



**American Public Health Association
Minutes of the Governing Council
June 13, 2022
Virtual Mid-Year Meeting**

Convening of the Council

The meeting was convened by Secretary of the Council, Georges C. Benjamin, MD as President, Kaye Bender, PhD, RB, FAAN was experiencing technical difficulties. Speaker of the Council M. Aaron Guest, PhD, MPH, MSW, presided, and Greg Ullrich, JD, served as Parliamentarian. Dr. Benjamin welcomed and thanked the Governing Councilors for their work, and then turned the meeting over to the Speaker.

I. Call to Order

Dr. Guest called the meeting to order at 2:05 p.m. ET.

II. Quorum Call

Secretary of the Council, Dr. Georges Benjamin, confirmed a quorum was present.

II. Review of voting and speaking in the LUMI platform

Dr. Guest began by reviewing how Councilors could request to speak within the LUMI platform. Dr. Guest then reviewed voting procedures and conducted a test vote to orient Councilors to the voting process within the platform.

IV. Approval of the Meeting Agenda

Dr. Guest then called for a motion to approve the meeting agenda. The motion to approve the agenda was appropriately moved and seconded and hearing no discussion, the Speaker called for a vote.

Motion: To approve the agenda of the 2022 Mid-Year meeting of the Governing Council.

Outcome: 143 yea (100%); 0 nay (0%). The motion was approved.

V. Approval of the October 2021 meeting minutes

Dr. Guest then called for a motion to approve the October 2021 meeting minutes.

The motion to approve the minutes was appropriately moved and seconded, and hearing no discussion, the Speaker called for a vote.

Motion: To approve the minutes of the October 2021 meeting of the Governing Council.

Outcome: 136 yea (99 %); 1 nay (1%). The motion was approved.

VI. Approve the Creation of the One Health Section from the One Health SPIG

Next, Dr. Guest noted one of the critical functions of the APHA Governing Council is to approve the establishment, combination, or discontinuation of Sections and SPIGS of APHA. The Speaker then introduced the proposal from the Intersectional Council (ISC) to establish the One Health Section from the One Health SPIG. Dr. Guest attempted to turn the floor over to Thomas Docker, DVM, MPH, Chair of the ISC, but as Dr. Docker had technical difficulties. Dr. Guest moved to Item VII, Treasurer's Report, and stated Item VI would be revisited once Dr. Docker was on the line.

At this time, the Councilor from the ICHES Section, David Swedler, PhD, MPH, was recognized and asked if for the purpose of confirming the quorum, a list of all meeting attendees could be provided to Governing Councilors. Dr. Guest agreed to share the participant list post-meeting and noted there were 220 participants on the call, 165 of whom were voting members (quorum is 105).

The Speaker then turned the floor over the Treasurer Hernandez.

Following the Treasurer's Report, Dr. Guest returned to Item VI. Unfortunately, Dr. Docker's technical difficulties persisted so the Speaker delivered the ISC report on his behalf. Dr. Guest noted the proposal from the Intersectional Council on the floor to establish the One Health Section from the One Health SPIG. Dr. Guest stated the One Health SPIG meets the membership requirement of a Section (250 members) boasting 284 members as of March 2022. On March 23, 2022, the One Health SPIG applied to the ISC steering committee to move from a SPIG to a Section. The ISC Steering Committee approved the application at their April meeting and the application was forwarded to the full ISC for a two-week review on April 12. The comments received during this review period were all positive and the ISC recommends the current One Health SPIG becomes the new One Health Section.

Dr. Guest then presented the motion from the ISC to approve the creation of the One Health Section from the One Health SPIG. Dr. Guest reminded councilors approving the motion would not change the total number of APHA member units and stated as this the motion is from a committee, no second is required. He then called for discussion.

Speaker Guest recognized the Councilor from Aging and Public Health Section, Shenita Freeman, DSc, MSHIA, MPH. Dr. Freeman asked a representative from the current One Health SPIG to explain the work of their SPIG. The Councilor from the One Health SPIG, Catherine Machalaba, PhD, MPH, explained the work of the SPIG (formerly the Veterinary Public Health SPIG). noting they look at the connections between human, animal and environmental health and provided details on the One Health approach.

Speaker Guest then called on the Councilor from the HIV/AIDs Section, Jeffrey Goodman, MPH, who asked to verify that there was no fiscal impact of granting the SPIG section status. Dr. Benjamin confirmed there was no meaningful financial impact.

