence E.F. Barnes, DHSc, MPH

Despite significant improvements in maternal and child health care over the past half century, problems and unmet needs continue to exist.

The conceptual framework of the guidelines goes beyond meeting medical/physical needs—they encompass both a preventive and therapeutic approach with a concern for the emotional, social, and economic needs of the community. Their ultimate goal is the improvement of both the outcome of pregnancy and total family and community health; this book is the result of their work.

Contents:

- Prenatal, Postpartum, and Interconceptional Care
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Nutritional Assessment in Health Programs

Ed.: George Christakis, MD, MPH
First Edition, 1973; Seventh Printing, 1984

This book supplies information useful to administrators and clinical nutritionists, teachers and students of nutrition and dietetics, researchers, dietetic practitioners and consultants, and those who plan and carry out nutrition surveys and public health programs.

Contents:

- Community Assessment of Nutritional Status
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- Laboratory Assessment of Nutritional Status
- Nutritional Assessment of the Infant, Child and Adolescent
- Maternal Nutritional Assessment
- Nutritional Assessment of Adults and the Elderly
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- NAS/NRC Recommended Daily Dietary Allowances
- Selected References and Sources of Data

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ISBN 0-87553-116-4

Mental Health: The Public Health Challenge

Ed.: E. James Lieberman, MD
1975

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Public Swimming Pools: Recommended Regulations for Design and Construction, Operation and Maintenance

**Ed.: Eric W. Mood, MPH
1981**

This volume sets forth minimum conditions which will provide and protect the health, safety and well-being of those using swimming pools.

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- Inlets
- Drains
- Surface Overflow System
- Filters
- Disinfectant and Chemical Feeders
- Ladders, Recessed Steps and Stairs
- Decks and Walkways
- Depth Markings and Lane Lines
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St. Louis Encephalitis

Ed.: Thomas P. Monath, MD
1980

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- St. Louis Encephalitis in Tropical American
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- Convalescence and Sequelae
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APHA Member Price: \$32.00

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A Guide to Medical Care Administration

Volume I: Concepts and Principles

Ed.: Beverlee A. Myers, MPH

First Edition (Revised 1969);

Seventh Printing, 1978

Dealing with the basic elements of organizing and financing personal health services, this volume provides a unified approach to problem-solving, and the development of guidelines for action.

It is of interest to anyone who has a present or potential responsibility for assuring the adequacy of personal health services.

— 114 pages; tables and figures

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Ed.: Avedis Donabedian, MD

First Edition 1969; Third Printing, 1978

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CONSTITUTION & BY-LAWS

American Public Health Association, Inc.

CONSTITUTION

(As Amended by the Association Members, March 1981)

ARTICLE I Name

The name of this Association, incorporated under the laws of Massachusetts, is the American Public Health Association.

ARTICLE II Object

The object of this Association is to protect and promote personal and environmental health. It shall exercise leadership with health professionals and the general public in health policy development and action, with particular focus on the interrelationship between health and the quality of life and on developing a national policy for health care and services and on solving technical problems.

ARTICLE III Membership

Section 1. There shall be two classes of individual constituents to be designated as Members and Honorary Members; and three classes of organization constituents to be designated as Affiliated Associations, Agency Members, and Sustaining Members.

Section 2. The right to hold office, to vote, or to serve the Association in any capacity shall be open to all individual constituents.

ARTICLE IV Governing Council Composition

Section 1. There shall be a Governing Council which shall consist of voting and nonvoting members as follows:

The voting members shall be:

(a) Two elected representatives of each Section and such additional number of elected representatives of each Section, and of the unaffiliated membership, as is determined annually by the Executive Board based on the ratio of primary members in each group to total membership in the Association.

(b) One representative to be designated by each Affiliated Association, such representative to be a member of APHA.

(c) The officers of the Association and members of the Executive Board, except for the Executive Director.

Voting Councilors who concurrently hold positions that also give them ex officio nonvoting Council membership shall retain their voting privileges.

The ex officio members without vote:

(a) The Chairperson of each Association Council.

(b) The Chairperson of the Program Development Board.

(c) The Chairperson of the Action Board.

(d) The Chairperson of each Standing Committee of the Association.

(e) The Executive Director.

(f) Chairpersons of the Sections.

(g) Past-Presidents of the Association.

