# IAPH Strategy

International Academy of Public Health (IAPH)

2024

IAPH

International Academy
of Public Health

# Contents

# Abbreviations

**APHEA**    Agency for Public Health Education Accreditation

**CBE**    Competency Based Education

**CPD**    Continuing Professional Development

**ASIC**    Accreditation Services for International Colleges

**EMPHNET**    Eastern Mediterranean Public Health Network

**EMR**    Eastern Mediterranean Region

**IAPH**    International Academy of Public Health

**LMS**    Learning Management System

**WHO**    World Health Organization

**UK**    United Kingdom

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# Foreword

At the intersection of advancement and adversity, the public health landscape calls for not only resilience but also proactive transformation. Today, we observe the emergence of a second strategy crafted for precisely that purpose- the International Academy of Public Health (IAPH) New 2024-2026 Strategy. This is not merely a compilation of objectives; rather, it serves as a compelling summons, a roadmap illuminating the route toward a healthier and more equitable future for our region and beyond.

Emerging from the fertile foundation of the Eastern Mediterranean Public Health Network (EMPHNET), IAPH has evolved into a dynamic force for positive impact. We have equipped numerous public health professionals with the knowledge and skills necessary to address a variety of challenges, spanning from infectious diseases to environmental hazards and other domains within public health. However, as we take pride in our accomplishments, we recognize that the path ahead requires even more significant strides.

This strategy sets our sights on four critical objectives:

**Strengthening Ourselves:**
IAPH aims to enhance its foundation, driven by financial sustainability, strategic partnerships, and a commitment to innovation.

**Transforming Education:**
We will advance by adopting a credible, practice- based model that immerses future leaders in the realities of the field.

**Scaling Our Impact:**
Recognizing the dynamic nature of public health needs, our response will adapt accordingly. We will expand programs based on regional demands, ensuring our expertise reaches every corner where it is needed.

**Elevating the Workforce:**
Through steadfast advocacy and targeted initiatives, we will champion the professionalization of public health practitioners across the region.

This is not merely a strategy for IAPH; it serves as a roadmap for constructing a healthier world. By collectively implementing IAPH's strategy, we can shape a future where communities flourish, leaving no one behind in the pursuit of well-being.

May the knowledge we generate serve as our tools against disease and inequity. Let our steadfast commitment be the driving force that molds a public health landscape reflective of all our aspirations. Let us turn vision into action.

**Dr. Mohammad Tarawneh**
IAPH Director

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# Background

Public health practices promote and protect the health of all people and their communities as well as the environment in which they live. As a discipline, public health has been defined as "the science and art of preventing disease, prolonging life and promoting health through the organized efforts and informed choices of society, organizations, public and private, communities, and individuals."[1]. As such, public health is socially anchored and highly appealing to the concept of health and wellbeing. The contributions of public health practices, interventions, and education to humanity are immense ,especially in the areas of reducing mortality and morbidity during the past century. Such achievements can be attributed directly to public health initiatives[2]. Yet, the public health profession has not received the recognition it deserves, and it endures major challenges globally.

More specifically, the personnel joining public health practices do not enjoy the recognition, reward, and professional status conferred on colleagues in other disciplines, especially clinical practice. This situation has mostly led to undermining public health and discouraging the youth from pursuing it as a career. To address the situation, there is an increasing need to professionalize both public health and its workforce[3]. Specifically, attention is devoted to professionalizing the public health workforce and to enable its members to be regulated, recognized, motivated, and trusted for their critical roles. Key professionalization levers for the public health workforce include competency frameworks, education and training, formal organizations, professional credentialing, and codes of ethics[4].

Public health education is among the components of professionalizing the public health workforce and arguably the most important one. This is because education is what produces and strengthen the public health workforce and is a determinant of recognition, and professional status. To adequately address the challenges of public health in the 21st century, related policy initiatives and strategies need to focus on cultivating education and training and growing the future workforce of professionals in the field[5]. The need to scale up, transform, and professionalize public health education has further been highlighted by the lessons emerging from the COVID 19 pandemic[6].

The purpose of this document is to present a strategy for transforming public health education in the Eastern Mediterranean Region (EMR) under the model of the International Academy of Public Health (IAPH). The document first introduces IAPH and outlines the public health context in the EMR before presenting the IAPH strategy for the period 2024-2026.

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[1] Winslow C-EA (1920) The untilled fields of public health. Science 51:23

[2] Medicine, I.o., Who Will Keep the Public Healthy? Educating Public Health Professionals for the 21st Century, ed. K. Gebbie, L. Rosenstock, and L.M. Hernandez. 2003, Washington, DC: The National Academies Press. 320.

[3] Czabanowska, K. and J. Middleton, Professionalism of the public health workforce – how to make it happen? Journal of Public Health, 2022. 44(Supplement_1): p. i54-i59.

