The Hawai‘i Public Health Association’s
Global Public Health Conferences 2002 and 2003: Lessons Learned

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Abstract
The 2003 Global Public Health Conference: Collaborating for Quality of Life and Health in the Pacific was sponsored by The Hawai‘i Public Health Association in partnership with the University of Hawai‘i’s Globalization Research Center and a number of other local and national organizations. This second consecutive Pacific-based conference posed new funding and staffing challenges. The novelty of the 2002 conference drew substantial sponsorship and a large volunteer base. In 2003, however, many sponsors were less willing to fund a second year, and experience with the 2002 volunteer process precipitated restructuring the 2003 planning committee to include only those who could offer time and skills. A part time administrative assistant was also hired. The 2003 abstracts included few submissions in traditional medicine and alternative healing, areas lacking from the previous conference as well. The inappropriate “call for abstracts” process for traditional practitioners was remedied by inviting speakers in these areas. The resulting 2003 conference successfully increased HPHA membership, and provided a nurturing venue for the 100+ presenters to share their public health work. In addition to Hawai‘i and the mainland USA, the 350+ conference attendees represented many nations from Fiji to Aotearoa, and even South Africa. Regardless, staffing and funding issues prompted the decision to schedule large conferences every other year, and new ideas for the 2004 annual meeting are being explored. Additionally, other Pacific nations have expressed interest in hosting the event. Lessons learned from two years of international conference planning will better prepare HPHA and other not-for-profit, volunteer organizations for future quality events in public health.

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HPHA Annual Meeting History
The American Public Health Association’s (APHA) State Affiliates host yearly local, annual meetings for their public health professionals. Hawai‘i’s affiliate, the Hawai‘i Public Health Association (HPHA), is no exception and has held a public health meeting on Oahu every year since 1945. HPHA’s meetings had been successful events drawing approximately 100-150 attendees yearly. However, the geography of the islands often made it difficult for health professionals to travel from island to island for one day meetings, and many organizations have little funding to provide their staff with travel and lodging for a general public health event. Regardless, public health professionals on Oahu looked forward to a yearly gathering of colleagues to discuss their work and learn about issues important to Hawai‘i and the island communities.

The 2002 Global Public Health Conference
A number of events prompted the 2000-2002 HPHA President, Nancy Partika, to propose a larger conference for June 2002. The demise of the University of Hawai‘i’s School of Public Health in July 2000 was a low point in public health in Hawai‘i. For many, the school was a unifying element in the public health community and provided an academic forum for Hawai‘i’s public health vision. The school was not only beneficial for the local Hawai‘i community but a gathering place for public health professionals in the Pacific and even Asia. Hawai‘i was the
perfect bridge between western and eastern ideas and public health practice. Pacific Islands are isolated from each other and counted on Hawai‘i to provide such a venue. Without this, public health professionals needed another event to discuss their ideas and work.

Additionally, membership in HPHA had been waning for a few years. Small annual meetings were not a huge draw for public health professionals from neighbor islands, and the small population of public health workers on Oahu was not enough to sustain an all volunteer organization. Something that would attract not only neighbor island participants, but also other Pacific Island nations and perhaps mainland US participation was necessary.

A large conference could promote public health dialogue and collaborative action on global health issues specific to the Pacific region; support broader policy, infrastructure and leadership dialogue; identify public health resources for Hawai‘i; and offer continuing education and public health training opportunities for the region. The networking effort would strengthen Hawai‘i’s public health community, and show Hawai‘i’s capacity for leadership in public health.

The vision to expand the annual meeting into a larger venue with invited plenary speakers and peer reviewed presentations met with enthusiasm from the HPHA Board of Directors. The Board’s decision to use that year’s APHA meeting theme of Global Public Health and apply it to our Pacific region initiated the first Global Public Health Conference: Issues and Strategies for Hawai‘i and the Pacific. The only hesitation from HPHA was staffing. HPHA has never had staff to assist with projects and events. While previous annual meetings were volunteer efforts, the same process for a large conference was unrealistic and financial support would be necessary for planning. HPHA searched for organizations within Hawai‘i to support the effort. The Globalization Research Center (GRC) at the University of Hawai‘i took the challenge and thought it worthwhile to devote time and GRC resources to the event. GRC became HPHA’s primary partner for both conferences. A vast fiscal drive yielded sufficient funding for the planning process, and volunteers were encouraged to participate by the potential success of a huge event. The conference was held at the Hawai‘i Convention Center, which proved to be an impressive site to host Hawai‘i and Pacific Island guests.

