The Public Health Association of Nova Scotia (PHANS)

Member Survey Report

Accepted by the PHANS Board May 23, 2007

Acknowlegements

The Public Health Association of Nova Scotia (PHANS) wishes to acknowledge all those who contributed to this survey. Through their persistance and dedication, an idea became reality. As a result, the Board and Membership Committee of PHANS have increased their awareness of the needs of PHANS members and their sense of the purpose and direction to take on behalf of PHANS.

Foremost to thank are the 35 PHANS members who provided a rich range of responses to the survey. As well, several Board members and Members of the Membership Committee contributed significantly to the creation and administration of the survey, the analysis of the survey results and the final report, including Hope Beanlands, Heather Christain, Andrea Hilchie-Pye, Marie McCully Collier and Grace Warner.

Very special thanks are extended to Matthew Pye and Andrea Hilchie-Pye for providing the technical expertise and equipment that enabled PHANS to collect input from PHANS members with an electronic on-line survey, and to Marie McCully Collier, Chair of the PHANS Membership Committee, for her leadership through all the steps required to complete the survey and prepare the final report.

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I. EXECUTIVE SUMMARY

This report describes the process and results of an electronic survey of members of the Public Health Association of Nova Scotia (PHANS) on behalf of the Board of Directors and the Membership Committee of PHANS. All seventy members of the PHANS list serve, a private group email service for members only, were invited to participate.

The purpose of the survey was to collect input from members regarding their expectations of PHANS, their involvement in PHANS, their satisfaction with the PHANS communication initiatives in place for members, and their understanding and level of support for the priority actions of PHANS. It was anticipated that PHANS members' input would provide invaluable guidance to the Board and the Membership Committee in their efforts to maintain and enhance an active and involved membership.

Twelve quantitative and qualitative questions were designed, pilot tested and refined before implementation on September 18, 2006. Members were advised of the survey on the PHANS list serve and asked to link directly to an electronic questionnaire. Members' responses were voluntary, confidential and anonymous. Survey responses were collected and collated at a protected site. The survey ended October 18, 2006. Data were then provided to the PHANS Membership Committee in Excel format for analysis.

2. KEY FINDINGS

Overall, the members responded positively to the request to participate in the PHANS survey. Some 35 of the 70 list serve members (50%) responded to questions about their expectations of PHANS, their involvement in PHANS, their satisfaction with the PHANS communication initiatives in place for members, and their understanding and level of support for the priority actions of PHANS.

A. Member Involvement

Members reasons for joining PHANS

Survey respondents joined PHANS because they were interested in public health issues and wanted to support and be involved in the work of PHANS. Some were seeking networking opportunities or ways to keep up to date about issues of public health in Nova Scotia and a small number joined because they believe in public health.

Members expectations of PHANS

The tone of the qualitative responses indicate that at the time of the survey, respondents' expectations were being met reasonably well by PHANS. Over half (18/35 or 51%) of the survey respondents indicated that PHANS met their expectations most or almost all of the time. On the other hand, almost half (17/35 or 48%) said PHANS met their expectations some or none of the time. Respondents provided a range of comments to explain how well PHANS was or was not meeting their expectations. They indicated that:

 They appreciated the work PHANS is doing with its limited resources and no staff.

- That PHANS could be doing more to meet the expectations of some of its members, e.g., that they would like PHANS to provide more educational opportunities for members; and that they would like PHANS to be more visable to members and the public about what it is doing.
- That participation was difficult for members living outside of Halifax.

Members satisfaction with their level of involvement in PHANS

Survey results revealed a variety and range of opinions from members about their satisfaction with their level of involvement in PHANS. Some 63% (22/35) of the respondents were dissatisfied or very dissatisfied with their level of involvement whereas 37% (13/35) were satisfied or very satisfied. Likewise, while a few respondents commented that they were satisfied with their level of involvement, others said:

- They did not have the time to be more involved because of work and other commitments.
- They found it difficult to participate because they lived outside of Halifax.
- It was difficult to get engaged without "clear specific actions".

B. Member Communications

PHANS members receive communications from PHANS through a private group email service (list serve), newsletter and a "Members only" section on the PHANS website www.phans.ca. Overall the feedback from the survey respondents was complimentary and appreciative of these communication strategies. However, a number of suggestions were made on how PHANS might enhance or improve communications for members.

Newsletter

According to survey respondents, the newsletter is the most popular communication strategy used by PHANS. Few improvements were suggested but PHANS is being asked by some respondents to send the newsletter out more often and to focus more on current, up to date information about public health issues, events, member activities, priority policy issues, the actions being taken and how members can contribute. Striking a newsletter committee and appointing a newsletter editor was also suggested.

List Serve

The list serve is less popular than the newsletter. Only a little over half of the survey respondents indicated that they always or usually read it. As with the newsletter, few improvements were suggested. PHANS was again asked to focus more on current, up to date information including public health issues, events, member activities, priority policy issues, the actions being taken and how members can contribute. A few respondents said that they struggle to understand computer language and how to use the technology.

PHANS Website - members only section

According to survey respondents, this was the least popular communication strategy used by PHANS. Over half (19/35) of the members responding to the survey had not signed on. When asked to explain "why not?", lack of time or interest were among the main reasons given. Technical difficulties were a barrier for a few respondents.

C. PHANS Priority Actions

Overall, amost three quarters of the survey respondents reported a high level of interest in the three priority action areas identified by PHANS -- the renewal of public health, early child education and care and Atlantic collaboration. As well, the feedback from respondents did not suggest any strong consensus on changing or adding to the priority actions. The comments of one respondent provide a thoughtful conclusion "It seems unreasonable to add priorities when it is unclear how progress is occurring on the existing three; as well, each of those is important and requires significant effort."

Renewal of Public Health

Not surprisingly, the renewal of public health in Nova Scotia was rated highest in terms of interest by 94% (33/35) of the respondents. Public health workers across Nova Scotia are keenly following the implementation of recommendations made following a 2005 independent review of Public Health Services in Nova Scotia. However, fewer than half of the respondents rated their understanding of the issue as very good or good.

Early child education and care

Interest in exploring ways to support policies that ensure the sustainability of early child education and care in Nova Scotia was rated quite high by over 70% of respondents, but only a little over 30% felt they had a good/very good understanding of the issue.

Atlantic Collaboration

Exploring for opportunities to collaborate with the Prince Edward Island, New Brunswick and Newfoundland Labrador Public Health Associations was not well understood by over 50% of respondents, but the level of interest was quite high – 66% rated their interest as mid-high to high.

3. CONCLUSIONS

A. Member Involvement

Survey respondents have told us:

- They joined PHANS because they were interested in public health issues and wanted to support and be involved in the work of PHANS; that they are seeking networking opportunities or ways to keep up to date about issues of public health in Nova Scotia; and that they believe in public health.
- They are appreciative of the work that PHANS is doing with its limited resources and no staff.
- Their expectations are being met reasonably well by PHANS but more could be done to meet their expectations.
- They would like PHANS to provide more educational opportunities for members.
- They would like PHANS to be more visable to members and the public about what it is doing.
- They would like to be more involved in PHANS (63% of the respondents were dissatisfied or very dissatisfied with their level of involvement in PHANS) but:
 - they find it difficult to participate in PHANS actiities if living outside of Halifax:

- they do not have the time to be more involved suggesting that personal circumstances are often at the root of their lack of involvement; and,
- o that it is difficult to get engaged without "clear specific actions".

