## 2014 / 2015 Council of Affiliates Annual Report

The Council of Affiliates (CoA) serves to enhance the relationships with the American Public Health Association (APHA) and between its 54 Affiliates. With the vision of creating the healthiest nation in one generation, our mutual goal is to build a stronger, more cohesive APHA while also improving the infrastructure and the services provided by the Affiliates and the public health workforce. Guided by the APHA bylaws and the CoA 2014 – 2017 Work Plan, the CoA encouraged Affiliates' full participation in the activities and causes of the APHA. This annual report is intended to update the Governing Council of the CoA's progress toward attaining our mission and vision.

Thirty-six (36) Affiliate staff, leaders, and members attended the *Presidents-Elect Meeting* to learn about the role of Affiliates in furthering the mutual mission, vision, and goals of the APHA/CoA. The CoA Work Plan outlined its goals and objectives aligned with *APHA's strategic plan*. CoA was able to implement 12 of its 22 objectives by its mid-year meeting and made progress in each of the other 10 multi-year objectives. The Leadership Manual has been updated to improve the CoA's transparency and responsiveness to the needs of its membership and the successful implementation of its roles and initiatives.

The CoA continues to strengthen its relationship with APHA. The Chair-elect of the CoA and the *Intersectional Council-Steering Committee*, respectively, attend the other's monthly meeting and CoA members are encouraged to actively participate in their selected section(s). The CoA's collaboration with the *Student Assembly* continues to focus on implementing the *Regional Student Liaisons* initiative to better align the Affiliates and future public health leaders. In this vein, the CoA engaged two *early career professionals* from Affiliates for *Membership Services*' new work group. Three CoA members are also active members of the *Action Board* and successfully influenced Affiliates' participations in the PHACT Campaign as well as other advocacy actions. A CoA member participated on the *Nominations Committee*. The CoA Chairperson fully engaged as an ex-officio voting member of the APHA *Executive Board*, contributing the CoA perspective on various topics including *Governance* and the *Strategic Planning*.

An Affiliate delegation of 13 ventured to Cuba in March 2015 (4 CoA members, 6 Affiliate members, 2 family members, and 1 Affiliate Affairs staff member). Many travelers were impressed with Cuba's comprehensive, intersectoral health care system integrating all facets of life: [family, cultural (spiritual/religion), business, education, government] in primary and secondary levels of health services. This educational exchange led to the CoA's development of a proposal to the Executive Board and precipitated an International Workgroup staffed by the Global Health Manager in APHA's Center for Professional Development, Public Health Systems & Partnerships.

Affiliates received training on advocacy throughout the year. During the midyear meeting in Washington, DC, CoA members and Presidents-Elect Meeting attendees visited their legislators to advocate for key public health concerns. In addition, Affiliates received funding for accreditation readiness and for capacity building to combat determinants of chronic disease. In preparation for the 2015 APHA Annual Meeting, the CoA has planned a wide-ranging and exciting program starting on Saturday, October 31<sup>st</sup> to educate, network, share best practices and recognize the excellence and innovation of Affiliates leaders, members, staff, and students via Affiliate Day, the Affiliate Scholarship and Awards Reception, the Candidates Forum, three scientific sessions, and 32 posters.

The CoA Chair extends deepest gratitude to our industrious leadership team, conscientious Regional Representatives, our dedicated representatives to APHA Boards, Councils, Committees, and Work Groups, and the diligent Affiliate Affairs staff, current and immediate past, especially in light of staffing transitions in 2015. Finally, we thank the illustrious APHA Executive Board and Executive Director for their support of all Affiliates and the work accomplished across our nation.

Respectfully submitted, Patricia D. Parker, MSPH 2014 / 2015 CoA Chair