By canvassing public health workers and officials in Hawai‘i, World Health Organization officials in the Pacific, and neighboring Pacific Island health professionals, a list of conference tracks were assembled. A call for abstracts was distributed widely throughout the region, and a number of health organizations and individuals were identified to present topics of importance on Oahu and our neighbor islands. The conference program for 2002 is still available on the HPHA website www.hawaiipublichealth.org.

Four plenary speakers: Dr. Sitaleki Finau, Director of the Fiji School of Public Health; Laurie Garrett, medical and science writer from Newsday; Dr. Jay Glasser, then President Elect of APHA; and Dr. Noa Emmett Aluli, a primary care physician from Moloka‘i General Hospital, presented their regional perspectives on public health. Peer reviewed presentations encompassed a diverse array of health topics in Hawai‘i and the Pacific:

- Climate Variability, Forecasting and Health and Well Being in the Pacific Islands
- Evaluating Health Outcomes
- Women's Health
- Centers for Disease Control Collaboration with US-Pacific Affiliated Jurisdictions
- "It Can Happen to You!" A Teen Pregnancy Prevention Play for Asian and Pacific Islander Communities in Hawai‘i
- Dengue Fever
- Community Partnerships and Empowerment
- Health Transitions Among Pacificans: Unpacking Imperialism
- Native Hawaiian Health
- Cholera in the Marshall Islands: Political, Economic & Ecologic Perspectives
• Migration and Displacement: Impacts on Public Health in Hawai‘i and the Pacific
• HIV/AIDS in the US-Pacific
• Nutrition Issues in the Federated States of Micronesia, Vanuatu and Fiji

Integrating both Pacific and global perspectives, the June 2002 conference was attended by 350 participants from over 10 Pacific Islands, and featured speakers from Hawai‘i and the Pacific. Additionally, representation from WHO, APHA, CDC, and UNICEF provided a strong global contingent, and gave attendees an opportunity to network not only among their Pacific Island colleagues but also to showcase their strengths, beliefs, and experiences to a larger audience. The venue facilitated dialogue to broaden and strengthen public health strategies in the Pacific and laid the foundation for continued collaboration. Networking with both Hawai‘i and mainland public health professionals also offered new opportunities for Pacific Island nations to build more effective public health programs for their populations.

HPHA membership increased from less than 100 to more than 350 members and the conference generated a profit with registrations and new memberships. The success of the event propelled HPHA into immediate planning for a 2003 conference.

2003 Global Public Health Conference
Following the 2002 conference, HPHA officers launched an evaluation of the 2002 planning process. The initial large volunteer effort had whittled to a small group of dedicated volunteers by the time of the June 2002 conference. This group was invited back to the 2003 planning process with the benefit again of GRC staff and resources. In addition to GRC staff, HPHA hired a part time conference assistant to help with registration, memberships, and general conference related tasks. Conference participants had indicated a preference for Hawai‘i and Pacific island based speakers, prompting efforts to invite plenaries who would reflect regional experiences in the field. Plenary speakers for the 2003 conference included: Dr. Kekuni Blaisdell, a prominent local physician; Sandra Pierantozzi, Vice President of the Republic of Palau; Francis Hezel, a Jesuit Priest and Director of Micronesian Seminar in Pohnpei; and Dr. Virginia Caine, current APHA President.

Peer reviewed presentations were chosen from a pool of over 100 submitted abstracts. Prince Management Consultants, a local website development company, was hired to create an on-line submission process and facilitate a blinded abstract review. Since first time presenters and non-traditional presenters from the islands were less likely to submit abstracts, a more concerted effort was made to locate speakers in the areas of traditional medicine and healing. Additionally, speakers were invited to cover topics absent in the abstract pool. Other challenges in the abstract review process included the lack of abstract writing skills among submitters, and often the same projects as the previous year were re-submitted for the 2003 event. A few presenters were asked to re-write abstracts in the requested format, and ideas were discussed for an abstract writing workshop at the conference. Unfortunately, with time and financial constraints, the writing workshop was not realized, but may be a potential for future conferences.

