REPORT ON 5TH ASPHA ANNUAL GENERAL MEETING (AGM) HELD ON 4TH OCTOBER, 2014 AT THE UNIVERSITY OF CAPE TOWN, CAPE TOWN-SOUTH <u>AFRICA</u>

INTRODUCTION

The 5th AGM of ASPHA was held in Cape Town, South Africa on the 4th October, 2014 at the University of Cape Town. The meeting brought together sixteen delegates from six different countries (Democratic Republic of Congo, Ghana, Kenya, Nigeria, South Africa and Tanzania).

The meeting started at 10:15am with self-introduction by delegates. This was followed by a welcome address by the Vice President of ASPHA (Prof. Sharon Fonn). The Vice President in her address enumerated some of the commitments that were made at the 2013 4th AGM in Cape Town.

REPORTS

• Report from Committees

Public Health Education/ Curriculum Development Committee

Leslie London indicated that they are developing a paper on the Core competencies of a Public Health Graduate. They were also to map up public health graduates which still needs to be done. University of Cape Town has started with the mapping. Graduates would be mapped from diverse fields because of the Social determinants of health. We can present projects that have been done on tracking of Public Health graduates at our next meeting. The Alliance for Health System Research is interested in a similar project thus we can write a proposal and liaise with them. This will be spear headed by Prof. Uzochukwu since Nigeria is already doing a similar thing.

The development of the curriculum for public health training would be an essential tool especially for upcoming Public Health institutions to use. Member institutions are already collaborating with each other in sharing ideas and lecturers. The database of all lecturers and their capabilities has already been uploaded on our website. There has been numerous networking among our member institutions with each other and also with non-members which is

very good (eg. University of Stellenbosch with University of Malawi, University of Ghana with University of Nigeria and Kwame Nkrumah University for Science and Technology (KNUST). It was suggested we look at ASPHA facilitated partnerships and put our logo on. We should also have guidelines on the use of the ASPHA logo so members can use in their inland and outland partnerships.

Advocacy & Fundraising Committee

Sharon Fonn indicated that fundraising has been a challenge and suggested that member institutions should be made to contribute a fee. This was deliberated upon and members finally settled on a membership fee of US\$100.00 per institution. It was also suggested that members should fish for sponsors to help run the Association. Sharon also reported the involvement of ASPHA in the World Federation of Academic Institutions for Global Health (WFAIGH) which is also based at the School of public Health, University of Ghana. She is representing ASPHA at the federation with other members also supporting the various committees.

Research Committee

It was suggested we collaborate with each other and write a research proposal to help raise funds for the association. Members can also look out for calls for funds and alert ASPHA to go grab with full force. The World Federation of Public Health Associations would be 50 years in 2017 thus we can plan and have some briefings there. Also we can write a paper on "How Health Systems Global can help ASPHA on what they and we can do for each other".

• Report from Country Coordinators

Democratic Republic of Congo: The country coordinator was absent. Patrick Kayembe reported that a new MPH programme in nutrition has been established with partnership from University of Durban, South Africa and the University of Bergen in Norway. The programme will use the English language in teaching. It is mostly research oriented.

South Africa: Flavia Senkubuge reported that there have been a lot of collaborations between the Public Health institutions in South Africa and other countries. She enquired if the University

of South Africa can join ASPHA even though they do not have MPH. It was explained that ASPHA is solely for Public Health Institutions so all Institutions that offer courses in Public Health can also join as Associate members. It was also suggested that we point out the benefits Institutions stand to gain from joining ASPHA on our website.

Ghana: The country coordinator was absent. Richard Adanu indicated that KNUST is now a full member of ASPHA with the University of Health and Allied Sciences been an Associate member. He also reported that there is an upcoming public health institution in Ghana which is been built by the Mormons thus would be invited to join the association.

Kenya: The country coordinator was absent. Dan Kaseje reported that Great Lakes have many papers published with international journals thus need to be acknowledged. He also informed the house that the School has a new director who will be taking over in January.