Section 2. Councilors elected by Sections and the unaffiliated membership shall be elected to two-year terms and shall not be eligible to serve in that capacity for at least two years after expiration of three consecutive terms. Terms of such Councilors shall begin at the close of the annual meeting in the year they are elected and shall terminate at the close of the annual meeting at which their respective terms expire. Governing Council elections shall be held annually on the basis of an apportionment determined from the membership in the Association and its units on September 1 of the preceding year.

The terms of the representatives of Affiliated Associations shall begin and terminate in accordance with the constitution and by-laws of their respective organizations.

Section 3. The officers of the Association shall be the officers of the Council and the Executive Director shall act as Secretary of the Council. The Speaker of the Council shall preside at all meetings of the Council and shall perform such other duties as custom and parliamentary usage require. He/she may consult a parliamentarian, who shall be appointed by the Executive Board, when a question of order arises. In the absence of the Speaker, the President or a Vice-President shall preside.

Section 4. A quorum of the Council shall consist of 50 percent of the voting Councilors.

Section 5. Meetings of the Council shall be called by the Executive Director at the request of the President, or at the request in writing of any thirty voting Councilors. In the latter case, the call to the meeting shall be issued at least twenty days in advance of the meeting and shall state the purpose for which it is called.

ARTICLE V Elections

It is a general policy of the Association that there should be at least two nominees for each Section office, representatives to the Governing Council, and members of the Executive Board. There may be two or more nominees for each national Association office, except for the office of President which shall be assumed by the President-Elect of the previous year. Whenever there are two or more nominees for any position, mail ballots to the appropriate membership shall be used except in the case of those offices where election is by the Governing Council. Provision shall be made for voting by proxy by all units of the Association.

ARTICLE VI Governing Council Functions

The functions of the Governing Council shall be:

Section 1. To establish policies and amend the By-laws of the Association and to adopt rules for the conduct of its own business.

Section 2. To establish policies for the Association and for the guidance of the Executive Board and the officers.

Section 3. To receive and act upon reports or recommendations from any organization constituent, the Program Development Board, the Action Board, the Standing Committees, and the Executive Board.

Section 4. To receive at its first session at the time and place of the annual meeting a report from the Chairperson of the Executive Board in which the work, the accomplishments, and the financial status of the Association during the year preceding such annual meeting shall be reviewed and a statement made of the major activities contemplated for the ensuing year.

Section 5. To establish Sections of the Association, on request to establish Departments of the Association, consisting of several Sections; to combine or discontinue Sections or Departments; to prescribe the composition of Section Councils; to maintain coordination among Sections or Departments; and to formulate general rules governing their policies.

Section 6. To elect the Executive Board, the officers of the Association, and Honorary Members.

Section 7. To recognize Affiliated Associations.

Section 8. To make available to the general membership an abstract of the minutes of each of its meetings.

ARTICLE VII Officers

The officers of this Association shall be a President, a President-Elect, the immediate Past President, three Vice-Presidents, an Executive Director, a Treasurer, the Chairperson of the Executive Board, and the Speaker of the Council. The officers, with the exception of the President, the immediate Past President, the Chairperson of the Executive Board, and the Executive Director, shall be elected by the Governing Council, as provided in the Constitution and in the By-laws.

The immediate Past President shall serve from the close of the annual meeting at which her/his term as President expires to the close of the next succeeding annual meeting. The President-Elect shall serve as such from the close of the annual meeting at which he/she is elected to the close of the next annual meeting, when he/she shall automatically become President. As President he/she shall serve to the close of the next succeeding annual meeting. However, in case of the inability of the President to complete her/his term for any reason, the President-Elect shall at once succeed to the duties of President, filling the unexpired term of her/his predecessor and her/his own term consecutively. The Speaker of the Council and the Treasurer shall serve concurrent three year terms from the close of the annual meeting when elected until the close of the annual meeting at which their terms expire. Other officers, except the Chairperson of the Executive Board and the Executive Director, shall serve from the close of the annual meeting when elected until the close of the next annual meeting, and all officers shall serve in any case until their successors are elected and qualified. A majority vote of the Councilors voting shall be required to elect, and if no candidate receives a majority vote on the first ballot, the candidate receiving the smallest number of votes shall be dropped after each ballot in succession until a majority vote is obtained. The

Chairperson of the Executive Board and the Executive Director shall be elected by the Executive Board, which Board shall define the duties, authority, and terms of office of these officers, respectively.