Next there was a point of clarification asking whether the Intersectional Council currently serves this function. Speaker Guest responded that it does not. The Intersectional Council has the ability to make recommendations and can set the criteria for sections and SPIGs, but it is the Governing Council who approves the creation of sections, SPIGs and forums, as well as relationships with Affiliates and Caucuses.

Dr. Doker then spoke noting Dr. Machalaba did a good job explaining the One Health SPIG's mission statement and he looked forward to a favorable vote.

Hearing no further discussion, the Speaker called for a vote.

Motion: To approve the creation of the One Health Section from the One Health SPIG.

Outcome: 143 yea (97%); 5 nay (3%). The motion was approved.

VII. Treasurer's Report

APHA Treasurer Benjamin Hernandez, MBA, delivered a report outlining the Association's fiscal position in FY 2022, APHA's FY 2023 budget and plans for after FY 2023.

Treasurer Hernandez began his report discussing FY 2022 finances through April 2022. Hernandez stated total revenues through April were \$14,765,502 and total expenditures were \$15,284,729, resulting in a current deficit of \$519,226. The Treasurer compared these numbers to January 2022 when revenues were \$11,644,844 and expenditures were \$10,915,468, for a

surplus of \$733,376. Treasurer Hernandez noted the deficit was planned, but showed the January numbers to demonstrate how quickly things change.

Treasurer Hernandez then shared projections for the close of FY 2022 in June. Projected revenues are \$16,874,288 and projected expenditures are \$18,822,844, leading to projected deficit of \$1,948,555. Treasurer Hernandez stated that while this is a smaller deficit than was originally planned when creating the FY 2022 budget (\$2.4 million planned), it is still significant. Hernandez stated that the negative effects of the pandemic are hitting for the first time this year and this will continue next year.

Treasurer Hernandez then moved to discussion of the FY 2023 budget. The Treasurer noted the FY 2023 budget was not yet complete as it was necessary to wait until closer to the end of the current fiscal year to close the gap in the proposed budget. Hernandez stated the final budget will be presented to the Executive Board in late-June for approval. The FY 2023 budget is planned to be a deficit budget, but the proposed deficit is within APHA's reserve abilities. Treasurer Hernandez also cautioned the deficit in FY 2023 may be larger than FY 2022.

Treasurer Hernandez then moved to discussion of the future (after FY 2023) noting uncertainty, but the Treasurer assured Governing Councilors planning for after FY 2023 was occurring now and hard choices will be needed. Hernandez stated on the revenue side this could include dues increases, increased Annual Meeting fees, more meetings, etc. and on the expense side could result in cut programs, reducing the size of APHA activities and cutting costs in how things are done. Treasurer Hernandez noted these hard choices are not a surprise and will be a multiyear process. Treasurer Hernandez noted small things will help, but won't close the deficit and it is likely not everyone will be happy with the solutions.

Treasurer Hernandez concluded and turned the floor back to the Speaker. Dr. Guest opened the floor for questions.

The Councilor from CHPPD, Jennifer Carmona, DPH, was recognized and asked for more information on the variance in the consulting line on the FY 2022 expenses year-to-date budget vs. actual table on the Treasurer's written report to the Governing Council. Treasurer Hernandez noted much of this was related to grants, but included a multitude of projects including APHA Your Way. Treasurer Hernandez offered to follow up with more specifics following the meeting.

The Councilor from Health Administration, Linda Landesman, DrPH, MSW, was recognized and asked whether an assessment had been done about how APHA compares to other public sector non-profits in terms of how they came through the pandemic and how the association is doing financially. Treasurer Hernandez stated no formal assessment had been done but based on his experience on other boards, APHA's experience has been very similar to other associations/organizations.

The Councilor from Medical Care, Alison Jordan, LCSW, spoke next and asked for more detail on the level of APHA's reserves and for clarity on a typo in the written report, Section A. Treasurer Hernandez stated APHA has an excess of \$20 million in assets (a chart is being created that breaks down these reserves and will be shared with the Governing Council). Hernandez noted liquid assets are about \$10 million, but not all can be disposed of.

Dr. Guest then announced the time allotted for discussion on this item had ended and the Council needed to move forward with the agenda. Dr. Guest did confirm in response to Dr. Carmona's questions that the discrepancy in projected vs. actual consultant fees were related to grants. Given there were several individuals remaining in the queue, the Speaker and Treasurer Hernandez agreed to answer the remaining questions in a follow up report to the Council.

The Speaker then returned to Item VI.

