



## **CALL FOR ABSTRACTS**

### **2026 Annual Conference**

#### **The Power of Public Health Nursing: Building Bridges and Improving Health**

***Virtual Conference with Live Sessions on April 29, May 6, 13, 20***

***Presented by  
The Association of Public Health Nurses (APHN)***

#### **General Conference Information:**

The 2026 APHN annual conference will explore strategies, roles, and opportunities to improve health for all through collaborations supporting public health nursing practice, education and research. Conference sessions, in live online and recorded formats, will provide participants with opportunities to engage with colleagues from across the country whose interests focus on public health/population health and the development of collaborative public health programs and policies. Conference participants will include individuals from the public, private and non-profit sectors, as well as public health, academic and community settings.

The conference will be held in a virtual format. There will be live, online keynote and plenary sessions held on April 29, May 6, 13, and 20, each running approximately 4 hours. Authors of accepted abstracts will create a video recording of their session via Zoom. All recorded abstract

sessions will be made available to conference registrants through the conference app. Additionally, approximately 24 of the accepted abstracts will also be featured in live presentations during the four live online sessions.

**Conference Learning Outcomes include:**

1. Gain insights into emerging opportunities for collaboration supporting public health nursing practice, education, and research.
2. Build collaborative teams to drive health equity innovation initiatives.
3. Highlight and promote innovative strategies and partnerships enabling public health leaders, including nurses, to advocate for effective public health policies and programs in their communities.
4. Discuss advocacy and policy efforts to address the environmental and human health consequences of climate change.
5. Develop strategies for fostering a culture of collaboration within an organization.

**The conference will engage participants in dialogue about innovations in policy, practice, and advocacy to advance health equity. In doing so, the conference will:**

- Strengthen collaborations and create new partnerships across fields and disciplines;
- Increase awareness of how and where health inequities exist;
- Spur innovative thinking to create changes in local and agency practices and policies;
- Provide attendees with guidance to work on initiatives to promote health equity;
- Offer an opportunity for networking and learning for all conference attendees.

The ***intended audience*** for this conference includes, but is not limited to:

- Public health nurses and other public health workers
- Program/agency coordinators and administrators
- Environmental health workers
- Faculty and researchers

- Policy professionals
- Students

### **Session Options:**

APHN invites abstract submissions from individuals wishing to present a(n):

- **Oral, Recorded Presentation (25-minute sessions)**
- **Poster Presentation (10-minute)**

### **Submissions Due: Friday, January 9 at 11:59 PM ET**

Abstract reviews and selection of sessions will be completed by conference planners, staff, and recruited reviewers. Based on the abstracts submitted, conference planners will ensure that the program will be representative of the variety of topics and geographic areas represented in public health nursing.

Continuing Education Credits: APHN is in the process of securing continuing education credits for the conference. If your proposal is accepted you may be required to provide some additional information for purposes of verification of credits.

***Please Note: Acceptance to present requires all presenters to register and pay to attend the conference.***

### **Abstract Submission Instructions**

Complete and submit the online form; **one submission per presentation**. Please assure abstract is submitted completely, indicated by a completion message and abstract submission summary email immediately following the submission. A second submission is welcome and requires using a different email address.

**The lead presenter will receive a confirmation of receipt.** Once submitted, revisions to abstracts cannot be accepted. Late submissions will not be accepted. **\*Communications will be directed to the lead presenter only.**

Your abstract submission must have clearly stated:

- Presentation Title

- Lead Presenter and Abstract Contact (Name, job title or role (e.g., student), organization, address, phone #, email)  
**\*All communication regarding presentations will be sent to the lead presenter only.**
- Additional Presenters, their organizations and email addresses (up to 4)
- Additional Non-presenting Authors and their Organizations (up to 4)
- Lead Presenter and Additional Presenters Biographies and Credentials
- Preferred Session Format (Oral Presentation, Poster Presentation)
- Learning Outcomes of Session (up to 5). Describe, in measurable terms using a behavioral verb (such as describe, discuss, explain) what attendees will be able to do following participation in the session. The learning outcomes should provide a clear focus for your session. Words to avoid: understand, know, learn.

### **Abstract Text:**

- In 300 words or less, clearly describe why the session is relevant to public health nurses and other public health professionals and the theme of "The Power of Public Health Nursing: Building Bridges and Improving Health" by providing the following information:
- Background of Topic: Describe the main focus, research questions, hypothesis, or needs.
- Purpose or Aim of the presentation: Include descriptions of participants, intervention, data collection and analysis, or the equivalent.
- Summary of the content: Include a description of the intervention or program. Share results or findings, if applicable, that will be presented. Results presented in the poster can be preliminary, incomplete (in process of data collection), and can include anticipated results.
- Implications: Clearly present the "take home messages" from your project or investigation as it relates to public health.