B. Member Communications

Survey respondents have told us:

- They appreciate the efforts of PHANS to communicate through its' newsletter, list serve and website, but PHANS could enhance or improve communications for members.
- The newsletter is the most popular communication strategy.
- They want the newsletter sent out more often.
- They want the newsletter and list serve to focus more on current, up to date information about public health issues, events, member activities, priority policy issues, the actions being taken and how members can contribute.
- PHANS needs a newsletter committee and newsletter editor.
- Only a little over half of the survey respondents always or usually read the list serve.
- A small number of members struggle to understand computer language and how to use the technology.
- "Members only" is the least popular communication strategy used by PHANS because they lack time or interest and may experience technical challenges.

C. PHANS Priority Actions

Survey respondents have told us:

- They have a high level of interest in and support continued action on the three priority action areas identified by PHANS -- the renewal of public health, early child education and care and Atlantic collaboration.
- They would like to be better informed about the three priority action areas identified by PHANS and know how they can contribute.

4. RECOMMENDATIONS

In keeping with the feedback provided by the survey respondents, PHANS should give serious consideration to taking action on the following recommendations:

- Inform members that the survey is complete and provide them with a copy of the Executive Summary via the PHANS list serve and indicate that the complete survey report is available on the PHANS Website.
- Post the complete survey report on the public section of the PHANS Website in pdf format.
- Initiate a discussion with members about the findings, conclusions and recommendations on the "Members only" discussion board of the PHANS website (Ask the members what they think PHANS should do, given the survey results, and particularly, given the qualitative responses).
- Recruit a Newsletter Committee and editor/co-editors.
- Reexamine the role, mandate and purpose of PHANS to syncronize with the needs and expectations of it's members.
- Provide more continuing education and networking opportunities for members.

- Regularly inform and educate the membership about any activities related to the three priority action areas and provide more specific ways for members to be involved.
- Identify opportunities to share information with members and the public about public health in Nova Scotia.
- Identify innovative, time-efficient, user friendly ways that enable members with limited time, or living outside metro, to be more involved and make a greater contribution.
- Seek ways to attract and retain and actively engage members i.e., use modern technology to its advantage by providing opportunities for member participation in board and committee meetings by teleconference or other technical means such as webcam.
- Consider changing the time of the board meetings, to reduce the conflict between work schedules and meeting times.
- Consider ways to reduce or alleviate the technical challenges that members may experience using any of the communication tools associated with PHANS.

II. INTRODUCTION

This report describes the process and results of an electronic survey of members of the Public Health Association of Nova Scotia (PHANS) on behalf of the Board of Directors and the Membership Committee of PHANS. All 70 members on the PHANS list serve, a private group email service for members only, were invited to participate.

The purpose of the survey was to collect input from members regarding their expectations of PHANS, their involvement in PHANS, their satisfaction with the PHANS communication initiatives in place for members and their understanding and level of support for the priority actions of PHANS. It was anticipated that PHANS members' input would provide invaluable guidance to the Board and the Membership Committee in their efforts to maintain and enhance an active and involved membership.

Twelve quantitative and qualitative questions were designed, pilot tested and refined before implementation on September 18, 2006. Members were advised of the survey on the PHANS list serve and asked to link directly to an electronic questionnaire. Members' responses were voluntary, confidential and anonymous. Survey responses were collected and collated at a protected site. The survey ended October 18, 2006. Data were then provided to the PHANS Membership Committee in Excel format for analysis.

Some 35 of the 70 list serve members (50%) responded. (It was not possible to facilitate participation from the four PHANS members who were not on the list serve at the time of the survey). A total of 177 qualitative comments were provided.

III. DESCRIPTION of SURVEY

Twelve quantitative and qualitative questions were designed to focus on PHANS Member Involvement, Member Communications, and PHANS Priority Actions. These questions were pilot tested and refined before implementation on September 18, 2006. Members were advised of the survey on the PHANS list serve and asked to link directly to an electronic questionnaire. Member responses were voluntary, confidential and anonymous. Survey responses were collected and collated at a protected site. Data were then provided to the PHANS Membership Committee in Excel format for analysis.

IV. DATA ANALYSIS

Excel software was used to collate quantatative data. Qualitative data were organized, grouped and analyzed manually. Data maintained by the PHANS website and list serve manager were used to augment the discussion about the PHANS list serve and "members only" service for members.

V. SURVEY FINDINGS

A. Member involvement

Members reasons for joining PHANS

Most (89% or 31/35)) of the members who completed the survey responded to the question, *"Why did you join PHANS?"* Some 34% (12/35) indicated that they were interested in Public Health issues and wanted to support and be involved in the work of PHANS. Responses included statements like:

- " to be engaged in public health issues within the province, to help make a difference",
- "I am working in Public Health Services and want to be informed and support this
 professional organization as best I can" and,
- I am "committed to Public Health reform".

Some 17% (6/35) stated they joined PHANS for the networking opportunities. Examples of comments which indicate that these members see PHANS as an opportunity to network are:

- "I thought it would be a good opportunity to have contact with other public health professionals in Nova Scotia".
- "important network for my practice".

Some 11% (4/35), joined PHANS as a way to keep up to date about Public Health in Nova Scotia, as indicated by the statements below.

- " to keep up-to-date on current and emerging initiatives in public health in NS, as well as across Canada"; and,
- " to learn what is going on in public health".

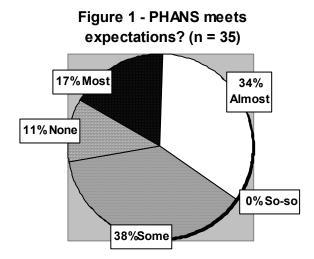
An additional 11% (4/35) said their belief in Public Health was their reason for joining PHANS. There were seven other various reasons provided. Four members did not respond to this question.

Members expectations of PHANS

Members were asked "Is PHANS meeting your expectations?" A five point ordinal measurment scale was used to rate their responses (from most of the time to none of the time.) Of the 35 members who responded,17% (6/35) said PHANS met their expectations most of the time and 34% (12/35) said PHANS met their expectations almost all of the time, whereas 37% (13/35) said PHANS met their expectations some of the time and 11% (4/35) said PHANS met their expectations none of the time. No respondents selected a neutral 3 or "so-so" rating. (see Figure 1).

