

American Public Health Association



International Health Section

Manual for Section Leaders

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Introduction

The maintenance of this manual is a labor of love by volunteers with the International Health Section of the American Public Health Association. It is a tribute from current leadership to those coming behind us, so that they don't have to fumble around the way we did!

Olive Roen was an original author in collaboration with Samir Banoob during his first term as chair, and then the baton was picked up by Della Dash and Amy Hagopian. Meg-Ann Whitney is credited with the word processing recent editions. Many other section leaders contributed to ensure accuracy.

There are sure to be mistakes and omissions as well that will need to be corrected, so please make notes and forward them to the Archivist, who will be the official editor of the Section Manual.

This manual should supplement other Section publications:

1. Brochure for quick information about the Section and to encourage professionals and students to join.
2. *A Primer of APHA's International Health Section and How to Get Involved*, intended to help all the over 1500 Section members understand how APHA and the IH Section work and give tips on how ordinary members can engage.
3. *Growth of International Health: An Analysis and History* documents the evolving importance APHA gave to international and global health and the founding and growth of the IH Section.

Part I: Section Purpose

1. Introduction

The International Health (IH) Section of the American Public Health Association (APHA) provides a focus for persons involved and/or interested in international and global health issues. It serves as the APHA focal point that identifies issues, develops strategies, and promotes activities in the area of international and global health. It also provides a common forum for the exchange of experiences and knowledge in international and global health that contributes to the activities of the APHA and shares in the general responsibilities of the global public health movement.

2. Section Strategies:

The Section's standing committees each have action plans, which together and in conjunction with regular communications, comprise a "strategic direction" for the section. We are volunteers busy with our regular jobs, but come together to move APHA ahead on the international stage.

The IH Section's **mission** is to:

- a. Provide a multidisciplinary forum for scientific and public exchanges of knowledge and views on international and global health issues;
- b. Collaborate with those within APHA whose interests intersect with international and global health;
- c. Advocate for key international and global health issues within the Association and at various levels of government;
- d. Serve as advocate for the development and recognition of technically, scientifically and politically sound approaches to international and global health problems;
- e. Mobilize interest and encourage debate among professionals and the public on international and global health issues.

The **goals** of the IH Section are to:

- a. Advocate for U.S. international and global health policy that advances public health among world populations;
- b. Monitor U.S. international and global health policy implementation and work to refine or strengthen implementation as appropriate;
- c. Organize high quality scientific program at the annual national meeting of APHA;
- d. Build enthusiasm among IH Section members that encourages involvement in Section activities; and,
- e. Ensure the Section is well managed, has strong communications systems, and carries out its functions efficiently.

3. Section History

APHA has been influencing policies and setting priorities in public health for over 125 years. In 1976, the International Health Section was established.

Growth of International Health: An Analysis and History, published in 2003, documents the evolving importance APHA gave to international and global health and the founding and growth of the IH Section.

Part II: Section Governance

1. Introduction

The structure and governance of the IH Section follows the general APHA guidance for Sections on the web page "Leaders Corner" <http://www.apha.org/membergroups/sections/leaderscorner/>

The Section is both an extension of the Association and a unique entity with the flexibility to develop its own priorities (consistent with APHA's policies and positions) and its own activities. The Association is committed to the concept of a Section as a strong and visible professional group representing a specialty in public health. The Section is expected to develop its own context, character, and ways of functioning. The Section is expected to reflect APHA priorities along with the priorities of its own discipline(s). The diverse characteristics of each Section constitute the interdisciplinary strength of APHA.

In accordance with APHA Bylaws, the business of the Association (including the Section) is carried out according to Robert's Rules of Order (refer to the Governing Council Guide Summary of Robert's Rules of Order). The Section Chair and Officers shall apply democratic principles in all matters of business. The Section election process must observe democratic principles and strictly adhere to written procedures. Business meetings must be open to Section membership.

Executive Board or Liaisons from other sections, or Section Affairs staff may attend business meetings, and any attendee should be allowed to place items on the business meeting agenda. Attendees should be able to freely express their views without fear of reprisal, and discussions should include various points of view on issues. Any major Section decision should be recorded, reflecting majority votes, minority votes and any abstention votes.

a. What is the Section Council?

The Section Council serves as the leadership and decision-making body of a Section. Each of the Sections within APHA each has its own Section Council, the body responsible for internal operations and overall direction. Its members volunteer for important management and leadership functions of the section, such as committee chairmanship, Annual meeting organization, and more.

b. What is the APHA Governing Council?

The APHA Governing Council serves as the primary decision-making body of APHA. It approves overall APHA policy, adopts APHA resolutions, approves the APHA budget and selects APHA's leadership staff. Governing Councilors take guidance from the Section Council but also organize themselves to deal with issues as they arise during the debate.

The primary roles of the Governing Council (GC) as set forth in the Constitution charge the GC to:

- Establish policies and amend the Bylaws of the Association and to adopt rules for the conduct of its own business;
- Establish policies for the Association and for the guidance of the Executive Board and the officers;
- Receive and act upon reports or recommendations from any organization constituent, the Science Board, the Action Board, the Education Board, the Standing Committees and the Executive Board;
- Receive at its first session of the APHA annual meeting a report from the chair of the Executive Board on the work, accomplishments and financial status of the Association during the years preceding the APHA annual meeting, and a statement of the major activities contemplated for the ensuing year;

- Establish Sections of the Association; combine or discontinue Sections; prescribe the composition of the Section Councils; maintain coordination among the Sections; and formulate general rules governing their policies;
- Elect the Executive Board, the officers of the Association, and honorary members;
- Recognize Affiliates Associations; and
- Make available to the general membership an abstract of the minutes of each meeting.

It is important to note that while APHA Governing Councilors are members of a specific Section and are elected by their Section to serve on the overall APHA Governing Council, they technically do not have voting rights within their individual Section Councils.

2. Criteria for Selection of Section Leadership

The strength of any organization is dependent on the quality of its leadership. When selecting leaders, the Section shall consider the importance of recruiting young people, ensuring continuity as well as competence, welcoming enthusiasm, encouraging a willingness to serve, and providing diversity, which in the APHA context means following the APHA Affirmative Action Guidelines in appointments for representation on Boards, Committees, and activities.

3. Composition

The formal governing body of the IH Section is called the Section Council and is comprised of the Section Officers:

- Chair
- Chair-elect
- Secretary
- Secretary-elect
- Immediate Past Chair
- Six section Councilors

This is the body officially empowered by APHA bylaws to take votes on Section business.

In practice, however, the Section operates using a Leadership Team model. The Leadership Team includes the Section Council, as described above, along with the following non-voting members:

- Section's 7 Governing Councilors (this number could change as membership totals change)
- Section Committee Chairpersons
- Appointed Positions
- Section Representative on the APHA Action Board
- Section members serving on other APHA-wide Boards
- Any Section members providing significant leadership in Section activities, such as chairing committees
- APHA Staff – Global Health Manager and Coordinator serving in an ex-officio capacity

4. Elections

Elections are held in the early summer of each year. The number and positions rotate according to the terms of office. Section Councilors serve 3-year terms, and Governing Councilors serve 2-year terms. Typically, the number and types of positions include the following:

<u>Position</u>	<u>Total in Office</u>	<u>Number Elected</u>	<u>Election Cycle</u>
Section Councilors	6	2	Every year
Governing Councilors	7 (2007)	3	In odd years
		4	In even years
Chair-Elect	1	1	In even years
Secretary-Elect	1	1	In even years

Candidates either volunteer to run or are recruited by the nominating committee. At least two candidates are nominated for each position, wherever possible.

Section elections are conducted electronically on the internet by APHA, and winners are determined by a simple majority vote.

Members are sent an email informing them of the candidate’s names and bios, as well as the website address for voting. APHA facilitates the process and ensures objectivity and confidentiality.

In cases where a vacancy occurs (due to a resignation or recall), or when an APHA-sponsored election fails to take place, those present and voting at the APHA annual meeting at a regularly called business meeting of the Section may elect the leadership ensuring a quorum of five Section Council members. If a vacancy occurs for the Chair or Secretary positions, the Section Council can vote in the Chair- or Secretary-elect to assume those positions.

5. Accountability

Accepting a nomination, being elected or appointed to a leadership position within the IH Section is an honor bestowed upon a candidate by one’s peers through the APHA voting process. It is also a promise of contribution to be fulfilled. These positions involve significant responsibility and accountability to the Section membership at large. It should be noted that filling a position but being unable to contribute is withholding the opportunity for leadership from someone who is able to serve.

All elected and appointed officers are expected to participate fully in their roles fulfilling the duties outlined for their position, participating in leadership conference calls, liaising with other APHA sections and officers, being an ambassador for the IH Section outside of APHA, and attending IH Section business meetings at the APHA annual meeting as well as the mid-year meeting that usually occurs in June.

Elected officers who do not carry out the duties of their office are subject to recall by the membership, often but not always in response to a recommendation by the Section Chair. In the case of a resignation or recall, those present and voting at a regular IH Section meeting can elect a new officer.

