

- Abstinence program:** Programs that require a person to completely stop using or doing something. These programs often are encountered in discussions of how to treat substance abuse or addiction.
- Adverse drug reaction or event (ADR or ADE):** Reactions to a medication, often severe and unpredictable, that can be life threatening or cause permanent damage.
- Advisory Committee on Immunization Practices (ACIP):** An advisory group for CDC that consists of medical and public health personnel who use the latest information to prepare recommendations for immunization schedules for various age groups and populations.
- American College Health Association (ACHA):** National organization comprised of institutional and individual members who provide health care to college students.
- American Pharmacists Association (APhA):** A national organization that represents individuals such as pharmacists and pharmacy technicians to improve and promote safe and effective medication use and patient care.
- American Red Cross:** A private organization that provides two types of services—blood collection and disaster services. It is part of a larger international organization called the **International Federation of the Red Cross and Red Crescent (IFRC)**.
- Analytic epidemiology:** A branch of epidemiology that uses comparison groups to establish potential cause and effect relationships. Not considered as conclusive as experimental or interventional epidemiology, analytic epidemiology may be the only option to study certain exposures and subsequent disease formation.
- [Office of the] Assistant Secretary for Preparedness and Response (ASPR):** The principal advisory group for the HHS Secretary on public health emergencies, including bioterrorism. Office of the ASPR was formerly called the Office of Public Health Emergency Preparedness.
- At-risk populations (or individuals):** For a given disease or injury, the person or population with an increased likelihood of being exposed, injured, or disadvantaged than the general population.
- Baby boomers:** Adults who were born following World War II (1946–1960).
- Beneficence principle:** One of four guiding principles for bioethics. It speaks to acting in a manner that is beneficial to others.
- Bioethics (bioethical principles):** Field of philosophy that considers how values and morals are manifested in behaviors in health care and biomedical research. Bioethics serves as a foundation for pharmacy ethics.
- Board of Health (or Health Board):** Local or state level organization that consists of members who represent various aspects of the population, including expertise on health. Usually an appointed position, these boards provide oversight and guidance to state and local health officers and departments.
- Board of Pharmacy:** Body that provides oversight of the licensure and practice behaviors of pharmacists, pharmacy technicians, and pharmacies within a state. The board is responsible for licensing practitioners and sites as well as monitoring practice. Members are usually appointed by the governor.
- Booster (vaccine booster):** Shot given for vaccines with antibody counts that tend to diminish over time. The booster shot helps the body ramp up the antibodies to a protective level.
- Case definition:** A description of the symptoms, lab tests, and behavior of a disease used in disease surveillance and epidemiology to standardize how illnesses are labeled and counted.
- Case law:** The interpretation and further refinement of understanding of laws that occurs as court decisions are appealed and the court judges outline their arguments and interpretations for others.
- Case report:** A type of descriptive epidemiology that details the occurrence of an illness or injury from exposure to endpoint. Case reports are often the first indication of a cause-effect relationship between an exposure and disease and can inspire further research on the issue.
- Case series:** A type of descriptive epidemiology that consists of more than one case report. The case series is used to begin looking for potential patterns and similarities among various cases.
- Case-control study design:** An analytical epidemiology design that is used to study rare diseases. Subjects for the study are identified on the basis of their disease status and then retrospective data about exposures to disease-causing factors are collected.
- Causal factors:** Things that directly or indirectly contribute to the development of a disease. These factors are often described with a **causal pathway** to show relationship with disease and other causal factors.