Members were provided an opportunity to qualify their responses: "Please comment on how PHANS is or is not meeting your expectations". Twenty of 35 (57%) members provided qualitative responses -- of whom eight were complimentary and appreciative of the efforts of the Board of Directors and committees of PHANS. For example, one said "I think in the last two years in particular, PHANS has really been trying to reach out and get more folks involved in current public health issues. We need to continue to go down that path and get further commitment from others who have a passion for public health

both within the formal public health system and in the community and corporate sector". On the other hand, two respondents suggested that PHANS needs to be more visible to members about what it is doing; two said that living outside of metro made it more difficult to participate in PHANS activities; two said they would like to see more active involvement by "people" and/or frontline public health professionals and three suggested that PHANS should focus more on educating the public and PHANS members about public health. Fifteen of 35 (43%) members did not comment.

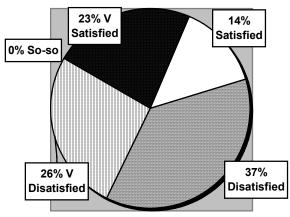


Members satisfaction with their level of involvement with PHANS

Members were asked "Are you satisfied with your level of involvement with PHANS?". A five point ordinal measurment scale was used to rate their responses (from very satisfied to very dissatisfied). Of the 35 members who responded to the question, 23% (8/35) indicated they were very satisfied and 14% (5/35) reported being satisfied with their level of involvement whereas 37% (13/35) were disatisified and 26% (9/35) were very dissatisfied with their level of involvement with PHANS. No respondents selected a neutral 3 or "so-so" rating (see Figure 2).

Respondents were provided an opportunity to qualify their responses: "Please comment on your satisfaction rating regarding your level of involvement". Twenty-one of 35 (60%) members provided written comments whereas 14 (40%) did not comment. Among the 21 who wrote comments, 13 indicated they did not have the time to be more involved; three said they found it difficult to participate because they lived outside of Halifax; two said they were satisfied with their level of involvement; one suggested that it was difficult to get engaged without "clear specific actions"; another stated "I am as involved as I am able to be..."; and one individual indicated that s/he took full responsibility for "my lack of satisfaction".

Figure 2- Satisfaction with involvement in PHANS (n=35)



A. Member Communications

The survey posed four questions regarding PHANS communications strategies. Members were asked about their use of, and to comment about, the PHANS list serve, PHANS website and PHANS Newsletter.

List Serve

Members were asked "How often do you read the list serve?" Using a four point ordinal scale (always to never), 54% (19/35) of respondents indicated they always or usually read it, whereas 46% (16/35) rarely or never read it. When asked "What more would you like to see on the PHANS list serve?", 10 of 35 (29%) members surveyed had no suggestions or said the list serve was satisfactory or fine. Suggestions from seven members include: minimizing cross postings with other list serves; providing more current, up-to-date information about public health issues, events, member activities; PHANS'priority policy issues, the actions being taken, and how members can contribute. Three said they were unclear about what is meant by a list serve – of whom one suggested a tutorial on the use of list serves. One said she does not use the list serve. Fourteen of the 35 respondents (40%) did not comment.

Newsletter

Members were asked "How often do you read the newsletter?" Using a four point ordinal scale (always to never) 71% (25/35) indicated they always or usually read it, whereas 29% (10/35) rarely or never read it. When asked "What more would you like to see in the PHANS newsletter?", 4 of 35 (11%) respondents said the newsletter was fine as is. Four suggested, similar to the list serve, such things as: current, up to date information about public health issues, events, member activities; and, the priority policy issues, the actions being taken, and how members can contribute. Two suggested PHANS strike a newsletter committee with a newsletter editor. Two respondents said that they may not have seen the newsletter as they were unsure about how it was distributed or if they had seen it. One member suggested the newsletter needed to be

sent out more often than once a year. Twenty-two of the 35 members surveyed (63%) did not comment or provide any suggestions.

PHANS Website - members only section

Members were asked "Have you signed up for the Members only site? (on the PHANS website) and if not, why not?" Respondents were able to select a "yes" or "no "answer. Some 46% (16/35) said "yes" they had, whereas 54% (19/35) said "no" they had not signed on. Among the 19 respondents who had not signed up, 8 of 35 said they had not signed on because they had no time to do so; 3 said they had no need or interest, 2 experienced technical difficulties when they tried to sign on and 2 were not aware of the site.

Other comments

Members were asked "Do you have any additional comments regarding PHANS member communications?". Twenty-one of 35 (60%) respondents did not comment. Among the remaining 14 (40%) respondents, 10 were appreciative and complimentary of the efforts of PHANS to communicate with members through the website and list serve (One of these respondents acknowledged PHANS efforts to recruit new members with bookmarks and the poster board and reinforced the importance of PHANS communicating with members to keep them informed and to seek their feedback about what PHANS is doing in the priority action areas). One member suggested that PHANS needs to be clear and concise about activities (less about plans and more about doing); one suggested that members should learn how to reply to sender as opposed to "reply all" on the list serve and one suggested that there needs to be a way to engage members through relevant and timely communications. One respondent asked if PHANS communications could be combined with the Health Promotion Clearing House on-line newsletter.

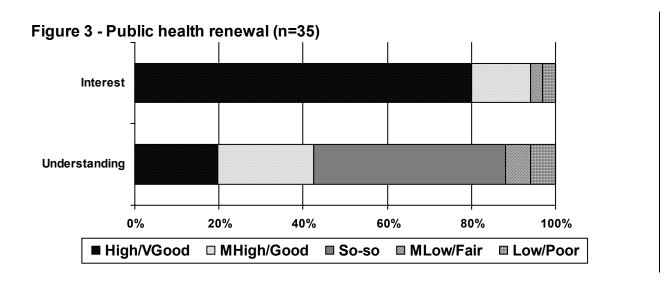
C. PHANS Priority Actions

Seven questions were asked about the members' understanding, interest and support for the three priority action areas of PHANS: renewal of Public Health Services in Nova Scotia; exploring ways to support policies that ensure the sustainability of early child education and care in Nova Scotia; and, exploring for opportunities to collaborate with the PEI, NB and NL Public Health Associations. A five point ordinal scale was used to rate their level of interest (from high to low) and a five point ordinal scale was used to measure their level of understanding (from very good to poor) of each priority area.

Renewal of Public Health

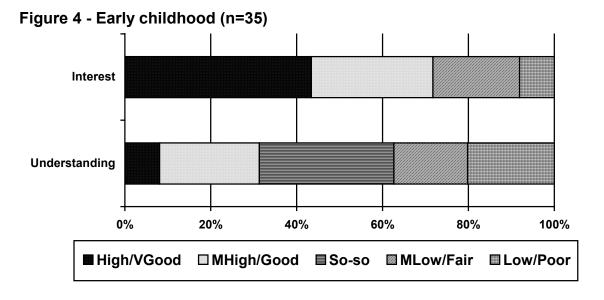
In response to the question "Rate your level of interest in the renewal of Public Health Services in Nova Scotia.", 94% (33/35) of the members surveyed rated their interest level in the renewal of public health services as mid-high to high whereas 6% (2/35) rated their interest as mid-low to low. No respondents selected a neutral 3 or "so-so" rating (see Figure 3). When asked to "Rate your level of understanding of how PHANS is supporting the renewal of Public Health Services in Nova Scotia.", 43% (15/35) of the members surveyed felt their understanding of how PHANS is supporting the renewal of Public Health Services in Nova Scotia was good or very good: 46% (16/35) selected a

neutral three (so-so) rate; and 11% (4/35) felt their understanding was fair or poor (see Figure 3).



