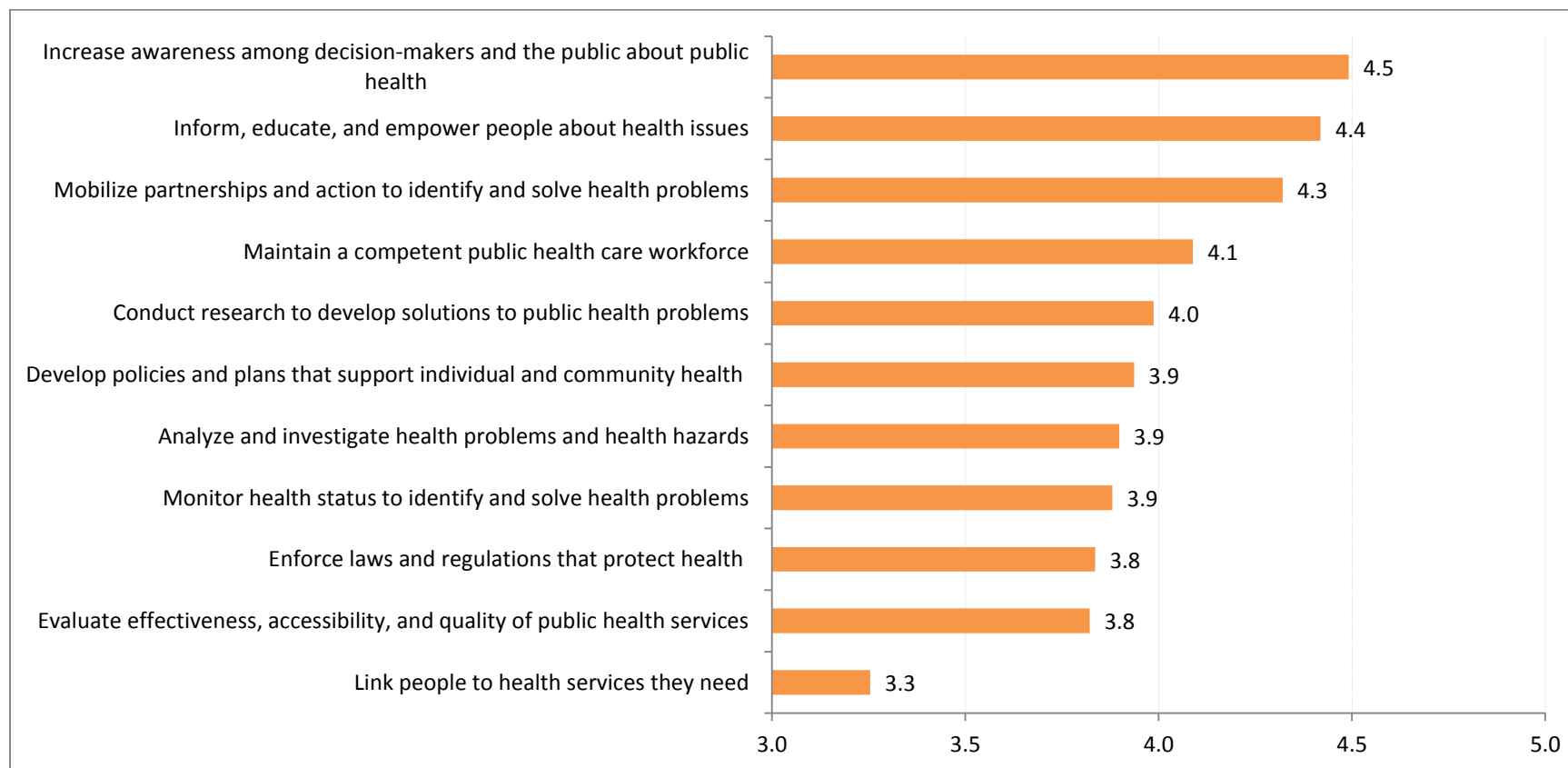


Final Results of the PHA Survey (N=57 out of 82 PHAs / 70% Response rate)

1. Prioritized roles and responsibilities of the PHAs)

(Importance of the activities on a scale of 1-5 where 1 is not very important and 5 is critically important)