- Census Bureau:** Colloquial term used to refer to the United States Census Bureau. The U.S. Constitution requires that the population of the United States be enumerated every 10 years.
- Center for Drug Evaluation and Research (CDER):** The center within the Food and Drug Administration that exists to ensure safe and effective medications are available for use in the United States. CDER regulates over-the-counter and prescription products as well as health products such as fluoride toothpaste and sunscreen products.
- Centers for Disease Control and Prevention (CDC):** One of the major operating components of the HHS with a primary role in providing and supporting public health activities.
- Code of ethics (professional codes of ethics):** Explicit list of the principles that guide ethical practice of a profession. Pharmacy has its own code of ethics called “**Code of Ethics for Pharmacists**,” which was last updated and approved in 1994.
- Cohort study design:** Used in analytical epidemiology to study cause and effect. Subjects are selected on the basis of their exposure status, and the subsequent development of disease is measured. This type of study may use either prospective or retrospective data collection.
- Collaborative Practice Agreement:** A contractual agreement between at least one physician and one pharmacist outlining clinical services that a pharmacist will provide to patients in an outpatient setting, actions to be taken if the patient suffers a health emergency, and when to refer the patient back to the physician.
- Community Health Center (CHC):** Clinics that receive federal funds for providing ambulatory health care services. Services are provided to anyone and fees are based on the patient’s ability to pay.
- Community health workers (CHWs):** Persons recruited from the target population, usually a minority and underserved population, who have knowledge about the needs of the population. CHWs often act as links between the patient and the health care system.
- Consumer Product Safety Commission (CPSC):** A federal agency most strongly tied to pharmacy through its responsibility for enforcing the use of child-proof safety caps on medication products.
- Contagious:** A disease that can be transmitted by contact.
- Correlational study design:** One type of descriptive epidemiology study design. It uses population-level data to compare rates between two or more populations or within one population at two or more points in time. Because it lacks individual-level data, correlational study design cannot be used to explore connections between exposures and disease.
- Cost benefit analysis (CBA):** A method used to compare what is obtained (benefit) for resources consumed (cost). It differs from other economic evaluations in that it considers both input costs and output benefits in monetary terms.
- Cost effective:** A generic term applied to many inquiries about programs and the results (effectiveness) that they attain for the resources consumed (costs). The term may refer to a variety of studies and different types of outcomes, but it implies that both costs and outcomes are being considered.
- Cost effectiveness analysis (CEA):** A method used to compare outcomes produced (effectiveness) for the resources consumed (costs). The outcomes are measured in natural or physical units such as deaths, cures, or years of life saved.
- Cost of Illness (COI) study:** An analysis method used to measure the resources consumed (costs) by people with a specific disease. It is considered a partial analysis since it does not consider the outcomes produced by consuming all the resources. COI studies are often used to set priorities for research and program spending.
- Cost utility analysis (CUA):** A method used to compare resources consumed (costs) for outcomes produced. In this analysis, the outcomes are measured or weighted by preferences called utilities.
- Costs:** In economic evaluations, it refers to the value of resources consumed by the intervention or program. Costs are reported in monetary terms.
- Counterfeit medications:** Medication products that are not genuine because they are created to deceive patients and providers.
- Cross-sectional survey:** A descriptive epidemiology study design that measures variables across the entire population at a single point in time. Data is collected at the level of the individual person.
- Cultural competence:** The attitudes, knowledge, and skill to interact with members of a different cultural group in a manner that is respectful and considerate of their needs. Cultural competence should be differentiated from **linguistic proficiency**.
- Culturally Linguistically Appropriate Services (CLAS) Standards:** Standards developed and published by the Office of Minority Health of the U.S. Department of Health and Human Services for providing culturally and linguistically appropriate services.

