

MAKING THE GRADE IN PUBLIC HEALTH ADVOCACY

We are pleased that public health advocacy was the theme of the August 2003 issue of the Journal. However, we find that several areas need further emphasis.

As noted by Avery and Bashir, speaking truth to power is a right and “the advocate takes this right and makes it her duty.”¹(pp1208, 1209) All public health professionals should be engaged in public policy reform. Yet the draft of the Public Health Professional’s Oath promulgated by APHA (and absent from this issue) speaks too softly and says too little on public health professionals’ responsibility to engage in policy and social change.²

We also value the inclusion of Minkler and colleagues’ article on community-based participatory research (CBPR),³ given the essential need for political acumen in CBPR. Indeed, the Institute of Medicine identified CBPR, as well as policy and law, among the 8 areas to be strengthened in graduate public health training.⁴ The authors added, “Although the importance of policy in public health has long been recognized . . . , education in policy at many schools of public health is currently minimal. . . . Should schools wish to be significant players in the future of public health and health care, dwelling on the sci-

ence of public health without paying appropriate attention to both politics and policy will not be enough.^{4(p13)}

Advocacy has been listed among health education competencies since the mid-1980s and is on the emerging list of competencies for all public health professionals.^{5,6} APHA's Public Health Education and Health Promotion (PHEHP) Section has cosponsored 6 health education advocacy summits with the Coalition of National Health Education Organizations. PHEHP also has participated in developing a Web site to disseminate advocacy information and resources.^{7,8}

We have seen little progress in students' professional preparation as public health advocates in our years providing Capitol Hill experience to nearly 500 students and health education professionals since 1998. APHA, public health schools and programs, and others engaged in public health workforce development must place a higher priority on offering meaningful courses and continuing education in policy and media advocacy. As the Institute of Medicine underscores, it is time for our schools and programs to appreciate all the dimensions of our role as public health professionals and to reward faculty for advocacy involvement. It is also time for journal editors, authors, and researchers to fully embrace the importance of their work in the advocacy arena. ■

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