Minutes of the GC TC  
Sept 12, 2016

<table>
<thead>
<tr>
<th>Present</th>
<th>Regrets</th>
<th>Absents</th>
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<tbody>
<tr>
<td>Asnake M. (MA)</td>
<td>Bedi, R.</td>
<td>Nansaalmaa B.</td>
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<td>Moore M. (MM)</td>
<td>Laaser U.</td>
<td>Regmi B.</td>
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<td>Chauvin J. (JC)</td>
<td>Lewis J</td>
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<td>Borisch B. (BB)</td>
<td>Mendez Dussan V.</td>
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<td>Lomazzi M. (ML)</td>
<td>Rahmanzai J.</td>
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<td>De Cata E. (EDC)</td>
<td>Salahuddin T.</td>
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<td>Asuzu M.</td>
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<td>Faerstein E.</td>
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<td>Hernandez I.</td>
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<td>Heya Y.</td>
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<td>HuLamm V.</td>
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<td>Kondji Kondji D.</td>
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<td>Piggott W. T.</td>
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<td>Rispel L.</td>
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<td>Ricciardi W.</td>
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<td>Te Patu A.</td>
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<td>Walker D.</td>
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Decisions/Actions

Main points:

Minutes of the GC TC March 1st 2016 have been approved.

Fundraising updates (MM)

The need to get funds to sustain the international office has been underlined. The office space, IT and other materials as well as a part of ML salary are in-kind contribution of the University of Geneva through BB professorial position.

Main points:

- 2 fundraising brochures (attached to this email) have been developed by ML, MM and PHAA (graphic designer) – these brochures are promoting fundraising for the Charter implementation. Increasing Charter visibility and knowledge will facilitate fundraising. The Charter brochures have been sent to the Governing Council, Advisory Board, finance committee members and selected Chairs and members and are now available online.
- Fundraising activities by the International Office & finance committee:
  - a small grant of around 5,000 USD was agreed by the University of Geneva (Fonds generals de l’université de Genève) for the support of the past Conference
on the Charter. A new one under preparation
  o Application to Wilsdorf Foundation – refused
  o Several meetings and proposals to IFPMA – refused
  o Meetings WFPHA- GAVI – 5 people met. BB willing to join their CSO
    Consultancy Group – steering committee, which would allow to have a better
    position to get funds when calls are open. BB candidature will need to be voted
    next spring.
  o Contacts established with several organizations and corporates in Geneva
  o Follow up of calls of the EU commission (by M. Gissler) - currently no funds
    available for PH
• Fundraising proposal by L. Rispel (see Annex I):
  - Database of possible donors to be prepared.
  - Idea of creating a small group for fundraising coordinated by L. Rispel and the
    International Office.
  - All GC members are strongly encouraged to engage themselves in fundraising
    sharing contacts, and making face-to face meetings with possible donors
  - Development of an implementation plan of the Charter (by identifying 2 or 3 key
    activities) that can be funded more easily
  - Joint application WFPHA & regional federations/PHAs & academic institutions
• Working Groups have been encouraged to get involved in specific process of fundraising
  (much easier since applying for specific topic/specific grants) as already done by some of
  them.
• Follow up with congress sponsors (as a rule) and take advantage of the 50th anniversary
  to increase visibility and possibilities to get funds.
• Aetna Foundation (see below)
All these activities should be performed in parallel focusing on the project that can more easily
be funded, identifying first the sponsors that may be more willing to support.

Membership Fees (EDC):
• Around 24k USD membership fees collected up to now. 60 countries are missing (15 of
  them high income countries) - some members have agreed with MM for reduced fees for
  2015 or 2016 (year of transition with the new fees). Thanks to EDC for having reminded
  members their responsibilities.
• L. Rispel will draft a letter to be used by the International Office to be sent out for the
  payments reminders – exceptional reductions may be considered on request
• L. Rispel launches the idea that the GC members or other public health personalities
  make an individual contribution to the WFPHA

15th World Congress on Public Health (MM)
• Preparation is well on progress. Please see details in Annex II
• ML proposed to have a follow up with the Congress sponsors and in particular with Bill
  and Melinda Gates Foundation as main implementers of the Charter
• Reduced entrance fees or other partial financial help or discounts will be evaluated for
  GC, Chairs and of some key people to the 15thWCPH (e.g. low income countries and
very involved in the WFPHA). EDC will send an email to GC members and Chairs asking who will participate to the 15thWCPH, who can pay, who can pay partially, etc. and then transfer the info to MM

### Awards (MM and MA)

1. A call was sent to all members regarding the Organizational Award
2. Awards/Nomination committee and GC have approved to attribute to Prof. Mike Daube the Leavell Award as suggested by the Public Health Association of Australia, the hosting country of the 2017 World Congress
3. For the Lifetime Achievement Award, candidates should be proposed by the members of the GC and of the Advisory Board and then submitted for selection and approval by the Awards/Nomination committee and the GC. GC and AB members to provide EDC their suggestions.