- Culture:** A pattern of learned beliefs and behaviors shared among members of a group. Culture can proscribe communication styles, roles and relationships, and how members of the group interact.
- Cumulative incidence:** A rate that reflects the total number of new cases of a disease during a specified period of time in the total population at risk. It tends to produce a lower estimate than an incidence rate (or incidence density).
- Declaration of Alma-Ata:** A 1978 declaration by the World Health Organization that addresses priority health needs and the fundamental determinants of health.
- Demographic information or data:** Information or data that summarize the personal characteristics of the members of a population group. Examples of demographic data include age, sex, ethnicity or race, immigration status, educational status, and economic status.
- Deprived environment:** An environment that does not provide residents with the necessities to maintain their health.
- Descriptive epidemiology:** Studies of diseases with the primary purpose of providing information about the spread and behavior of a disease in a population. Study designs in descriptive epidemiology do not include a comparison group or a comparison in the analysis.
- Disaster Medical Assistance Team (DMAT):** Teams of health professionals who volunteer their time and expertise during responses to public health disasters to augment local services and personnel. These teams are part of the National Disaster Medical System (NDMS).
- Disease management services:** Services aimed at reducing complications and premature death associated with chronic diseases such as diabetes or asthma. Such services tend to focus on a single disease state so a patient with multiple conditions may need multiple disease management services.
- Disease surveillance:** The process of monitoring and reporting levels of disease activity in a community or county or at the state or national level. Information is used to identify outbreaks earlier with the intention of containing and controlling the spread of disease more effectively.
- Domestic violence:** Coercive actions used by a one person to establish and maintain power and control over another person in the household.
- Drug Enforcement Agency (DEA):** One of the agencies within the U.S. Department of Justice. Its primary connection to pharmacy practice is through the licensing and regulation of controlled substances.
- Drug-related problems (DRPs):** A system for categorizing all the potential problems that may arise from medication-related therapy, including failure to use medication when indicated.
- Emergency preparedness:** Those activities undertaken to plan for, prepare for, and respond to disasters.
- Endemic:** A disease that occurs in a population at a low but consistent and persistent level so that a limited number of cases occur each year.
- Epidemic:** When a disease outbreak spreads to many individuals in one or more populations across two or more geographic areas.
- Epidemiology:** The science of public health that describes the behavior of disease within populations. It has several branches: descriptive, analytic, and interventional.
- Ethical dilemma:** A situation that arises when two or more individuals find their belief systems lead them to different conclusions about the best way to handle a situation.
- Ethics:** The study of the effect of underlying beliefs and morals on behavior.
- Ethnicity:** An individual's ancestry if referred to as his or her ethnicity. The U.S. Census Bureau has defined ancestry as "...a person's ethnic origin or descent, roots, heritage, or place of birth of the person, the person's parents, or their ancestors before arrival in the United States."
- Experimental study design:** The research design that uses at least one comparison group, random assignment to a study group, and an intervention that is under the control of the researcher. Experimental study design is considered the gold standard for establishing cause-effect relationships.
- Exposed populations (or individuals):** Populations or individuals whose risk of disease or injury is increased because they have been exposed to a causative agent. Such agents may be infectious microorganisms, chemicals, or radioactive materials.
- Federal poverty level (FPL):** Based on family size and ages of family members, the Census Bureau calculates the level of income needed.
- Field investigation:** Work done during a disease outbreak to quickly identify the source and contain the spread of the disease.
- Focus groups:** Small groups of people who are selected to represent a larger population. They are asked to provide information about the issue or intervention under consideration.

Food and Drug Administration (FDA): The federal agency within the U.S. Department of Health and Human Services (HHS) that provides oversight of the manufacture, distribution, advertisement, and use of food, medications, and other products to ensure safety and effectiveness.

Formative evaluation: An evaluation of a program that is conducted while the program is being implemented. The results can be used to improve the program while it is still active. Formative evaluation is distinguished from summative evaluation, which focuses on the end results after the program is completed.

Frequency rates: Generic term that refers to ratios created by using counts (frequencies) of the outcome of interest such as disease or death in the numerator and number of people in the whole population. Examples of frequency rates are morbidity and mortality rates.

Health Canada: The national health service for Canada. Its United States counterpart is the U.S. Department of Health and Human Services (HHS).

Health department: One or more people employed by local or state governments to run and supervise local or state public health programs.

Health determinants: Conditions or factors associated with health.

Health disparity: The difference in life expectancy and health status among ethnic and racial population groups.

Health education: Activities intended to produce changes in knowledge or ways of thinking that facilitate skill acquisition or behavior change related to health.

Health officer: The title of the person to whom the health board gives the power to enforce health laws.

Health profiles: Statistical summaries of the health status of a specific community, county, or state.

Health promotion: Actions affecting one or more determinants of health that enable people to maintain or improve their physical, mental, or social well-being.

Health Resources and Services Administration (HRSA): An agency of the HHS that focuses on increasing access to health care for the medically underserved and vulnerable populations. HRSA is the agency that provides support to community health centers.

Health status: The description of the level of physical, mental, and social function of an individual.

Healthy People 2010 (HP 2010): The Office of Disease Prevention and Health Promotion in the HHS that sets national health promotion and disease prevention objectives for the decade. HP 2010 is designed to increase the quality and quantity of healthy life as well as eliminate health disparities.