VIII. Nominations Committee

Dr. Guest then turned things over to Nominations Committee Chair Allison R. Casola, PhD, MPH, MCHES. Dr. Casola announced the open positions in 2022, President-Elect (three-year term), Treasurer (three-year term) and three open positions on the Executive Board (four-year terms). The candidates are as follows:

President-Elect (two candidates for one open position):

Ella Greene-Moton

Jeffrey Hallam, PhD, MA

Treasurer (three candidates for one open positions)

Ann Dozier, RN, PhD, FAAN

Benjamin Hernandez, MBA

Renata Slayton, MPH

Executive Board Member (six candidates for three open positions):

Kevin Borrup, DrPH, JD, MPA

Shontelle Dixon, MPH

Julie Graves, MD, MPH, PhD, AAHIVS

Claude Jacob, MPH

Diana Kingsbury, PhD

Gopal Sankaran, MD, DrPH, MNAMS, CHES

Dr. Casola then announced the candidates for Honorary Vice President (one-year honorary term). The candidates are as follows:

Honorary Vice-President (three candidates for three open positions):

Vamini Selvanandan, MD, MPH, CCFP (EM), Chair of the Board of Directors of the Canadian Public Health Association — *Canada*

Rosana Teresa Onocko-Campos, PhD, President, Brazilian Association for Collective Health (ABRASCO) — *Latin America and the Caribbean*

Mary Wooley, MA, President, Research!America— *United States*

Dr. Casola closed by commending the members of the 2021-2022 Nominations Committee. Dr. Guest also thanked all the members of the Nominations Committee on behalf of the Council and then turned the floor over to Dr. Bryan Buckley to deliver a presentation from the Development Committee of the Executive Board.

IX. Development Committee

Development Committee Chair, Bryan O. Buckley, DrPH, MPH, began by stating a committee goal to have 100% of Governing Councilors participate in leadership giving by the Annual Meeting. To date, 34.9% of Governing Councilors have contributed \$30,449 and the Executive Board was leading by example with 100% of the board having contributed. Dr. Buckley stated the goal of his presentation was to broaden the definition of giving to include financial contributions, support, relationships and media. Dr. Buckley stated those that would like to contribute financially could donate to APHA, give the gift of APHA membership, or sponsor a student to attend an APHA event. Additionally, Dr. Buckley encouraged Councilors to explore their relationships by 1) seeking a matching gift from their company/organization; 2) sharing contacts and facilitating introductions to prospective individuals, corporations, foundations or governmental funders; 3) personally asking non-APHA friends to donate to APHA; and 4) suggesting and introducing APHA to sponsors for the 2023 Annual Meeting and Expo in Atlanta. Dr. Buckley asked that connections be emailed to development@apha.org. Dr. Buckley then detailed how Councilors could aid APHA on social media by creating and publishing fundraisers in support of APHA and by forwarding appeals via their networks. Dr. Buckley then discussed overall means of support including: 1) Submitting a brief fundraising video of one minute or less on why you give your time and finances to support APHA to development@apha.org; 2) advocating for APHA by sharing its mission and why it is important with contacts; and 3) shopping @AmazonSmile and designating APHA as your beneficiary to makes a donation of .5% of your purchases to APHA. Lastly, Dr. Buckley introduced the new giving platform (apha.org/donate) that can be sent to anyone and is set up to accept one-time, weekly, monthly or yearly donations. Dr. Buckley concluded by thanking Councilors for their service to APHA on behalf of the Development Committee.

X. Joint Policy Committee

Science Board Chair and Joint Policy Committee Co-Chair Danielle Campbell, MPH began the JPC report by noting that 19 proposed policy statements (including two resubmitted late-breakers from 2021) were accepted into the 2022 review process in February. The proposals were divided into four main categories; A) Economics and International Health; B) Environmental and Human Rights; C) Violence Prevention and Equity; and D) Access to Care, Equity and Prevention.

Campbell stated the Science Board and JPC held their initial reviews of the proposed policy statement on April 20-21 and April 28-29 respectively. Campbell noted that the results of this assessment were provided to authors on May 20 and are available on the APHA website for Governing Councilors to review. Revisions are due Aug. 15. Additional next steps were also highlighted, including:

- 1) JPC will review the resubmissions in mid-September and provide a second assessment.
- 2) Late Breaker proposed policy statements are due Oct. 17 to policy@apha.org.

- 3) Public hearings will be held virtually ahead of the Annual Meeting programming on November 1-2.
- 4) The Governing Council will discuss and vote to adopt the proposed policy statements during Session II at the Annual Meeting on Tuesday, Nov. 8 from 8:30 a.m.- 1:30 p.m. ET.

Elaine Archie-Booker, EdD, RN, Chair of the Education Board and Co-Chair of the JPC, then presented the JPC's initial assessments of the proposed policy statements. Eight proposed policy statements received conditional assessments, and 11 received a negative assessment.