### **Please also provide:**

- Brief Description of Session or Poster (50 words) that will appeal to attendees. If your presentation is selected, this information may appear in the conference app (subject to APHN edits). This applies to all presentations.

- **Electronic Signature:** The Lead Presenter/Author must type his/her name and the date. This serves as the electronic signature and signifies the intent to comply with all requirements of the Association of Public Health Nurses.
- **Conflict of Interest Form,** filled in by all of the presenters and provided with the submission within 30 days of acceptance. The Conflict of Interest Form will be sent with acceptance notification.

### **Please also note:**

APHN will notify you if any information is missing. Presenters may be required to complete additional paperwork or forms for continuing education purposes.

Once abstracts and accompanying documents are submitted, they are considered final and cannot be edited.

Authors will be notified in early February of their abstract's acceptance. Authors should plan to finalize their presentations and record them during the month of March. All recordings must be submitted by Friday March 5. Additional details regarding submission of recordings will be forthcoming.

### **Abstract Samples**

**\*\*Please note that these are examples of abstracts, and your abstract does not have to appear exactly like the ones shown. It offers assistance to those people that have not submitted an abstract before or need additional guidance on the format\*\***

#### ***Example #1***

**Purpose:** There is a dearth of population-based data about children's mental health in XYZ. To help fill this critical data gap, questions were added to the 2012 XYZ Child Health Survey (CHS) to measure the need for mental health care, receipt of needed care, the prevalence of attention deficit hyperactivity disorder (ADHD), depression, anxiety, and/or behavioral or conduct disorders, and the use of medication for these conditions.

**Methods:** The XYZ Child Health Survey is a call back survey from the Behavioral Risk Factor Surveillance System Survey (BRFSS). The BRFSS monitors health status, prevalence of chronic diseases, and self-reported risk behaviors of XYZ adults through a random-digit-dial telephone survey. During the BRFSS phone interview, the interviewer inquires if a child between the ages of 1-14 years lives in the household and about the respondent's willingness to complete a survey about the child. Approximately 2 to 4 days later, the parent is called to complete the CHS on a variety of health topics.

**Results:** Overall, 9% of children needed mental health care in 2012. Of those, 73% received the care they needed. Six percent of children had been diagnosed with ADHD and 68% of them

were taking medication, 2% of children had been diagnosed with depression, 5% with anxiety, and 3% with behavioral or conduct disorders. Identified disparities will be reviewed.

Relevance: These data will be used to support health care providers, public health professionals, and policy makers in understanding the extent of mental health needs and the disparately effected groups among XYZ children through the use of a population-based surveillance mechanism.

### ***Example #2***

Purpose: Health disparities in XYZ have been well-documented for many years; however, the elimination of these disparities has not been a top organizational priority for the XYZ Health Department until recently. In 2012, XYZ Health Department developed a strategic plan for 2012-2016. One of the cross-cutting priorities in the plan is to promote health equity and environmental justice.

Methods: In the fall of 2012, the XYZ Health Equity and Environmental Justice Collaborative was formed. The Collaborative is comprised of representatives from each Division and Office within XYZ and has four executive sponsors from senior leadership. The Collaborative arrived upon shared definitions of health equity and environmental justice, created vision and mission statements, and identified goal areas, objectives and activities in support of the mission. These materials will be shared with participants in this session. Work groups have been formed for each goal area.

Results or lessons learned: One activity of the Collaborative was to conduct a baseline survey to assess employee's awareness and knowledge of health equity and environmental justice issues, perception of the climate of the department with regard to health equity and environmental justice, and related actions. The results of this survey and efforts to address identified deficits will be discussed. Efforts to include employees at all levels within the organization will also be highlighted. Progress on each goal area will be reported.

Relevance and support of theme: This session will illustrate XYZ actions in support of achieving health equity and environmental justice, consistent with the conference theme. Goal areas within the Collaborative's work plan are closely aligned with several of the 10 Essential Services of public health.

The table below, taken from ANCC's Revision of Bloom's Taxonomy, provides guidance for the most appropriate verbs to use in your abstract.

ANCC's Revision of Bloom's Taxonomy of Objectives:

Define	Translate	Interpret	Distinguish	Compose	Judge
Repeat	Restate	Apply	Analyze	Plan	Appraise
Record	Discuss	Employ	Differentiate	Propose	Evaluate
List	Describe	Use	Appraise	Design	Rate
Recall	Recognize	Demonstrate	Calculate	Formulate	Compare
Name	Explain	Dramatize	Experiment	Arrange	Value
Relate	Express	Practice	Test	Assemble	Revise
	Identify	Illustrate	Compare	Collect	Score
		Operate	Contrast	Construct	Select
		Schedule	Criticize	Create	Choose
			Diagram	Set up	Assess
			Inspect	Organize	Estimate
				Manage	Measure

## Questions??

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