If a Section Council vacancy occurs more than ninety days prior to the APHA Annual Meeting, the Section Council can designate a new member to serve until the next meeting of the IH Section, at which time the vacancy will be filled by election of the Section Council.

6. Terms of Office

At the close of each APHA annual meeting, new terms of office begin and the old terms expire.

The terms of elected officers and councilors are as follows:

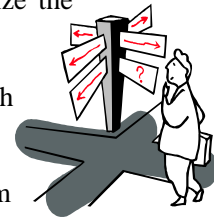
Chair.....	2 years
Chair-Elect.....	2 years
Secretary	2 years
Secretary-Elect	2 years
Immediate Past Chair	2 years
Section Councilors (6)	3 years
Governing Councilors (7 in 2007)	2 years

The two-year term for both the Secretary-Elect and the Chair-Elect allow them to serve under the apprenticeship of the incumbent Chair and Secretary to facilitate continuity of capacity in the administration of Section affairs.

Mentoring, Continuity and Transition

Every committee or task force should have a co-chair who assists the chair and share responsibilities, and covers for absence since we are a group of traveling professionals. Committee membership should be diversified among generations and expanded to maximize the labor force.

To facilitate transitions, a mentoring system has been proposed whereby each person currently holding a position mentors a newly elected or appointed person to the Leadership Team for a one-year period of time. Selection of mentors/mentees is to be established during the Section Orientation and Team Building Meeting held during the APHA annual meeting.



The six Section Councilors serve three-year terms, and each year two new members are elected to replace the two members whose terms expire. Along with the Officers, the Section Councilors serve as the official representative voting body of the Section according to APHA bylaws.

The number of Governing Councilors in a Section is determined by the size of the membership of that Section. The IH Section currently has seven Governing Councilors.

The Section Chair appoints Section Committee Chairs, typically after consulting the Section Leadership Team. Section appointees generally do not have fixed terms, but continue to serve at the request of the Chair, or until they resign.

After five consecutive years in any elective Section office, an officer shall be ineligible to re-election to that office for an entire Association year.

Part III: Officer Positions & Duties

Introduction

Included under each position is the list of duties that explain how that job is accomplished, and the resources for doing the job.

Liaising with other affiliates and other Sections should be a top priority for all IH Section Officers.

Section Officers (elected to 2-year terms):

Chair: Miriam Labbok (expires 11/2010), miriam_labbok@unc.edu

Chair Elect: Malcolm Bryant (becomes chair after meeting 11/2010) malcombryant@comcast.net

Immediate Past Chair: Samir Banoob, (expires 11/2010) sbanoob@aol.com

Section Secretary: Amy Hagopian (expires 11/2009), hagopian@u.washington.edu

Secretary Elect: Carol Dabbs (becomes secretary 11/2009, until 11/2011), dabbscj@state.gov

Secretary Elect in waiting: Jean Meyer Capps (becomes secretary 11/2011), jcapps@erols.com

Section Councilors (elected to 3-year terms):

Alfonso Rossales, (expires 11/2009) arossales06@gmail.com

Hélène Carabin, (ends 11/2009; re-elected to 11/2011) helene-carabin@ouhsc.edu

Wendy Johnson (ends 11/2010, overlaps with Governing Council) wendyj@igc.org

David J. Fitch, replacing Adesanya (expires 11/2010) dfitch7@yahoo.com

Padmini Murthy (expires 11/2011) minimurthy@aol.com

Lisa Pawloski (expires 11/2011) lpawlosk@gmu.edu

Jirair Ratevosian (assumes duties 11/2009, expires 11/2012) jratevosian@gmail.com

Governing Councilors (elected to 2-year terms):

Malcolm Bryant (expires 11/2009) malcombryant@comcast.net (COUNCIL WHIP)

Laura Altobelli, (ends 11/2009; re-elected to serve until 11/2011) laura@future.org

Carlos Castillo-Salgado, (expires 11/2009) castilloc@paho.org

Elvira Beracochea, (expires 11/2010) elvira@midego.com

Gopal Sankaran, (expires 11/2010) gsankaran@wcupa.edu

Leonard Rubenstein (expires 11/2010) lrubnst@jhsph.edu

James Pfeiffer (expires 11/2010) jamespf@u.washington.edu

Wendy Johnson (assumes 11/2009, expires 11/2011) wjohns@u.washington.edu

Amy Hagopian (assumes 11/2009, expires 11/2011) hagopian@u.washington.edu

IH Section committees (appointed by Chair):

Nominations: Mary Anne Mercer <mamercer@u.washington.edu>

Program: Omar Khan <IH.APHA@gmail.com> chair; Mike Bailey <mibailey@jhucpp.org> assistant chair

Awards--Paul Freeman <freeman.p.a@att.net> chair; Mini Murthy <Minimurthy@aol.com> assist. chair

Communications Chair and Website Manager: Eckhard Kleinau, <ekleinau@masimax.com> co-chair

Newsletter Editor: Josefa Ippolito-Shepherd <ippolitoshepherdj@yahoo.com>

Membership: Rose Schneider <rschneider@jhu.edu>

Students & New International Health Professionals: Helene Carbin <helene-carbin@ouhsc.edu>

Policy and Advocacy: Jirair Ratevosian <jratevosian@gmail.com>

Section Management: Carol Dabbs <dabbscj@state.gov>

IH Section working groups:

Community-Based Primary Care: Paul Freeman and Malcolm Bryant;

Pharmaceuticals: Maggie Huff-Rousselle <mhuffrousselle@ssds.net> chair, Bob Eilers
<Robert.eilers@dhs.state.mj.us>

Trade and Health Liaison: Mary Anne Mercer <mamercer@u.washington.edu>

Global Health Connections Committee: Chair Gopal Sankaran <gsankaran@wcupa.edu>; Co-chairs Mini
Murthy <Minimurthy@aol.com> and Hala Azzam <hala_azzam@yahoo.com>

APHA wide responsibilities:

Action Board Representative: Donna Barry <djbarry@earthlink.net>

Global Health Manager (APHA Staff): Morgan Taylor <morgan.taylor@apha.org>

Trade and Health Liaison: Mary Anne Mercer <mamercer@u.washington.edu>

International Human Rights Committee (ends 11/2010): Elvira Beracochea <elvira@midego.com>

APHA Nominating Committee (ends 11/2009) - Amy Hagopian <hagopian@uw.edu>

Science board & liaison to publications board - Omar Khan <okhan@jhsph.edu>

Updates posted to: <http://www.apha.org/memborgroups/sections/aphasections/intlhealth/committees/>

Elected Position Description and Duties***a. Section Chair***

Description: The Association By-Laws recognize a single Section Chair who represents the Section. The Section Chair serves as an ex officio, non-voting member of the Governing Council, and a member of the Intersectional Council.

Duties:

- Working with the Council to have an activity plan that meets the Section's priorities and is consistent with APHA.
- Convening Section Council business meetings and/or conference calls.
- Leading the Section in using the democratic process and Robert's Rules of Order.
- Working with the Section to select a meaningful strategic plan with goals, objectives, and related activities.
- Developing and monitoring the Section budget in consultation with the Section Council.
- Monitoring and approving budget expenditures as the fiscal agent of the Section.
- Delegating responsibilities except for the fiduciary responsibility.
- Keeping activities focused.
- Encouraging members to actively participate.
- Supporting recruitment of new members to the Section.
- Including new members in Section activities, such as encouraging participation in Section committees or projects.
- Developing and submitting Section's Annual Report.
- Overseeing Section fund raising for compliance with APHA policies.
- Filling standing committees with appropriate and current Section members.

- Encouraging the Section's Immediate Past Chair to chair the Section's Nominations Committee. Several Sections have adopted this approach and find it helpful because the Immediate Past Chair has current knowledge of the process.
- Seeing that the Section develops slates for Officer and Councilor elections.

- Seeing that the Section responds to the APHA Membership Deployment Process.
- Acknowledging and rewarding Section Leaders and members for their contributions.
- Responding to APHA requests for input/feedback on issues in consultation with Section Council or other Section members.
- Meeting the APHA and Section Affairs calendar deadline dates.
- Facilitating Section work so that full Section participation may happen prior to Section Affairs deadlines, such as sufficient time and opportunity for members to be included on the Section leadership ballot.
- Taking responsibility to engage the chair-elect throughout the year, and to work with the chair-elect at the end of the term to review Section activities and obligations and insure a smooth transition for the new chair.

Resources: Manual for Section Chairs and Leadership of General Guidelines for Sections.

b. Section Chair-Elect

Description: The Chair-elect should attend the Chair-Elect orientation. During the time as Chair-Elect, one is encouraged to participate in a variety of Section activities to increase familiarity with the many aspects of the Section. This is a time for the Chair-Elect to develop a goal of the contribution one wants to make to the Section and to begin that process before actually becoming Chair. This goal needs to be consistent with the Association and the Section’s Strategic Plan and priorities. The Chair-Elect may wish to further existing priorities, or creatively develop new priorities along with the other Section leaders.