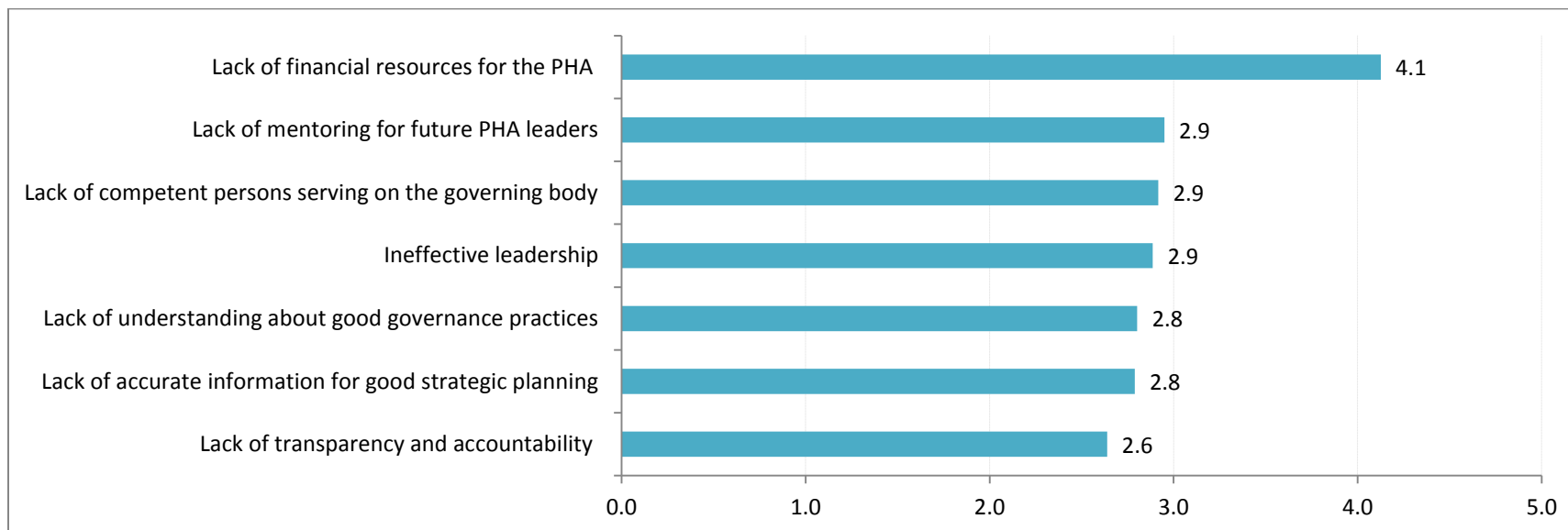
Other important roles for public health associations are:

- 1) Support research and teaching activities in the public health domain by its institutional members
- 2) Advocate for universal and equitable access to healthcare
- 3) Public health activism
- 4) Promote civil society's role
- 5) Influence health policy
- 6) Create a network of public health professionals, and link up all the public health workers and their organized groups for collaborative actions for health promotion

- 7) Sub-regional (ECSA), African regional and international networking on public health issues
- 8) Raising awareness about major health problems and mobilization of citizens for active participation in health promotion
- 9) Encourage the local provision of training
- 10) Regularly provide new research findings to national audience by publishing a Public Health Journal
- 11) Create pilot project or models of successful public health intervention and present them to public
- 12) Build networking among public, private, government, nongovernment sector with aim to support positive public health interventions
- 13) Advocate for the adoption of public health policies which address the social and ecological determinants of health
- 14) Networking with international agencies
- 15) Increase the understanding of individuals, community and decision makers about the need for specific public health interventions such as action on tobacco, alcohol, obesity and preventing the spread of infectious disease
- 16) Join the debate on ethical issues in health
- 17) Inter-sectoral processes
- 18) Serve as a forum for technical discussion and public health policy
- 19) Organize events (congresses, symposia) with autonomy and independence from government and industry
- 20) International academic cooperation
- 21) Ensure scientific update of its members
- 22) Active participation in political decision-making
- 23) Establish a platform for inter-professional dialogue and socialization in public health

2. Factors constraining the governance effectiveness of PHAs

(On a scale of 1-5, where 1 is very little constraint, and 5 is very big constraint)

