



**CPHA  ACSP**

CANADIAN PUBLIC HEALTH ASSOCIATION  
ASSOCIATION CANADIENNE DE SANTÉ PUBLIQUE

CANADIAN PUBLIC HEALTH ASSOCIATION  
**2016 Annual Report**

In January 2016, CPHA announced its five-year Strategic Plan with six interlinked strategic goals that will be a guide for the coming years. This positions CPHA to be stronger, more resilient and focused on the issues of the day, while maintaining its vigilance on issues of concern to the public health community. CPHA continues to address important policy and advocacy issues; most recently, positions were developed on cannabis policy reform, the opioid crisis in Canada, the phase-out of coal-fired power plants, early childhood education and care, and medical assistance in dying. The Strategic Plan helps the Association to maintain focus on issues that are relevant, important and timely and yet have impact on health equity, population health and the public health system. The goals embolden the Association to convene partners to achieve common goals, to maintain a dynamic and engaged membership, and to remain financially sustainable.

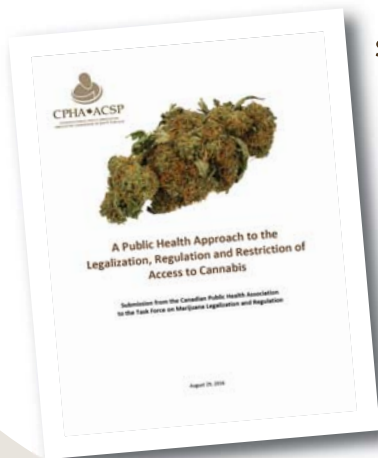


## CPHA inspires and motivates change in support of health equity

The pursuit of good health and health equity is a continual process of creating opportunities and putting into place the socio-economic, ecosystem, political and structural means to support their attainment. CPHA is committed to sustained action that leads to improvement in health equity in partnership with other organizations. In 2016, the Association began the development of a sex- and gender-based analysis policy and also began exploring how it can meaningfully, respectfully and effectively engage with Indigenous communities to ensure that its evidence-informed policy alternatives, advocacy activities and other practices support Indigenous communities to achieve their desired health outcomes.

## We are the voice for public health in Canada

As the only national public health association in Canada, we champion a public health perspective on important public policy discussions that impact the health and well-being of Canadians. Major efforts in 2016 centered on substance use, health and the environment, healthy childhood development, and healthy living.



### Substance use

#### *Cannabis legalization and regulation*

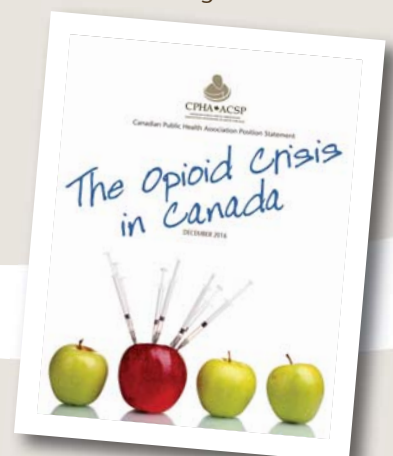
Prime Minister Justin Trudeau's election platform included a promise to legalize, regulate and restrict access to cannabis. A starting point in the process was the creation of a federal Task Force on Cannabis Legalization and Regulation. CPHA actively provided input through media interviews, participation in an invitational roundtable, and a formal Task Force submission. The final Task Force report reflected many of CPHA's concerns and represented a public health approach to the issue, balancing the desire of Canadians to legally consume cannabis products while reducing the harms associated with such consumption.

#### *A public health approach to cannabis*

CPHA has been funded by Health Canada, through the Substance Use and Addictions Program, to undertake a project entitled "A public health approach to cannabis (and other substances): Prevention, health promotion, surveillance and capacity building". To support a public health approach to cannabis (and other substances), CPHA is engaging a range of individuals and organizations from the health, public health and social service communities to enhance their knowledge of, and capacity to address issues related to cannabis and other substance use. Overall, CPHA hopes to facilitate increased collaboration among health and social service providers involved in preventing problematic cannabis use and reducing related harms.

#### *The opioid crisis in Canada*

There is an expanding opioid crisis in Canada that is resulting in epidemic-like numbers of overdose deaths. The traditional criminal justice approach to managing this situation has failed to reduce the death toll and needs to be supplemented with an enhanced and comprehensive public health approach. Such an approach includes the meaningful involvement of people with lived experience. Through the publication of a position statement, letters to Parliamentarians, and media outreach, CPHA called



on the Government of Canada, in partnership with provinces, territories, municipalities and Indigenous peoples' governments to expand current efforts to manage this crisis.