### 50th WFPHA Anniversary (JC)

- JC provided a summary of the activities planned (attached to the Minutes email). Up to now he got no sponsorships to support anniversary activities. Most activities are done on voluntary base. Current status:
  1. Vignettes on past presidents are under preparation by U. Laaser with the support of T. Piggot and S. Buttigieg
  2. M. Hilson and R. Morgan are preparing an article on the history of the WFPHA to be published in the JPHP – Federation pages
  3. Idea of naming the rooms of the 15WCPH with the names of past presidents and Secretary Generals of the WFPHA has been proposed – MM to make the follow up
  4. Application of media, social media and technologies for the 50Th Anniversary and the congress is under discussion by JC, T. Piggot and S. Buttigieg
  5. Anniversary booklet is under preparation as part of congress material

Suggestions by LR: consider to include the anniversary fundraising as a part of the congress fundraising – MM to make the follow up

- The GC agrees on the logo proposed with the following minor changes:
  1. Include New Zealand on the logo now not visible as suggested by A. Te Patu
  2. Add Cuban designer signature
     
     JC will make the follow up and share the final logo to be added on WFPHA and congress websites, letterheads etc.

- Proposal to launch a contest among WFPHA members in order to collect pictures to be shown during the 15WCPH about main PH achievement in the past 50 years and the main target within each country member – proposal approved by the GC. International office will make the follow up.

- WHO promised to either provide a video on the 50th Anniversary, either to send us a certificate – the GC would appreciate both, with the certificate maybe nicely framed and given by R. Krech during the anniversary ceremony. International office to make the follow up.

### Charter (BB & ML)

To Charter implementation phase is on-going. Detailed project description attached to the
Minutes email.

- The training on the Charter will be done mainly by phone with selected members, partners and regional groups. All TC attendants will be invited to provide the International Office with a list of people working in fields impacting health within their country to be invited to a 2nd teleconference to further debate the Charter.
- A survey to all WFPHA members and IANPHI members is in progress, showcasing how the Charter can be applied and sustaining the debated around global health today.
- Kondji Kondji underlines that it is crucial that the Charter is being known at Regional Levels and spread through WHO regional offices too.

**Oral Health working Group (ML)**
The OHWG has agreed on the idea to set up regional centers developing oral health under the framework of the Global Charter. The center(s) will allow to align the oral health community under this common framework. Moreover, the center(s) will represent a great fundraising opportunity.
A Call for tender has been sent out and expression of interest have been reported by UK, US, Ethiopia, Tanzania and Indonesia.
The process is now at the beginning and will wait for the world congress outputs for further development.

- the GC has agreed with the approach proposed

**CPMA-WFPHA training center (H. Heya)**
The CPMA still needs time for the training center to be recognized by the Chinese Government and to set up an appropriate program.

**Advisory Board (MM)**
The GC has agreed that the AB shall focus on fundraising activities as main activity, in coordination with the international office.
New AB members will be discussed at the next GC TC.

**Use of digital technology and its impact on population health and health equity gains**
- The Aetna Foundation-supported initiative on the use of digital technology and its impact on population health and health equity gains came to an end on August 31. This work is a part of the Health equity WG.
- Three expected outputs achieved:
  1. holding a successful concurrent session on this issue at the 14th World Congress on Public Health in Kolkata in February 2015;
  2. publication in late 2016 of a special electronic supplement of the Journal of Public Health Policy containing 8 commissioned articles on this same topic from several different perspectives/contexts; and,
  3. preparation of a Discussion Paper for the WFPHA, to propose several ideas for the GC’s consideration for future action by the Federation (and its PHA members) to promote the use of digital technology and improve its use for population health and health equity gains.
- The Aetna Foundation has given a ‘green light’ to submit a concept paper for a potential Phase 2 initiative. L. Rispel and JC will meet with A. Sabina of the Aetna Foundation at the APHA Conference at the end of October 2016 – the proposal should be shared with...
the GC for comments and approval before proceeding with any contract with Aetna.