[4] World Health Organization. Regional Office for, E., Roadmap to professionalizing the public health workforce in the European Region. 2022, World Health Organization. Regional Office for Europe: Copenhagen.

# Introducing IAPH

IAPH is a multi-disciplinary professional development academy for the public health workforce established in 2019 as one of the Eastern Mediterranean Public Health Network (EMPHNET) initiatives.

As a specialized entity, IAPH provides diverse training programs in numerous areas of public health and boosts capacities to contribute to the development of health services within and outside the Region with a focus on strengthening the public health workforce.

IAPH identifies itself as a strategic institution supporting public health workforce capacity in the EMR and as an advocate and reservoir of expertise for promoting public health regionally and globally.



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# IAPH Salient Features

IAPH has the attributes of being scientifically driven, professionally oriented, and practice-based aiming to bridge the gap between academia and public health practice. It also pursues comprehensive coverage for public health specialties and targets the broad spectrum of the public health workforce coming from various disciplinary backgrounds.

The Academy gains additional power by deriving multi-country expertise and capitalizing on modern and digital technology to support its functions.



Professionally Oriented

Technologically-Driven

Multi-Country Expertise

IAPH

Multi-Professional

Practice Based

Multi-Disciplinary
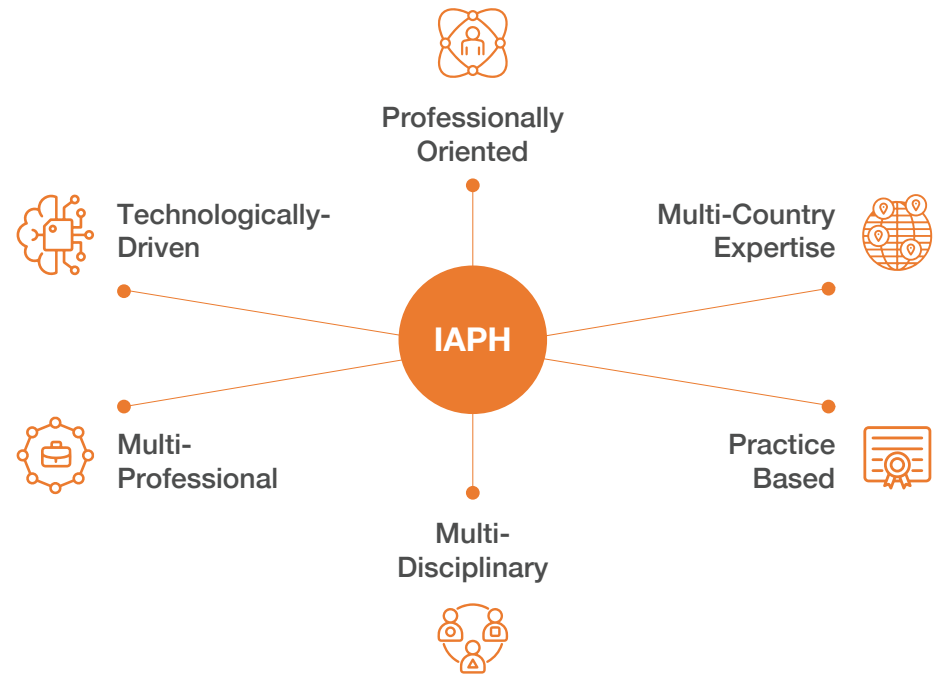
# IAPH Vision

IAPH aspires to attain excellence as a leader in public health education, capacity, and innovation at regional and global spheres.

# IAPH Mission

IAPH works to promote the public health workforce mass capable of addressing the challenges of strengthening national health systems and improving population health in the Eastern Mediterranean Region (EMR) and beyond.

# IAPH Values and Principles

**Learning**

IAPH values learning and evidence as a core element and principle that guides development and transformation.

**Diversity**

IAPH cherishes cultural diversity and inclusiveness based on respect for the other.

**Excellence**

IAPH is committed to excellence and professionalism and adopts the highest international standards to ensure credible offerings.

**Accountability**

IAPH commits to putting the health and wellbeing of communities first and follows a socially responsive path to improving population health.

**Agility**

IAPH values context and continuously adapts its offerings to the changing needs of the Region.

**Partnership**

IAPH subscribes to a collaborative approach and works with partners to identify capacity needs and offer tailored solutions.

**Innovation**

IAPH strives to provide offerings that encourage innovative thinking and action.

# The First IAPH Strategy

The first IAPH Strategy was introduced in 2020 and it was foundational. The 2020-2023 strategy pursues the following three strategic objectives:

- Building up and strengthening the institutional governance for IAPH.

- Introducing diverse and quality set of public health education and training programs.

- Scaling up public health science, practice, and professionalism.

**The implementation of the strategy builds up towards establishing the governance structures for IAPH, developing the policies and regulations, and anchoring the institutional capacity in addition to introducing capacity educational programs for the public health workforce.**

The foundational strategy succeeded in achieving progress along the lines of the three strategic objectives including the following:

- Investing capital funds for the premises, equipment, and resources for IAPH in Amman, Jordan.