- Duties:
- Acting for the Chair in the absence of that Officer and assisting the Chair in providing leadership to the Section.
 - Assisting the Chair in conducting the annual and interim Section meetings.
 - Serving as a member of the Section’s Nominating and Awards Committee.
 - Serving as a voting member of the Section Council.
 - Becoming Chair of the Section and its Council upon completing the term of office as Chair-Elect.
 - Developing, in consultation with the Section Council, the annual plan that will be implemented during the Chair-elect’s first year as Chair.
 - Attending and participating in the Intersectional Council meeting at the APHA annual meeting.
 - Learning the role of the Chair, and attending the annual orientation meeting held for Chair-Elects (usually in June).

Resources: Manual for Section Chairs and Leadership of General Guidelines for Sections.

c. Immediate Past Chair

Description: The Immediate Past Chair of the Section has a primary responsibility to be an active and advisory member of the Section leadership and of the Intersectional Council. The Immediate Past Chair should attend the annual meeting of the full ISC that is held at the APHA Annual Meeting. The immediate Past Chair of the Section is a voting member of the Section Council. S/he serves as Section Chair or as Chair-Elect in the absence of the Chair. S/he will also serve on the Section’s Nominating Committee, assist the archivist and help organize orientation activities/content for new leaders at the APHA annual meeting.

Resources: Manual for Section Chairs and Leadership of General Guidelines for Sections.

d. Section Secretary

Description: The Section Secretary responsibilities are partially spelled out in the current APHA Bylaws. The Section Secretary serves as a voting member of the Section Council.

Duties: The Secretary shall:

- Announce all scheduled conference calls, notifying the leadership of the time, date and phone number for the calls.
- Take minutes of all conference calls and business meetings (mid-year and annual) and transmit them to the section leadership. Minutes include attendance, a summary of the subjects and content of discussion, decisions made, action items needing follow up, and next meeting time(s).
- Assemble and edit mid-year and annual reports and arrange for distribution to the leadership, APHA and posting to the web page.
- Serve on the section organizing committee to make arrangements for the annual meeting and mid-year meeting.
- Propose agendas (to the chair) for the annual business meetings of the Section at APHA and the mid-year meeting; when final, distribute appropriately.
- When unable to be present at the APHA annual meeting, thoroughly instruct the Secretary-elect or a substitute in the event the Section has no Secretary-elect, as far in advance of the meeting as possible.
- Transmit a copy of the minutes to the Section Affairs staff of APHA as soon as possible after the meeting or conference call.
- Assist the Chair in follow-up of Section decisions.
- Assist the Advocacy and Resolutions Committee to process resolutions and position papers according to the guidelines of the Action Board.
- Provide assistance to the website manager with posting content to the Section website.
- Work with APHA to ensure that the Section membership roster is up to date.
- Compile a roster of Section Officers and Committees, including chairs and their email addresses, and distribute to Section Council and Committee Chairs by the time of the APHA annual meeting. Update this roster regularly and post it to the web page.
- Orient the Secretary-elect to the responsibilities of the Secretary and transmit to the incoming Secretary all records and files of the Section. In cooperation with the archivist, determine which materials should be placed in the archives.
- Notes from APHA bylaws: A Secretary-elect may assist the Secretary in her/his duties, and the Section Secretary shall be a member of the section nominating committee.

e. Section Secretary-Elect

Description: The Section Secretary-Elect supports the activities of the Secretary, and has two years to fully learn the roles and duties of this position.

Duties:

- Serve on the section organizing committee to make arrangements for the annual meeting.

- Obtain all records and files from the outgoing Secretary.
- Acts for the Section Secretary in his/her absence.
- Learn from the Secretary all the duties and responsibilities in order for smooth transition after rotation.

Resources: Manual for Section Chairs and Leadership of General Guidelines for Sections.
Section documents, pamphlets, archives.

f. Section Councilors

Description: Each Section Councilor must maintain current and primary membership in the Section in which one holds such a position.

Duties: The following describes the general overall responsibilities of the Section Council as whole, without singling out duties specific to any one position on the Council. A quorum of the Section Council shall consist of five members. Between meetings, the business of the Section Council can be conducted by communications between the Chair, Secretary and other members of the Section Council using email and conference calls. According to the APHA Bylaws, the duties of the Section Council shall include, but not necessarily be limited to the following:

- To make general recommendations in relation to the Annual Meeting program.
- To assist with the Section's annual meeting programming by submitting proposals for invited sessions, reviewing abstracts, and serving as a session moderator.
- To participate in Section leadership conference calls and respond to leadership emails.
- To work actively toward the participation of the Section in the broader affairs of the Association by offering well-qualified candidates for positions as officers of APHA and as members of Association-wide committees.
- To initiate inter-Sectional collaboration and activities that promote the overall aims of the Section and the Association.
- To collaborate with global partners working in international and global health, for example, the Global Health Council.
- To propose individuals from the membership of the IH Section for APHA awards.
- To serve as Chair of one (or more) Section Committees, and provide support for other Committees as needed.
- To advise the Section Chair on the development and monitoring of the annual budget and plan.
- To act on Section membership and on Section policies.
- To submit annually to the Governing Council through the Executive Board a report of the transactions of the Section.
- To report annually to the Governing Council through the Executive Board on the plans, scope, and policy of the Section during the succeeding year.
- To formulate rules of procedure for the Section.
- To consider and transmit to the Governing Council resolutions originating in the Section. Only resolutions approved by the Governing Council shall be published as representing the policy of the Association.
- To advise on the publication of papers and reports presented at the Section meetings.
- To advise the Executive Board with respect to the organization and membership of the Action Board, the forthcoming Science Board (an

outgrowth from the Program Development Board), Councils, Task Forces, and Standing Committees.” (APHA Bylaws, Art. XIV, Sec. 9).

- Serves as a liaison with appropriate professional and constituency organizations, related government organizations, and individuals interested or already working in international and global health.

- While officially only the Section Council (NOT the Governing Councilors) vote on Section issues, both Section and Governing Councilors are members of the Section Leadership Team, and in practice the Section operates under a consensus model where the entire Leadership Team is involved in Section decision-making.

Resources: Manual for Section Chairs and Leadership of General Guidelines for Sections.

g. Governing Councilors

Description: The Section Governing Councilors are expected to attend each session of the Governing Council at the APHA Annual Meeting. They are expected to prepare for these sessions. If a Governing Councilor is not able to attend the meeting(s), then a proxy should be designated to vote in the place of that Councilor. For a detailed description of the proxy process, please see Proxy below under Resolution Process.

IH Section members should have discussions with their Governing Councilors about the proposed policies, the major Association decisions coming before the Governing Council, and the election of Association Officers. The Section Council will ask that its Governing Councilors present important points about proposed policy statements, and take to the Public Hearings the views of the Section Council. This latter activity may result in a Governing Councilor participating in proposed policy revisions during and immediately following the Public Hearings, which are held at the APHA Annual Meeting.

The Section Governing Councilors are strongly encouraged to work with their Section’s committee(s) and relevant committees on public policy statements. Although Governing Councilors should vote their conscience, they must consider the interests and concerns of the members that they represent. They also command more power when they vote as a block for the Section. Therefore, the size of the IH Section, as well as the degree to which its members are active determines the amount of power and leverage the Section has within APHA.

Duties:

- Actively participate in APHA’s Governing Council debate to voice IH Section positions, including voting on matters before the Governing Council.
- Attend the candidates’ forum of the Governing Council and inform the Section Council about candidates.
- Attend relevant Joint Policy Committee hearings on proposed resolutions and position papers.
- Assist with the preparation and amendment of resolutions and position papers, in collaboration with the IH Policy and Resolutions Committee.
- Network with other Governing Councilor members from other Sections and State Affiliates to garner support for issues and resolutions of interest to the Section, with special effort made to ensure active liaising with selected Sections that have potential for shared governance and action interests.

- Suggest new thematic issues-oriented working groups to the Section Council.
- Work with the IH Section Council towards increased IH representation in APHA leadership including the Executive Board, the Action Board, and other APHA decision-making bodies.
- Work with APHA on maintaining an up-to-date resolutions archive.
- Governing Councilors as a group will make recommendations to the Section Council concerning IH Section positions on various issues, including meeting themes, APHA election of officers, and proposed resolutions and position papers.
- While officially only the Section Councilors (NOT the Governing Councilors) vote on IH Section issues, both Section and Governing Councilors are members of the Section Leadership Team, and in practice the Section operates under a consensus model where the entire Leadership Team is involved in Section decision-making.

The Governing Council Whip is appointed by the chair in consultation with the section Governing Councilors. The duties of this position include organizing the group for actions, communications with other sections, SPIGs, and caucuses and voting during the council meetings, and ensuring the presence of the Section governing councilors in G.C. meetings and arranging for proxy voting for those who will not be able to attend. The Governing Council Whip will also consult with the section leadership on G.C. matters and receive feedback to ensure proper representation that serves the section strategies and plans and report to the section meetings on the G.C. decisions and deliberations.

Resources: APHA Governing Council Handbook.

h. Archivist (and Section Manual Editor)

The role of the archivist is normally maintained by the section Secretary who passes the archives to the incoming secretary

Description: The Archivist collects and stores documents and Section information that provides an institutional memory for the Section. The Archivist works in close collaboration with the Secretary, the website manager, and the Immediate Past Chair.