ICD-10 (International Classification of Disease, 10th Edition): A compendium of codes for causes of mortality and morbidity that is maintained by the World Health Organization. In the United States, ICD-10 is used to record causes of death. A modified version, ICD-9-CM, is used to record hospital utilization.

ICD-10-CM (International Classification of Disease, Clinical Modification, 10th Edition): A modified version of the ICD-10 that is used in the United States to record hospital utilization information. The 10th edition is currently under review, and the 9th edition is still in use.

IFRC (International Federation of the Red Cross and Red Crescent Societies): The international organization that coordinates national Red Cross groups. The United States has its own chapter—American Red Cross.

Immunization: The administration of vaccines to develop antibodies for a specific antigen (active immunity).

Incidence: The number of new cases of a disease in a population within a specified time period. Incidence is often reported as an **incidence rate (incidence density)**, which is a ratio of the number of new cases to the number of people at risk of getting the disease during a specified period of time. This term is differentiated from **prevalence**.

Incidence density (incidence rate): A ratio comparing the number of new cases to the number of person-time spent at risk. This term differs from cumulative incidence in that it includes only the time that members of the at-risk population are actually at risk. It tends to produce a higher value than the cumulative incidence.

Incident Command System (ICS): An approach used to organize a response to a disaster. Key roles are designated ahead of time, and much training is needed to perform the duties of the key positions.

Indian Health Service (IHS): The agency within the United States Public Health Service that provides medical care to American Indians or Alaska Natives.

Infant mortality rate: The number of deaths of infants less than 1 year old per year.

Infectious: A way of describing an illness caused by an agent that results from transmission of the agent from an infected person or animal either directly or indirectly through inanimate objects.

Intangible costs: Term related to the mental and psychological burdens of an illness, injury, or its treatment. Emotional pain and suffering or fear of death from a disease are two examples.

International Health Regulations (IHR): Legally binding international agreement created by 194 countries to prevent and respond to acute public health risks that have the potential to cross borders and threaten people across the globe. The process was supported by the WHO, and the regulations can be found on that web site.

Interpreter: A person who conveys what has been verbally stated in one language into a second language for a third person. This term is differentiated from **translation**.

Intervention: A term used to indicate that an intentional change has been introduced. If the intervention involves primarily a medical procedure or a medicine, it is usually referred to as a treatment.

Isolation: Term that refers to keeping a person who is contagious (because he or she has an active infectious disease that can be transmitted to others) separate from those who do not yet have the disease and those who have not yet been exposed.

Jacobson v. Massachusetts: A landmark court decision for public health that reinforced the police power of a local government in matters of public health.

Justice principle: One of the four principles of bioethics, it refers to the fair distribution of scarce resources (i.e., there is not enough for everyone). In research, the justice principle can refer to equal opportunity to participate in a study. There are several different ideas about what is “fair distribution.”

Key informants: Individuals who have knowledge of a specific health issue. They may be interviewed to obtain subjective data on the issue. These individuals may or may not be stakeholders since they may not be directly affected by the issue or its resolution.

Levels of prevention (disease prevention): Three levels of disease prevention used in public health to distinguish between activities performed to prevent exposure and risk of getting sick (primary prevention), detect early disease and begin early treatment (secondary prevention), and treatment to prevent complications or death and restore health (tertiary prevention).

Life expectancy: The average number of years that a person can expect to live at a given age, usually birth, based on current death rates.

Lifestyle: The pattern of behaviors related to exercise, nutrition, consumption of alcohol, and substance use. Lifestyle has been shown to be associated with risk for certain diseases (e.g., diabetes) and to be related to life expectancy.

Linguistic proficiency: Ability to speak and write in a specific language. A person can be proficient in a language (e.g., English) but lack cultural competence when interacting with persons from a culturally different group.

Lost productivity: An economic term that describes reduced output created by workers who are ill and either working at subpar levels or out sick and not working at all.

Measures of association: Term used to establish a relationship between two or more variables, and often reported as correlations. Measures of association do *not* establish cause-effect relationships.

Median income: The point at which half the population has more income and half the population has less income.

Medicaid: The program for low-income persons, funded by both the federal and state governments but administered by the state government. Medicaid should not be confused with Medicare because they are separate programs.