- Forging partnerships with distinguished regional and international entities and implementing collaborative activities in accordance with the signed agreements.

- Adapting the education and training programs to suit the diversity in the region through translation into some languages and customization.

- Achieving institutional and program-level accreditation from some credible agencies including the United Kingdom (UK) based Accreditation Services for International Colleges (ASIC) and the Agency for Public Health Education Accreditation (APHEA). Nationally in Jordan, IAPH gained recognition agreement by the High Health Council, the Technical and Vocational Skills Development Commission, the Jordan Nursing Council, and the Jordanian Medical Council.

- Initiating the development of a regional competency framework for public health education culminating in a technical draft document ready for consultation and finalization during the next strategic phase.

- Establishing a robust learning management system and introducing an online training approach.

- Contributing to public health advocacy and supporting policy dialogue and capacity through meetings, webinars, and professional networking.

- Introducing and partially implementing a comprehensive package of public health training programs including the design of 133 courses as part of 32 programs under 13 fields of study pertaining to public health.

- Setting up governance structures for IAPH, describing their role and responsibilities, and operationalizing them.

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The first strategic phase led to important gains including the establishment of IAPH and its governance structures in addition to the ignition of its work. There remain challenges in promoting the Academy and realizing its full potential. The second strategy would need therefore to consolidate the gains, address shortcomings, and scale up the momentum to transform public health education and impart the required capacities.

The remaining challenges and agenda facing the new strategic phase include the following:

- The requirement to further strengthen IAPH to ensure a level of institutional capacity commensurate to a leadership role for supporting public health in the Region and beyond.

- The need to secure sustainable funding and resourcing to enable implementation and ensure institutional sustainability.

- The importance of fully enabling a transformative model of public health education emphasizing practice-based learning.

- The dire need for the right quantity and quality of public health workforce relevant to the challenging regional context.

- The imperative to promote the professionalization of the public health workforce to ensure attractive public health careers and elevate public health practice.

- The need for effective networking with similar institutions at national, regional, and international levels.

# Approaching the Second IAPH Strategy

Based on the outcome of the first strategic phase and the lessons learned, IAPH is embracing a second cycle of strategic planning towards realizing its vision and mission.

**Aware of the regional health situation and the ever-generating challenges for public health, IAPH plans for a new strategic phase emphasizing the following dimensions:**

- The need to strongly advocate for public health as an indispensable field for improving health and wellbeing.

- The imperative to promote public health leadership at system, organizational, and individual levels.

- The necessity of introducing change in the form of innovative approaches to enable public health to face a new level of challenges.

- The importance of synergy and collective action to address the ever-expanding public health improvement agenda.

- The considerations for establishing regional reference standards for public health and supporting national capacities for public health education.

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# Strategy Guiding Principles

IAPH's strategy is informed by some key principles and considerations to support clarity in terms of the goals and the means of achieving them. **The following are the main principles underpinning the strategy:**

IAPH's strategy adopts complementary dimensions to impart public health capacity and cherishes a broad definition of the public health workforce. IAPH, therefore, directs its offerings to the core public health workforce, the arsenal of other health professionals, the wider workforce, and the community members.

**Comprehensive Approach**

**Contextualized Orientation**

IAPH's strategy is anchored in the context of the EMR aiming to be locally relevant and globally connected.

The rising attention to global health security informs the approach of IAPH in this respect.

The strategy embraces the concept of capacity as encompassing the dimensions of systems, institutions, individuals, and community and tailors its content accordingly.

**Holistic Understanding of Capacity**

**Synergistic Model**

The strategy affirms the importance of education-service synergy and a type of public health education that is integrated into the environment of public health practice. This is underpinned by the concept of public health education, public health practice, and health systems reinforcing each other.

IAPH's strategy moves away from repetitive and normative approaches to transformative paradigms in addressing public health workforce capacity. This entails new thinking, innovation, and a change management model.

**Transformative Paradigm**

**Diversity-informed Approach**

The strategy is mindful of the huge diversity in the EMR and the need to consider history, culture, norms, and practices in various countries in program development and implementation.

IAPH's strategy cherishes the emerging concept of professionalizing the public health workforce to better position and empower public health professionals. The identified levers for professionalization inform the content of the strategy and provide a sense of direction for the planned actions.

**Professionalization Mindset**

**Globally-connected Paradigm**

While striving to be relevant to the regional context, IAPH's strategy is informed by the global context and is connected to the global movement on scaling up public health.