- Duties:
- Maintain and keep current the Section Manual in compliance with the Constitution and Bylaws of the Association and the requirements of the Section.
 - Collect documents such as the citations for the annual Section awards, Section newsletters, anniversary programs, and memorabilia.
 - List in the annual report all documents added to the archives over the last year.
 - Update the Section history document regularly (bi-annually?).
 - Prepare special historical documents, perspectives, and other types of requests as they arise.
 - Make additions, deletions or other changes in the Section Manual to incorporate action taken at Section Council meetings that result in changes in Committee responsibilities, policies and procedures.
 - Make Section documents available to the Leadership Team and all Section members, and provide written communication to inform the Section when new and updated material and documents become available.

Resources: All Section documents, resources and materials related to Section history, function, procedures, processes, content and record-keeping.

Part IV: Section Committees, Working Groups & Liaisons

Introduction

Section committees are established by the Chair in consultation with the Section Council and leadership. Action is taken, as needed, at the APHA annual meeting or at other times to continue existing committees, establish new ones, and discontinue old ones. Ad hoc committees and task forces are formed as needed, and provide a focus on a specific topic or activity that needs the Section's attention for a short period of time. The Section Chair appoints a committee Chair, who in turn will appoint a committee as needed. Committee Chairs and other appointees serve from the date of appointment until they resign or until the Section Chair ends their term.

Chairs of committees will be appointed by the Section Chair in consultation with the section Council Members and co-chairs of all committees will be appointed collaboratively by the Section Chair and the relevant committee Chair. The committee Chair should convene at least one meeting during the APHA annual meeting. The committee Chairs are responsible for preparing a specific agenda, reporting on committee activities, and making recommendations to the Leadership Team. A committee report should be prepared and submitted to the Section Secretary 30 days prior to the APHA annual meeting.

Announcements of meetings to be held should be copied to the Section Chair and Secretary. The committee Chair will also submit articles to the Section Newsletter via the Newsletter Editor.

One member of each IH Section committee should serve as a Section Liaison to an APHA committee, SPIG, task force or Section depending on the purpose, focus, activities and collaboration needs of that specific IH committee.

1. Policy & Advocacy Committee

The Policy & Advocacy Committee works to advance policies at the levels of APHA, U.S. government, non-government organizations, and internationally to advance our priority issues. We organize the section membership to organize scientific sessions at the national conference, conduct research, advance resolutions for APHA consideration, sign onto legislative initiatives, write articles and letters, and lobby our elected representatives.

The APHA's International Health section had seven priorities for advocacy action in 2009:

Activities

- Contacting legislators through visits, correspondence and phone calls;
- Preparing fact sheets, background papers and other research;
- Organizing letters to be written to newspapers and other media outlets;
- Joining or organizing coalitions and other advocacy strategies;
- Writing articles suitable for publication in professional journals, newspapers, etc;
- Developing fact sheets and background and position papers on specific topics and drafting legislative proposals; or
- Conducting public forums at the APHA Annual Meeting and other venues.

#	Goal	Lead advocate
1	Ensure US International aid policy advances humanitarian public health priorities and health as a human right as its primary motivators. In 2009, this will allow us to focus on PEPFAR financing, the HIV travel ban, and other issues as they arise.	Wendy Johnson
2	Raise awareness of the issues associated with aid effectiveness in strengthening the public sector’s ability to provide health services and infrastructure (including water and sanitation) in low-income countries.	Elvira Beracochea
3	Build health workforce capacity in low-income countries.	Amy Hagopian
4	Advance maternal and child health, especially by improving child survival and decreasing maternal mortality through strengthening integrated primary care delivery systems.	Miriam Labbok Donna Barry Mary Anne Mercer
5	Encourage US and other donors to address issues of low-income country food aid and food security.	Donna Barry
6	Seek opportunities to demonstrate APHA International Health Section solidarity with colleagues, health systems and health workers facing threats, especially from war, natural disaster and humanitarian emergencies.	Leonard Rubenstein
7	Promote universal coverage in US, and sustain public health systems abroad.	Meredith Fort

The proposed agenda for 2010* is:

2010 DRAFT Advocacy and Policy Committee Goals

The International Health Section’s Advocacy and Policy Committee works to leverage APHA’s capacity to improve global health delivery and foreign aid effectiveness by advancing advocacy efforts and rights-based US policy to: (1) rebuild and strengthen the public health infrastructure and workforce; (2) improve quality of care and eliminate health disparities; and (3) ensure equitable and maximum access to health.

Chair: Jirair Ratevosian, jratevosian@gmail.com

Rebuild and Strengthen Public Health Infrastructure and Health Workforce Worldwide

Activities include:

- Support efforts to strengthen health systems and build health workforce capacity in resource-poor countries, including development of laws and regulations to curtail recruitment from developing countries suffering health worker shortages
- Support efforts to reconstruct health systems and reduce threats posed to health workers as a result of armed conflict, natural disaster, humanitarian emergencies, or political repression

Improve Quality of Care and Eliminate Health Disparities

Activities include:

- Prioritize maternal, newborn and child health, within an integrated global health strategy for strengthening integrated primary care systems
- Support universal coverage with effective interventions, including efforts to expand prevention, care and treatment for HIV/AIDS, tuberculosis and malaria; and food security improvement programs

Ensure Equitable and Maximum Access to Care

Activities include:

- Promote a comprehensive US approach to global health oriented towards fulfilling commitments of the Millennium Development Goals, with an emphasis on strengthening health systems to deliver integrated services with community level involvement
- Support proportionate, consistent, predictable and robust funding for all global health agencies, policies and programs
- Contribute to conflict prevention efforts as a proactive measure to preserve health infrastructure and workforce and protect population health

*note that this is still in progress. Final agenda to be released during 2009 Annual Meeting in Philadelphia.

2. Awards Committee

The Awards Committee solicits nominations and selects individuals for Section awards. The committee Chair is appointed by the Section Chair. The committee Chair, with the advice of the Section Council, appoints a committee that represents the various constituencies of the Section. The Awards Committee should include a Governing Councilor, a Section Councilor and the Section secretary

The Awards Committee Chair convenes the committee, either in person or by conference call and email. The committee establishes criteria for each award, solicits nominations from the Leadership Team and membership, and sets deadlines for nomination. A request for nominations for Section awards is placed in The Nation's Health and other publications.

The Committee receives and processes nominations, deliberates and selects winners. Deliberations on candidates should be conducted with confidentiality among the committee members. The Committee orders award plaques or other symbols and works with the Chair to plan the Section's Social Hour and Awards Ceremony at the Annual Meeting. The Committee also presents these awards at the ceremony.

The Awards Committee Chair informs the Section Chair and the nominator, along with APHA officials. The Chair issues a press release and photos to notify appropriate individuals, such as The Nation's Health, The American Journal of Public Health, the Annual Meeting program, the state governor, and the mayor and local media in the jurisdiction in which the awardee resides.

Award recipients' names are posted on the IH Section website.

The Awards Committee Chair prepares an annual budget and a committee report to be submitted to the Section Chair and Secretary.

In collaboration with the archivist, the Chair updates the Section's historical listing of recipients of Section awards and members who have received APHA wide awards.

Section Awards
▪ Lifetime Achievement Award
▪ Mid-Career Award
▪ Distinguished Service Award
▪ Special Service Award
▪ Student Research Award

3. Section Organization and management Committee

This committee serves to support the section in making meeting arrangements, staffing our booth in the annual APHA Expo Hall, fundraising, and other logistical matters.

Its functions include:

- Arrange meeting space and refreshments for the section annual and mid-year meetings
- Work with the chair of the Awards committee to make arrangements for the annual awards dinner
- Make arrangements for IH Section Luncheon at Annual meeting, including:

Assist Speaker

- Room reservation (in coordination with Program Chair)
- Order Food
- Arrange for Decorations
- Reserve Speaker's table, and Assist Chair to invite those to be seated there
- Arrange publicity and photographs

- Organize materials and staffing for the Section booth during the annual meeting
- Assist the secretary in his/her role as archives holder for the section
- Fundraise for the Section enrichment budget, as allowed by one's employer (delegate otherwise)
- Assist the secretary in his/her duties, as is reasonable

The chair appoints the committee chair. Members of the committee should include the secretary, secretary-elect, and an APHA staff as an ex-officio member. Other members are selected to cover these activities. In preparation for the annual meeting, it is preferred that some members are selected from the annual meeting city.

4. Membership Committee

This committee is the focal point for maintaining and managing a recruitment mechanism and activities for the IH Section. Committee members work to recruit and retain members from cooperating agencies, universities, non-governmental organizations and other professional groups in the field of international and global health.

The committee also works to recruit professionals from U.S. health agencies who have an interest in international health. The committee works with overall APHA membership promotion activities. The Committee Chair is an ex officio member of the APHA Committee on Membership. Other committee members, ideally including someone who will focus on students, may be appointed jointly by the Section and Committee Chairs. There is not set number of members for this committee.