ARTICLE VIII Executive Board

Section 1. There shall be an Executive Board, consisting of the President, the President-Elect, the immediate Past President, the Treasurer, and twelve members to be known as the Elective Members, elected from among individual constituents of the Association for terms of four years each by the Governing Council. The Executive Director and Chairpersons of the Action Board and the Program Development Board shall serve as members of the Executive Board ex officio without vote.

Section 2. Election to membership on the Executive Board shall terminate any appointment by the Executive Board.

Section 3. It shall be the duty of the Executive Board to direct the administrative work of the Association; to act as the Trustee of the Association's properties; to elect Agency Members and Sustaining Members; to act on technical standards on behalf of the Association; to coordinate and review recommendations of Association Councils, Standing Committees, the Action Board, and the Program Development Board; to adopt interim policies which shall be in effect until the next meeting of the Governing Council; and in general to carry out the policies of the Governing Council between meetings of the latter.

The Executive Board shall establish its own rules of procedure and have such further powers and duties as may be prescribed in the By-laws.

Section 4. A quorum of the Executive Board shall consist of eight members.

ARTICLE IX Finances

Section 1. All funds received by the Association

shall be deposited promptly in such accounts as may be approved by the Executive Board. The Executive Director shall arrange for their disbursement in accordance with duly authorized vouchers. The Executive Board may give signatory powers to others responsible to the Executive Director to facilitate her/his work.

Section 2. The financial records of the Association shall be audited annually by certified public accountants to be selected by the Executive Board. The report of this audit shall be published annually in an official publication of the Association.

Section 3. All individuals having access to the Association's assets and/or accounting records shall be covered by a fidelity bond to be purchased by the Association.

Section 4. The Treasurer shall monitor the financial affairs of the Association and shall report on the financial status at all regular meetings of the Executive Board and the Governing Council.

ARTICLE X Amendments

This Constitution may be amended by the individual constituents voting thereon in a ballot cast by mail, provided that the specific amendment to be acted upon is published in the official publication of the Association not less than thirty days prior to the mailing of the ballots to the individual constituents by the Administrative Office, and provided further that the amendment has received prior approval by the Governing Council in the same manner as provided in the By-Laws for amendments to the By-Laws. The closing date for the reception of ballots shall be forty-five days from the date of the mailing of the ballots by the Administrative Office. An amendment shall become effective only upon receiving an affirmative vote on two-thirds of the ballots cast by the individual constituents. The Presidents shall designate Tellers to canvass the ballots and to report the result to the Governing Council as provided in the By-laws.

BY-LAWS

(As Amended by the Governing Council, November 15, 1984)

ARTICLE I Membership

Section 1. Health professionals, other career workers in the health field, students of the health professions, and other persons interested in public health shall be eligible for election as members according to procedures prescribed by the Executive Board.

(a) A member may declare her/his affiliation with several Sections according to her/his interests, but shall designate one Section or unaffiliated status as her/his primary affiliation. He/she may transfer her/his primary affiliation from one Section to another or to unaffiliated status, but not more than once annually.

(b) Any individual constituent shall be eligible to hold office and committee appointments in the Association; to vote on all matters in her/his primary Section; and to vote on all matters except for election of officers or Governing Councilors in other Sections of which he/she may be a member.

Section 2. Individuals or corporations interested in public health may be elected to Sustaining Membership by a three-fourths vote of the Executive Board. Sustaining Members shall be entitled to receive the Journal and such other publications of the Association as the Executive Board may designate.

Section 3. No person may become a Life Member after December 1, 1974 but all persons

who became Life Members under prior provisions of these By-laws shall retain all the privileges of Life Membership.

ARTICLE II Fellows and Honorary Members

Section 1. No person may be elected a Fellow after December 1, 1975, but all persons who were elected Fellows under prior provisions of these By-laws shall retain all privileges of Fellowship.

Section 2. Distinguished service in public health may be recognized by Honorary Membership in the Association. Election shall be by

a three-fourths vote of the Governing Council, upon recommendation of the Executive Board. Honorary Membership shall not confer voting rights in the Association except that Honorary Members who have previously been Members shall retain all the privileges of Association membership.

ARTICLE III Agency Membership

Section 1. Agency Membership shall be open to state and local official and voluntary organizations engaged in public health work or other programs having a close relationship to health services. The following types of agencies shall be considered to meet this requirement: (1) official health agencies, (2) voluntary health agencies and institutions, (3) health and welfare councils, (4) agencies providing health services as part of a broader program, and (5) other agencies and organizations that have established a recognized standing in the health field.