**Student and Young Professional Section (SYPS) of the WFPHA (T. Piggott)**

Terms of References has been approved – soon available on line on a dedicated page.
For instance, the group will be kept small. Once defined how a bigger groups can be managed, students from PHAs member (students section) will be invited to join SYPS.

**1st International Public Health Conference of Panama and AASPA meeting (E. Faerstein)**

The conference in Panama has been very successful. Detailed report will be available in the next WFPHA newsletter.
AASPA met during the meeting.
AASPA is leading a survey to map PHA capacity and activity in the region, has prepared a contribution for the JPHP and has in general agreed with the principles of the MoU proposed by WFPHA. Membership fees collection process to be further discussed but a preference to keep that independently managed by the two associations has been underlined by MM.

**Membership criteria (ML)**

New membership criteria have been approved. Available at [http://wfpha.org/the-members/how-to-become-a-member/](http://wfpha.org/the-members/how-to-become-a-member/) - membership Application form. These criteria will allow a better evaluation of the PHA applying as well as a follow up (annual reports).
A long-term way of members monitoring shall be put in place in the next years.

**Policy updates (ML)**

- Use of WFPHA logo
- Sponsorship policy

Approved

**6th Asia Pacific Conference on Public Health and the APRLO–WFPHA meeting (H. Heya)**

The conference has been very successful. Detailed report will be available in the next WFPHA newsletter.
APRLO-WFPHA meeting took place during the conference.
The setup of an Asia pacific federation of public health association is on-going. The idea to make a mapping of PHAs of the region has been agreed.
The next APCPH will be during the 15WCPH. The flag of the conference has been officially given to H. Yeatman (PHAA).

**Public Health in Africa and SDGs and AFPHA meeting (MC. Asuzu)**

The conference has been very successful. Detailed report will be available in the next WFPHA newsletter.
It has been suggested to have one congress and meeting per year of the AFPHA

**HQ functioning amendment (MM)**

The amendment that when B. Borisch is absent, M. Lomazzi officially replace her has been approved.

**Other AOB:**

1. WFPHA Statutes
2. WFPHA supported statements

Will be discussed to the next GC TC (Nov the 14th)

**Next GC TC will take place on Nov 14th**
### ACTION POINTS

<table>
<thead>
<tr>
<th>ACTION POINTS</th>
<th>RESPONSIBILITY</th>
<th>DUE DATE</th>
<th>COMPLETION</th>
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<tbody>
<tr>
<td>GC members, AB members and Chairs are strongly encouraged to sustain</td>
<td>GC</td>
<td>From now on</td>
<td>In progress</td>
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<td>fundraising activities in coordination with the international office</td>
<td>AB</td>
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<tr>
<td>GC members, AB members and Chairs are invited to make individual contribution</td>
<td>GC</td>
<td>From now on</td>
<td>Not started yet</td>
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<tr>
<td>to the federation and to invite PH personalities to make contributions as</td>
<td>AB</td>
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<td>well</td>
<td>Chairs</td>
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<tr>
<td>Write a first draft around a grant renewal for Aetna Foundation to be</td>
<td>JC</td>
<td>October 2016</td>
<td>Not started yet</td>
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<td>shared with GC</td>
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<td>Email to GC and Chairs concerning</td>
<td>EDC</td>
<td>End Sept 2016</td>
<td>Emails SENT.</td>
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<td>- Participation to the 15WCPH</td>
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<td>Almost nobody has answered</td>
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<td>- DT technology paper</td>
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<td>- Lifetime Ach. Award</td>
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<td>- Database of potential sponsors to be filled</td>
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<tr>
<td>Remake the 50th Anniv. logo</td>
<td>JC</td>
<td>End Sept 2016</td>
<td>Done</td>
</tr>
<tr>
<td>Photo contest follow up</td>
<td>International Office</td>
<td>From now up to the 15WCPH</td>
<td>Started, already received a few</td>
</tr>
<tr>
<td>Draft the call for vacant seat on the GC</td>
<td>EDC</td>
<td>End Sept 2016</td>
<td>Done for American Region, Waiting for Nepal</td>
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Rapporteur: Eleonora De Cata
Annex I

1. We create a data-base of ethical funders that we can approach, with names and details of contact persons

2. Once we have the database, we allocate individuals from the WFPHA HQ, the exec or Governing Council to meet face to face with these individuals, talk to them about possible funding support. Drawing on my own experience as Dean of the School of Public Health, it makes a BIG difference to see people face to face, rather than send an email (which they can delete easily).