# Strategic Enablers

IAPH's strategy capitalizes on some key strategic enablers to inform its content and support effective implementation.
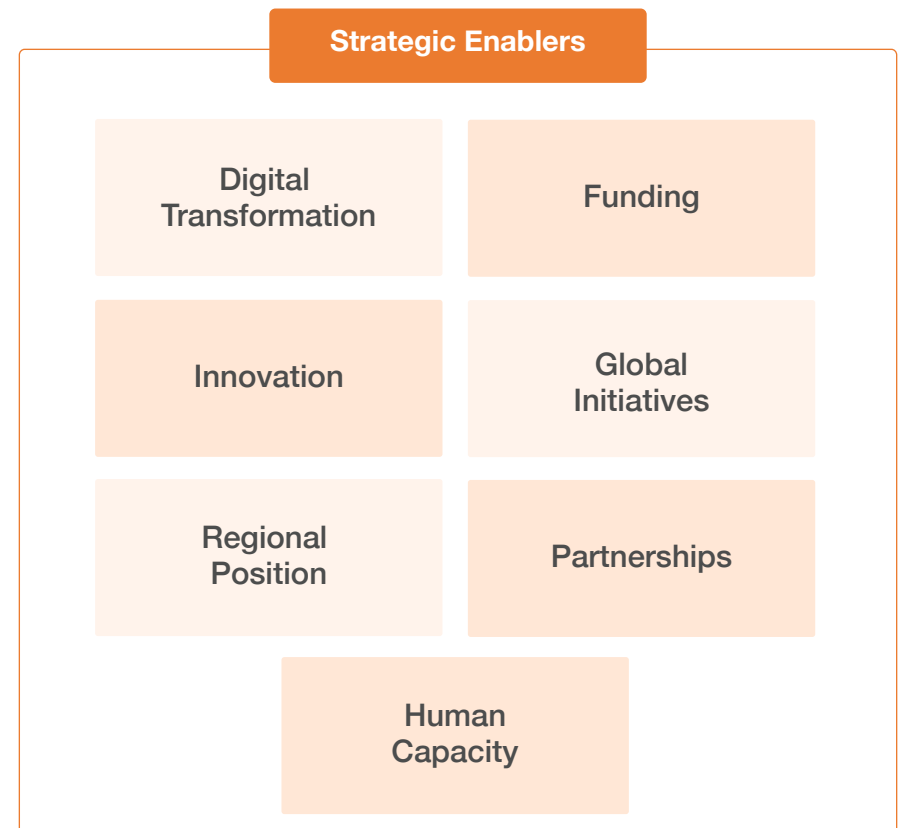
Human capacity comes at the top as IAPH is capitalizing on its regional position to establish and maintain a unique pool of regional expertise in public health.

IAPH is also mindful of the role of funding and partnerships in galvanizing the work and ensuring sustainability. A set of global initiatives on scaling up public health capacity are considered as important enablers for IAPH's strategy.

These include the movement on professionalizing the public health workforce, global and regional competency framework, and strategies to promote global health security.

In this digital era, IAPH is also cognizant of the huge potential of technology and innovation in shaping performance and adding value to the development, implementation, and monitoring of the strategy.

**The diagram below depicts the strategic enablers for the next phase of IAPH strategic planning.**



Strategic Enablers

Digital Transformation — Funding

Innovation — Global Initiatives

Regional Position — Partnerships

Human Capacity

# Strategic Objectives

**IAPH's strategy identifies the following four strategic objectives:**

- Strengthening the institutional capacity of IAPH.

- Transforming public health education towards a credible practice-based model.

- Scaling up public health education programs in response to regional needs.
- Promoting the professionalization of the public health workforce in the region.