Section 2. An agency applying for membership shall submit such information on its organization, program, and other evidence of its qualifications as may be required.

Section 3. Election to Agency Membership shall be by a three-fourths vote of the Executive Board.

Section 4. In return for benefits derived from membership or for services rendered, Agency Members may elect to discharge their financial obligations to the Association through fees, as established by the Executive Board, instead of, or in addition to, the dues specified in Article V, Section 3.

ARTICLE IV Affiliated Associations

Section 1. A state or territorial public health association or similar association, including more or less than a state, and organized for the same general objects as the American Public Health Association, may be elected by a three-fourths vote of the Governing Council as an Affiliated Association. Not more than one such association shall be admitted from the same area.

Section 2. An association applying for affiliation shall submit a copy of its constitution and by-laws, its last annual accounting of income and expense, a roster of its members, and such other evidences of its qualifications as may be required. Each Affiliated Association shall submit an annual report within one month after its annual meeting which shall include information on financial standing, membership, changes in constitution and by-laws, and any other matters directed by the Executive Board.

Section 3. The Executive Board shall consider all applications for affiliation and questions regarding continued affiliation and report its recommendations to the Governing Council.

ARTICLE V Dues

Section 1. The following constituents shall be exempt from the payment of annual dues:

Honorary Members, Life Members, and Members who have been affiliated with the Association for thirty years or more and who have retired from active duty, and Members who have been affiliated with the Association for forty years regardless of retirement. The dues of all other constituents are payable annually in advance.

Section 2. The Executive Board shall establish a schedule of dues for Association membership and for multiple Section membership, both subject to approval by a two-thirds vote of the Governing Council.

Section 3. Annual dues for Agency Members shall be based on the number of employees in the agency. The rates to be paid by such members shall be established by the Executive Board subject to approval by two-thirds vote of the Governing Council.

Section 4. The dues for Affiliated Associations shall be assessed on a capitation basis with a differential providing a lower per capita payment for affiliate members who are also members of the American Public Health Association. The capitation rate shall be established by the Executive Board, subject to approval by a two-thirds vote of the Governing Council.

Section 5. The dues for Sustaining Members shall be set by the Executive Board, subject to approval by a two-thirds vote of the Governing Council and the minimum dues shall be \$750 annually.

ARTICLE VI Discontinuance of Membership

Section 1. Nonpayment of dues shall be a cause for discontinuance of membership of any constituent after a grace period to be determined by the Executive Board, provided that constituents in arrears have been notified prior to the expiration of the grace period by the Executive Director by mail. Constituents whose membership has been discontinued for nonpayment of dues may be reinstated, provided such person or organization complies with the eligibility requirements then effective.

Section 2. If, in the opinion of the Executive Board, any Member, or Fellow, or other constituent of the Association permits the use of her/his name, or otherwise allows herself/himself to be quoted or used for illustration in the advertising of a commercial product, in such a manner as to reflect discredit upon the Association, his/her membership, Fellowship, or affiliation with the Association shall thereupon be terminated.

Section 3. Upon the recommendation of the Executive Board, the Governing Council may discontinue the membership or affiliation of any constituent. Three-fourths of the votes cast shall be necessary for such action.

ARTICLE VII Publications

Section 1. All publications of the Association shall be issued under the direction of the Ex-

ecutive Board. Reports, declarations, or statements, not involving standards, emanating from any Section, Committee, Board, or Council may be published under the name of the responsible Section, Committee, Board, or Council, provided that such report, declaration or statement is approved for publication by a majority of the members of the responsible unit, and by a referee mutually agreed upon by the Chairperson of the Executive Board and the responsible Association unit.

Section 2. The American Journal of Public Health shall be the official Journal of the Association. The Executive Board shall appoint a Managing Editor of the official Journal and an Editorial Board of not less than five members to serve at the pleasure of the Executive Board.

Section 3. The Executive Board shall appoint a Publications Board of not less than five members to serve at the pleasure of the Executive Board, to foster development and revision of books published by the Association.

ARTICLE VIII Executive Board

Section 1. The Executive Board shall elect from its own membership a Chairperson who shall serve in that capacity for such term as the Executive Board shall determine. It shall also designate such other officers of the Board as it may require for the conduct of its business.