Early Child Education and Care

In response to the question "Rate your level of interest in exploring ways to support policies that ensure the sustainability of early childhood education and care in Nova Scotia.", 71% (25/35) of the members surveyed rated their interest in this area as midhigh to high, whereas 29% (10/35) rated their interest as mid-low to low. No respondents selected a neutral 3 or "so-so" rating (see Figure 4). When asked to "Rate your level of understanding of how PHANS is exploring ways to support policies that ensure the sustainability of early childhood education and care in Nova Scotia.", 31% (11/35) felt their understanding was very good/good; 31% (11/35) were neutral (so-so) and 37% (13/35) rated their understanding as fair/poor (see Figure 4).



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Atlantic Collaboration

When asked to "Rate your level of interest in exploring Atlantic collaboration with the PEI (Prince Edward Island), NB (New Brunswick) and NL (Newfoundland Labrador) Public Health Associations.", 66% (23/35) of the members surveyed rated their interest level as mid-high to high whereas 34% (12/35) rated their interest level as mid-low or low. No respondents selected a neutral 3 or "so-so" rating (see Figure 5). In response to the question "Rate your level of understanding of how PHANS is exploring Atlantic collaboration with the PEI, NB and NL Public Health Associations.", 9% (3/35) said they had a good or very good understanding of this issue; 40% (14/35) were neutral (so-so) and 51% (18/35) rated their understanding as fair or poor (see Figure 5).

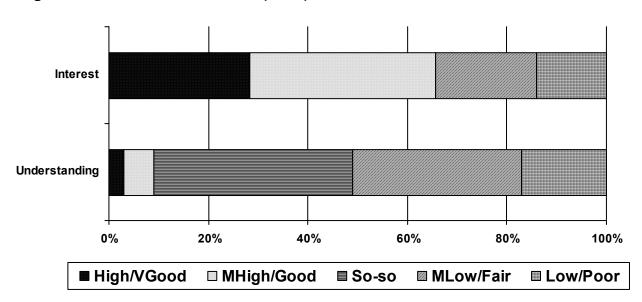


Figure 5 - Atlantic Collaboration (n=35)

Other Areas of Priority

Fourteen of the 35 (40%) respondents did not provide any comments when they were asked "What other priority areas would you suggest for PHANS?" Among the 21 (60%) who did respond, three felt the priority areas were fine as they were (one of these respondents stated "It seems unreasonable to add priorities when it is unclear how progress is occurring on the existing three; as well, each of those is important and requires significant effort"). Three suggested focusing on the renewal of public health; and three suggested that PHANS needs to increase its visability and presense and influence in the community and health system by working with other groups and organizations. Two respondents suggested that poverty was a key issue. Two identified issues related to a determinants of health approach including continuing to work on policy based initiatives and finding ways to support the National Collaborating Centre (NCC) for Determinants of Health being hosted by St. FX University. Affordable housing, environmental health, injury, chronic disease prevention, using the public health capacity framework and accountability framework or a focused activity on early childhood development were among the suggestions of the remaining eight respondents.

VI. DISCUSSION

A. Member Involvement

Members' reasons for joining PHANS

The responses from members to the question "Why did you join PHANS?" indicate that many joined because they were interested in public health issues and wanted to support and be involved in the work of PHANS. Some members were seeking networking opportunities or ways to keep up-to-date about issues of public health in Nova Scotia and a small number joined because they believe in public health.

Members' expectations of PHANS

The tone of the qualitative responses indicate that at the time of the survey. respondents' expectations were being met reasonably well by PHANS. When members were asked about how PHANS was or was not meeting their expectations, over half (18/35 or 51%) of the respondents indicated that PHANS met their expectations most or almost all of the time. On the other hand, almost half (17/35 or 49%) said PHANS met their expectations some or none of the time. When asked to explain how PHANS was or was not meeting their expectations, close to half (43% or 15/35) of the members surveyed did not provide comments. The remaining 20 members provided a variety and range of comments. For example, one group of eight respondents said they were appreciative of the work PHANS is doing with its limited resources and no staff. On the other hand, the comments of a group of nine respondents suggest PHANS could be doing more to meet the expectations of some of its members. Seven respondents in this group said they would like to be more involved in PHANS; they would like PHANS to provide more educational opportunities for members; and they would like PHANS to be more visable to members and the public about what it is doing. Two respondents in this group said that participation was difficult for members when living outside of Halifax. Indeed their comments point to a longstanding issue for PHANS – how to increase the number of members who live outside the Halifax area and how to increase the involvement of members who live outside the Halifax area.

Members satisfaction with their level of involvement in PHANS

Survey results revealed a variety and range of opinions from members about their level of involvement in PHANS. The data show that 63% (22/35) of the respondents were dissatisfied or very dissatisfied with their level of involvement in PHANS whereas 37% (13/35) were satisfied or very satisfied. Only 21 of 35 (60%) members responded when asked to comment on their level of satisfaction with their involvement. For example, among the 21 responding, only three said they were satisfied with their level of involvement. A group of 12 respondents indicated they did not have the time to be more involved suggesting that personal circumstances are often at the root of members' lack of involvement in PHANS. Three said they found it difficult to participate because they lived outside of Halifax, again pointing to the challenge that PHANS has to attract and involve a membership from outside the metro area. One member said that it was difficult to get engaged without "clear specific actions" – suggesting that PHANS needs to communicate more clearly with the membership about its activities and to provide more

specific ways for members to be involved. One member said he/she took full responsibility for his/her dissatisfaction.

An analysis limitation

The electronic structure of the questionnaire did not permit linking the quantitative and the qualitative data. This linkage would have enabled a more indepth analysis of the responses of members who said that they were dissatisfied with their involvement or that PHANS was not meeting their expectations.

B. Member Communications

PHANS members receive communications from PHANS through a private group email service (list serve), newsletter and a members only section on the PHANS website www.phans.ca. Overall the feedback from the survey respondents was complimentary and appreciative of these communication strategies. However, a number of suggestions were made on how PHANS might enhance or improve communications for members.

Newsletter

PHANS distributed one newsletter to members in 2006 by posting it on the PHANS list serve. A copy was also posted on the PHANS website on the Reports/publications page http://www.phans.ca/pdfs/February_2006Update.pdf. According to survey respondents, the newsletter is the most popular communication strategy used by PHANS -- a little over 70% indicated that they always or usually read it. Few improvements were suggested but PHANS is being asked by some respondents to send the newsletter out more often and to focus more on current, up to date information about public health issues, events, member activities, priority policy issues, the actions being taken and how members can contribute. A newsletter committee and newsletter editor were also suggested.