3. My initial list of 15 donors or funders to put into the data-base:
   i. Bill and Melinda Gates Foundation
   ii. Clinton Foundation
   iii. Rockefeller Foundation
   iv. UK Department for International Development
   v. European Union
   vi. Atlantic Philanthropies
   vii. Ford Foundation
   viii. GTZ (Germany)
   ix. AusAID
   x. Swedish International Development Agency
   xi. Canadian International Development Agency
   xii. International Development Research Centre
   xiii. Aetna Foundation (it seems they are interested in a second phase)
   xiv. Because the medical equipment companies are less tainted than the large pharmaceuticals, we should also approach Siemens (Germany), Philips,
   xv. The tele-communications companies (Samsung, Vodacom, etc).

4. We need to develop a phased implementation plan for the charter-this means that we have to break it down into smaller manageable chunks, and prioritise what are the activities that will enable us to achieve or move towards the broader vision enunciated in the Charter. At the moment, I have difficulties working out what it is that we want to achieve, even though I like the conceptual framework very much. Some of the calls for proposals are very disease specific-would we be keen to apply for a disease specific grant that would enable us to build capacity in one of the domains of the global charter? But if we agree with the idea of a phased implementation plan, we can set up a small committee (which I am happy to be part of) to develop that document.

5. Once we are clear on the activities that we want to focus on in the next 2-5 years, we should develop one or two funding proposals that would draw on academic institutions
(from the regional structures) and PHAs. The consortium or bidding partners should preferably go across 2 or more geographical boundaries (Africa, Europe, Americas, Asia, etc.). The proposal should have clear deliverables and benefits for all partners, and of course should cover HQ costs. The proposal would be ready for submission should a call come out (see below). Again, my experience is that it takes a lot of time to negotiate consortia, and there is often not enough time before a “call for proposals” come out to write the proposal, plus negotiate the terms of engagement.

6. We need to look out actively for calls for proposals from donors, but that is dependent on completing points 4 and 5.
Annex II

PROGRESS REPORT

Date: September 2016
Prepared by: Dr Helen Keleher, Congress Convenor
Distribution List: WFPHA Governing Council

WCPH 2017 Program

1. All Plenary Speakers spaces now filled and comprise an impressive list of speakers – see website for updates

2. World Health Day (7 April 2017):
   a. Laureate Prof Peter Doherty will be keynote speaker, and we are waiting on confirmation from Helen Clark, Administrator of UNDP to be our second keynote speaker.
   b. WFPHA 50th birthday acknowledgements are scheduled
   c. Two young people (aged 17 yrs) will speak for 5 mins on what kind of world they would to live in, 20 years from now
   d. Congress will close at 12md

3. World Leadership Dialogues – 20 have been accepted on important public health topics/issues and the lead organisations have also put forward impressive lists of speakers. Topics include:
   - Ecological determinants of health
   - Systems approaches to prevention of chronic disease
   - Pandemic experiences and cross sectoral lessons
   - Complex policy agendas – the WHO CSDH
   - Global economic determinants of health including trade and investment treaties
   - Child health
   - Global migration and health
   - Students and young professions: the future of public health
   - Universal dental care provision
   - Prevention of Violence Against Women (PVAW)
   - Obesity prevention in children
   - Gun violence prevention
   - Blood-borne virus elimination by 2030
   - Suicide prevention in First Nation people
   - Health Promotion
   - Malaria and Tuberculosis
• Global security, sustainability and public health: Chemical, biological and nuclear threats and responses

4. Total number of abstracts received: 2,021 including 124 identified as from Indigenous people. The abstract reviewing process has begun. Acceptance letters due to be sent 1st week in October.

5. A program scheduling day will be held 10 October.

6. Registrations are open; early bird closes 7 December

7. Sponsorship: progressing steadily. Still waiting to hear from Bill and Melinda Gates Foundation.

8. Congress Party – Tuesday 4th April from 7pm on South Wharf – this will also be a birthday party for the WFPHA.