



Are you committed to improving the health of rural Mississippians?

Make plans to attend this important videoconference.

Those in attendance will learn to:

- Establish relationships with community and state partners
- Connect with state agencies and other resource providers
- Open dialogue on important rural health issues

Tentative Agenda:

- 8:30 – 8:45 Welcome
- 8:45 – 9:15 Mississippi Department of Health – Victor Sutton
- 9:20 – 9:50 Mississippi Chronic Illness Coalition - Mary Helen Conner
- 9:50 – 10:00 Break
- 10:00 – 10:30 MS Heart Disease & Stroke Prevention Task Force - Dr. Sharon Wyatt
- 10:35 – 11:05 MS Mobilization Against Diabetes - Cassandra Dove
- 11:10 – 11:40 Mississippi State University Extension Service
- 11:40 – 1:00 Break for lunch – on your own
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- 1:00 – 1:15 Reconvene welcome
- 1:15 – 1:45 Comprehensive Cancer Control – Dr. Mina Li
- 1:50 – 2:20 Asthma Coalition of Mississippi - Laurie Walters
- 2:20 – 2:30 Break
- 2:30 – 3:00 Tobacco State Plan - Tanya Funchess
- 3:05 – 3:35 Mississippi Oral Health Plan - Dr. Nicholas Mosca
- 3:35 – 3:45 New directions

Sponsored by:



MISSISSIPPI DEPARTMENT OF HEALTH

www.HealthyMS.com

1-866-HLTHY4U

1-866-458-4948

Registration Information

These sessions will be conducted through the interactive video system of Mississippi State University Extension Service. Individuals may participate from any of the available sites throughout the state. There is a site in almost every county. To find the nearest site, contact your county Extension Service office. You can locate the nearest county office through the MSU Extension Service web site at: <http://msucares.com/counties/index.html>

If you prefer a face-to-face session, you are welcome to join us in Raymond, the host site for the presentations:

Central Mississippi Research & Extension Center

1320 Seven Springs Road

Raymond MS 39154

(601) 857-2284

Participation is free, but registration is required:

To register, return the form below to Rachel Welborn, Box 9755, MS State, MS 39762, fax: 662-325-8777, e-mail: rachelw@ext.msstate.

Name: _____ Phone _____

Organization (If representing an organization): _____

Address: _____

E-mail: _____

Are you a member of a health coalition/network: ____Yes ____No

If yes, what is the name of the group? _____

From which site do you plan to participate? (If you are not sure, list the county name and you will be notified of the closest site.)

Do you plan to attend all segments of the conference? ____Yes ____No

If no, please indicate the time(s) you plan to attend (i.e. 9:00 – 12:00):