Policy	Assessment
A1	Negative
A2	Conditional
A3	Conditional
A4	Negative
B1	Conditional
B2	Negative
B3	Conditional
B4	Negative
C1	Negative
C2	Conditional
C3	Negative
C4	Negative
C5	Negative
C6	Negative
C7	Negative
D1	Conditional
D2	Conditional
D3	Negative
D4	Conditional

Dr. Archie-Booker stated:

- A **positive assessment** denotes that the proposed policy statement meets policy statement guidelines, and only minor changes are needed.
- A **conditional assessment** denotes the proposed policy statement generally meets the policy statement guidelines, but needs some revision.
- A **negative assessment** denotes the proposed policy statement does not meet policy statement guidelines, or there are major flaws within the proposal.

Dr. Celeste Monforton, DrPH, MPH, Chair of the Action Board and Co-Chair of the JPC then noted that the 13 policy statements adopted in 2002 are scheduled for automatic archiving at the close of the 2022 Annual Meeting. If members believe the science, references and actions steps of any of these policy statements remain relevant and the statement should be kept active, they must submit a justification requesting the policy statement(s) be kept active to policy@apha.org by June 30. Dr. Monforton noted that the Science Board will review these requests and make a

recommendation to the Governing Council via the JPC as to whether the statements should remain active. Dr. Monforton reminded Councilors that while archived policy statements no longer guide APHA policy or practice, they are still available to members as historical documents. APHA members are encouraged to update policy statement scheduled for archiving with the latest evidence and rationale in support of priority policy areas. However, policy statements can also be updated after archiving.

Dr. Guest then opened the floor to questions on the JPC presentation. Hearing no questions, the Speaker proceeded to move to the JPC recommendation regarding the archiving of policy statements adopted in 2021 related to the COVID-19 pandemic.

Dr. Monforton reminded Councilors that at the 2021 Annual Meeting, the JPC made a motion to archive three statements related to COVID-19 after three years vs. the standard 10-years given the rapidly evolving evidence and experience. The three policy statements were:

- 2021-11 Lessons Learned for the COVID-19 Pandemic: The Importance of Universal Healthcare in Addressing Healthcare Inequities
- 2021-18 Preparing Public Schools in the United States for the Next Public Health Emergency: Lessons Learned from COVID-19
- 2021-08 Call for Urgent Actions to Address Health Inequities in the U.S. Coronavirus Disease 2019 Pandemic and Response

Following debate in October 2021, the Council moved to suspend consideration of the motion and revisit the recommendation at its June 2022 meeting.

Dr. Monforton stated following further review, the 2022 JPC found that 2021-11 and 2021-18 address pandemics broadly with evidence and action steps that are likely to remain relevant in years to come. Therefore, JPC recommends these be archived after 10 years as is standard practice. However, Dr. Monforton noted 2021-08 is largely specific to the COVID-19 pandemic and requires more frequent updating of the evidence base and action steps to reflect the current science and environment to appropriately guide APHA policy and practice. Therefore, the JPC moves that policy statement 2021-08 be archived in 2024, three years from adoption. Dr. Monforton also noted that in the future the JPC will work with staff to identify policy statements originally written with a narrow scope that would benefit from and update with a broader lens.

Dr. Guest then opened the floor for discussion on the motion. The Councilor from the International Health Section, Cheryl Conner, MD, MPH, was recognized and asked if archived statements can only be seen by APHA members. Dr. Monforton responded that the archived statements are available to APHA members, but if there is someone from the public seeking access to an archived statement, this can be requested and provided by staff. Dr. Conner then asked if JPC could provide a summary of the general reasons statements receive a negative and also asked if JPC recommended C3 and C4 be combined. The Speaker responded that the question was out of order as only discussion on the motion on the floor was permitted, but the question could be revisited later, time permitting. The Councilor from the Ethics Section, Cee Ann Davis, MD, MPH, FACPM, FACOG, provided an amendment to archive policy statement 2021-08 in 2023 provided it be updated by 2022, otherwise 2021-08 should be archived in 2022. The motion was seconded by the Councilor from Mental Health, Mary Armstrong, PhD, but Dr. Monforton explained there would be no way to update the statement by 2022 and suggested the

original motion was made to provide members enough time to update the original statement. JPC co-chair Danielle Campbell further explained that per the original motion the policy statement would be archived if not updated. Hearing this Dr. Davis withdrew the amendment. Hearing no further discussion, the Speaker called for the vote.

Motion: JPC moved that policy statement 2021-08 be archived in 2024 (three years from adoption).