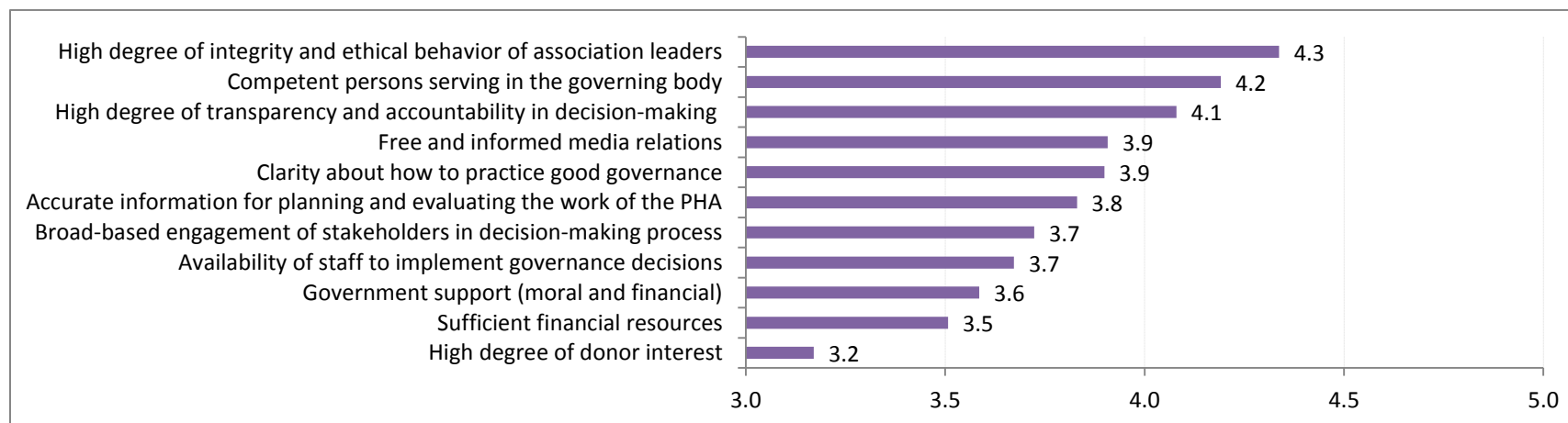


Other factors constraining the governance effectiveness of PHAs are:

- 1) Lack of time for the persons involved in the PHA affairs who have their full time job and work for the PHA on voluntary basis
- 2) District branches are currently weak because of lack of funds to allow national leadership to periodically visit and guide them
- 3) Lack of Government support / frequent change of government authorities / lack of interest from the public authorities in the PHA
- 4) Very bad seeds of inter-professional and work group rivalries sown by past professionals and now very difficult to overcome
- 5) Lack of a plan for developing PHA comprehensively and commitment to implement it
- 6) Inadequate information and communication mechanisms and lack of a strategic plan
- 7) Lack of regularity in Governing Body Meetings (General Assembly, Board of Directors)
- 8) Lack of feasible projects
- 9) Little or no interest from young professionals in the activities of PHA
- 10) Lack of time for the governing body to engage in the task of governing the association
- 11) Public health is little studied in some health professions (pharmacists, dentists, physiotherapists), limits their participation
- 12) Lack of proper physical space for the PHA
- 13) Little active participation of the members and lack of true social cohesion of the members of the association
- 14) Lack of commitment from members / lack of understanding of the values and professional principles / politicization of the PHA
- 15) Lack of active participation of partners
- 16) Absence of state health policy post

3. Factors supporting the governance effectiveness of PHAs

(On a scale of 1-5, where 1 is very little support, and 5 is very big support)



Other factors supporting the governance effectiveness of PHAs are:

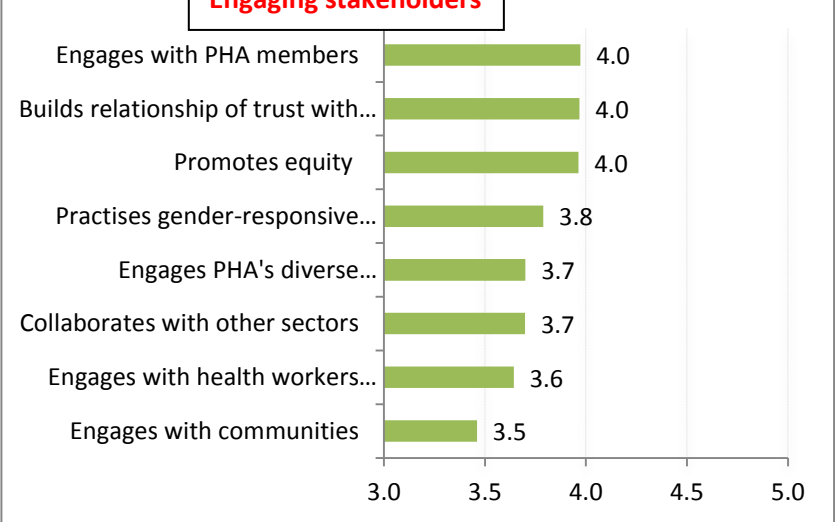
Financial resources for staffing and other activities / Government support / Participation in International events / Strategic planning / Stakeholder engagement / Democratic political environment / No more funds for international cooperation projects / Will, altruism, motivation / Social engagement experience of the senior leadership / Loyalty of members to the PHA