Nigeria: The country coordinator was absent. Benjamin Uzochukwu reported that he has been communicating with members informally either as members of the Association of Public Health Physicians of Nigeria, Public health Association of Nigeria etc. We have also been mapping Public Health practitioners under the Consortium for Health Policy and Systems Analysis in Africa (CHEPSAA) and ASPHA can collaborate with CHEPSAA on this.

Tanzania: Bernard Njau, an observer from Tanzania was present at the meeting to know more about ASPHA. He confirmed ASPHA is really the mouth piece of African Public Health Institutions thus would send the message across to the institutions in his Country.

• Report from ARCADE-CHRSS

Lilian Dudley reported that ASPHA in collaboration with the ARCADE Centre for Health Systems and Services Research (HSSR) and Development at Stellenbosch University organised a seminar on "Innovation in strengthening HSSR capacity in Africa". This took place on Monday, 29 September, 2014 at Southern Sun The Cullinan. The Speakers were Keith Weeks (Economist) and Prof Charles Wiysonge from Stellenbosch University. The seminar reviewed Health System Research in Africa which showed that Africa is still lacking behind in terms of research. This was as a result of inadequate published research from African even though South Africa is doing well. The seminar also looked at training Graduates on e-learning platform to reduce the workload on faculties.

• **Report from World Federation of Academic Institutions for Global Health (WFAIGH)** Sharon Fonn reported they have had series of Conference Calls. The federation has two main committees which ASPHA members have volunteered to join. i.e Finance Committee (Prof. Richard Adanu) and the General Committee (Dr. Lilian Dudley and Dr. Laetitia Rispel). The next meeting of the Federation would be in Berlin during the World Health Summit (19th October, 2014).

• **Report on ASPHA's Stall at the Third Global Symposium on Health Systems Research** Marian Offei reported that the stall at the Symposium really helped to market ASPHA in a grand style thanks to SIDA for giving us that opportunity. The stall was manned by herself and David Coetzee with partial support from Sharon Fonn. We were able to get about eleven (11) new institutions from nine countries (Burundi, Senegal, Tanzania, Zambia, Zimbabwe, Burkina Faso, Cameroon, Uganda and Mozambique) who are not part of ASPHA to show interest in joining and also promised to spread the word to other public health institutions in their country.

We were also able to get great suggestions from other institutions on how to get more institutions to join the group. One was to have a francophone friendly website to motivate the francophone countries to join.

• Report on the Core Competencies Paper and its Status

David Coetzee reported that a paper has been written on these core competencies and was sent to all members for comment in which only three persons responded. They hope to finalise and publish as well as distribute it to members by the end of the year. Members agreed it was a useful document they can use to review their own curriculum and also to assist them as they move from 'department' status in their universities to 'school' status.

MEMBERSHIP

ASPHA currently has about 29 members in ten (10) countries. It was proposed all members pay membership dues of US\$100.00 or more depending on the strength of the institution. This will just be a commitment fee but would not help sustain the Association thus we should seek for more funds for our activities.

WAY FORWARD/ UPCOMING EVENTS

- The ASPHA Logo should be used when institutions want to request for external examiners or members are contacted by non-members to give inputs on issues of public Health concern.
- The ASPHA website should have links to other collaborators and member institutions website.
- Laetitia Rispel would represent ASPHA at the 14th World Congress on Public Health to be hosted in Kolkata, India from 11-15 February 2015.
- Next ASPHA AGM
 - We should have an academic component linked with our AGM in 2015 to focus on issues to do with drawing curriculum on work being done by Association members. We can invite people from different countries to give presentations on projects that have been done on mapping of Public Health Graduates.
 - Minutes of previous AGM should be sent to members just prior to the meeting asking them to read and print out or bring with them. A physical copy also needs to be at the meeting so we can go through it.
 - Before the AGM we have to go through any action items and put them in matters arising section of the agenda for the AGM as well as a status update on it so we can quickly tell everyone where we are and what has happened.
 - Before the next AGM if we want people to present we need to tell them what to present so they are ready so we need to think a bit more about the agenda in advance.
 - We need to focus on the research aspect of the Association at the next meeting.
 - We need to look out for a meeting to host ours with. It was suggested with collaborate with the African Federation of Public Health Association (AFPHA) to have our meeting with them in Uganda in September. This will create an opportunity to get Makerere University to join ASPHA.