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                    ┌──────────────────────┐
                    │  Practice-based      │
                    │  Educational model   │
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┌──────────────────────┐              ┌──────────────────────┐
│  IAPH's Capacity     │              │  Professionalizing the │
│  Strengthening       │              │  Public Health Workforce │
└──────────────────────┘              └──────────────────────┘
                    ┌──────────────────────┐
                    │  Scaling up Public   │
                    │  Health Education    │
                    └──────────────────────┘
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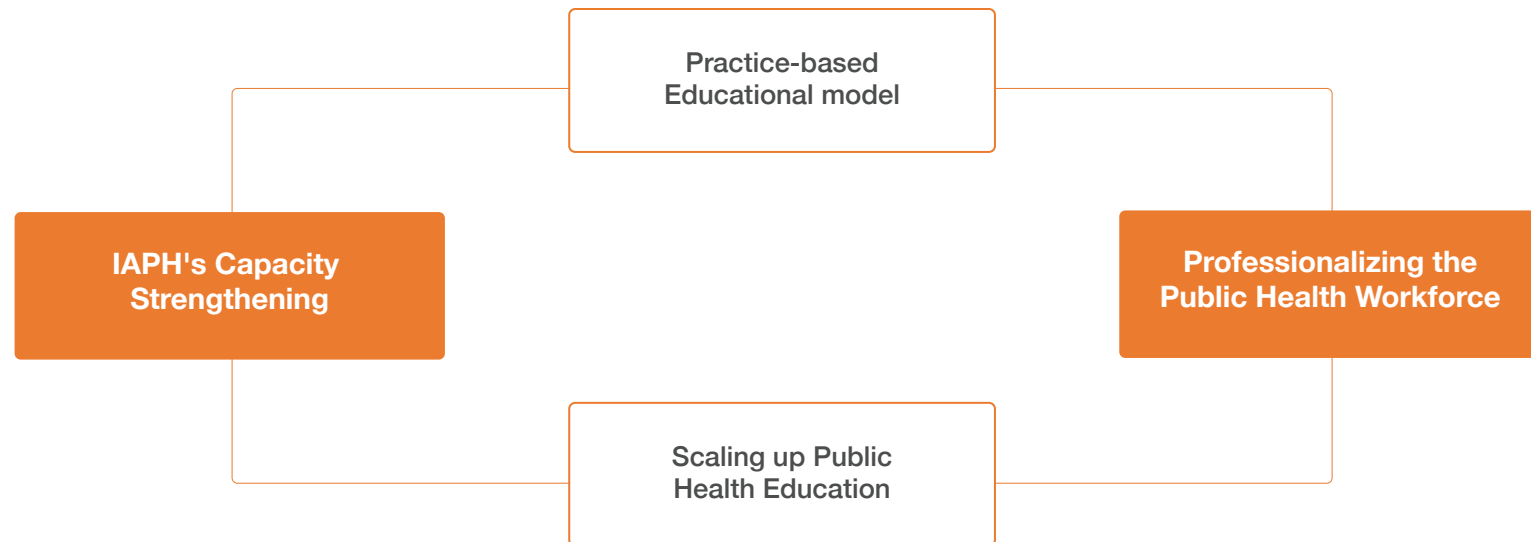
# Strategic Initiatives

IAPH's strategy identifies a set of strategic initiatives under each of the four strategic objectives.
**The initiatives synergize to contribute to achieving the objectives and realizing the mission of the Academy:**

## Strategic Objective One:
**Strengthening the institutional capacity of IAPH**

**1.1.**
Enhancing the leadership, governance, and technical capacity of IAPH

**1.2.**
Securing adequate and sustainable funding for IAPH

**1.3.**
Fostering strategic partnerships and collaborations with relevant entities

**1.4.**
Optimizing digital transformation and innovation to serve IAPH's mission

## Strategic Objective Two:
**Transforming public health education towards a credible practice-based model**

**1.1.**
Developing a regional competency framework for public health education

**1.2.**
Establishing a public health residency model

**1.3.**
Introducing prototype curricula for professional education

**1.4.**
Addressing faculty development and capacity for public health educators

## Strategic Objective Three:

**Scaling up public health education programs in response to the needs of the region**

**3.1.**
Ensuring consolidation and implementation of current programs.

**3.2.**
Introducing new educational programs in response to needs.

**3.3.**
Promoting public health education component for other health professions.

**3.4.**
Introducing health literacy educational programs for communities.

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## Strategic Objective Four:

**Promoting the professionalization of the public health workforce**

**4.1.**
Advocating a better image and recognition of the public health profession.

**4.2.**
Establishing a credible continuing professional development (CPD) system for the public health workforce.

**4.3.**
Enhancing capacities for public health research and publishing.

**4.4.**
Supporting networking and unionization of the public health workforce.

| Strengthening IAPH's Capacity | Transforming to a Practice-based Educational Model | Implementing and Scaling up Educational Programs | Professionalizing the Public Health Workforce |
|---|---|---|---|
| • Leadership and technical capacity.<br>• Adequate and sustainable funding<br>• Strategic and impactful partnerships.<br>• Digital transformation and innovation. | • Regional competency framework.<br>• Public health residency<br>• Prototype competency based curricula.<br>• Faculty and trainer development | • Consolidating current programs.<br>• Intrdocuing new programs.<br>• Public health for health professionals schools.<br>• Health literacy for community members. | • Professional recognition.<br>• CPD system.<br>• Public health research.<br>• Networking for public health. |

# Strategy Programming

IAPH's strategy identifies a set of strategic initiatives under each of the four strategic objectives.
**The initiatives synergize to contribute to achieving the objectives and realizing the mission of the Academy:**