List Serve

According to records maintained by the list serve manager, 70 of 74 members were signed on to the list serve when this survey was conducted. Less popular than the newsletter, only a little over half of the survey respondents indicated that they always or usually read it. As with the newsletter, a few improvements were suggested. PHANS was again asked to focus more on current, up to date information including public health issues, events, member activities, priority policy issues, the actions being taken and how members can contribute. As suggested, care must be taken to minimize cross postings with other list serves. As well, a few respondents indicate that they struggle to understand computer language and how to use the technology, indicating that care must be taken to instruct members when needed on how to use the list serve appropiately.

An analysis limitation

The electronic structure of the questionnaire did not permit linking the quantitative and the qualitative data. This linkage would have enabled a more indepth analysis of the responses of members who said that they did or did not read the newsletter and/or list serve.

PHANS Website - "Members only" section

During 2004, PHANS updated its website www.phans.ca and enabled new members to join PHANS and /or CPHA from this site. A private "Members only" site was also added. Members are asked to register themselves on the site by creating their own private passwords that permit them to return easily when they wish. This site is used to post PHANS By-Laws, minutes of Board meetings and a list of Board members. Members may also post discussion topics and seek opinions from one another about the topic. However, participation in "Members only" among members has been low according to records maintained by the website coordinator. At the time of the survey, 29 of 74 members were signed on this site according to the website manager. No members had used the discussion board, but a small number of members had used the site to access the Board minutes.

The public section of the website is open to PHANS members and the public. Indeed, the website manager responds, on average, to one request a month from the public for information about public health or public health services in Nova Scotia.

According to survey respondents, the PHANS Website is the least popular communication strategy used by the members. Over half (19/35) of the members responding to the survey had not signed on. When asked to explain "why not?", lack of time or interest were among the main reasons given. Two respondents cited technical challenges. Although these numbers are small, they do highlight that "Members only" is cumbersome to access and not a critical place for members to visit. There is a challenge to make this site more user friendly and attractive. In today's technical world it has potential to be a very useful way to further engage and encourage member participation in PHANS activities.

C. PHANS Priority Actions

Overall, over 70% of the survey respondents said they have a high level of interest in the three priority action areas identified by PHANS -- the renewal of public health, early child education and care and Atlantic collaboration. As well, the feedback from respondents did not suggest a strong consensus on changing or adding to the priority areas. There were suggestions by a few that PHANS needs to increase its visability and presense and influence in the community and health system by working with other groups and organizations. Affordable housing, environmental health, injury, chronic disease prevention, using the public health capacity framework and accountability framework or a focused activity on early childhood development were also suggested. Poverty was viewed as a key issue as was continuing to identify and work on policy based initiatives related to a determinants of health approach. While one can easily agree that all of these issues are important public health issues, the comments of one respondent provide a thoughtful conclusion "It seems unreasonable to add priorities when it is unclear how progress is occurring on the existing three; as well, each of those is important and requires significant effort."

Renewal of Public Health

Not surprisingly, the renewal of public health in Nova Scotia rated highest in terms of interest by 94% (33/35) of the respondents. Public health workers across Nova Scotia are keenly following the implementation of recommendations made following a 2005 independent review of Public Health Services in Nova Scotia. However, fewer than half of the respondents rated their understanding of the issue as very good or good, suggesting that PHANS has a role to provide more regular information to members about this unfolding process.

Early child education and care

Interest in exploring ways to support policies that ensure the sustainability of early child education and care in Nova Scotia was rated quite high by over 70% of respondents. However, only a little over 30% felt they had a good/very good understanding of the issue. This priority was selected by PHANS in 2006 in response to the federal government failing to contine to support a National Child Care and Education Program. Gaps were also identified in Nova Scotia's child care and education programs and efforts begun to work collaboratively with other groups and organizations with similar interests. This work continues. The low understanding level among respondents indicates that PHANS needs to provide more regular information to members about this issue as well.

Atlantic Collaboration

Exploring for opportunities to collaborate with the PEI, NB and NL Public Health Associations was not well understood by over 50% of respondents, but the level of interest was quite high – 66% rated their interest as mid-high to high. This is a long-term ongoing initiative. PHANS has much in common with the Public Health Associations in New Brunswick, Prince Edward Island and Newfoundland Labrador including small memberships and limited resources. Coming together to work on common issues is often a good way to build a foundation for future collaboration. There are no issues being pursued at this time. The low understanding of respondents indicates that PHANS needs to inform and educate the membership about any related actions or potentials to collaborate.

VII. CONCLUSIONS

This survey collected input from members regarding their reasons for joining PHANS, their expectations of PHANS, their involvement in PHANS, their satisfaction with the PHANS communication initiatives in place for members, and their understanding and level of support for the priority actions of PHANS. There was a very good response to the survey – 35 of 70 (50%) members on the PHANS list serve participated. A rich range of feedback from respondents has been collected that will provide invaluable guidance to the Board and the Membership Committee in their efforts to maintain and enhance an active and involved membership. The following is a summary of the conclusions and recommendations eminating from the survey findings.

A. Member involvement

Survey respondents have told us:

- They joined PHANS because they were interested in public health issues and wanted to support and be involved in the work of PHANS; that they are seeking networking opportunities or ways to keep up to date about issues of public health in Nova Scotia; and that they believe in public health.
- They are appreciative of the work that PHANS is doing with its limited resources and no staff.
- Their expectations are being met reasonably well by PHANS but more could be done to meet their expectations.
- They would like PHANS to provide more educational opportunities for members.
- They would like PHANS to be more visable to members and the public about what it is doing.
- They would like to be more involved in PHANS (63% of the respondents were dissatisfied or very dissatisfied with their level of involvement in PHANS) but:
 - they find it difficult to participate in PHANS actiities if living outside of Halifax;
 - they do not have the time to be more involved suggesting that personal circumstances are often at the root of their lack of involvement; and,
 - that it is difficult to get engaged without "clear specific actions".

B. Member Communications

Survey respondents have told us:

- They appreciate the efforts of PHANS to communicate through its' newsletter, list serve and website, but PHANS could enhance or improve communications for members.
- The newsletter is the most popular communication strategy.
- They want the newsletter sent out more often.
- They want the newsletter and list serve to focus more on current, up-to-date information about public health issues, events, member activities, priority policy issues, the actions being taken and how members can contribute.
- PHANS needs a newsletter committee and newsletter editor.
- Only a little over half of the survey respondents always or usually read the list serve.
- A small number of members struggle to understand computer language and how to use the technology.
- "Members only" is the least popular communication strategy used by PHANS members because they lack time or interest and may experience technical challenges.

C. PHANS Priority Actions

Survey respondents have told us:

- They have a high level of interest in and support continued action on the three priority action areas identified by PHANS -- the renewal of public health, early child education and care and Atlantic collaboration.
- They would like to be better informed about the three priority action areas identified by PHANS and know how they can contribute.