The membership committee works with APHA to develop materials and communications to promote membership and retention in the Section. The committee makes a special effort to attract student members, by, for example, sending the IH newsletter to Schools of Public Health. An annual membership report will be presented at the annual APHA meeting. The committee works with APHA to obtain missing information on Section members, such as email addresses and phone numbers.

The committee will work with the IH section to staff the IH booth at conferences and meetings, at the APHA annual meeting, the Global Health Council annual meeting and other venues. This committee also will work with APHA to identify and recognize long-standing members.

5. Information and Communication Committee

This committee is responsible for the production and distribution of information relevant to the international and global health activities of the Section, and essential for communication between the section members, committees and its partners. Tools to be used include:

- The Section Newsletter
- The Section web site
- Special announcements or reports

The newsletters are prepared with input from the Section Leadership Team and the various Section committees and working groups, and send it for publication on the APHA and IH Section websites. For further information on the Newsletters, please see Part VI of this Section Manual.

6. Nominating Committee

The purpose of the Nominating Committee is to prepare the slate of nominees for the International Health Section elections and other APHA wide offices and generally to work with the Leadership Team in identifying candidates for various Section and APHA roles. A Chair is appointed by the Section Chair based on recommendations from the Section Council. Four or five other committee members are selected by the Section Chair and the Leadership Team with an effort to assure representation by the various constituencies of the Section.

The committee solicits candidates for Section offices and positions by broadcasting appeals to the membership, as well as requesting nominations from current Section leadership. Candidate names are submitted to APHA, along with biographical sketches. APHA conducts the Section leadership election online in May/June of each year. Election results are announced electronically to all members in the October issue of *The Nation's Health*. Ideally, there will be two or more candidates for each position.

The positions to fill include:

- Chair-Elect: elected bi-annually for a two-year term followed by a two-year term as Chair.
- Secretary-Elect: elected bi-annually for a two-year term as Secretary Elect, followed by a two-year term as Secretary.
- Section Councilors, who serve three-year terms. Two are elected each year, to maintain a roster of six.
- Governing Council members, who serve two-year terms. Three or four will be elected each year to ensure continuity. The total number of governing councilors is adjusted annually depending on the number of members in the Section.

The Nominating Committee should make available clear job descriptions and time commitment expectations to all candidates. This includes the annual meeting, which is a Saturday through Wednesday commitment. When the slate of nominees generated by the Nominating Committee is not considered satisfactory, a member may add a candidate to the slate by presenting the signatures of at least 25 members with primary affiliation in the Section. The petition must be submitted within 30 days after publication of the slate put forward by the nominating committee. Publication occurs in *The Nation's Health*, among other places. APHA shall add the petition-generated names to the ballot.

Elections are conducted by APHA on-line, and winners are determined by a simple majority vote. In cases where a vacancy occurs or an APHA-sponsored election fails to take place, those present and voting at the APHA annual meeting at a regularly called business meeting of the Section may elect the leadership ensuring a quorum of five Section Council members.

The Chair of the Nominating Committee prepares and submits reports to the Section Chair, archivist, website manager, and newsletter editor. S/he is also responsible for producing a budget for the committee's activities.

7. Program Committee

The purpose of the Program Committee is to plan and organize a program of scientific quality and of national interest to the Section and APHA members as a means of informing them of the issues, direction, and research related to the practice of international and global health with emphasis on the annual meeting theme selected by the APHA Governing Council.

The Section Chair appoints the Program Committee Chair at least 12 months prior to the annual meeting for which the Chair is responsible. The Chair may serve for multiple years at the discretion of the Section Chair. The immediate past Program Committee Chair should serve as an advisor to his or her replacement. Members serving on this committee are selected from volunteers with a record of expertise, research and publications in the international health various disciplines.

Program Committee Activities

- Assume the responsibility for the IH Section program at the Annual Meeting, not including the IH Section booth, Business Meetings, Awards Ceremony and Social Hour, and Section luncheon. Coordinate the sessions of the program with other Section activities to minimize conflicts of events.
- Prepare the Call for Abstracts for the Annual Meeting's Scientific Sessions.
- Solicit ideas for the program from the Section and Governing Councilors, Section Chair, other Section Committees, and the general IH Section membership. Solicit ideas for invited sessions from the IH Section leadership.
- Organize the peer review of abstracts submitted in response to the Call for Abstracts to assist in the choice of those to accept for the program. Make the final choice to accept or reject abstracts based on responsiveness to the overall Annual Meeting theme, responsiveness to the IH Call for Abstracts, peer review results, and the ability to organize coherent panel and poster sessions.
- Contact those asked to organize invited sessions and ensure that they submit all abstracts and presenter information for the program by the deadlines set by APHA.
- Develop the IH program by placing abstracts into panels and poster sessions and putting ordinary and invited panel sessions and poster sessions into time slots. This should be done to minimize topic area conflicts as much as possible (e.g., avoid scheduling two HIV-related sessions in the same time slot or two high-profile invited sessions in the same time slot).
- Participate in the APHA Program Committee orientation meeting usually on the Thursday following the Annual Meeting to initiate program organization for the subsequent Annual Meeting. Note that the IH Section Chair also may participate in this meeting. At the meeting, be prepared to participate in a discussion to propose topics and speakers for the Annual Meeting's Special Sessions (sessions organized for the Association as a whole, not part of individual Sections' programs).
- Recruit and prepare moderators for IH scientific sessions.
- Report on the program at IH Section meetings, including the number of ordinary and invited panel sessions, number of poster sessions, number of abstracts received, numbers of peer reviewers engaged in abstract assessment, highlights of the program, and other information of interest to the membership.
- Answer questions and solve problems of IH members related to the program (especially related to submitted abstracts) by email, telephone, and regular mail.
- Share materials and methods used to plan the program with the incoming Program Committee Chair.
- Be available as a resource to help the Program Committee in the year following the end of one group's program planning term.

8. Students and New International Health Professionals Committee

The purpose of this Student and Young Professionals Committee is to support and coordinate the efforts of the Section to reach out to students and young professionals interested in careers in international and global health and to facilitate their engagement in Section activities. The committee Chair is appointed by the Section Chair. Other Section members representing a representative cross section of schools of public health, medical schools, and young professionals can be appointed by the Committee and Section Chairs.

Students and New International Health Professionals Committee Activities

- Promote student and young professional membership in the Section, and develop and direct the energy of students and young professionals interested in exploring international and global health.
- Write a column for publication in the International Health Section Newsletter; prepare a student Section of the website.
- Identify contact persons, students and/or faculty, for each school of public health and interested medical school who will serve as a conduit of information about APHA and the Section.
- Advertise, solicit, and review papers from students for the annual meeting in coordination with the Program Committee Chair.
- Identify and share curricula appropriate to the needs of students who are interested in developing courses in health care in poor countries.
- Organize and maintain a network of students and young professionals for sharing of common interests, career goals, job opportunities, and strategies for achieving those goals.
- Organize the “Careers in International Health” panel for the APHA Annual Meeting.

9. Section Liaisons

These individuals are appointed by the Section Council to serve as liaisons between the IH Section and other APHA Sections. Ideally, there shall be a liaison with the State Affiliates and to each of the APHA Sections, Special Primary Interest Groups (SPIGs), and caucuses of APHA.

10. Committee on APHA Global Health Connections

This newly formed committee is responsible for capacity building and collaboration among the different components of APHA. While any APHA member can join the IH Section as a secondary member, the focus on this committee is to act as an informal facilitator in APHA for global health to involve sections and committees and Forums with significant global health interest and activities. This mainly involves the MCH, HIV/AIDS, Population and Family Planning Sections, as well as the International Human Rights Committee and the Trade and Health Forum. The Committee Chair, appointed by the Section Chair, selects a co-chair and members with interest and affiliation to other APHA components.

Activities

- Encouraging the production of joint sessions, resolutions, and position papers
- Promoting global and international awareness within APHA on global health issues of major concern
- Facilitating the involvement of international members of APHA in activities of the Association and collaboration with domestic members on issues of mutual interest

11. Committee on External Global Health Connections

This new committee aims at reaching out to agencies and organizations specialized in international and global health to build partnership, collaboration and advocacy in this field between these organizations and APHA/IH. Priority will be given to:

- UN international agencies in the field of health namely WHO and PAHO, World Bank, UNICEF, UNDP
- US Governmental Organizations, US-AID, CDC, Department of Health & Human Services/ Global Health, EPA
- NGOs including Global Health Council and Faith Based Organizations

Activities will be planned on the basis of opportunities and the priority of issues relevant to APHA and IH concerns. The committee chair is appointed by the Section Chair who jointly selects a co-chair and members from volunteers with experience and interest in working with these organizations.

12. Global Health Strategies Committee:

The Committee is responsible for developing and identifying strategies that guide APHA and its IH Section and members for actions in the global health field. This is achieved by producing position papers or special policy papers on current issues with input and survey from the members of APHA.