Outcome: 127 yea (92 %); 11 nay (8%);. The motion was approved.

XI. APHA Your Way Update

Dr. Guest then turned the floor over to President Kaye Bender, PhD, RN, FAAN, APHA, to provide an update on APHA Your Way. Dr. Bender began reviewing the communication goals for the project including:

1. Creating a proactive communication and outreach plan that speaks to multiple audiences, such as APHA staff, volunteer leaders and members.
2. Educating and establishing internal champions for change and facilitating a strategy that supports the desired change.

Dr. Bender stated the communications staff regularly shares executive, strategic and timely communication including a planned article in The Nation's Health on APHA's new online community, APHA LEAD, as well as regular web updates (apha.org/apha-your-way) highlighting progress and events related to the project.

Dr. Bender then provided updates on the work of the five staff committees tasked with executing project priorities:

1. Data Systems and IT
2. Mentoring
3. Onboarding New Members
4. Leadership Transition and Engagement
5. Measures and Rewards

Dr. Bender began by reminding Councilors of the objectives of Committee 1: Data Systems and IT which included:

- 1) Replace APHA Connect with a more user-friendly tool and create an easily accessible landing page for APHA members.
- 2) Integrate data systems that hold a variety of information about members and their engagement.
- 3) Streamline other technology tools for efficiency.

Dr. Bender announced that the Higher Logic platform was selected to host the new online community and APHA LEAD, which will replace APHA CONNECT, will launch Summer 2022. APHA LEAD will provide a better user experience, increase integration across technology tools and increase automation making things easier for staff. Dr. Bender noted data will be migrated from APHA Connect and integrated with IMIS, seed content will be created for the new communities and each APHA member unit will have a community, and beta testing will occur ahead of launch. Dr. Bender encouraged attendance at a training for community administrators, including Section leaders, on June 15 at 2:00 p.m. ET. Dr. Bender also noted that Sebastian Padrino has been hired to help manage the new platform.

Dr. Bender then highlighted some of the exciting features of APHA LEAD including:

- 1) User-friendly functionality and layout.
- 2) A mobile app, making it easier to connect and join the discussion.
- 3) The ability to sign up for APHA activities through a streamlined events calendar.
- 4) A mentoring and volunteer module (in Phase 2).
- 5) A new expert directory, making it easier than ever to network (in Phase 2).

Dr. Bender then reviewed the objectives of Committee 2: Mentoring:

- 1) Develop a comprehensive approach to connecting members with mentors.
- 2) Offer more speed mentoring programs throughout the year.

As a piece of a comprehensive mentoring program, APHA launched the Distinguished Leaders Mentoring Series which offers members face-to-face time with public health luminaries via small groups and webinars to learn about the mentors' career paths and ask questions of their own. Dr. Bender noted the inaugural session, held April 26, 2022, focused on "Public Health is Where You Are" and featured Durrell J. Fox. Dr. Bender encouraged Councilors, especially those who are early-career professionals or students, to register for the next session on June 28, 2022 at 4:00 p.m. ET featuring Emily Holubowich, Vice President of Federal Advocacy at the American Heart Foundation. Dr. Bender then noted upcoming mentoring initiatives include cohort style mentoring focused on topics of interest or skills, speed mentoring, and traditional 1:1 mentoring utilizing "Mentoring Match" in APHA LEAD.

Dr. Bender then discussed the objectives of Committee 3: Onboarding New Members:

- 1) Establish a specific staff position to direct and guide new members.
- 2) Create a structured process to onboard new members focusing on navigating APHA and getting value out of membership.
- 3) Ensure information on each unit and its strategic goals, activities, and ways to get involved are available to all members.

Dr. Bender stated a newly designed membership webinar will now be held quarterly to help members get engaged quickly. Dr. Bender noted the next webinar is scheduled for June 29 at 3:00 p.m. ET and registration is open. Dr. Bender also encouraged Councilors to complete the membership survey that launched June 2 by June 17 to aid the work of this committee. Dr. Bender concluded that further initiatives to achieve Committee 3's objectives are dependent on capacity and staffing proposed in FY 2023.

Next, Dr. Bender reviewed the objectives of Committee 4: Leadership Transition and Engagement:

- 1) Create a transfer of knowledge process between outgoing and incoming leaders.
- 2) Create a clear and transparent process to help leaders step down if needed.
- 3) Provide more targeted leadership training.
- 4) Educate members on who their leaders are and what they do and offer more opportunities to engage with leaders.
- 5) Provide more information about potential leaders in elections.