4. Current governance practices of the PHAs
 (On a scale of 1-5, where 1 is very little, and 5 is fully)

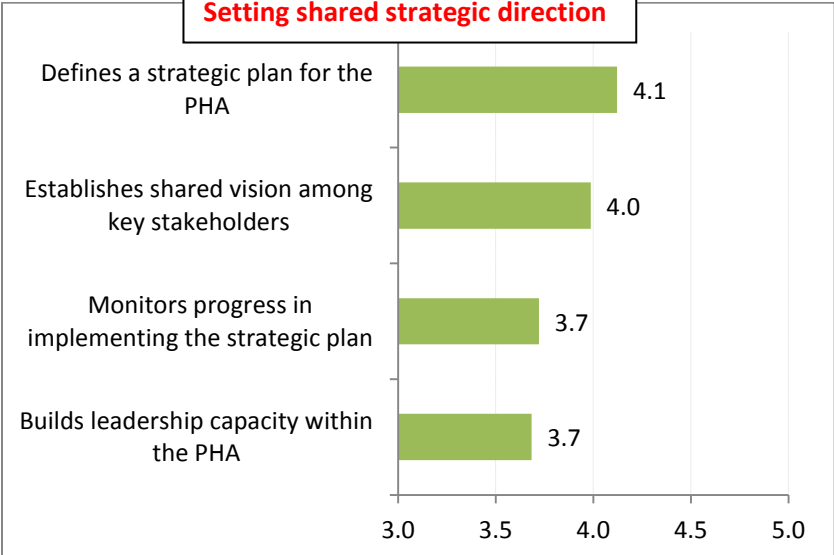
Cultivating accountability



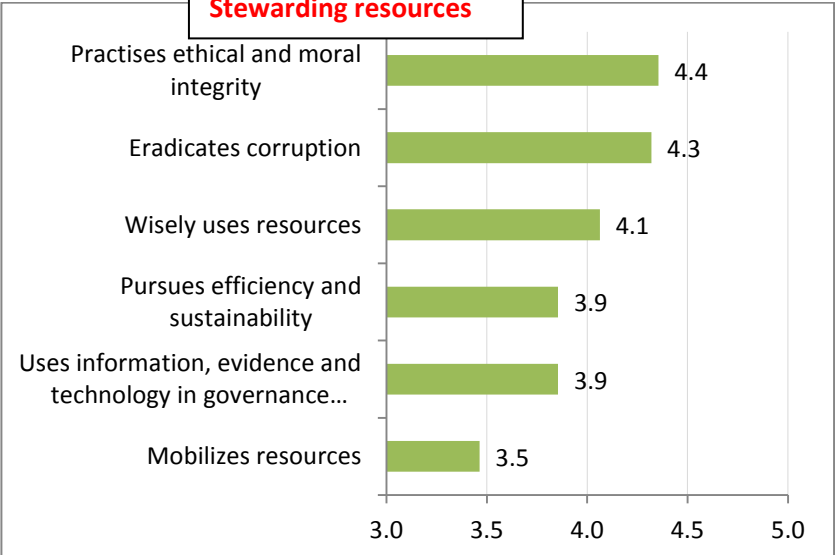
Engaging stakeholders



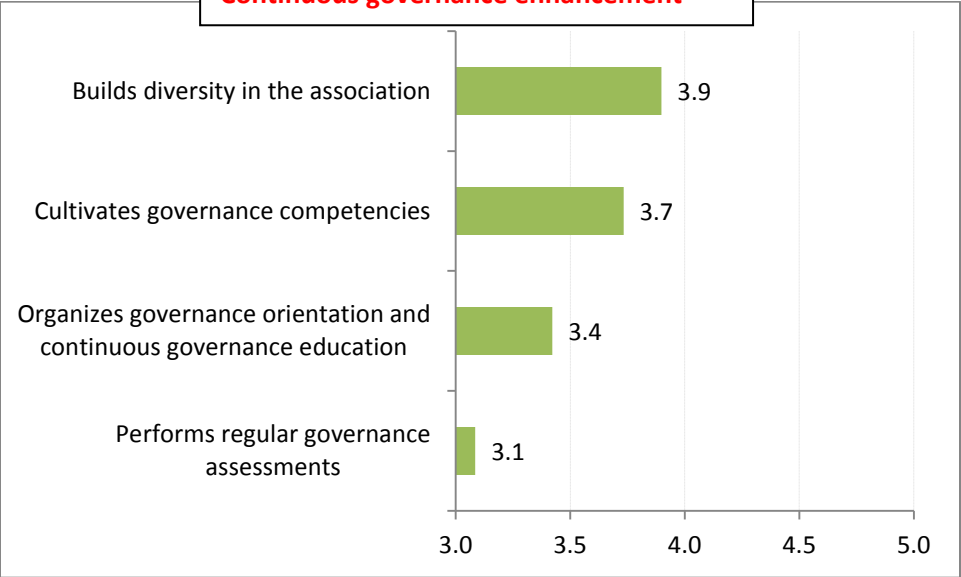
Setting shared strategic direction



Stewarding resources



Continuous governance enhancement

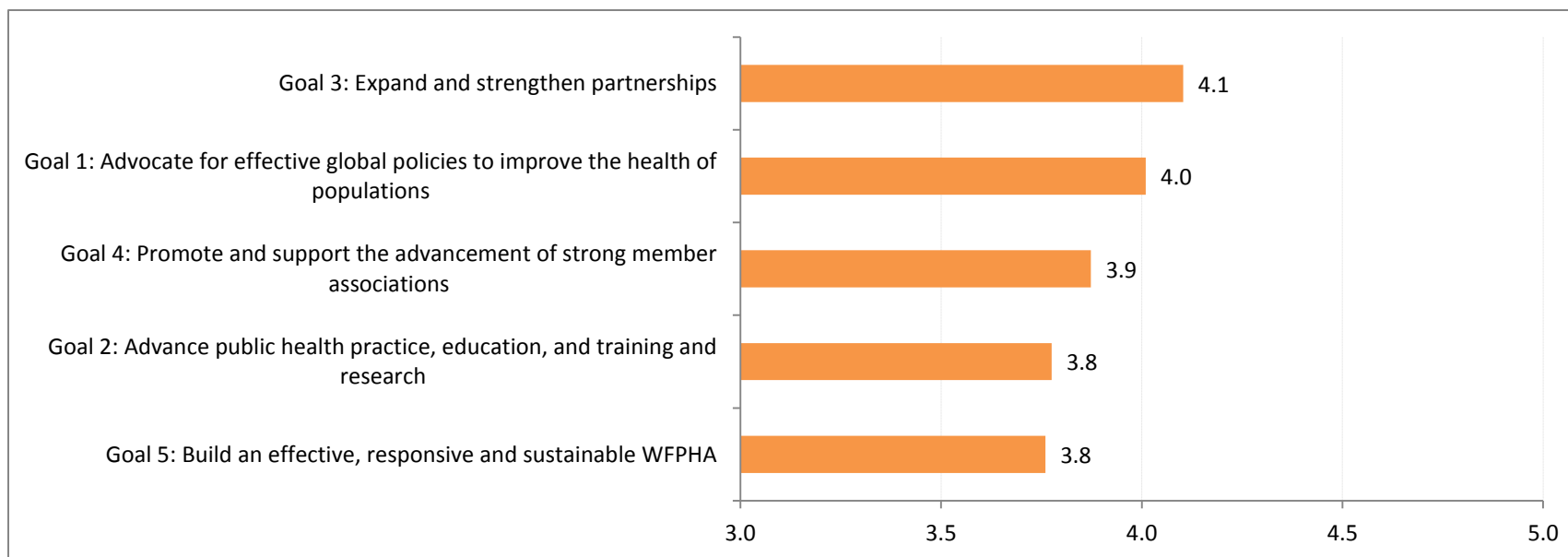


5. Awareness among PHAs of WFPHA’s Strategic Plan and Goals



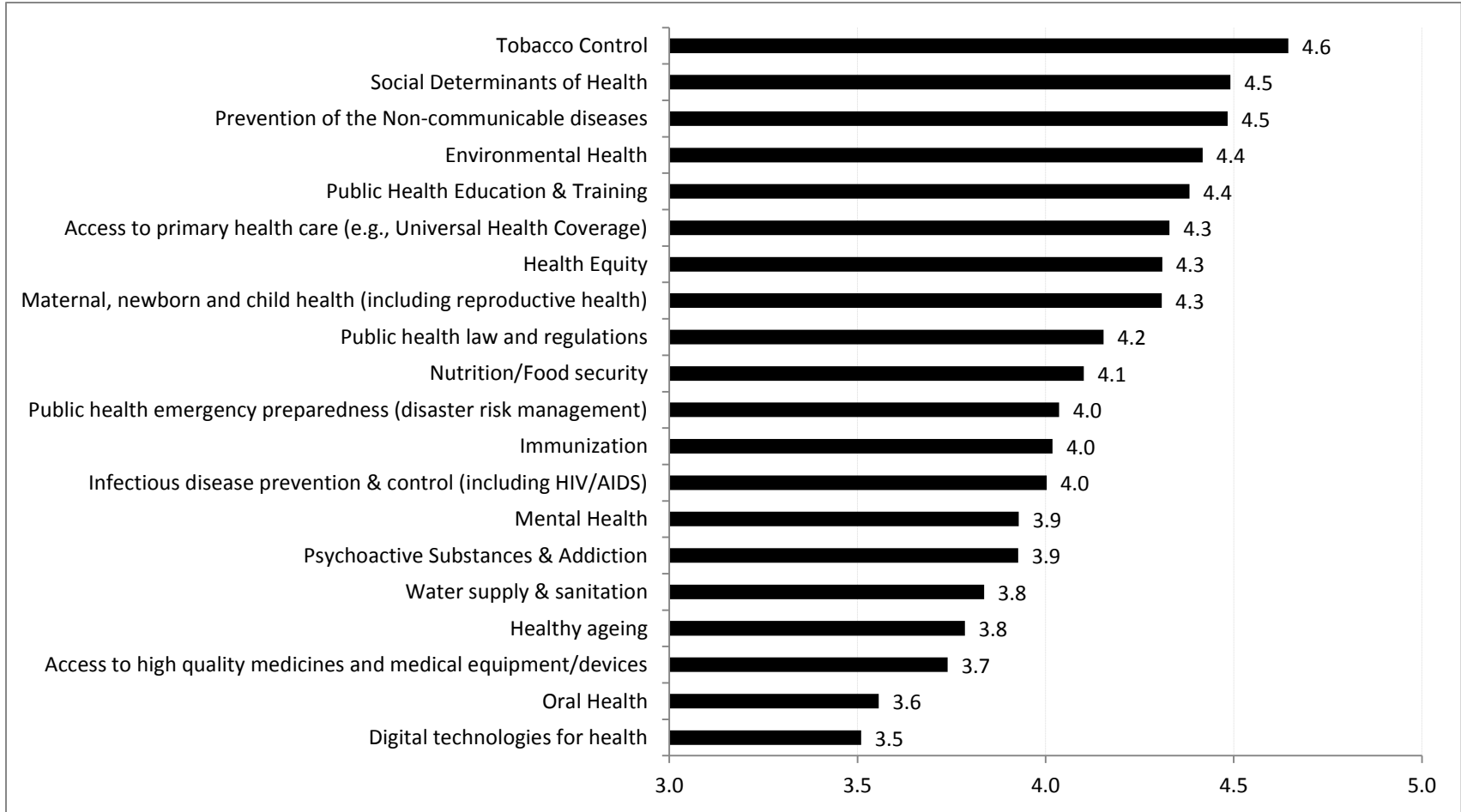
6. WFPHA's likelihood of accomplishing its Strategic Plan goals in the next 5 years

(On a scale of 1-5, where 1 is will not accomplish and 5 is will fully accomplish)



- 1) **Goal One:** Advocate for effective global policies to improve the health of populations (e.g., implement the WFPHA-WHO collaboration plan, advocate WFPHA policies, and organize World Congress on Public Health)
- 2) **Goal Two:** Advance public health practice, education, and training and research (e.g., implement WFPHA Fellowship Program, establish framework of public health competencies, use the Journal of Public Health Policy for communicating WFPHA positions on public health issues, and facilitate collaboration at regional and national levels)
- 3) **Goal Three:** Expand and strengthen partnerships (e.g., strengthen partnerships with WHO and others, and develop new partnerships)
- 4) **Goal Four:** Promote and support the advancement of strong member associations (e.g., expand the number of member PHAs, contribute to strengthening organizational capacity of member PHAs)
- 5) **Goal Five:** Build an effective, responsive and sustainable WFPHA (e.g., implement a resource generation strategy, operate an effective Geneva office, provide regular reports to member PHAs on resolutions and declarations, plan for WFPHA 50th Anniversary in 2017)"

7. Public health topics by their importance for the PHAs
 (On a scale of 1-5, where 1 is not much important and 5 is very important)