Section 2. If a vacancy occurs among the Elective Members of the Executive Board, the Board, after consultation with the Nominating Committee for Association Officers, shall designate a new Member to serve until the next meeting of the Governing Council, at which time the vacancy will be filled by election as provided in Article IX of these By-laws, except that, at the discretion of the Executive Board, the prior submission required by Article IX, Section 2, may be waived.

Section 3. In addition to those prescribed in the Constitution and in these By-laws, the Executive Board shall have the following powers and duties:

(a) To plan methods for the procurement of funds.

(b) To approve the budgets for the Association's work and to publish summaries of the budgets in the official publication of the Association promptly after their adoption.

(c) To conform to the policies of the Governing Council in the conduct of its work.

(d) During intervals between meetings of the Governing Council, to possess and exercise all the powers of the Council in the management and direction of the business and professional activities of the Association in all cases in which specific directions have not been given by the Governing Council.

(e) To appoint the members and designate the Chairperson of the Program Development Board and its Councils and Task Forces, after

receiving the advice of the Program Development Board. To ratify the President's designations of members of the Action Board. To authorize the establishment; appointment of the members, and designations of the Chairpersons of all other Association committees, including an Executive Committee of the Executive Board.

(f) To act as the official accrediting body of the Association. The Executive Board may delegate this function to another organization unit.

(g) To transmit a report of its proceedings and transactions to the Governing Council at least thirty days before each annual meeting.

Section 4. No Elective Member of the Executive Board, except one serving as Chairperson, may serve again as an Elective Member until at least one year following expiration of a full term. The terms of Elective Members shall begin at the close of the annual meeting at which they are elected and terminate at the close of the annual meeting at the expiration of their respective terms. The terms of no more than three Elective Members shall expire in any year.

ARTICLE IX Nomination and Election of Officers

Section 1. There shall be a Committee of the Governing Council to be known as the Nominating Committee for Association Officers, composed of the President, the Chairperson of the Executive Board and six members of the Governing Council, who shall be chosen as provided in Section 7 of this Article. Such Committee shall serve from the time of its election until it shall have read its report at the first regularly scheduled session of the Governing Council at the next following annual meeting.

Section 2. Not less than thirty days prior to the annual meeting such Nominating Committee shall submit to the membership of the Governing Council, either by mail or by publication in the official Journal, the name or names of one or more nominees for each of the offices of President-Elect, three Vice-Presidents, and Treasurer, and for each of the vacancies among the Elective Members of the Executive Board, including those due to terms expiring at the close of that annual meeting. The Nominating Committee shall similarly submit the name or names of one or more nominees from among the present or past members of the Governing Council for the office of Speaker of the Council, whenever a vacancy exists. In the event that more than three vacancies exist among the Elective Members of the Executive Board, the Nominating Committee shall specify the terms of the nominees. All nominees shall be selected from among the membership of the Association, except that the nominees for two of the offices of Vice-President may include persons from the Americas outside the United States who are not members of the Association.

Should a nominee become unavailable for election after the submission of the list by mail or publication, the Nominating Committee is authorized to make substitute proposals in its verbal report to the first meeting of the Governing Council.

Section 3. Upon the petition of any twenty voting members of the Governing Council such Nominating Committee shall add to the list of candidates selected by it the name of any eligible candidate for the office specified in such petition; providing such petition is received by the Nominating Committee for Association Officers and found by it to be valid. The report of such Nominating Committee, including all the nominees for each of the offices, shall be presented immediately following the approval of the minutes at the first session of the Governing Council held at the annual meeting.

Section 4. The election of officers and Elective Members of the Executive Board shall be held at the last session of the Governing Council scheduled to be held during the annual meeting.

Section 5. The officers of the Association shall be elected in the manner prescribed in the Constitution, provided, however, that whenever the number of nominees for an office or group of offices does not exceed the number of offices to be filled, the Secretary may be directed to cast the ballot of the Governing Council for the nominee or nominees.

Section 6. Whenever a vote by individual ballot is required the President shall appoint three Tellers who shall ascertain and report the results of the ballots cast. Whenever there is a tie between two or more candidates which makes it impossible to determine either the election or the order of precedence between them, a second ballot shall be taken limited to the candidates involved in the tie.