ELECTION OF NEW EXECUTIVES

It was proposed some of the old executives be retained to help build the Association. Prof. Sharon Fonn was nominated as president with Prof. Patrick Kayembe as the Vice President. Prof. Dan Kaseje, Prof. Richard Adanu and Prof. Benjamin Uzochukwu were also nominated as members.

ACTION POINTS

- 1. Benjamin Uzochukwu to lead the proposal on mapping public health graduates in Africa with sponsorship from the Alliance for Health Systems Research.
- 2. Richard Adanu to confirm the account details for ASPHA and our available balance.
- 3. ASPHA executives to enumerate the benefits members seek to gain in joining ASPHA.
- 4. Marian Offei to update country coordinators on the current member institutions in their country and task them to get the rest on board.
- 5. Lilian Dudley to send the report on the ARCADE-CHRSS seminar to Marian.
- 6. ASPHA executives to develop the guidelines for the use of ASPHA logo on collaborative programmes.
- 7. Marian Offei to send the ASPHA logo to members with the developed guidelines to put on their letters or notices with the inscription "A member of ASPHA" when they think is appropriate to do that.
- 8. Marian Offei to send the list of ASPHA Country Coordinators to Leslie.
- 9. Marian Offei to send the list of institutions and countries who are members out so that we can check spelling titles etc. to update on our website.
- 10. Marian Offei to send an appreciation letter to SIDA for giving us the Stall at the Third Global Symposium on Health Systems Research.
- 11. Laetitia Rispel to send Marian the contact person at AFPHA to help with the possible collaboration for a meeting in Uganda.
- 12. Patrick Kayembe to help translate some of the information on the website into French.

CONCLUSION

The AGM came to a close at 2:20pm followed by a group photograph.

STH ASPHA AGM - CAPE TOWN, SOUTH AFRICA

4TH OCTOBER, 2014

ATTENDANCE SHEET

NO	NAME	COUNTRY	INSTITUTION	E-MAIL ADDRESS	TELEPHONE NO.
1.	Patrick Kalambayi Kayembe	DR Congo	Kinshasa School of Public Health	patkayembe@yahoo.fr	+243818111182
2.	Richard Adanu	Ghana	School of Public Health, University of Ghana	rmadanu@ug.edu.gh	+233244238556
3.	Philip Adongo	Ghana	School of Public Health, University of Ghana	adongophilip@yahoo.com	+233244806015
4.	Marian Offei	Ghana	School of Public Health, College of Health Sciences, University of Ghana	marianoffei@yahoo.com	+233246945940
5.	Dan Clement Kaseje	Kenya	Great Lakes University of Kisumu	kasejedan@yahoo.com	+254733320141
6.	Leah Marende	Kenya	Great Lakes University of Kisumu	Lean.Afieho@gmail.com	+254720490427
7.	Jane Mumma	Kenya	Great Lakes University of Kisumu	jnmumma@yahoo.com	+254728726321
8.	John Alwar	Kenya	Great Lakes University of Kisumu	jackajuoga@yahoo.com	+254725335645
9.	Benjamin S. C. Uzochukwu	Nigeria	University of Nigeria, Enugu- Campus	bscuzochukwu@gmail.com	+2348033130050
10.	David Coetzee	South Africa	University of Cape Town	david.coetzee@uct.ac.za	+274066262
11.	Laetitia Rispel	South Africa	University of the Witwatersrand	laetitia.rispel@wits.ac.za	+27117172543
12.	Sharon Fonn	South Africa	University of the Witwatersrand	sharon.fonn@wits.ac.za	+27117172707
13.	Flavia Senkubuge	South Africa	School of Health Systems and Public Health, University of Pretoria	flavia.senkubuge@up.ac.za	+27834024493
14.	Leslie London	South Africa	SPH & Family Medicine, University of Cape Town	leslie.london@uct.ac.za	+272 14066524
15.	Lilian Dudley	South Africa	University of Stellenbosch	ldudley@sun.ac.za	+27219389566
16.	Bernard Njau	Tanzania	KCMU College, Tanzania	biesein@yahoo.com	+27710596946