Medicare: The social insurance program offered by the federal government that provides insurance for adults aged 65 and older. Also eligible for the program are persons with kidney failure who are on dialysis.

Medication errors: Human errors related to medication prescribing, dispensing, and administration. Not all errors injure patients, and many are caught before the patient receives the medication. Because they are deemed avoidable, medication errors are a focus for prevention activities.

Morbidity: The presence of a disease or complications of a disease in a person.

Morbidity rate: A ratio of the number of people with a disease or condition compared to either the total number of people in the population or those who are at risk of the disease. Morbidity rate may be expressed as a percentage for a commonly occurring disease or a ratio of per 100,000 if rare.

Mortality: Another word for death. In public health, there is an interest in **premature mortality**, which is death that occurs before the end of the natural lifespan.

Mortality rate: Number of people in a population who die of a specific disease or injury within a designated period of time. Mortality rate can be reported as a percentage if the death rates are high or, more typically, presented as a number per 100,000 people.

Motivational Interviewing: A method used to help patients identify the sources of their ambivalence and other barriers to changing their health behavior. Motivational interviewing puts the responsibility for change with the patient instead of the provider.

National Association of Boards of Pharmacy (NABP): An organization whose members are the state-level boards of pharmacy. Among its many duties, NABP oversees the licensing exam (NAPLEX).

National Center for Health Statistics (NCHS): The agency in the Department of Health and Human Services (DHHS) in the federal government responsible for collecting and compiling data on health and social services.

National Disaster Medical System (NDMS): A federal system used to augment local responses to disasters. It primarily provides health care expertise and personnel through its response teams such as DMAT and NPRT.

National notifiable diseases: A list of infectious diseases that are monitored in the U.S. population to identify potential outbreaks early. The list is maintained by the CDC and each state has its own adaptation of the list for diseases it monitors. See also Reportable Diseases.

National Pharmacist Response Team (NPRT): One of the volunteer response teams of the NDMS that consists of pharmacy personnel who can be deployed to assist with a disaster response.

Non-governmental organizations (NGOs): Organizations usually created by private groups that see a need not being addressed by government agencies. NGOs raise their own funds and often work in conjunction with government agencies.

Non-maleficence (do no harm) principle: One of the four principle of bioethics; often interpreted as “do no harm.”

Objective data: Data that can be observed and measured by someone other than the study subject. For example, in community health, objective data represents facts and is obtained from statistical reports, either of providers or agencies in the community or government.

Odds Ratio (or relative odds) (OR): A ratio of probabilities that is used to express the likelihood that a person with a disease was exposed to the causative agent. An odds ratio that is greater than 1 is interpreted to mean that a person with the disease was more likely exposed to the causative factor than a person without the disease.

Outbreak: A sudden occurrence or increase in the number of cases of a disease, usually infectious. Outbreaks are usually limited in the number of people and locations affected. Outbreaks that continue to grow in size and extent may become epidemics.

Outcome: The results of an exposure to a causal factor either intentionally introduced, as in the case of an intervention, or experienced as a part of one’s environment, as in the case of contact with a causal agent of a disease (e.g., polluted air).

Pan-American Health Organization (PAHO): A voluntary international organization whose members are countries located in North, Central, and South America. It serves as regional organization for the World Health Organizations and goes by the alternative title of “Region of the Americas.”

Pandemic: A disease outbreak that involves many people and many countries around the globe. Recent examples include the SARS outbreak in 2002–03 and the H1N1 (swine) flu outbreak in 2009–10.

Personal Health Information (PHI): The information about an individual’s health that is protected by the Health Insurance Portability and Accountability Act (HIPAA).

Pharmacoepidemiology: A branch of epidemiology that studies the patterns of medication use or adverse events in a population for a specific class of products or an individual product. Pharmacoepidemiology can identify issues that are not apparent in smaller studies.

Pharmacy Practice Acts: State-level legislation that defines the scope of practice for pharmacists and pharmacy technicians within the state. To implement pharmacy practice acts, rules and regulations for the act must be written.

Police power: The authority each state has to take action on behalf of its citizens to ensure their well-being. The scope of this power is constantly being shaped and tested through legislation and the court system.