**4** Strategic Objectives

**16** Initiatives

**64** Interventions

The table extending over the next pages presents the strategy programming including the time frame and responsibility for implementation in addition to the indicators for monitoring and ascertaining progress and achievement

| Strategic Objective | Strategic Initiative | Interventions | Timeline 2024-2026 | Responsibility | M&E Indicator |
|---|---|---|---|---|---|
| Strengthening the Institutional Capacity of IAPH | Enhancing the leadership and technical capacity of IAPH. | Revitalize and expand the Specialty Committees, Scientific Council, and Advisory Board. | Q1-Q2 | Board of Directors IAPH Management | Diversity and quality of members |
| | | Establish a working model for engaging experts and faculty. | Q1 | IAPH Management Board of Directors | Stability and effective contribution of members |
| | | Expand and maintain licensing and accreditation of IAPH's educational programs. | Q1-Q12 | IAPH Management | Status of IAPH's accreditation |
| | | Arrange for recognition of IAPH qualifications/ certificates in the countries of the region. | Q1-Q4 | IAPH Management Advisory Board | Status of IAPH's licensing/awards |
| | Securing adequate and sustainable funding for IAPH. | Develop an advocacy and marketing strategy for IAPH and its offerings. | Q1 | IAPH Management Board of Directors | Approved marketing strategy |
| | | Design, implement, and update a fee structure for IAPH's offerings. | Q1-Q12 | IAPH Management | Approved fee structure Level of income |

| Strategic Objective | Strategic Initiative | Interventions | Timeline 2024-2026 | Responsibility | M&E Indicator |
|---|---|---|---|---|---|
| Strengthening the Institutional Capacity of IAPH | | Attract grants and project funding to support IAPH's functions. | Q1-Q12 | IAPH Management | Income from funded projects |
| | | Utilize collaborative funding to boost IAPH's financial resources. | Q1-Q12 | IAPH Management | Income from collaborations |
| | Fostering strategic partnerships and collaborations with relevant entities. | Consolidate and streamline the current IAPH partnerships. | Q1-Q2 | IAPH Management Advisory Board | Status of MOUs implementation |
| | | Map stakeholders and engage into new impactful partnerships and collaborations. | Q3-Q10 | Board of Directors IAPH Management | Number of new partnerships |
| | | Establish IAPH's stakeholder platform to promote exchanges and joint learning. | Q6 | IAPH Management | Functioning stakeholder platform |
| | | Assess the impact of partnerships and collaborations to inform next strategic phase. | Q12 | Board of Directors Advisory Board | Evaluation report in place |

| Strategic Objective | Strategic Initiative | Interventions | Timeline 2024-2026 | Responsibility | M&E Indicator |
|---|---|---|---|---|---|
| | Optimizing digital transformation and innovation to serve IAPH's mission. | Develop a digital transformation strategy for IAPH. | Q1 | IAPH Management | Approved strategy document |
| | | Implement a robust digital infrastructure to support IAPH educational offerings. | Q1-Q4 | IAPH Management | Adequate DT infrastructure |
| | | Strengthen and further develop the learning management system (LMS) platform. | Q2-Q4 | IAPH Management | Functioning effective LMS |
| | | Promote the use of Artificial Intelligence and innovations to support IAPH's mission | Q2-Q12 | IAPH Management | Number of innovations adopted |
| Transforming Public Health Education towards a Credible Practice-based Model | Developing a regional competency framework for public health education | Conduct consultation on the competency framework document. | Q1-Q2 | IAPH Management | List of individuals and institutions consulted |
| | | Validate and endorse the competency framework. | Q2 | Advisory Board Board of directors | The approved competency framework document |
| | | Disseminate and publicize the competency framework. | Q3 | IAPH Management | Published CF document (on IAPH's website and printed) |

| Strategic Objective | Strategic Initiative | Interventions | Timeline 2024-2026 | Responsibility | M&E Indicator |
|---|---|---|---|---|---|
| Transforming Public Health Education towards a Credible Practice-based Model | | Produce guidelines on competency based public health education to inform transformation in the region. | Q4 | IAPH Management Advisory Board | Published guidelines |
| | Establishing a public health residency model | Develop the standards for the public health residency model. | Q1-Q2 | IAPH Management Scientific Council Advisory Board | Approved standards document |
| | | Introduce a process for accrediting training sites for public health education. | Q3 | IAPH Management Scientific Council | Accreditation process in place |
| | | Pilot the accreditation of training sites and residency training. | Q4-Q6 | IAPH Management with partners | Pilot result |
| | | Consolidate and adopt the residency model for public health education. | Q7-Q12 | IAPH Management | The residency model is fully operational |

| Strategic Objective | Strategic Initiative | Interventions | Timeline 2024-2026 | Responsibility | M&E Indicator |
|---|---|---|---|---|---|
| Transforming Public Health Education towards a Credible Practice-based Model | Introducing prototype curricula for professional education | Redesign various IAPH curricula based on the competency framework. | Q5-Q12 | Specialty Committees Scientific Council | Number of renovated curricula |
| | | Introduce higher professional qualifications in public health. | Q7-Q8 | IAPH Management Scientific Council | Doctoral program in place |
| | | Develop regional guidelines for professionalizing public health education curricula. | Q8 | IAPH Management Scientific Council | CBE in place |
| | | Fully implement competency based public health education. | Q9-Q12 | IAPH Management | CBE in place |
| | | Map training needs for faculty and trainers in the region. | Q5 | IAPH Management Scientific Council | Mapping report |
| | Addressing faculty development and capacity for public health trainers | Design CBE-oriented faculty development programs. | Q6 | IAPH Management Scientific Council | Approved FD programs |
| | | Implement faculty development programs to support the CBE model. | Q7-Q12 | IAPH Management | Number of faculty trained |
| | | Establish a resource and exchange platform for public health educators. | Q12 | IAPH Management | Functioning platform |