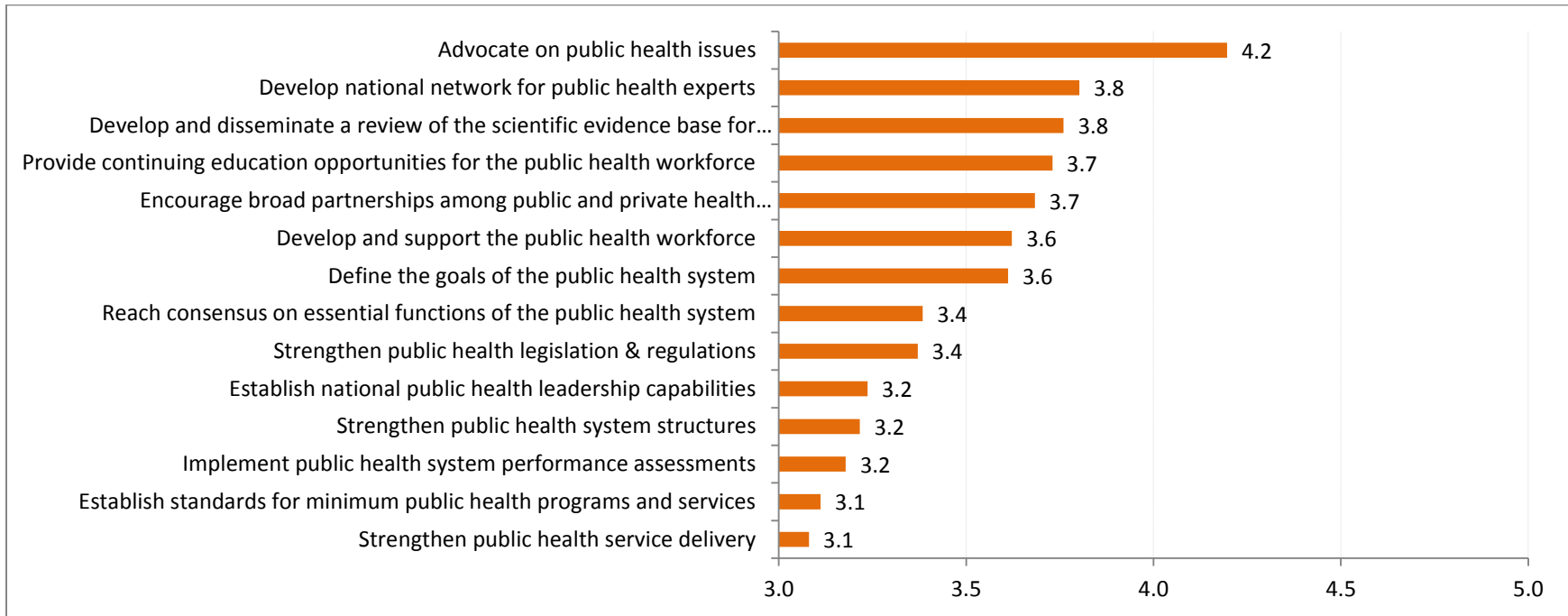


Other important public health topics from the perspective of the PHAs:

Occupational health, health policy and health services assessment, sanitary and epidemiological surveillance, social control and people participation in health policies and services, Allergy, Alcoholism, Traditional medicine, Occupational Health and Safety, especially the Health of Health Care Workers, Access to quality health services, Social protection in health for all, Evaluation of health technologies,

organization and strengthening health information system, prevention of cardiovascular diseases, fight against epidemics, human resource development for community health, Public health careers, sexual health, is crucial because of reproductive health. The gender-based violence, Promotion of exercise and physical activity, Alternative medicine to solve health problems, and Leadership and accountability in public health

8. PHAs' willingness to be involved in the implementation of core PH functions in the coming 3-5 years
 (On a scale of 1-5, where 1 is will not be much involved, and 5 is will be very involved)



Other important public health functions of interest from the perspective of the PHAs:

Strong relationship with Academic Societies of public health, Insufficient stakeholder consultations in policymaking on the part of the policy and decision makers, Install local and regional observatories for the promotion of public health across the country, Mobilize and coordinate civil society organizations involved in issues of public health, Serving as the benchmark for highest academic and scientific technical level in matters of public health, Violence/Injury Prevention, Health Reform efforts in the US-- Protecting the Affordable Care Act (including the Prevention and Public Health Fund), Ensuring transportation policies help public health, and Strengthening of the health system.