Section 7. At the second meeting of the Council, the Governing Council shall elect three of its members to serve on the Nominating Committee for Association Officers for the ensuing year and the next succeeding year. No more than one of the six elected members may hold primary affiliation with any one Section of the Association, nor may any such elected member be an officer of the Association, a member of the Executive Board, a Chairperson of a Standing Committee, the Program Development Board or Councils, or the Action Board. The election shall be by ballot from among the candidates nominated from the floor. The three candidates, satisfying the requirements of this Section 7 and receiving the highest number of votes shall be declared elected. Ties shall be determined as provided in Section 6 of this Article. Immediately after the election, the President shall designate one of the six elected members as Chairperson. In the event there is no person elected or continuing to serve an unexpired term on the Nominating Committee who represents a racial or ethnic minority group, then the Executive Board shall

appoint one such person to be an additional member of the Nominating Committee for a term of one year.

Section 8. If a vacancy occurs in the office of the President-Elect more than ninety days prior to the opening date of the annual meeting, the Nominating Committee for Association Officers shall prepare a list of one or more names which will be mailed to the members of the Governing Council. On petition signed by twenty members of the Governing Council additions may be made to this list. Thirty days subsequent to the mailing of the list, the list of nominees, including any additions by petition, will be submitted to the Governing Council for a mail ballot. If the vacancy occurs less than ninety days before the annual meeting, the Nominating Committee for Association Officers will be instructed to present to the first meeting of the Governing Council a candidate or candidates for the office of President, making prior notification by publication or in writing to the Governing Council unless the Executive Board decides such notification may be waived.

ARTICLE X Action Board

There shall be an Action Board whose function shall be to formulate, plan, organize and pursue the implementation of Association policies and positions, including development and pursuit of an annual legislative program. To this end it shall stimulate and collaborate with all appropriate units of the Association and its affiliates in assuring implementation of nationwide policies and developing state and regional policies; encourage establishment of relationships with organizations outside of the Association with interest in joint action; initiate and assist in the development of a comprehensive body of public policy for the Association; and review annually progress in promoting realization of Association policies and positions.

The voting membership of the Action Board shall consist of a Chairperson, who shall be appointed by the President each year; a Vice-Chairperson, appointed by the President-Elect each year; the Immediate Past Chairperson; one representative of each of the Sections, who shall be chosen by the President from among a panel of three names submitted by each Section in any year when a term of their representative expires, each of whom serves a two-year term and may not serve two successive terms; and four members-at-large, two of whom are appointed in any given year by the President to two-year terms, and who may not serve two successive terms. In addition, the Chairperson of the Program Development Board and the Executive Director shall serve as members ex officio without vote.

The Action Board shall appoint appropriate subcommittees including a committee to receive and present policy statements and resolutions for Governing Council action. Operations of the Action Board shall be carried out within a budget annually established by the Executive Board.

lized in nominating and voting for Governing Council members.

Section 3. The officers of each Section shall be a Chairperson, Chairperson-Elect, and a Secretary.

Section 4. New terms shall begin and old terms shall expire at the close of annual meetings. After five consecutive years in any elective Section office, an officer shall be ineligible to reelection to that office during one Association year.

Section 5. The Chairperson, or in her/his absence the Chairperson-Elect, shall preside at meetings of the Section.

Section 6. The Secretary shall keep the minutes and other records of the Section, and shall transmit to the Executive Director of the Association a copy of the minutes of both the business and scientific sessions as soon as practicable after the close of the annual meeting. When unable to be present at the meeting, he/she shall thoroughly instruct the Secretary-Elect, or a substitute in the event that the Section has no Secretary-Elect, as far in advance of the meeting as possible.

Section 7. A Secretary-Elect may assist the Secretary in her/his duties.

Section 8. There shall be a Section Council composed of the officers of the Section, the immediate past Section Chairperson until succeeded, and six members, the latter to be known as the elective members, each of whom shall be elected for a term of three years; provided that when a Section is first established two members shall be elected for one year, two for two, and two for three years.

Section 9. The duties of the Section Council shall be:

(a) To make general recommendations in relation to the annual meeting program.

(b) To act on Section membership and on Section policies.

(c) To submit annually to the Governing Council through the Executive Board a report of the transactions of the Section.

(d) To report annually to the Governing Council through the Executive Board on the plans, scope, and policy of the Section during the succeeding year.

(e) To formulate rules of procedure for the Section.

(f) To consider and transmit to the Governing Council resolutions originating in the Section. Only resolutions approved by the Governing Council shall be published as representing the policy of the Association.