Fiscal constraints plagued the process from the beginning. Based on 2002 conference attendance, HPHA expected a similar turn out for 2003; however, there was no guarantee, and officers could not count on registrations to cover costs. Securing fiscal support early was paramount. Federal and foundation grant attempts proved unsuccessful as funders were unwilling to commit to a conference in the Pacific that seemed far removed from their mainland perspectives. Organizations that had donated in the past were unable to commit funds at the same level as the previous year, and reduced their contributions. With an uncertain fiscal environment, HPHA scaled down plans for additional speakers, teleconferencing to Pacific Islands, additional receptions, and conference ‘extras’. Ultimately, registrations exceeded projections and a few local organizations were able to provide funds as their fiscal years closed. These reimbursements received post-conference generated a second year of profit, and plans have been discussed to
create a fund specifically for future Global Public Health conferences.

The Global Public Health Conference 2003: Collaborating for Quality of Life and Health in the Pacific proved to be a success with over 370 public health professionals, increased membership for HPHA, and global participation with attendees from the US mainland, WHO and South Africa. The 2003 conference program is available on the HPHA website. Presentation topics included:

- Minority Women’s Health and Chronic Diseases
- SARS
- Health Economics
- The Pain of HIV: Mind Body and Spirit
- Cancer
- Bioterrorism, Emergency Preparedness and Response
- Globalization, Health and Development Policy in the Pacific Island Countries
- Heart of the Sea, a film portrait about Hawaiian legend Rell Sunn
- Harm Reduction
- End of Life Care and Aging
- Traditional Medicine, Health and Healing in Fiji
- Suicide and Globalization in the Pacific

A concurrent CDC Bioterrorism meeting brought additional attendees and speakers from Pacific Island nations. The CDC meeting organizers had contacted HPHA to explore hosting their event at the Hawai‘i Convention Center. While contact was made too late to dedicate time to the partnership details, the meeting did provide an additional element to the conference, and similar partnerships would be beneficial for future events.

The Future of the Global Public Health Conference
The Hawai‘i Public Health Association is faced with similar issues as other APHA affiliates. How to increase volunteerism in the organization? How to procure funding for public health community events? How to increase membership? HPHA accomplished all of the above with the Global Public Health conferences, but not without a number of challenges forcing us to re-think the process and develop better, streamlined ways of running HPHA’s annual meetings and events.

Several planning meetings for future conferences have resulted in one overarching recommendation. Such a large scale conference needs to be held bi-annually. HPHA will host a smaller annual meeting in the opposite years, but planning for Global Public Health conferences will encompass a full 2 years. This will enable more time for fund raising, grant writing and assembling a volunteer committee of individuals with specialized skills to contribute to the process. The volunteer group had further decreased to a small core group of workers who committed to tasks for the 2003 conference. Expecting volunteers from our small public health community to donate time yearly for such a large event is unrealistic. HPHA has estimated that a minimum of 3.5 paid staff are needed to streamline the planning process; the expectation is that organizations involved in future planning will be able to offer their staff to the process.

The alternate year schedule would enable presenters to prepare new material for submission. It would also allow more time to recruit presenters in non-traditional ways and encourage first time presenters to submit abstracts. Periodically hosting the conference at alternative sites, such as other Pacific Islands, would increase the visibility and importance of the event, provide an opportunity for new ideas, new presentations, and give other islands more ownership of our regional conference.

Current plans include an HPHA annual meeting in June 2004 focusing on one public health track or subject, and a Global Public Health Conference in June 2005 at the Hawai‘i Convention Center in Honolulu. Grant writing for the 2005 conference has been initiated by the Cancer Research Center of the University of Hawai‘i, and HPHA will be soliciting more organizations to donate staff time and funds. HPHA hopes to set a system in place for Global Public Health conference planning; one that can provide a solid base to maintain the momentum.
of the conference through organizational, staff or location changes. The Global Public Health conferences have inspired and motivated the Pacific public health community and efforts like these need to be recognized and sustained.

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