Population pyramid: A graph showing the age and sex structure of a population presented as a bar graph in the form of a pyramid. Young populations with a high proportion of children will be wide at the bottom and narrow at the top to form a typical pyramid. A population with a large proportion of older adults will resemble an inverted pyramid.

Post mortem: A Latin term that refers to “after death.” Post mortem is used colloquially to refer to an examination of an event after the event has ended.

Post-exposure prophylaxis (PEP): Medications or treatment used after a person is exposed to an infectious organism to reduce his or her chances of developing an actual infection or clinical illness.

Prevalence: The total number of existing cases of a disease in a population regardless of how long individuals have been ill. Prevalence is usually presented as a **prevalence rate**, which is total number of cases in a defined population during a specific period of time. For example, the prevalence rate for type 1 diabetes in children between 1–12 years of age was 62/100,000 in 2006.

- Primary health care:** The term often used to indicate the first encounter between a patient and a health care provider. Primary health care is defined by WHO as the fundamental components of a community required to promote and maintain health and includes components (e.g., economics) that are not part of the health care system.
- Primary prevention:** The level of prevention focused on avoiding exposures that cause disease and improving the ability of an exposed person to not develop a disease if exposed. Examples of primary prevention include hand-washing to avoid exposure and vaccination to bolster immunity to fight and prevent an infection.
- Principle of the Ethical Practice of Public Health:** The first code of ethics for public health professionals. It was established in 2002 by the Public Health Leadership Society.
- Prospective data collection:** Data collected from or about the subjects at the time the event or disease is occurring.
- Public health:** Those actions and policies that are concerned with improving health or preventing illness, intended for a population group, and accomplished through collective action that is often taken through local, state, and national governments.
- QALY (quality-adjusted life year):** A single number that represents both length of life and the quality of the life.
- Quarantine:** The practice of restricting where individuals who have been exposed to a contagious infectious disease can go to control and contain the spread of the disease in the population.
- Race:** Term used to represent the biological characteristics of a group of people with the implication that a person from one race is biologically different than a person from another.
- Rates:** A ratio that uses a common denominator (e.g., per 100 or per 100,000) to express population outcomes (e.g., mortality and morbidity) so that outcomes in different population groups can be compared.
- Region of the Americas:** A subset of the World Health Organization with member countries that are in North, Central, and South America. The geographic grouping is designed to focus countries on issues they share across borders that may not be relevant to other continents. It is the same as PAHO.
- Relative risk (RR):** A ratio used to measure the association between exposure and the subsequent development of a disease. It compares the cumulative incidence rates of disease development in a group that was exposed to a suspected causative agent to the rate for those who got the disease but were not exposed. If the RR > 1, then the exposure increases the risk; if the RR < 1, the exposure is protective and decreases risk of disease.
- Reportable disease:** Also called notifiable disease. Diseases, usually infectious ones, are monitored in a population. Laboratories and health care workers who identify potential cases of reportable diseases are expected to notify the local health department.
- Respect for autonomy principle:** One of the four bioethical principles. It focuses on the need to respect the patient's (or research subject's) freedom to choose his or her own actions. This principle is the basis for informed consent.
- Retrospective data collection:** The process of gathering data on subjects after the event or disease of interest has occurred. Methods for retrospective data collection include asking subjects to recall information for prior events and reviewing documents with data collected during the event (e.g., medical charts). Less intrusive than prospective data collection, retrospective data collection can be plagued by missing or uncollected data.
- Risk factors:** Behaviors, exposures, demographic characteristics, or genetically determined tendencies that put a person at increased risk of disease or injury. Risk factors are usually described in relation to a specific disease or injury.
- Screening:** The process used to detect risk of disease or actual presence of disease. Screening results are used to guide subsequent actions. Screening may involve laboratory tests, physical examinations, or interviews about risks of exposure.
- Secondary prevention:** The level of disease prevention that focuses on reducing the risk and severity of disease *after* an exposure has occurred. Screening for early detection of disease, ending the exposure, and administering antidotes or preventative treatments before symptoms appear are typical activities at this level of prevention.
- Self-report surveys:** Method of collecting data that involves asking the subject directly to provide information not readily observable or measured by the observer.
- Sentinel case:** The first case of a disease in an outbreak. It usually refers to infectious disease. Epidemiological field methods can be used to determine the sentinel case in a large outbreak.
- SOAPE process:** The SOAPE process, which is used in clinical practice to monitor individual patients, has been adapted as the SOAPE process, which is used to obtain and organize health data for the entire community. SOAPE is an acronym representing subjective data, objective data, assessment, planning, and evaluation. Assessment represents the diagnosis of the problem, planning describes the intervention to address the problem, and evaluation is a description of the outcomes of the intervention.

