# AMCHP Conference Call for Proposals

## Epidemiology Tip Sheet

This is a guide to provide additional information on how to submit an epidemiology-focused abstract to AMCHP. Submissions can include but not limited to original research, surveillance projects, systems and program evaluation, and cluster/outbreak investigations within the MCH population. It contains the prompts, further explanation of the prompts, and sample responses.

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## 1) Provide a brief summary of your work. Include any helpful background information such as the history behind its development, any principles or values that support it, or relevant prior research.

Feel free to include an introduction and background of your project. Describe the problem at hand or the gap you are trying to address. This is the area where you state the significance of your work and the objective.

Example response:
*State Title V programs increasingly seek ways to identify communities with the greatest opportunity for improved MCH outcomes. This project developed a dashboard overlaying the Concentrated Disadvantage (CD) Index using publicly available socioeconomic indicators from the American Community Survey and linked these data with birth outcomes to better understand patterns across the state. By combining multiple indicators into a single geographic measure, the project demonstrates how public health leaders can use neighborhood-level data to complement traditional health indicators, support needs assessments, prioritize investments, and inform strategic planning for maternal and child health programs.*

**2) In what ways have families, youth, communities, and/or local leaders been meaningfully engaged across your efforts (e.g., identifying priorities, shaping design, implementing strategies, or serving advisors)? How does this engagement promote shared power and decision-making? Please include any individuals or organizations playing a key role in these efforts.**

This prompt wants applicants to think outside of the box and brainstorm ways they can involve more stakeholders into their work. Some indirect partnerships can include concerns that exist within a community but was shared to you by a news outlet or a mutual connection.

Often, epidemiological work may not involve local leaders or the community. If that is the case, highlight partnerships that exist within your work and the impact it would make on the families, youth, communities, and/or local leaders.

**2) In what ways have families, youth, communities, and/or local leaders been meaningfully engaged across your efforts (e.g., identifying priorities, shaping design, implementing strategies, or serving advisors)? How does this engagement promote shared power and decision-making? Please include any individuals or organizations playing a key role in these efforts.**

Example response:

*This work was conducted within the Department of Health' to strengthen the state's Title V needs assessment and support data-informed decision-making. Epidemiologists collaborated with MCH programs, family leaders, and community partners to identify an approach that would better describe community conditions influencing health outcomes and produce information that could be readily applied in planning and resource allocation. The resulting maps and analyses were designed as practical tools for state and local public health staff, helping translate complex data into information that supports discussions with community partners and local decision-makers.*

## 3) How is your work addressing causes of challenges and conditions that impact your key population?

Feel free to reiterate the challenges and conditions your population of interest is experiencing and how your work is alleviating the population from this. Also, you can further elaborate on your methods and how they address the challenges.

Example response:
*Rather than focusing solely on health outcomes, this work examines community conditions associated with those outcomes. The Concentrated Disadvantage Index combines measures of poverty, unemployment, public assistance use, female-headed households, and the proportion of children to identify communities experiencing multiple socioeconomic challenges. Mapping these conditions alongside birth outcomes helps public health agencies recognize where additional support may be needed and provides a more complete understanding of factors that influence maternal and child health. This information can guide resource allocation, partnerships, and targeted interventions.*

## 4) Describe any successes of your work. What is different because of the work you are going to present?

For this prompt, you can share some of the outcomes of the work you have done. Some examples can include but not limited to program and policy development, better understanding of the problem at hand, improved data collection, increased access to services, etc. You can include general conclusions and results without getting too specific about numbers and p-values.

Example response:

*The analysis demonstrated clear geographic patterns across the state and found significant differences in in infant mortality, preterm birth, low birth weight, very low birth weight, and teen pregnancy rates across levels of concentrated disadvantage. These findings provided a new way for Title V leaders to visualize community conditions alongside health outcomes and strengthened the evidence available for needs assessment and program planning. The project also illustrated how readily available public data can be transformed into actionable information for decision-making and future analyses.*

## 5) What important lessons have you learned (both positive and negative) through implementing your work that you can share with others who may wish to do something similar or replicate your work in a different context?

Attendees like to learn from other states and jurisdictions about their project, and how they can replicate it. Therefore, it is important to share any challenges and takeaways from your work.

Example response:
*One important lesson is that combining multiple community indicators often provides a more meaningful picture than examining individual measures alone. Geographic visualization made complex data easier to communicate with program staff and leadership and helped identify areas for further exploration. At the same time, the project reinforced that neighborhood-level indices should complement, not replace, local knowledge and community engagement. Data can identify patterns and generate questions, but additional context and partnership are essential for understanding why differences exist and selecting appropriate public health strategies.*

**6) Does your proposal relate to the 2027 conference theme: Recharge, Reimagine, and Rise? If yes, please explain how your proposal relates to the theme, including which word best characterizes how your proposal aligns (i.e., recharge, reimagine, or rise*) If no, please tell us how your proposal advances the practice of maternal and child health.**

***Explanations for the theme is available in the submission portal.**

If your project does not directly align with a theme, it will not negatively impact your submission.

Example response:
*Reimagine. This session demonstrates how MCH leaders can reimagine the use of publicly available data by integrating neighborhood-level measures with traditional maternal and child health indicators. Participants will learn practical approaches for using geographic and socioeconomic data to steer then needs assessments, prioritize resources, and support more informed public health decision-making.*

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**7) Please provide a short description for the online agenda. This description will be published in AMCHP conference materials, including the event app and website.**

Example response:

*How can neighborhood-level data strengthen maternal and child health decision-making? This session introduces a practical approach for developing and applying* the *Concentrated Disadvantage index using publicly available data. Participants will learn how geographic measures can complement traditional health indicators, identify communities with the greatest opportunity for impact, and support Title V needs assessments, program planning, and resource prioritization. The session includes lessons learned, examples from* the state Title V Program, *and practical considerations for adapting this approach in other states and jurisdictions.*

# Key Dates

Call for proposals Opens: August 3, 2026

**Call for Proposals Closes: September 30, 2026**

Registration opens: October 1, 2026

Proposal Reviews Due: October 7-24, 2026

Acceptance Notices go out: November 19, 2026

Early Bird Registration Closes: January 16, 2027

Conference Dates: March 6-9, 2027


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Where to go for Conference Information:

AMCHP's 2027 Annual Conference Page:
https://amchp.org/amchp-conference/

Call for Proposals Site:
https://www.abstractscorecard.com/cfp/submit/login.asp?EventKey=EXVZFLGU

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