The committee chair is appointed by the Section chair, and they jointly select a co-chair and members who are familiar with health services research and policy formulation

Working Groups and Liaisons

1. Community-Based Primary Health Care Working Group

The pendulum is now shifting. It is becoming increasingly clear that community-based approaches that involve community leaders and community members as partners are of vital importance in reaching the poorest of the poor and the marginalized around the world. Such approaches are also of vital importance since the burden of disease is greatest in these hard-to-reach populations. Furthermore, community-based approaches are highly effective in promoting behavior changes that are necessary for health improvement, from hand-washing to safe sex.

The “Global Strategy Framework on HIV/AIDS,” recently released by UNAIDS, states:

“It is at the community level that the outcome of the battle against AIDS will be decided.... Local capacity for prevention, care and support efforts need to be recognized, affirmed and strengthened.”

As it is with AIDS, so it is with the other major causes of readily preventable or treatable causes of serious morbidity and mortality throughout the developing world – involving the community is a critical element of effective health programming and improving health status.

The purpose of this Working Group is to encourage interest in and knowledge about this approach, to promote awareness of successful examples of using this approach, and to encourage the scaling up of this approach to sub-national and national populations. The Working Group also seeks to encourage the recognition of the value of this approach in health policies and in the funding of health programs. Finally, the Working Group promotes networking and information sharing among its members.

Our working definition of CBPHC (recognizing that definitions can be over-restrictive or lacking in specificity, depending on your viewpoint) is as follows:

CBPHC is a process through which communities and community members are active partners in efforts to improve health and control disease. These efforts may or may not be in collaboration with governmental or private health care programs, and they may be comprehensive in scope or highly selective. However, in all cases the community is either leading the process or functioning as an active partner in the process. And, activities take place within the community, often outside of existing health facilities, so that essential services are readily available even to the poorest and/or the most geographically isolated members of the community.

At present (2007), the Working Group has approximately 80 members. Henry Perry and Paul Freeman are the current Co-Chairs of the Working Group, and Connie Gates is Secretary-Treasurer.

The Working Group meets twice a year, at the American Public Health Association's Annual Meeting and at the annual meeting of the Global Health Council. It sponsors a workshop on the Saturday prior to the opening of the APHA Annual Meeting on Sunday, and it provides time for discussion among those who attend its meetings and workshop (including an informal dinner after the workshop). The proceedings of one of the earlier workshops (held in 2000) have now been published as a monograph (Jon Rohde and John Wyon, editors, *Community-Based Health Care: Lessons from Bangladesh to Boston*, Management Sciences for Health, 2002). An evidence-based review regarding the effectiveness of CBPHC sponsored by the Working Group is now nearing completion and has obtained the active involvement of UNICEF, the World Health Organization and the World Bank. The Working Group sponsors a list serve which shares information of interest about issues and activities related to CBPHC.

2. Pharmaceutical Working Group:

The group, chaired by Maggie Huff-Rousselle, is active in communicating with other groups with concern to pharmaceuticals and public health. Our Section is focusing on promoting access and assistance to developing countries to the essential drugs and medical supplies, and the ethical production, testing and marketing of pharmaceuticals particularly in developing countries.

3. Liaison with the Trade and Health Forum:

The Section established a working group on trade and health and organized sessions during the annual meeting. With the growth of interest in this area within APHA a Trade and Health Forum was approved with support from the IH Section. Our Section appointed Marry Anne Mercer as a liaison to the Forum, organizing a group of interested specialized section members. The aim of this group is to ensure that the IH section policies and views are well represented in the Forum focusing on:

- Recognition of the need to achieve the Millennium Development Goals, particularly eradication of severe poverty and hunger,
- Fairness and equity for developing countries in all trade treaties to promote economic development,
- Availability and affordability of essential drugs and medical supplies to the needy international communities, and
- Observation of needs for human resources in health in developing countries and prevention of brain drain.

Part V: Section Administration

1. Introduction

The primary purpose of the Section administration is to conduct the business of the IH Section according to APHA bylaws, working closely with the Section Leadership Team and the membership. The Section is responsible for following the fiduciary and legal policies of the Association.

Membership issues also need to be identified and followed-up on in order to ensure that the Section continues to grow and that members are encouraged to remain actively involved.

2. Section Finance

The responsibility for the development of the budget for the Section rests with the Chair, preferably in consultation with the Leadership Team. The amount of money received by the Section from APHA is based upon a capitation payment per primary member enrolled in the Section and is determined annually by APHA in accordance with its principles for the allocation of membership income. The Section financial year runs from July 1 through June 30. Unexpended funds at the end of the fiscal year are forfeited. An outgoing Chair submits a report on expenditures to date in that fiscal year. The new Chair takes over management of the remaining budget balance as of the end of the Annual Meeting.

The Section budget should reflect the priorities of the Section as established during the meetings of the Section Council or Leadership Team. Overall policies with respect to the payment for travel and expenses incurred in connection with APHA business are mandated by APHA policy. Each individual Association member is expected to pay for his/her own lodging and meals at meetings. Annual and interim meeting expenses are the responsibility of each individual member. Committee Chairs and Officers are responsible for developing a proposed budget for submission to the Section Council and Chair. Committee Chairs and Officers are also responsible for developing as part of their annual report to the Section a record and an explanation of the purposes for which funds were expended. Over-expenditures or unauthorized expenditures are the responsibility of the individual responsible for the spending, not of the Section Council or of the Section budget. All financial expenditures (e.g. receipts, invoices, etc.) must be sent to the Chair for approval prior to being sent to APHA for reimbursement.

The budget for 2009 was \$10,884.75, with \$5,886 from the APHA's allocation, and \$5,098.75 from generous donors to the section. It was spent primarily on the following:

- Mid-year meeting room rental and food (\$2,500)
- Exhibition hall booths at the Global Health Council Conference and the APHA Annual Meeting
- Production of Section materials (IH Section History, Blue Book, pamphlets, etc.)
- Awards Ceremony (Social Hour food and trophies) (\$3,200)
- Communications (website, conference calls, postage, etc.)
- Audio-visual support for our Section business meetings (\$700)

3. Legal Responsibility

The Section Chair and Officers have the obligation to protect the Association, its Officers and other official designees, and the Section financially by following the APHA General Guidelines. These Guidelines include the requirements for the IRS Tax Code for 501(3)(c). The Association is designated as a non-profit organization. The fiduciary requirements of the Section Chair and Officers are specified in the financial parts of the *Manual for Section Chairs and Leadership of General Guidelines for Sections*.

4. Section Membership

To be an active Section member, an individual must hold current membership in APHA. Each member is also encouraged to join their state Affiliate. Anyone who is a member of APHA may become a member of a Section. Members may select a primary Section or declare themselves unaffiliated. If members wish to support and affiliate with an additional Section, they are said to hold secondary membership in a second Section. However, the right to hold office or to serve as a member of a Section Council, or to chair a Section committee, requires primary affiliation with that Section. Members are allowed to transfer their primary affiliation from one Section to another, but not more than once each year.

Part VI: Section Documentation and Communication

1. Introduction

The IH Section currently has many types of Section documents and resources used for the various activities being carried out for both the administrative functions of the Section as well as the policy and resolution requirements.

Communication systems are extremely important as the Section membership is geographically distributed not only throughout the U. S., but also globally. This part of the Section Manual provides details on how to access both APHA and Section documents, and the communication routes for executing routine Section business.

2. APHA and Section Documentation and Resources

American Public Health Association

www.apha.org

APHA – International Health Section

<http://www.apha/membergroups/sections/aphasections/intlhealth>

American Public Health Association, Inc. CONSTITUTION & BYLAWS

Manual for Section Chairs and Leadership of General Guidelines for Sections

APHA Membership Policy Manual & Organizational Review

The APHA Guide: Information for Members and Leaders

Action Board Guidelines for Participation

IH Section Primer (Little Blue Book)

IH Section History

IH Section Pamphlets

IH Section Manual

3. Section Communication

a. Section Website

APHA's website points to our Section's website, which is www.apha-ih.org. If used well, the website can be a primary communications tool for the Section, as broadcast e-mails can be used to alert members to postings of new material. The website contains the Section manual, the Leadership Team roster, news items, advocacy opportunities, APHA resolutions sponsored by or pertaining to our Section, and much more.

To access the IH Section website,

<http://www.apha.org/membergroups/sections/aphasections/intlhealth/>

To “log on” to the APHA members-only website, go to www.apha.org, click on the “members” link and then enter the following:

For “User Name” - Put your APHA ID # in the space

For “password” – Put your first initial and last name in the space

You will then be on the “Members Only” page, which contains APHA documents, Member Services, and other information and resources. You can “Update your Member Record” on this page as well.

b. *Section List serve*

Section leaders should all be “enrolled” in the section list serve, a Google group. Committees of the section could organize their own groups, should they be large enough to warrant it.

Group name: APHA International Section

Group home page: <http://groups.google.com/group/apha-international-section?hl=en>

Group email address: apha-international-section@googlegroups.com

c. *APHA and Section Broadcast Emails*

APHA has the email addresses of all Section members who have submitted their email addresses to APHA. At the Section’s request, APHA/EGHR can send messages via “broadcast email” to them (85% of total Section members).

d. *Section Newsletters*

The newsletter is prepared by an Editor appointed by the Section Chair. It is processed by APHA staff and posted on the www.apha.org website. The Editor arranges for it to be posted on the Section’s www.apha-ih.org website. There are two issues per year although a third could be considered. The first is sent out between the APHA Annual Meeting and December 30, the second before May 30, and the third before September 30. Information about the posting of the newsletter is sent electronically to all primary and secondary Section members, and APHA leadership, as well as the World Federation of Public Health Associations, the Pan American Health Organization, and the Global Health Council.