Stages of Change Model: Originally developed by Prochaska and DiClemente, it is used to assist patients with behavior change by identifying where they are in the process and tailoring the intervention to that stage. The model as described by Toby contains six stages: 1) precontemplation, 2) contemplation, 3) preparation, 4) action, 5) maintenance, and 6) permanent maintenance.

Stakeholder: Someone who has an interest in and is affected by the public health issue or intervention under consideration.

Strategic National Stockpile (SNS): A system of stockpiled and vendor-managed medications, medical supplies, and information that can be delivered to a disaster site quickly. SNS is managed by the CDC.

Subjective data: Data that cannot be easily collected by an outside observer such as knowledge, attitude, beliefs, and opinions. It must be collected directly from the subjects via questionnaires, interviews, and group discussions. For example, in community health, subjective data is opinion data that is obtained by interviewing community residents.

Surveillance: Monitoring of the presence and behavior of a disease or behavior in a population to detect any unusual increase or early spread. Early detection should lead to early intervention to control and contain the disease or high-risk behavior.

Survival rates: The number of individuals in a defined population with a disease or condition that predisposes them to premature death who do not succumb. Often reported for a specific period of time, survival rates are the opposite of death or mortality rates.

Target population: The group of individuals who will be the focus of an assessment or intervention. The target population is usually defined by a demographic, geographic, or disease characteristic.

Tertiary prevention: The level of disease prevention that focuses on avoiding complications of a disease, reducing disease-related mortality and morbidity, rehabilitating, and curing (if possible) a person who has a disease. For pharmacists, this level is often called “therapeutics.”

Translation: Written information rendered from one language to another. Translators are people who transform a document written in one language into a document written in a second language.

Triage: The process of labeling individuals based on pre-set criteria for the purpose of prioritizing care and optimizing the use of limited resources.

Triangulating data: The process of gathering data from two or more sources to provide a more complete measure or understanding of the subject being studied.

Tuberculosis (TB): Infection by a mycobacterium that may be either an **active** or **latent TB infection (LTBI) disease**; most commonly seen as a pulmonary disease.

U.S. Public Health Service (PHS): The branch of HHS that provides patient-level health care. It includes pharmacists within its personnel.

United Nations (UN): International organization of countries that voluntarily participate in processes designed to promote peace, security, social progress, human rights, and better living standards of global citizens. The UN was established in 1945 after World War II.

The (First) Universal Declaration of Human Rights: Document outlining universal rights for all people adopted by the General Assembly of the United Nations on December 10, 1948. It followed the **Nuremberg Code** of 1947, which was the first document to specifically address ethical treatment of human subjects in research.

U.S. Department of Health and Human Services (HHS; formerly DHHS): The primary federal department dedicated to public health and personal wellness. It consists of a number of agencies, such as the FDA, CDC, PHS and NIH, that carry out activities in different areas of health and health research.

U.S. Pharmacopeia (USP): A non-governmental, public organization that serves as the official public standards setting authority for all medications (prescription and over-the-counter) and health products made or sold in the United States.

Vaccination: The administration of products that will induce the body to produce antibodies for a specific infectious disease. The purpose is to develop active immunity.

Vulnerable populations: Members of a community who for some reason cannot seek or obtain the health resources they need without the help of others. Examples include infants and small children, developmentally delayed, and economically disadvantaged individuals.

Western biomedicine: The concepts, values, and beliefs of medical science as they have developed in Europe and the United States.

Women, Infants, Children (WIC): A federally funded program that provides supplemental foods to women and young children who have a limited income.

World Health Organization (WHO): The directing authority within the United Nations on matters of global health, health research, standards, and monitoring health trends. WHO members are countries that participate in the UN.