Dr. Bender noted that thus far in pursuit of these objectives, the Intersectional Council has reviewed and provided input on the components of a new leadership handbook currently being drafted. In addition, additional leadership trainings are now available, meaning leaders now have access to at least one training per month.

Lastly, Dr. Bender noted that Committee 5: Measurement and Rewards, was set to launch after the strategic plan to align metrics with strategy. Dr. Bender noted that since strategic planning is about to begin, Brighter Strategies will, depending on budget, provide the following services instead:

- 1) Identify best practices for gamification using APHA LEAD together with Committee 5.
- 2) Conduct pre-strategic planning activities (mining existing data for comments relevant to strategy to inform the strategic planning process).
- 3) Continue supporting the other 4 committee to executive their goals.

Dr. Bender concluded stating Committees 1-4 will continue their work through early 2023 and in 2023 staff prioritization and implementation planning for the next set of recommendations will occur.

Dr. Bender turned the floor back to Dr. Guest who in the interest of time, held question on APHA Your Way until after Dr. Benjamin's presentation. Dr. Guest then turned the floor over to Hope Rollin, Chair of the Executive Board, to provide the Board's update.

XII. APHA Executive Board Update

Hope Rollins began by thanking the members of the Executive Board and staff and discussing the Executive Board's aims for the year including:

- 1) 150th Anniversary Planning and Execution
- 2) Board Member Training
- 3) Innovative Financial Stewardship
- 4) Strategic Plan Development
- 5) Connected and visionary board members

Rollins highlighted the progress of the Executive Board's committees to date noting the membership committee was involved in APHA Your Way; the Governance Committee is working on increased inclusivity; the Finance Committee is upholding fiduciary stewardship; the Development Committee is working on innovative approaches and garnering new technology to aid in development; the Strategic Planning Committee is working on recommendations regarding

enhanced design and metrics in the new strategic plan; and the Committee on Social Responsibility is working to maintain ethical practice.

Rollins also highlighted additional progress including leveraging virtual meetings for engagement and the safe return to in-person APHA presidential visits to state affiliates, in-person meetings at APHA headquarters and an in-person APHA Annual Meeting. In addition, Rollins noted the Executive Board has engaged in several shared learning opportunities including, “Leveraging Social Media for Advocacy”, “Fund Development”, “Awareness and Networking” and attending a training at the American Society of Association Executives on Effective Board Management.

Dr. Guest thanked Hope Rollins for presenting and then turned the floor over to Jeanie Holt to provide an update on the APHA Strategic Plan.

XIII. Strategic Planning Committee Report

Strategic Planning Committee Chair Jeanie Holt, MS, MPH, began with a review of the purpose of APHA’s strategic plan: To strengthen APHA to better achieve its mission to improve the health of the public and achieve equity in health status. Holt noted that the current APHA strategic plan is over five years old and is externally-focused, serving as more of a strategic plan for public health rather than one for APHA. In addition, Holt noted the progress towards the plan is measured by changes in leading health indications which are slow to change, making it hard to evaluate the impact of APHA activities and find leverage points to impact those leading health indications. Holt noted, however, that the strategic portfolios in the current plan have provided a flexible framework for various member units trying to apply the strategic plan to their work. Holt then reminded Councilors of the strategic portfolios which include strengthen public health practice, build a public health movement, and align organizational capacity and infrastructure.

Holt noted that the Executive Board has adopted the following recommendations from the Strategic Planning Committee:

- 1) Begin work on a new strategic plan for APHA
 - a. Focus on strengthening APHA
 - b. Focus on metrics to measure progress and inform change
 - c. Ensure solid evaluation plan and timetable
- 2) Keep strategic portfolios
- 3) Build on what we’ve learned from the APHA Your Way project
- 4) Hire a consultant
 - a. Gather input from affiliates, caucuses, staff and members (not obtained under APHA Your Way)
 - b. Facilitate developing a new strategic plan

Holt then reviewed the proposed timeline for the new strategic plan. In June, the Executive Board will approve a budget, including resources to hire a strategic plan consultant. In July and August, the committee will develop and issue an RFP and review proposal and select a consultant in September and October. Holt noted that from November to May, the consultant will gather input and draft and circulate a proposed new plan with the aim to have the Governing

Council approve the new strategic plan at its 2023 Mid-Year meeting. Holt asked Councilors to inform their member units the strategic planning process is underway and asked that suggestions and questions be sent to Jeanie.apha@gmail.com. Holt offered to come to member unit meetings to discuss the new strategic plan. Holt concluded by thanking the members of the Strategic Planning Committee, Executive Board, Dr. Benjamin and staff.