Suggested content for the newsletter includes committee reports, goals for the year and officers’ reports, awards given, special events in which the Section was involved, or in which a Section member was honored, and brief articles that concern international health issues.

The Editor ensures the archivist has retained a copy of the newsletter, and prepares and submits to the Section Chair a committee budget.

The Section newsletter can be found on both the APHA website and the Section website.

e. *Conference Telephone and Video Calls*

The Section uses conference calls to execute Section business. These have typically been held the 1st Tuesday of every other month, 1 pm Eastern time. Participants are sent a toll-free call-in number by the call organizer, who is typically the secretary. These calls are paid for out of the Section budget.

f. *Section Meetings*

Because of geographic distances, costs, and the development of communication tools, the functions of the Section Council are often carried out in an informal and voluntary way. Functions may be

delegated to officers and committees that may function rather autonomously. They must, however, keep the Chair informed of all actions, decisions, and plans. Section Council members have the responsibility to participate and be available to provide guidance and support to any activities when requested. At Section meetings, the Section Council develops, coordinates, revises, ratifies, and endorses activities that are carried out by the Leadership Team.

The Section must hold at least one regularly called business meeting at the APHA Annual meeting (APHA Bylaws). Section business meeting(s) may be scheduled at the convenience of the Section during the APHA annual Meeting except for those time slots designated by the APHA Program Planning Committee as ‘non-competing’ times. The APHA Convention staff provide to the Section Program Planners detailed guidelines and a calendar that includes information on how and when to schedule meeting and events at the Annual Meeting. The regularly scheduled business meeting(s) are to be published in the final program of the APHA Annual Meeting. This publication gives open notice that all meeting attendees and Sections members may attend. The regularly scheduled business meeting is an open meeting. To arrange Section business meetings, or other Section-sponsored events at the Annual Meeting, the Chair needs to provide that specific information (and needs) to the Section Program Planner.

The IH Section has several meetings each year, with most of them occurring during the APHA Annual Meeting. The Chair, in consultation with the Leadership Team, has the responsibility for developing the agendas and conducting these meetings.

Currently (2004), the Section holds the following annual meetings, with standing agendas provided herewith as a road map for IH Section business.

**Standing Agenda
Mid-Year Leadership Team Meeting
Global Health Council Conference – June**

This meeting is *intended specifically for the Leadership Team AND is also open to all current or interested Section members*. The purpose of the meeting is to monitor and follow up on the annual plan, plan for the annual meeting activities, and discuss committee reports, solicit for volunteers to fill vacant positions. The meeting is held as part of the global Health Council annual meeting program and hosted by GHC.

2009-INTERNATIONAL HEALTH SECTION MEETING AGENDAS

Sunday, November 8 • 11 am - noon	Global Health Connections Committee	Philadelphia Convention Center 110A
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Sunday, November 8 • 2 - 4 pm	Business Meeting #1	108B Philadelphia Convention Center
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This meeting is OPEN to all *Section membership*, and its purpose is to report on Section activities over the last year. This is a great opportunity for members to learn about ways to be involved in Section activities. Chairs describe their committee's work over the last year and solicit new members. We also get organized for the upcoming annual meeting (last minute booth staffing sign-ups, governing council caucuses, etc). We build enthusiasm for the Section's scientific program sessions during the upcoming APHA annual meeting.

- 2 PM Welcome and introductions by Miriam Labbok, Section Chair; with a special welcome to our international guests and new members.
- 2:10 Introduction of officers and review of roles (Section Chair)
 Secretary makes available copies of the annual report
 Description of next two business meetings held during this annual meeting, along with the Monday evening social/awards celebration and Section luncheon on Wednesday.
 Announcements of when committees will meet during the annual meeting (5 pm Monday prior to the Section Awards event)
 Staff report (Jesseca Boyer and Morgan Taylor)
- 2:20 Chair discusses the Section's strategic planning process
 Chair presents results of Section surveys
 Inter-sectional council report, Miriam
- 2:40 Omar Khan, program chair, orients us to the scientific program for the meeting. How were sessions selected, and what will be the process for next year?
- 2:50 Jirair Ratevosian, Policy/Advocacy committee chair, reviews key wins in 2009 and briefs the membership on the policy issues to be presented in the hearings later in the afternoon and where we need membership support and attendance.
- 3:00 Malcolm Bryant, chair elect and Governing Council Whip, briefs the Section members on the hot topics the Governing Council will tackle in its meeting on Tuesday, including the election of APHA leadership
- 3:10 Orientation to committees*, working groups** and individuals with APHA-wide assignments*** of the Section and APHA, and an opportunity for volunteers to connect with these committees. This is the time to consider any structural re-alignment for the coming year—new or “graduated” task forces, new or collaborating/combining committees, new leadership, and explain any mysteries. This year, re-organization will focus on the strategic plan and we will consider an MCH committee.

***COMMITTEES**: Nominations (APHA and Section), Program, Awards, Information/communications, Membership, Students and young professionals, Policy & Advocacy, Section Management, Global Health Connections, Section Strategic Planning committee. Query: Should we form an MCH committee?

****WORKING GROUPS**: Community-Based Primary Health Care Working Group, Child Survival Task force, Pharmaceutical interest group, Trade and Health.

*****APHA Assignments**: Action Board Rep, Science Board, Section council, Governing council, Intersectional collaboration, APHA policy review process, Action Board, World Federation of Public Health Associations, APHA international Human Rights Committee, APHA publications board, and others.

Monday, November 9 6:30 am to 8 am	Breakfast & Business Meeting #2 Strategic Planning discussion	PCC 111B
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	Elected and appointed leadership only	
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Monday, November 9 5 pm - 6 pm	Policy/Advocacy Committee meeting	Marriott room 408
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Monday, November 9 6 pm - 9 pm	Awards reception	Marriott Liberty Ballroom A
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The Monday night social is OPEN to all *Section members*, and is held to celebrate the occasion of being together and networking, and to present the Section’s awards.

6:00 Cash Bar, 7 pm Awards Ceremony; Chair will welcome and present Paul Freeman, Awards Committee, to present awards.

Tuesday, November 10 • 6 pm - 8 pm	Business Meeting #3	PCC 109B
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This meeting is OPEN to all *Section membership*, and its purpose is for business and organizational issues. Principal actions to be taken at the meeting include announcement of the Chair's selection of any new committee chairs for the coming year, discussions of program plans for the ensuing year, the scheduling of the interim meeting at the Global Health Council conference, and appointment of a nominating committee for the forthcoming year. Governing Councilors report on what happened at Governing Council, and solicit Section opinion on major APHA issues for next year. The Nominating Committee solicits volunteers to run for Section Leadership positions for the next year. The products of this meeting are work plans and leadership nominations from each of these sectional units.

- 6:00 PM Welcome by Miriam Labbok, Section chair, and introductions
- 6:15 Report of the Governing Council, by Malcolm Bryant
Action Board report, Donna Barry
- 6:40 General DISCUSSION of our section’s role in APHA, dynamic issues in global health and how the Section should position itself, updates on the new federal Administration's engagement on global health, and how we want to organize to influence policy towards our goals.
- 7:00 Discussion of advocacy opportunities and policy goals for Policy & Advocacy Committee
- 7:30 Program planning and themes for next year’s scientific session and themes
Discussion by members of preferences for next year’s program content
- 7:40 Last committee announcements and updates for this last business meeting
- 7:50 Announcements of the leadership teleconferences, mid-year meeting, and how to get on the list serve
- 8:00 Closing remarks , Miriam Labbok

<p>Wednesday, November 11 7:30 am - 9:30 am</p>	<p>World Federation of Public Health Associations Breakfast</p>	<p>All section leaders (loosely defined) invited!</p>
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This breakfast is an opportunity for leaders in international health – both APHA leaders as well as leaders from other associations in the World Federation of Public Health Associations (WFPHA) to meet, network and share information about global health interests and activities. While customary that this breakfast is by invitation only, Section members, particularly leaders, should make known to APHA staff their interest in being added to the invitation list if they wish to attend. <morgan.taylor@apha.org>

<p>Wednesday, November 11 • 12:30 pm - 2 pm</p>	<p>Section Luncheon</p>	<p>PCC 108AB</p>
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Tentative Speaker from the State Department or USAID to present the international health agenda of the new administration. The luncheon is OPEN to *all Section members and others*, however attendees must purchase tickets for the lunch. Members and others may attend the program even if they do not wish to purchase the lunch, however.

Part VII: American Public Health Associate (APHA)

1. Introduction

APHA has been influencing policies and setting priorities in public health for over 125 years. Throughout its history it has been in the forefront of numerous efforts to prevent disease and promote health.