| Strategic Objective | Strategic Initiative | Interventions | Timeline 2024-2026 | Responsibility | M&E Indicator |
|---|---|---|---|---|---|
| Scaling Up Public Health Education Programs in Response to Regional Needs | Ensuring consolidation and implementation of current programs | Revise and update the current IAPH educational programs. | Q1 | Scientific Council IAPH Management | Number of revised programs |
| | | Identify and agree on various implementation routes and strategies. | Q1 | IAPH Management | Approved document |
| | | Develop self-paced approaches to enhance uptake of IAPH's educational programs. | Q2 | IAPH Management Specialty Committees | Number of self-paced courses implemented |
| | | Expand implementation and delivery of the established public health programs. | Q2-Q12 | IAPH Management | Number of trainees and graduates |
| | Introducing new educational programs in response to needs | Map the regional needs for new public health education programs. | Q1 | IAPH Management | Mapping report |
| | | Conduct an exercise to decide priority educational programs. | Q2 | IAPH Management | Priority list for new programs |
| | | Design and introduce the selected educational programs. | Q3-Q12 | Scientific Council IAPH Management | Number of new programs introduced |

| Strategic Objective | Strategic Initiative | Interventions | Timeline 2024-2026 | Responsibility | M&E Indicator |
|---|---|---|---|---|---|
| Scaling Up Public Health Education Programs in Response to Regional Needs | Introducing new educational programs in response to needs | Evaluate the implementation of IAPH educational programs. | Q12 | Board of Directors Advisory Board | Evaluation results |
| | | Map the uptake of public health in health professions curricula in EMR. | Q4 | IAPH Management | Mapping report |
| | Promoting public health education component for other health professions | Develop guidelines and materials for implementation of public health component for health professions. | Q5-Q7 | IAPH Management Scientific Council | Published guidelines |
| | | Mobilize partnerships and resources to implement curricular change. | Q8-Q10 | IAPH Management | Implementation report |
| | | Establish a regional platform for review and exchange of experience. | Q11-Q12 | IAPH Management | Functioning platform |

| Strategic Objective | Strategic Initiative | Interventions | Timeline 2024-2026 | Responsibility | M&E Indicator |
|---|---|---|---|---|---|
| Scaling Up Public Health Education Programs in Response to Regional Needs | Introducing community health literacy educational programs | Map community needs for health literacy programs. | Q3 | IAPH Management | Mapping report |
| | | Design health literacy packages relevant to the context. | Q4-Q5 | IAPH Management Scientific Council | Educational material developed |
| | | Establish platforms for the delivery of health literacy education. | Q6 | IAPH Management | Functioning platform |
| | | Mobilize partnerships for implementation, evaluation, and further development. | Q7-Q12 | IAPH Management | Implementation status report |
| Promoting the Professionalization of the Public Health Workforce | Advocating a better image and recognition of the public health profession | Highlight public health as a critical profession and reflect its successes and achievements. | Q1-Q12 | IAPH Management | Number of events implemented |
| | | Adopt programs on honoring and celebrating distinguished efforts of public health professionals e.g., prizes. | Q1-Q12 | Board of Directors IAPH Management | Honors and prizes adopted |
| | | Establish a career advice program to motivate talented youth to join the profession. | | | |

| Strategic Objective | Strategic Initiative | Interventions | Timeline 2024-2026 | Responsibility | M&E Indicator |
|---|---|---|---|---|---|
| Promoting the Professionalization of the Public Health Workforce | Advocating a better image and recognition of the public health profession | Initiate a dialogue with regulatory bodies on licensing and professional recognition of public health graduates. | Q2-Q3 | IAPH Management | Functioning career advice program |
| | Establishing a credible CPD system for the public health workforce | Map the status of CPD for public health professionals in the region. | Q1 | IAPH Management | Mapping report |
| | | Prepare a regional strategy on CPD for public health professionals. | Q2 | IAPH Management Advisory Council | Approved CPD strategy |
| | | Develop standards for accreditation of CPD programs and activities. | Q3 | Scientific Council IAPH Management | Published standards |
| | | Establish a process for accreditation and credit calculation for CPD programs and activities. | Q4 | IAPH Management | Accreditation process in place |