9. What do PHAs expect from the WFPHA?

- 1) Indian Public Health Association needs full support, cooperation and encouragement to organize 14th World Congress on Public Health 2015 at Kolkata. Expecting financial support from WFPHA, WHO & UNICEF and partnership with governments at all levels and other stakeholders and public and private sectors for the success of 2015 World Congress.
- 2) Advance public health practice, education, and training and research
- 3) Enhance cooperation and exchange of information between PHAs
- 4) Provide the technical support to improve the PHA's capacity (for example, skills training at APHA)
- 5) Create more opportunity for regional cooperation, cross-border cooperation and so on.
- 6) More active participation of the WFPHA in global forums, especially those hosted by WHO
- 7) Information exchange
- 8) Public Health Competencies and functions to support health services and also continuing public health education for public health workforce
- 9) Mobilize resources for implementation of activities involving many national PHAs for example in mental health, migrant health or alcoholism prevention and control.
- 10) Short term workshop for future leaders
- 11) Coordination of key issues
- 12) Advocacy for effective global policies to improve the health of populations and which address the multinational dimensions of trade agreements that do not consider the health of a nation in its determinations
- 13) Enhance our public health workforce
- 14) Assist PHAs in low and middle income countries to access financial resources and become more sustainable
- 15) Build a strong partnership / Expand and strengthen partnerships
- 16) Strengthen coordination and collaboration with Afghanistan National Public Health Association
- 17) Help us in strengthening our organizational capacity to become national leaders in public health arena
- 18) Establish working groups dealing with main constraints and limitations of public health associations and issues appeared to be priorities for future actions
- 19) Promote the collaboration between financially more independent PHAs with financially more constrained PHAs, because we are in a global village, where public health issues have no borders. So we need to solve the world's public health problems together.
- 20) Capacity building support for the capacity building of the PHAs
- 21) Strengthen organizational capacity of the member PHAs
- 22) Share its experience as well as its achievements with its member associations
- 23) Promote international collaboration
- 24) Networking among existing PHAs
- 25) Work more on Global Health Issues such as air pollution and climate change that have impacts on health and also have more collaboration with multi-sector organizations and partnership.
- 26) Continue to be an effective advocate for the adoption of healthy public policy at the global level.
- 27) Provide grant based support in key areas of Public Health for promotion of public health on regional basis
- 28) Promote the public health issues of developing world through global, regional and national advocacy
- 29) Create a dialogue forum to influence policy on international public health agenda

- 30) To the 2017 World Federation Congress in Melbourne as a tool to build capacity and appropriate networking opportunities for PHAs across the globe but particularly in the Asia Pacific region
- 31) Pair the Chadian Association of Public Health with an established association
- 32) Organize a meeting in Tunisia the 2016 WFPHA ... a gathering of all members of the WFPHA for 3 days of collaboration, workshops, and twinning
- 33) Capacity building in mobilizing financial resources to implement the action plans.
- 34) Socialization experiences to support the development of national public health associations
- 35) Strengthen partnerships between different organizations worldwide and be a facilitator in this context
- 36) Facilitate and finance the participation of Bolivia in conferences, forums, and international symposia.
- 37) Undertake joint research
- 38) Increase the dissemination of scientific information
- 39) Advance practices in public health, education, training and public health research in Costa Rica, ensuring the effectiveness of publications and increase the number of annual issues of the Costa Rican Journal of Public Health and facilitate cooperation at national and regional level
- 40) Provide information and facilities to personally participate in the activities of the Federation.
- 41) Strengthen the skills of management teams for collective work and the development of a new role of our organizations
- 42) Support in strengthening technical and scientific members of the Government and the main committees for the efficient management and governance of the PHA
- 43) Support for the mobilization of resources
- 44) Create a Platform for online courses for the PHAs, in conjunction with universities with public health programs
- 45) Ensuring the WFPHA fulfills Goal 5 (Build an effective, responsive and sustainable WFPHA) as a priority and to the best of its ability. Without it, efforts to fulfill the other goals in the Strategic Plan will not be as successful.
- 46) Technical support for political advocacy and media relations within the field of public health
- 47) Back and forth dissemination of ideas between the WFPHA and PHA for global debates to advance in the country
- 48) Assistance for participation in the WCPH

10. Respondent PHAs

English	French	Spanish
<ol style="list-style-type: none"> 1. Afghanistan 2. Australia 3. Bosnia And Herzegovina (1) 4. Bosnia And Herzegovina (2) 5. Brazil 6. Canada 7. China 8. Croatia 9. Czech Republic 10. Egypt 11. Ethiopia 12. India 13. Indonesia 14. Iran (Islamic Republic Of) 15. Israel 16. Italy 17. Japan 18. Korea, Republic Of 19. Lithuania 20. Malta 21. Mongolia 22. Mozambique 23. Nepal 24. New Zealand 25. Nigeria 26. Romania 27. Russian Federation 28. Serbia 29. South Africa 30. Spain 31. Sudan 32. Taiwan 33. Tanzania 34. Thailand 35. Turkey 36. Uganda 37. United Kingdom (1) 38. United States of America 39. Viet Nam 40. Yemen 	<ol style="list-style-type: none"> 1. Algeria 2. Burkina Faso 3. Cameroun 4. Chad 5. Congo, Republic of the 6. France 7. Haiti 8. Mauritania 9. Niger 10. Senegal 11. Tunisia 	<ol style="list-style-type: none"> 1. Bolivia 2. Chile 3. Costa Rica 4. Cuba 5. Mexico 6. Nicaragua