Dr. Guest thanks Jeanie Holt for presenting and reminded Councilors they could also send questions regarding the strategic plan to governance@apha.org. The Speaker then turned the floor over to Dr. Georges Benjamin to provide the Executive Director's update.

XIV. Report of the Executive Director

APHA Executive Director Georges C. Benjamin, MD, reported on the Associations activities since the 2021 Annual Meeting. Dr. Benjamin began by highlighting AJPH's State of the Public Health Webinar which took place on Jan. 20, 2022 and noted it could be viewed online. Next, Dr. Benjamin reviewed National Public Health Week (April 4-10) activities, noting that there were a total of 814 partners this year (52 new partners); 182 local events were held nationwide as a part of National Public Health week this year; the National Public Health Week Twitter chat trended #4 nationally with 507 participants and 108.6 million impressions; 1260 people turned in live to the seven events APHA hosted throughout the week; and the Keep it Moving Challenge was successful despite slightly lower than average participation numbers.

Dr. Benjamin then moved to discussion of APHA's 150th Anniversary Celebration. Dr. Benjamin noted the addition of new staff, as well as communications, writing and development consultants, have been hired to help execute 150th Anniversary activities. Dr. Benjamin encouraged Governing Councilors to visit apha.org/APHA-150 to view histories of the various APHA member units, as well as statements from past presidents. Dr. Benjamin also highlighted 150th Anniversary merchandise. Dr. Benjamin discussed the monthly themes of the 150th Anniversary Celebration highlighting his discussion with Skip Harris, APHA Founder Stephen Smith's biographer. Dr. Benjamin also encouraged Governing Councilors to register to attend the virtual component of the Policy Action Institute on June 14.

Dr. Benjamin then turned to a review of the 2021 Annual Meeting. Dr. Benjamin stated attendance goals were met (8663 attendees paid vs. 8517 budgeted), but revenue goals fell short, mainly due to limited exhibitors. Infection control efforts were successful and there was no coronavirus outbreak linked to the event. Dr. Benjamin stated however, we learned hybrid meetings are very difficult and not possible this year, so the decision was made to split the 2022 Annual Meeting, offering an in-person meeting and a delayed broadcast the following week.

Dr. Benjamin then moved to discussion of the 2022 Annual Meeting, noting the plenaries are being finalized and over 9000 abstracts have been submitted. Dr. Benjamin stated an opening reception is planned for Sunday evening and vaccination will be required with masking optional as of now (local guidelines will be followed and infection control measures amended as needed depending on the state of the pandemic). *Note, the association made the decision to require masks for all attendees of the Annual Meeting in Aug. 2022.*

Dr. Benjamin then discussed recent legal ruling on which APHA filed amicus briefs including OSHA's Emergency COVID-19 regulations which was lost and the CMS Emergency Vaccine Rule which was won. The EPA clean power plant rule, *Dobbs v. Jackson's Women's Health*, and the CDC mask mandate remains pending as well but APHA has been actively involved filing amicus briefs to encourage the courts to take a strong public health position.

Dr. Benjamin also stated APHA is working hard to push the Administration to use regulation to fix the family glitch, which resulted in almost 3 million people not being able to get coverage under the Affordable Care Act, as well as losses following COVID emergency.

Dr. Benjamin also highlighted APHA's work to address challenges to public health authority noting APHA is part of a RWJF initiative to protect public health from state legislative challenges to public health authority. APHA's role is to:

- Educate and mobilize the national public health community, including APHA leadership, state affiliates, caucuses and past presidents.
- Mobilize partners outside of public health (education, healthcare, business).
- Provide financial and technical support to help mobilize APHA affiliates in priority states.
- Utilize methods such as townhalls with multisectoral partners, webinars, trainings, strategic communication, social media and conference sessions on the issue.

Dr. Benjamin then discussed the Public Health and Equity Resources Navigator (PHERN), a product of APHA's Alliance, which provides resources focused on ending the pandemic, advancing equity and building a resilient, robust, sustainable public health system for the future.

Next Dr. Benjamin highlighted APHA's work with Google and YouTube on "That's Public Health" a series of 20 videos explaining public health on APHA's YouTube page.

Dr. Benjamin provided an update on membership numbers, noting membership rates are stabilizing but still present a challenge. The bulk schools program is recovering and agency membership is growing rapidly. In addition, both the California North and Puerto Rico Affiliates are recovering.