| Strategic Objective | Strategic Initiative | Interventions | Timeline 2024-2026 | Responsibility | M&E Indicator |
|---|---|---|---|---|---|
| | Enhancing capacities for public health research | Conduct a situation analysis on public health research in the region. | Q1-Q2 | IAPH Management | Situation analysis report |
| | | Identify and publicize the public health research agenda for the region. | Q3 | IAPH Management Advisory Coun cil | Published document on research agenda |
| | | Develop a public health research capacity compendium. | Q4-Q5 | IAPH Management Scientific Council | Compendium in place, number of beneficiaries |
| | | Promote the conduct, publication, and dissemination of public health research. | Q5-Q12 | IAPH Management | Number of studies conducted and published |
| | Supporting networking and unionization of the public health workforce | Attain membership for IAPH in regional and international public health associations and networks. | Q1-Q12 | IAPH Management | Status of IAPH's membership |
| | | Develop the regional code of ethics for the public health profession. | Q4 | IAPH Management Advisory Board | Published code of ethics |
| | | Organize an annual public health workforce conference under IAPH. | Q3, Q7, Q11 | IAPH Management Scientific Council | Number of conferences organized |
| | | Establish an IAPH membership program to allow affiliation of public health professionals and activists. | Q9 | IAPH Management | Membership program in place |

# Implementation Arrangements

The strategy is essential in defining the scope and the role of IAPH and in providing a sense of direction for its path. However, the true value of the strategy is in implementing it to effect change and realize goals.

**The following arrangements are identified to ensure robust implementation of the strategy:**

- Commitment and Buy-in
- Roles and Responsibilities
- Annual Planning Approach
- Budgeting and Resource Allocation
- Effective Communication
- Partnership Mobilization
- Monitoring and Evaluation

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## Commitment and Buy-in

The commitment of IAPH leadership is a sine qua non for effective strategy implementation and this needs to be clearly established. The buy-in of the strategy stakeholders is another key consideration for ensuring implementation.

A clear process is therefore needed to engage the internal and external stakeholders in the process of strategy development, endorsement, and execution.

## Annual Planning Approach

Adopting annual plans to implement the strategy is a wise approach as the annual plans are more crystalized, operational, and implementable.

The annual plans represent a phased implementation of the strategy and an opportunity to disentangle the interventions into activities and activity components and this facilitates budgeting, resource mobilization, and implementation.

## Roles and Responsibilities

Assignment of roles and responsibilities is another key aspect for ensuring effective and harmonized implementation. The IAPH Management represented by the Executive Director and assisting team holds the prime responsibility for steering and coordinating the strategy implementation.

The governing and technical structures of IAPH including the Board of Directors, the Advisory Board, the Scientific Council, and the Specialty Committees have important roles, but they need to be mobilized and streamlined by the IAPH Management. There is a special need to ensure synergy and avoid dichotomy in implementation to establish a healthy environment and attain the efficient use of resources.

## Budgeting and Resource Allocation

Funding the strategy is a prerequisite for any meaningful implementation hence clear budget lines need to be developed. For reasons relating to accuracy and practicality, it is suggested here that budgeting and resource allocation should appear with the annual plans emanating from the strategy. This is because the annual (operational) plan would include activities and activity components that appeal to accurate budget estimates.

The sustainability of funding is a crucial dimension, and this can better be realized through diversifying sources of funding and adopting a fee-for-service approach to recover costs and provide funding for development and sustainability.

# Effective Communication

Effective communication is at the heart of robust implementation of the strategy. IAPH Management needs to ensure adequate, relevant, and sustainable communication with all stakeholders to galvanize implementation and provide feedback.

Communication channels are to be open and flowing both internally and externally to ensure speedy and collective progress. IAPH management is advised to assign a focal team to manage the strategy implementation.

# Partnership Mobilization

Effective partnership and collaborative work can add much value to enhance implementation through providing resources and boosting technical capacity. IAPH needs to strategize in capitalizing on impactful partnerships and nurturing them.

Joint projects based on smart collaboration and aiming to achieve common goals are effective in pooling resources and galvanizing implementation.

# Monitoring and Evaluation

Monitoring is indispensable in ensuring progress and enabling corrective action in a timely and effective manner.

IAPH Management needs to establish a monitoring system for the strategy based on the identified indicators and measures of performance.

Evaluation, on the other side, is fundamental to take stock of the progress at certain points of the strategy lifespan. IAPH needs to adopt mid-term and end-of-term evaluations using sound methods to adjust the strategy or emphasize its validity and inform the next strategic phase.

Periodic reporting on the strategy implementation is an effective tool to ensure progress and highlight areas for intervention.

A monitoring and evaluation framework is established for this strategy. The strategic indicators are included in Table 1 and the operational indicators logically accompany the annual plans.

Two evaluation cycles (mid-term and end-term) need to be planned based on a sound evaluation method to take stock of progress and derive lessons for corrective action and future strategic phases.

By implementing this strategy, IAPH can establish itself as a respected and leading institution that drives excellence in public health education, research, and policy advocacy regionally and globally. This will ultimately contribute to the advancement of public health practice, health system strengthening, and the improvement of population health at large.

# IAPH Strategy

## International Academy of Public Health (IAPH)

### 2024