VIII. RECOMMENDATIONS

In keeping with the feedback provided by the survey respondents, PHANS should give serious consideration to taking action on the following recommendations:

- Inform members that the survey is complete and provide them with a copy of the Executive Summary via the PHANS list serve and indicate that the complete survey report is available on the PHANS Website.
- Post the complete survey report on the public section of the PHANS Website in pdf format.
- Initiate a discussion with members about the findings, conclusions and recommendations on the "members only" discussion board of the PHANS website (Ask the members what they think PHANS should do, given the survey results, and particularly, given the qualitative responses).
- Recruit a Newsletter Committee and editor/co-editors.
- Reexamine the role, mandate and purpose of PHANS to syncronize with the needs and expectations of it's members.
- Provide more continuing education and networking opportunities for members.
- Regularly inform and educate the membership about PHANS' activities and the three priority action areas and provide more specific ways for members to be involved.
- Identify opportunities to share information with members and the public about public health in Nova Scotia.
- Identify innovative, time-efficient ways that enable members with limited time, or living outside metro, to be more involved and make a greater contribution to the organization.
- Seek ways to attract and retain and actively engage members i.e., use modern technology to its advantage by providing opportunities for member participation in board and committee meetings by teleconference and other technical means such as webcam.
- Consider changing the time of the board meetings, to reduce the conflict between work schedules and meeting times.
- Consider ways to reduce or alleviate the technical challenges that members may experince using any of the communication tools associated with PHANS.

APPENDIX

The Public Health Association of Nova Scotia (PHANS)

Member Survey Report

May 23, 2007

Q.1.a. How often to you read the list serve?

Rate	Number(n=35)	Percent
Always 1	8	23
Usually 2	11	31
Rarely 3	9	26
Never 4	7	20

Q.1.b. What more would you like to see on the list serve? (*=one individual response. Most respondents' spelling errors are corrected.)	n=35
***********No Comment	14 – no comment
 ♦Not more than it currently provides. Current info is important and relevant, especially notices of upcoming events and initiatives &/or emerging public health issues. ♦Nothing. ♦what is there is fine. ♦No suggestions.It's fine. ♦???. ♦Currently it meets my needs but there may be additions that would be helpful, but I cannot identify what they might be. ♦sufficent now for my purposes. ♦N/A. ♦I plan to start checking list serve. (Can't really suggest anything right now.) ♦There has been a challene accessing information - I will start to use it more. 	10 – Don't know/OK as is/no suggestions
 ❖Current up to date information regarding issues that affect Public health. ❖more information on issues on public health. ❖am fairly new to it, so i can't really say. i like the information about events, and i like the opporutniyt to have discussions about issues of shared intertest; ❖Individual member's activities that may interest other PHANS members ❖I am so many listserv I really only look to PHANS for NS public health news/events ❖Less cross posting with other list servs. Updates about public health events in Nova Scotia ❖Identify the policy issues that are of priority; what actions are being taken and how members can contribute 	7–information about public health issues, news, events, member activities
 ❖When you say Listserve I am assuming you are refering to the forums. I registered the other day and found that there are only postings rather than replys. I guess there is no controversy and discussion in public health (smile!); ❖I do not even know what a list serve is. There is so much terminology out there. I have only in the last few years even used a computer. I need help in terms of being friendly and helping me know what list serve is and how it would benefit me in using a list serve. ❖I joined PHANS last spring so haven't a firm idea of how the list serve functions 	3– unclear about what is meant by a list serve
❖I don't think I'd use it no matter what was included	1- does not use

Q.2.a. How often do you read the newsletter?

Rate	Number(n=35)	Percent
Always 1	13	37
Usually 2	12	34
Rarely 3	4	11
Never 4	6	17

Q.2.b. What more would you like to see in the newsletter? (*=one individual response. Most respondents' spelling errors are corrected.)	n=35
**************************************	22- no comment; don't know; no suggestions.
 No suggestions - it's fine too. Not more than it currently provides. Current info is important and relevant, especially notices of upcoming events and initiatives &/or emerging public health issues. I am fine with the content the way it currently is. I like it as it is now. If it was too long, I wouldn't read it! 	4- fine as is
 ❖info about events is good. I also like content disucssions. Tips for improving your practice (whatever that may be) ❖I would simply suggest a snapshot of important PH issues and how members can become involved. ❖Identify the policy issues that are of priority; what actions are being taken and how members can contribute ❖Injury control issues for NS 	4—information about public health issues, news, events, member activities
❖I think it would be really good to have a separate editor for the newsletter. It needs to be a position on the executive a stand alone not an add on for someone on the executive. The individual could use a little team to pull together ideas for newsletters to draw on activities happening throughout the province to show case some great public health initiatives. This would encourage having reps from throughout the province. ❖I would like to see a newsletter committee with a newsletter editor. I think feature SHORT articles would be of interest and opinion pieces could add some energy/discussion/interaction with Board members. I do realize it is not easy to get people to add one more thing to very busy schedules. This idea may not be practical.	2- an editor and a committee would help
 ♦ I've never seen it! ♦ Not sure if it is a hard copy or only available on line. 	2- may not have seen it
♦more of them. there was only one last year	1- send more often

APPENDIX

Q.3.a. Have you signed up for the members only site?

Rate	Number(n=35)	Percent
Yes 1	16	46
No 2	19	54

Q.3.b. Have you signed up for the Members only site? If not, why not? (*=one individual response. Most respondents' spelling errors are corrected.)	n=35
*****************No Comment *N/A	20 – no comment/N/A
♦lack of time;	
❖Toooooo Busy, overworked!!	
♦Time; will do so;	
❖ no time;	
♦No time to read another site	
❖I receive the health promotion Claeringhouse info and find it quite complete. i don't	
have time to read any additional info;	
♦Because I am trying to reduce information overload - and while one impolrtant site	
doesn't sound like much, it is one way I can control my time;	
♦ Why? I don;t have time or really a reason to go there. I assume that anything of	
importance will be communicated via list serv.	8 – no time
haven't felt the need;	
♦ It has not been a priority	1,
♦hadn't occured to me;	3- no need/interest
❖uncertain of password ;	
♦I am not savvy with the electronic thing.	2- technical issues
♦Didn't know about it;	
♦ Wasn't aware that I could;	2- not aware

Q.4. Do you have any additional comments regarding PHANS member communications? n=35 (*=one individual response. Most respondents' spelling errors are corrected.)		
***** No. *Not at this time.	21- no comment/no/not at this time	
 ♦ Well done. ♦ Well done. ♦ Appreciate the work. ♦ I appreciate what you are doing to keep members informed. ♦ It provides a very broad range of public health concerns and awareness ♦ It continues to be difficult to participate in person. I appreciate the opportunity to be involved through email communication, teleconferencing. ♦ The communication I feel is excellent and it looks like there is a lot of effort put into it. The problem is on my end and getting connected. ♦ Thanks for sending me this surveyI will try to use the site . ♦ I feel that I can access information easily from the website.I always try to attend the AGM. ♦ It is really nice to have the bookmarks and the poster board now to get the word out to potential members. It would be really important to communicate to the members and others what PHANS is doing in the priority areas. Members need to know what we are doing and have the opportunity to give us feedback. I am sure this is where the list serve would come in handy if more of us knew how to use it. I little tutorial on the use of list serves would be helpful. List Serves for Dummies so to speak. 	10- well done/appreciated	
 ♦Be clear and concise about activities; less about plans and more about doing ♦Members should learn how to reply to sender as opposed to reply all ♦There needs to be a way to engage members through communications. communications need to be relevant and timely 	3 -suggestions	
♦ Can they be combined with HPC? (Health Promotion Clearing House)	1- question	

Q.5.a. Rate your level of understanding of how PHANS is supporting the renewal of Public Health Services in Nova Scotia.