2. Organizational Structure: State Affiliates, Sections, SPIGs and Caucuses

APHA has 53 state public health affiliates with one in every state including the District of Columbia.

There are 25 Sections in APHA:

1. Alcohol, Tobacco, and Other Drugs
2. Chiropractic Health Care
3. Community Health Planning and Policy Development
4. Disability
5. Environment
6. Epidemiology
7. Food and Nutrition
8. Gerontological Health
9. Health Administration
10. HIV/AIDS
11. Injury Control and Emergency Health Services
12. International Health
13. Maternal and Child Health
14. Medical Care
15. Mental Health
16. Occupational Health and Safety
17. Oral Health
18. Podiatric Health
19. Population, Family Planning & Reproductive Health
20. Public Health Education and Health Promotion
21. Public Health Nursing
22. School Health Education and Services
23. Social Work
24. Statistics
25. Vision Care

There are 7 SPIGs in APHA:

- Alternative & Complementary Health Practices-
- Community Health Workers
- Ethics Forum
- Health Informatics and Information Technology
- Health Law Forum
- Laboratory
- Physical Activity
- Veterinary Public Health

There are 17 Caucuses in APHA:

- Academic Public Health Caucus
- American Indian, Alaska Native & Native Hawaiian Caucus
- Asian Pacific Islander Caucus
- Black Caucus of Health Workers
- Caucus on Homelessness
- Caucus on Public Health and the Faith Community
- Caucus on Refugee and Immigrant Health
- Community-Based Public Health Caucus
- Health Equity and Public Hospital Caucus
- Labor Caucus
- Latino Caucus
- Lesbian, Gay, Bisexual & Transgender Caucus of Public Health Workers
- Peace Caucus
- Socialist Caucus
- Spirit of 1848 Caucus
- Vietnam Caucus
- Women's Caucus

3. Boards, Committees and Task Forces:

Mandatory Section Representation

The following three are APHA-wide boards to which the Section is *obligated* to send representation.

a. **InterSectional Council (ISC)**

The InterSectional Council (ISC) is made up of the chairs, chairs-elect and immediate past chairs of each active APHA Section. These officials meet during the Annual Meeting, both as the ISC and in a joint meeting with the Committee of Affiliate. The Council allows Section leadership to come together to discuss issues of concern to common to a majority of or all APHA Sections. The full ISC is chaired by an individual elected from ISC membership. The ISC has an *ex officio* member without vote on the Executive Board. This individual is usually the chair of the ISC. The term of office is one year. The InterSectional Council Steering Committee was established to conduct the affairs of the InterSectional ISC Steering Committee terms are for one year.

b. **Governing Council**

The APHA Governing Council is the fundamental decision making body for the APHA. It approves the bylaws, for example, that establish all the organizational rules and structures. Each section is entitled to two representatives on the council, and additional numbers depending on the size of the Section (the International Health section has 4). Each affiliated state public health association also has a representative to the council. APHA officers and the members of the Executive Board also serve on the Governing Council. It is the Governing Council that adopts resolutions and makes policy decisions for the APHA, sets dues, elects leadership, elects officers and Executive board members, approves new boards, standing committees, task forces and other similar bodies. Governing Councilors serve two-year terms, and may only serve three consecutive terms (after which they must take a two year leave before serving again).

c. **Action Board**

The Action Board's function is to plan, organize, and pursue the implementation of Association policies and positions, including pursuit of an annual legislative program. The Action Board includes a

representative from each of the Sections. These representatives shall be chosen by the APHA President from among three names submitted by each Section in any year when the term of its representative expires. Action Board members serve two-year terms and may not serve two successive terms. The main resource for this Board is the *Action Board Guidelines for Participation*. This is sometimes a little-noticed position, but of remarkable power within the organization.

Optional Section Representation

The section has additional opportunities to lend leadership to APHA-wide Boards and Committees. These include:

d. American Journal of Public Health Editorial Board

The 15-member Editorial Board provides broad oversight and recommendations to the *AJPH* editor-in-chief and managing editor to produce a quality journal for APHA. The Editorial Board meets each spring and during the Annual Meeting. The term for Editorial Board members is three years. All members serve at the pleasure of the Executive Board.

e. Education Board

The Education Board is charged with overseeing the maintenance of accreditation for various APHA educational sessions so that members can receive accredited continuing professional education hours during the Annual Meeting. The Education Board has 15 appointed members, with the chairs of the Science Board, Action Board and the Executive Director serving as ex officio members without vote. The term for members of the board is three years.

f. International Human Rights Committee

The focus of this 10-member group is on international human rights. Several of its members have special involvement with human rights activities in selected areas of the world, e.g., Latin America, South Africa, Russia, China, etc. Personal experience with human rights problems in a specific world “trouble spot” is therefore a valuable asset for potential members of this committee. This committee meets only during the Annual Meeting, for which expenses are not reimbursed. Members keep in touch throughout the year by voice and electronic mail and a listserv. The term for members on IHRC is two years.

g. Joint Policy

Membership of the JPC is made up of 12 members drawn from the Action Board, the Science Board and the Education Board. The Chairs of Action, Science and Education Boards serve as Co-Chairs of the JPC and designate three members from each of their Boards, in addition to themselves, to serve on the JPC. The JPC meets mid-year to review all submitted policy statements (both resolutions and position papers) that have been submitted by APHA members to the APHA policy development process. During the Annual Meeting, the JPC holds open hearings on the policy statements.

h. Publications Board

The Publications Board is one of APHA’s most active working groups. It has the oversight for all books developed and published through APHA. Each Board Member represents a defined area of public health expertise. Each Board Member acts as a liaison to one or more book projects each year and is also involved in reading and evaluating numerous book proposals for their applicability to APHA’s overall

strategic plan. The Publications Board meets in the spring and during the Annual Meeting. Expenses for the Annual Meeting are not reimbursed. The term of appointment to the Board is three years.

i. Science Board

The Science Board (previously the Program Development Board) has the role of stimulating and coordinating the development of the scientific basis for the Association's professional and public policy programs. It may do this through the formation of task forces and other ad hoc units. The 15 members of the Science Board represent the core areas of public health: behavioral and social sciences; biomedical sciences and clinical practice; environmental and occupational health; epidemiology and statistics; and health management and social policy. The Board participates in the APHA policy development process by ensuring that all Association policy statements are evidence-based. Members with *scientific expertise* in any one of the five core areas are eligible for deployment. Such expertise may be found across the Sections and Affiliates. The Science Board may designate task forces, with the approval of the Executive Board. The Science Board meets in the spring and during the Annual Meeting. Expenses for the Annual Meeting are not reimbursed. Members of the Science Board are appointed through the membership deployment process, and each serves a three-year term. The Chair of the Board is ex officio to the Executive Board for the year that he or she is Chair. The Chairs of the Education and Action Boards and the Executive Director are ex officio members without vote on the Education Board.

4. Task Forces

While standing and other committees address internal activities of the Association, the Executive Board, Science Board and Education Board also have the constitutional authority to establish task forces to focus on specific issues of interest to the Association and its membership.

Part VIII: World Federation of Public Health Associations (WFPHA)

1. Introduction

The **World Federation of Public Health Associations** is an international, nongovernmental organization bringing health workers throughout the world together for professional exchange, collaboration, and action. Its members, currently numbering 70, are multidisciplinary national and regional public health societies whose own memberships include nurses, sanitarians, administrators, physicians, health educators, pharmacists, anthropologists, researchers, and many other persons interested in public health. Founded in 1967, WFPHA is the only worldwide professional society representing and serving the broad field of public health, as distinct from single disciplines or occupations. As a founding member of WFPHA, APHA provides key support to the World Federation of Public Health Associations such as providing space in APHA's Washington, D.C. headquarters for the WFPHA Secretariat. As a member of WFPHA, APHA has access to the World Health Organization, which recognized WFPHA as an NGO in official relations with WHO. Additionally, APHA has access to other UN agencies, such as UNICEF and the Economic and Social Council of the UN, through WFPHA's relationships with such organizations.

The APHA's International Health Section helps to nurture the relationship between APHA and the WFPHA. One recognition of this is that Section leaders are invited to the WFPHA breakfast that is held at our Annual Meeting.

International Congresses - WFPHA convenes a scientific conference every three years. Public health professionals and experts in related fields, nongovernmental and governmental, from around the world gather at the Congress to share ideas, experiences, and research. The 12th Congress took place in Istanbul, Turkey, April 27-May 1, 2009.

Annual Meeting - The Annual Meeting is held in Geneva each May at the time of the World Health Assembly. This scheduling facilitates the participation of representatives of WHO and key government officials.

Action on International Health Issues - WFPHA and its members influence international health policy through the development and implementation of policy resolutions and other advocacy initiatives. WFPHA has led the NGO community at Alma Ata in endorsing the concept of primary health care, urged linking health with economic development strategies, raised awareness of the health consequences of landmines and nuclear weapons, declared its opposition to the aggressive recruitment of health professionals from poor countries to rich ones, engaged as an active NGO participant in the negotiations leading up to the passage of the Framework Convention on Tobacco Control, and is committed to providing leadership in efforts to meet the Millennium Development Goals.