(g) To advise on the publication of papers and reports presented at the Section meetings.

(h) To advise the Executive Board with respect to the organization and membership of the Action Board, the Program Development Board, Councils, Task Forces, and Standing Committees.

Section 10. If a vacancy occurs more than ninety days prior to the opening date of the annual meeting among the officers of a Section Council, the Council shall designate a new member to serve until the next meeting of the Section, at which time the vacancy will be filled by election as provided in Section 2 of this Article.

ARTICLE XIV Departments

General rules regarding the affairs of Sections shall govern Departments.

ARTICLE XV Committee on Affiliates

Section 1. There shall be a Committee on Affiliates whose functions shall be:

(a) To study, recommend, monitor, and coordinate the ways in which APHA can strengthen Affiliated organizations;

(b) To study, recommend, monitor, and coordinate the ways in which Affiliated organizations can strengthen APHA;

(c) To study, recommend, monitor, and coordinate the ways in which APHA/Affiliated organization relationships can be strengthened.

Section 2. The Committee on Affiliates shall consist of fifteen members. Ten of the members shall represent Affiliates and shall be selected from among the Affiliate Representatives on the Governing Council in each of the ten federal regions, respectively, by vote of the Affiliate Representatives on the Governing Council in the region. The remaining five members shall be appointed by the Executive Board.

ARTICLE XVI Representation of Minority Groups and Women

Section 1. Prior to nominating any person for or appointing any person to any vacancy on any board, council, task force, committee, Section office, or other position, special consideration shall be given to choosing a person who represents a racial, ethnic, or other minority group. In addition, consideration shall similarly be given to choosing a woman for each vacancy.

Section 2. The Executive Board shall monitor such representation of minority groups and women and shall make a report at least annually to the Association.

ARTICLE XVII Fiscal Year

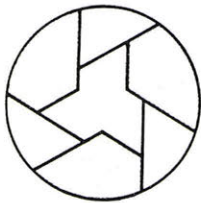
The Association's fiscal year shall be the calendar year.

ARTICLE XVIII Meetings of the Association

There shall be one general meeting of the Association, to be known as the annual meeting, which shall be held each year at a time and place designated by the Executive Board, provided that the Governing Council shall be informed in due course of the general plans for future annual meeting cities. The Governing Council may, however, determine by voting, at a regular meeting or by ballots cast by mail, that the annual meeting for a stated calendar year shall not be held; and provided further, that in case of great emergency the Executive Board may defer any annual meeting for not to exceed three months. Special meetings of the Association may be called by a majority vote of the Governing Council, the Executive Board, or the Association. In all proceedings of the Association, Robert's Rules of Order shall be official.

ARTICLE XIX Amendments

These By-laws may be amended by a two-thirds vote of those voting on the Governing Council during the annual meeting, provided that forty-eight hours prior written notice thereof has been given. The By-laws may further be amended by a two-thirds vote of those voting at any meeting of the Governing Council called for the purpose, provided that notice thereof shall have been given at least twenty days prior to such meeting.



AMERICAN PUBLIC HEALTH ASSOCIATION

1015 Fifteenth Street, N.W., Washington, D.C. 20005 • (202) 789-5600

March 1987

Dear Colleague:

In a large membership organization it is understandable if one feels a sense of estrangement from time to time. However, I want to do whatever I can to reassure you that we consider each member of the American Public Health Association a valuable person. You are important to the Association.

Since, as I am informed, your membership has expired and you have not renewed, I am interested in knowing whether in some way our membership benefits have not measured up to your expectations or whether there are other circumstances over which we have no control.

From our standpoint, we need every health worker on our team as we wrestle with major national and world health issues in our efforts to find solutions to the complicated health issues and priorities of our day.

I'd appreciate hearing from you on the enclosed form, and hopefully, receiving your renewal for your membership reinstatement. I'm enclosing a dues renewal form and a return envelope for your convenience.

Thank you for your time, your interest, and your opinions.

Very truly yours,

William H. McBeath, MD, MPH
Executive Director



AMERICAN PUBLIC HEALTH ASSOCIATION

1015 Fifteenth Street, N.W., Washington, D.C. 20005 • (202) 789-5600

MEMO TO: William H. McBeath, MD, MPH

1. Renewal just passed by before I realized it; check enclosed ().
2. I specifically decided against renewing recently for the following reason(s):

3. I did () did not () receive your publications (AMERICAN JOURNAL OF PUBLIC HEALTH and THE NATION'S HEALTH regularly and on time. I did () did not () find them useful, interesting or valuable to me.