Rate	Number(n=35)	Percent
Very good 1	7	20
Good 2	8	23
So-so 3	16	46
Fair 4	2	6
Poor 5	2	6

APPENDIX

Q.5.b. Rate your level of interest in the renewal of Public Health Services in Nova Scotia.

Rate	Number(n=35)	Percent
High 1	28	80
Mid-high2	5	14
Neutral "so-so" 3	0	0
Mid-low 4	1	3
Low 5	1	3

Q.6.a. Rate your level of understanding of how PHANS is exploring ways to support policies that ensure the sustainability of early childhood education and care in Nova Scotia.

Rate	Number(n=35)	Percent
Very good 1	3	8
Good 2	8	23
Neutral "so-so 3	11	31
Fair 4	6	17
Poor 5	7	20

Q.6.b. Rate your level of interest in exploring ways to support policies that ensure the sustainability of early childhood education and care in Nova Scotia.

Rate	Number(n=35)	Percent
High 1	15	43
Mid-high 2	10	29
Neutral "so-so" 3	0	0
Mid-low 4	7	20
Low 5	3	8

Q.7.a. Rate your level of understanding of how PHANS is exploring Atlantic collaboration with the PEI, NB and NL Public Health Associations.

Rate	Number(n=35)	Percent
Very good 1	1	3
Good 2	2	6
So-so 3	14	40
Fair 4	12	34
Poor 5	6	17

Q.7.b. Rate your level of interest in exploring Atlantic collaboration with the PEI, NB and NL Public Health Associations.

Rate	Number(n=35)	Percent
High 1	10	29
Mid-high2	13	37
Neutral "so-so" 3	0	0
Mid-low 4	7	20
Low 5	5	14

****** No Comment	14 – no comment
♦I think these priorities are enough for now; ♦priorities as stated are good ♦It seems unreasonable to add priorities when it is unclear how progress is occurring on the existing three; as well, each of those is important and requires significant effort.	3 – OK as is
❖Poverty, addressing this issue is timely and would also fit nicely with early childhood development; ❖Addressing disparities	2 - poverty
♦None.I think that the renewal of PH will be a large area to focus on. ♦I would like to see more involvement with the formal public health system. For example what the government is doing to improve public health services and how agencies outside the government can work with them. ♦keep few priorities and focus - the renewal piece is important and members need to see that PHANS continues to be watching the implementation process	3- renewal
♣Activities that make us more visible in the communitysuch as being a PHANS representative on other local/provincial committees. ♣Ways to work with public advocacy health groups for more direct input on alternative and complementary health care services Perhaps continually evaluating how other countries intregrate alternative, complementary health care, could be included in first line of health prevention. ♣I think it is important to find out from within the Public Health System and within the broader community are the key issues. What does the evidence tell are some of the key public health issues? At present there are a number of public health strategies unfolding in Nova Scotia it would be good for PHANS to be more intune with those strategies- ie Alcohol strategy. Healthy Eating Strategy. etc. What is our role in the Common Wealth and Canada Games? How do we ensure that we ask the right questions of the organizers and look out for the overall public healths interests for the long term not just through the time the games have gone on.The Public Health Association might want to consider what BC has done to raise questions with the Winter Olympics coming to Vancouver.	3 – community presence
❖Support for the Centre at St. F.X determining how to develop relationships with staff there; ❖Continue working on policy-based initiatives to support a determinants of health approach in NS	2 – determinants of health
♦chronic Disease prevention increasing piblic awareness around CDP	
use of the public health capacity framework and accountability framework	
♦ affordable housing;	
❖Injury control esp in 16 to 24 year male cohort	
I have worked for many years in Public Health in NL and the Public Health system is an excellent working model.	Renewal?
♦improving practice in general for people/organizations with an interest in public health	Renewal?
❖From an early childhood perspective, a focused activity would be of great benefit.	

APPENDIX

Q.9.a. Are you satisfied with your level of involvement with PHANS?

Rate	Number(n=35)	Percent
Very satisfied 1	8	23
Satisfied 2	5	14
Neutral "so-so" 3	0	0
Dissatisfied 4	13	37
Very dissatisfied 5	9	26

	n=35
Q.9.b. Please comment on your satisfaction rating regarding your level of involvement. (*=one individual response. Most respondents' spelling errors are corrected.)	
◆◆◆◆◆◆◆◆◆◆ No Comment– ◆N/A	14 – no comment/N/A
 ♦I am too busy and would like to be more engaged. ♦Presently haven't the time to commit more, as I have been traveling abroad for graduate studies. ♦Used to be more involved - too busy now to keep up beyond reading the listserv ♦appreciate teh work that volunteers do. I don't have the time to commit, but appreciate efforts of those who work for PHANS on a voluntary basis ♦I would like to become more actively involved in PHANS (e.g., board), however, work & home responsibilites prevent me from contributing in this way at this time. I hope to become more actively involved in future years. ♦I feel that I should be more involved but personal and professional commitments have to be my first priorities at this time in my life. I hope in the future this will change and I can become more involved because I believe in the organization ♦I would like to be more involved and feel that I should be; however with existing work schedules, family commitments and living outside of metro, it is difficult ♦I am in a new professional role and work is taking up much of my time at the moment. I am very interested in Public Health and happy to see the Association of NS. ♦I find that I don't have the opportunity to partake in the various PHANS events/issues; unable to coordinate involvement in PHANS with my current employment situation ♦Work priorities require me to put the association lower. ♦Unable to attend Board meetings, due to other commitments. Between Board meetings. members seem mostly to follow their own agendas (which are important). ♦I guess too many "things" are going on at too many times. I tend to see PHANS at meetings etc. as either an unattended display board or a bookmark etc in a meeting package. ♦I am as involved as I am able to be with work demands and other volunteer activies I 	12 – lack of time
am involved in. I do not live in the city and therefore I am able to be involved through teleconference call meetings to contribute so it works for me. I was very involved with PHANS (e.g. Board member) years ago but when I moved outside of Halifax I became disengaged. There does not seem to be a critical mass outside Metro to maintain regional involvement. I am not aware of efforts to try to hold events outside of Halifax. I would like to be more involvedliving outside the city is a challenge and hard to committ to more active involvement, although I would consider it in the future." I am involved when appropriate. My level of involvement is very satisfactory. I like to keep informed about PHANS activities. I sat on the board for a few years and enjoyed my time there.	3 – difficult as lives outside metro 3 -satisfied
❖I take full responsibility for my lack of satisfaction. ❖It is difficult to be engaged without clear specific actions. ❖I'm still learning, so I hope to become more involved as I learn more,	