Speaker Guest then opened the floor for questions. Dr. Guest called on Dr. Jennifer Carmona, who asked who APHA is collaborating with in order to address challenges to public health authority and what APHA's role is in these partnerships. Dr. Benjamin answered that APHA is partnering with the Robert Wood Johnson Foundation, ASHTO, NAACHO, Public Health Law Network, American Heart Association on a large initiative and is serving to educate the public health field, the public and a targeted group of states (Florida, Georgia, Arizona, Pennsylvania, North Dakota and Oklahoma) to educate their elected officials. The Councilor White-Phillips was then recognized and asked how APHA is working with groups in the Caribbean on partnerships to get them to become affiliates. Dr. Benjamin answered there are no affiliates in the Caribbean outside of Puerto Rico. APHA was working with the Virgin Islands a few years ago following the major hurricane that hit St. John in 2017. The main efforts APHA engages with in the Caribbean are through PAHO and the Alliance of Public Health Associations of the Americas, but these efforts are focused on countries with public health officials/bodies. Dr. Benjamin asked

Councilor White-Phillips if they knew of opportunities to potentially engage Caribbean nations to become Affiliates to please share.

Dr. Benjamin concluded by encouraging Councilor to stay involved, but to also take “me time” to care for themselves daily as we continue to combat a slew of public health issues.

XV. Report of the Speakers Ad Hoc Committee

Dr. Guest then delivered a report on the Speakers Ad Hoc Committee that was approved at the 2021 Annual Meeting. Dr. Guest reminded Councilors of the committee’s objectives:

- 1) Identify opportunities for improving the Governing Council experience, engagement, and activities.
- 2) Identify and disseminate best practices in the Councilor role to the member units by examining existing member unit activities.

Dr. Guest noted the members of the Committee were identified in January and have been meeting monthly to conduct data collection and share ideas. Dr. Guest noted that the committee will work to develop its recommendations from July-October and will present its final report to the Executive Board and Governing Council at the Annual Meeting in November. Dr. Guest thanked all the members of the Committee and encouraged Councilors to respond to any committee members who reach out.

XVI. Announcements and Reminders

Dr. Guest began by reminding Councilors that the next Speak with the Speaker Series is scheduled for Sept. 22, 2022, from 3:00 p.m. to 4:00 p.m. ET and a registration link will be sent in the summer.

Dr. Guest then moved to the Governing Council Schedule during the Annual Meeting, noting that Governing Council will meet in person at the Annual Meeting in Boston. Social distancing protocols will be in place and local mask guidance will be followed:

- November 1st and 2nd: Public Hearings on the proposed policy statements (Virtual)
- November 5th: 3-6PM Governing Council Session 1 (In-person, Boston)
- November 6th or 7th: Optional Leadership Roundtable (In-person, Boston)
- November 7th: Speaker Office Hours (In-person, Boston)
- November 8th: 8:30AM-1:30PM Governing Council Session 2 (In-person, Boston)

Dr. Guest noted the Governing Council will stick to the two-session format piloted last year. Dr. Guest also noted the Governing Council is moving away from clickers to vote. Voting at the Annual Meeting will occur on individual laptops/tablets/smart phones, so Governing Councilors should be sure to have their devices with them. Dr. Guest stated meeting materials will be

available two weeks prior to the meeting and proxy requests are due on Oct. 17 at 5:00 p.m. ET (proxies cannot be approved on site).

Dr. Guest then announced that Governing Councilors would again receive early access to housing for the Annual Meeting on June 24. Dr. Guest advised Councilors to look out for an email on that date with details.

Dr. Guest then stated that the last day to request an agenda item for the Annual Meeting is Sept. 1. Dr. Guest concluded by noting a post-meeting survey would be sent and should be completed by June 22.

The Speaker then opened the floor for questions. The Councilor from International Health Section, Carol Dabbs, MPH, was recognized and raised concerns about the inability to handle requests for proxies at the Annual Meeting in the case of illness or travel difficulties. Dr. Guest noted he would work with staff to put in place procedures for emergency proxies, but any anticipated proxies should be requested ahead of time.

The Councilor from Maternal and Child Health, Debra Jackson, MPH, DSc, was then recognized and implored the Speaker that there needed to be a process for appointing proxies at the Annual Meeting. The Speaker responded that a procedure for emergency proxies would be established.

XIII. Adjourn

Having completed business, Dr. Guest thanked the Governing Council and asked all to complete the post-meeting survey and review written reports from APHA Boards and Committees. The Speaker encouraged Councilors to send any questions not addressed in the meeting to aaron.guest@asu.edu or governance@apha.org. The meeting was adjourned at 4:36 p.m. ET.

The Governing Council will reconvene at 3:00 p.m. ET on Saturday, Nov. 5 in Boston, Massachusetts.