4. I did () did not () attend the APHA Annual Meeting in Washington, DC last November. I have () have not () attended previous Annual Meetings of APHA.

5. On a scale of 1 to 10 (10 being the highest), I rate the benefits of APHA as follows:

- _____ A. American Journal of Public Health
- _____ B. The Nation's Health
- _____ C. Opportunity to influence the future of Public Health
- _____ D. Annual Meeting
- _____ E. APHA Publications Discount
- _____ F. Continuing Education Programs
- _____ G. Professional affiliation with my Section
- _____ H. Low-cost Group Insurance

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____



PLEASE MAKE CHECK PAYABLE TO: AMERICAN PUBLIC HEALTH ASSOCIATION

1015 FIFTEENTH STREET, N.W., WASHINGTON, D.C. 20005

PLEASE RETURN THIS PORTION WITH YOUR REMITTANCE

IF PAYMENT HAS BEEN SENT, PLEASE DISREGARD THIS NOTICE

REGULAR MEMBERSHIP (Annual Dues)	\$60		\$	_____	
CONTRIBUTING MEMBERSHIP (Annual Dues)	\$90		\$	_____	
SPECIAL MEMBERSHIPS (See Reverse)	\$30		\$	_____	
SECOND SECTION MEMBERSHIPS (See Reverse)	\$ 5 (each)		\$	_____	
PERIODICAL (Medical Care monthly)	U.S. Members — \$52	Foreign Members — \$62		\$	_____
TAX DEDUCTIBLE CONTRIBUTION (Optional)		\$	_____		
TOTAL			\$	_____	

BILL NO. 05

Membership expiration: DEC 1986 Membership Number: 0422014 Primary Section: CHP

NANCY STOLLER SHAW
SAN FRAN AIDS FOUNDATION
333 VALENCIA ST FOURTH FLOOR
SAN FRANCISCO CA
USA 94103

Signature _____

Date _____

AMERICAN PUBLIC HEALTH ASSOCIATION

THIS STUB FOR YOUR RECORDS

NANCY STOLLER SHAW

Individual dues and contributions to APHA are tax deductible.

Dues (at left) \$ _____

Second Sections (reverse) \$ _____

Periodical (Medical Care) \$ _____

U.S. Members—\$52; Foreign Members—\$62

Tax Deductible Contributions \$ _____

Total Payment \$ _____

Date Paid _____ Check Number _____

Membership expiration: DEC 1986

Membership number: 0422014

Current Second Sections:

SPECIAL MEMBERSHIPS

(Check Below)

- _____ *Student/Trainee:* Persons enrolled full-time in a college or university, or occupied in a formal training program in preparation for entry into a health career.
- _____ *Retired:* APHA members who have retired from active public health practice and no longer derive significant income from professional health-related activities.
- _____ *Consumer:* Persons who do not derive income from health-related activities.
- _____ *Special Health Workers:* Persons employed in community health whose annual salary is less than \$10,000, or its equivalent for foreign nationals.

SECOND SECTIONS (and SPIGS) MEMBERSHIPS

(Each \$5 Annual — Circle appropriate code below))

- | | | |
|------------------------------|-----------------------------------|---|
| 27 Alcohol and Drugs | 04 International Health | 16 Public Health Education |
| 01 Community Health Planning | 09 Laboratory | 17 Public Health Nursing |
| 02 Dental Health | 10 Maternal and Child Health | 19 Radiological Health |
| 03 Environment | 11 Medical Care | 20 School Health Education and Services |
| 05 Epidemiology | 13 Mental Health | 21 Social Work |
| 06 Food and Nutrition | 15 Occupational Health and Safety | 22 Statistics |
| 25 Gerontological Health | 18 Podiatric Health | 26 Vision Care |
| 07 Health Administration | 12 Population and Family Planning | |

SPECIAL PRIMARY INTEREST GROUPS

- | | | |
|------------------------------|---|--------------------------------|
| 24-04 The Forum on Bioethics | 24-03 Health Law Forum | 24-07 New Professionals |
| 24-06 Chiropractic Forum | 24-05 Injury Control & Emergency Services | 24-08 Veterinary Public Health |