Q.10. Why did you join PHANS? (*=one individual response. Most respondents' spelling errors are corrected.)	n=35
❖❖❖❖ No Comment	4 – no comment
♦To keep up-to-date on current & emerging initiatives in public health in NS, as well as	
across Canada.	
❖To keep up to date with public health issues in the province.	
♦Because I need to find out about what it does!	4- to keep up to date
♦To learn what was going on in public health.	about PH in NS
♦I believe in its principles and values; ♦Believe in it.	4- belief in Public
♦years ago - belief in public health; ♦committed to Public Health reform.	Health
❖To support Public Health in Nova Scotia, to influence the development of	
government/non-government policies which support health and to remain current	
regarding Public Health and Public Policy issues.	
♦to be informed/involved and support Public Health.	
♦I am working in Public Health Services and want to be informed and support this	
professional organization as best I can.	
♦ Hoping by my membership fee, some of the work can continue to be supported	
♦ to be engaged in public health issues within the province, to help make a difference	
♦Interest of the issues, a passion for Public Health, staying connected, getting the	
journal.	
♦to support the organization's work. to be in the loop.	
♦support changes required for Public Health Renewal, information.	12– interest in the
♦Information connection.	issues, wish to
♦Because I had an interest in PUblic Health and now I work in Public Health.	support and to be
♦Because of interest in public health renewal and population health issues.	involved in the work
❖interested in public and community health issues.	of PHANS
♦ I thought it would be a good opportunity to have contact with other public health	
professionals in Nova Scotia.	
♦Important network for my practice.	
♦I am a public health practitioner and this gives me more opportunities to advocate.	
♦ Because I work in Public Health and thought I should join - opportunity to learn and	
network.	
♦ I was looking for a professional association related to my field of work. I also liked	
that PHANS is open to members outside of those working directly in public health. The	
opportunity for a broader range of members expands the level of expertise in the	
organization and broadens the scope for activity. ♦Have a great interest in how the alternative, complementary health professions such	
· · · · · · · · · · · · · · · · · · ·	
as my profession of Homeopathy is viewed, as being affordable to the public.Many people moving to Canada from overseas had a family homeopath therefore seek one in	6– networking
Canada.	opportunities
	оррогились
Thirty years ago I joined CPHA. I was active in both the NWT and BC branchs. I left	
Canada for a number of years and have been in NS for approx. 12 years. This is the	
first year I have joined PHANS. It has been relatively invisable.	ļ
❖I joined CPHA and thought it would be a good idea to get involved provincially but	
have not found the time to make that committment.	
♦I have been a member for several years ever since I became a CPHA member.	
♦I am as involved as I am able to be with work demands and other volunteer activies I	
am involved in. I do not live in the city and therefore I am able to be involved through	
teleconference call meetings to contribute so it works for me.	
♦2 years ago	
,	
	1

Q.11.a. Is PHANS meeting your expectations?

Rate	Number(n=35)	Percent
Most of the time 1	6	17
Almost all of the time 2	12	34
Neutral "so-so" 3	0	0
Some of the time 4	13	37
None of the time 5	4	11

Q.11.b. Please comment on how PHANS is or is not meeting your expectations. (*=one individual response. Most respondents' spelling errors are corrected.)	n=35
************* No Comment	15 – no comment
 ❖PHANS does an amazing amount of work on the backs of volunteers. But we need staff to really make a big impact. ❖I think PHANS does extremely well with its limited resources. By focusing on policy, PHANS had been able to have a real impact. ❖PHANS doing as much as possible with few resources and busy people ❖Apprecaite what PHANS is doing - and very much appreciate the commitment of the volunteer Board and Committee members acting on behalf of the membership ❖I think over the last two years in particular PHANS has really been trying to reach out and get more folks involved in current Public Health Issues. We need to continue to go down that path and get further committment from others who have a passion for public health both within the formal public health system and in the community and corporate sector. ❖appreciate involvement of PHANS in key public health issues, appreciate the communication link the association provides ❖I like the information-sharing opportunities and the various levels of committment available to members ❖It is helpful to receive emails about events that are happening around Public Health as well as obtaining other useful public health information. 	8 – appreciative of PHANS and what it is able to do with limited resources—i.e.,focus on policy, efforts to involve members, provides information and communication opportunities
❖I think it works both ways. Members have to learn more about what PHANS can do, and PHANS has to be more visible. ❖*Perhaps it is because of my newness to the org., but there doesn't seem to be a visability factor within certain fields of public health (environmental health for instance) ❖It is difficult to be involved. I would become more involved if I could meet with local members around PH issues that had implications for population health priorities in my community and region. ❖Being outside of metro makes it difficult to "actively"participate.	2- PHANS needs to be more visible 2 – harder to participate in PHANS if living outside of Metro
❖this is a hard question to answer, it depends on the situtaion and my standards are high. would like more people to be actively involved ❖I do not find there is enough participation of the front line workersPHS professionals that are working with the public. There is also a poor understanding of Public Health in the general population which makes it difficult to advocate with groups that would be supportive.	2- more active participation needed

Q.11.b. Please comment on how PHANS is or is not meeting your expectations. (*=one individual response. Most respondents' spelling errors are corrected.)	continued
 ♦I would like to see more speakers on what is going on in public health. ♦I would like to see a robust organization which could take on more public education initiatives and be more involved in the professional education of public health providers ♦need to learn more about the association. 	3 – more focus on education
PHANS seems to be a useful meeting place for workers in the field of public health, but with little evidence of coordinated activities, probably because everyone is fully occupied elsewhere.	
I'm not sure how much power PHANS has at the governmental level. I see it more as an information-sharing group and an opportunity for like-minded individuals to meet and discuss items of interest.	
♦ This is not a good question. Expectations are reciprocal. It is unreasonable to set up an expectation that PHANS cannot meet. Again, clear, concise action oriented communication about the three priorities can help me decide where my volunteer efforts can best be served.	

APPENDIX

Q.12. If your profession was not on the previous list, what is your profession? (*=one individual response. Most respondents' spelling errors are corrected.)	n=35
Public Health Dental Hygienist	1 (3%)
Public Health Educator	1 (3%)
 ❖Public Health Inspector. ❖Perhaps this is the issue. The titles, roles etc. have changed over time. I was trained as a public health inspector over thirty years ago. Now I would call myself an environmental public health professional. Public health inspection is a very, very small space on the environmental public health spectrum. ❖Environmental Inspector (I am a certyified Canadian Public Health Inspector as well though). 	3 (9%)
Public Health Manager	4 (11%)
Public Health Nurse	5 (14%)
Public Health Nutritionist	1 (3%)
Public Health Physician	
Student	2 (6%)
**************************************	17 (49%)– other