On December 12, the government introduced Bill C-37, "An Act to amend the Controlled Drugs and Substances Act and to make related amendments to other Acts". CPHA commended the Government for this move as it represents actions on a number of key recommendations included in the Association's position statement on the opioid crisis.

## Health and the environment

### *Accelerated phase-out of coal-fired power plants*

CPHA, in collaboration with the Canadian Association of Physicians for the Environment (CAPE) and the Pembina Institute, called on the Government of Canada to accelerate the phase-out of coal-fired power in Canada. A national coal phase-out by 2030 would prevent over a thousand premature deaths across Canada and result in billions of dollars in health benefits, according to a new report from the Pembina Institute and a coalition of health and environment organizations, including CPHA.

### *Ban on asbestos*

CPHA applauded the Government of Canada for its decision in December to implement a comprehensive ban on asbestos and asbestos-containing products. After years of evidence-based advocacy by CPHA and a wide range of stakeholders, asbestos and asbestos-containing products will be banned in Canada by 2018. Finally, the health and safety of Canadians is being put ahead of the interests of the asbestos industry.

## Healthy childhood development

### *Early childhood education and care*

Early childhood education and care plays an important part in healthy childhood development and provides valuable support to families with young children. Launched in June, CPHA's position statement on early childhood education and care calls on the Federal government to work with provinces and territories to establish a pan-Canadian early childhood education and care strategy.

### *Access to unstructured child-led play*

Play is the business of childhood. Without child-led, unstructured play children will be less resilient as they age. CPHA, in partnership with Ottawa Public Health and Saskatchewan *in Motion*, are being funded by The Lawson Foundation to develop strategies that could increase opportunities for play where children can follow their own instincts, ideas, and interests without a defined purpose. With the guidance of an Advisory Committee, the work focussed on conducting environmental scans to develop research summaries on the key issues and barriers limiting children's access to play. Topics include parental perceptions, playground injury statistics, and a review of Canada's Acts (Occupier's Liability, Day Care, and Education) and tort law, and their influence on the legal cases concerning injuries suffered during play. Additional issues being investigated include school recess and related policies, definitions of risk management, and the child-friendly city movement.

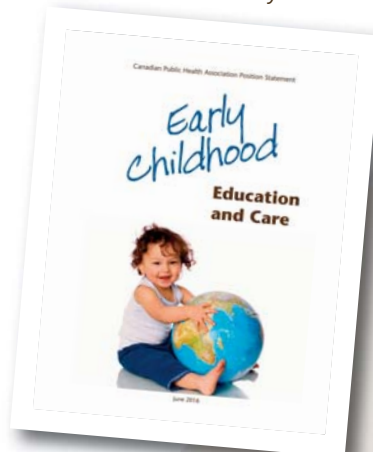
## Healthy living

### *Sexually transmitted and blood-borne infections (STBBIs) and related stigma*

CPHA has long been involved in sexual health efforts and has established relationships with health service organizations, sexual health centres, and public health units from across the country. Since 2010, CPHA has been involved in developing resources for front-line health and social service providers with the aim of enhancing STBBI prevention and reducing stigma associated with STBBIs. In 2016, we conducted a series of ten pilot workshops with a total of 254 participants attending the workshops. The objective was to pilot the content from the two workshops: 1) Moving Beyond the Basics: An Advanced Workshop about Sexual Health, Substance Use, STBBIs and Related Stigma, and 2) Challenging Organizational Stigma: A Workshop to Assist Organizations Critically Assess STBBI-Related Stigma and the Provision of Safe and Respectful Services. CPHA also hosted a series of webinars in 2016 to increase understanding of stigma as well as sexuality and/or

The **Public Policy Committee** assists in identifying issues, suggesting priorities, developing options and providing recommendations to the Board regarding CPHA policy positions. Its members included:

- ✦ Ardene Robinson Vollman, Board Chair (Chair)
- ✦ Ian Culbert, Executive Director
- ✦ Suzanne Jackson, Board Chair-elect
- ✦ Miranda Kelly, Member-at-Large
- ✦ Lynn McIntyre, Member-at-Large
- ✦ Jim Mintz, Board Member
- ✦ Eric Young, Board Member



substance use more broadly. As part of this webinar series, we invited the public health community to share their knowledge and expertise on reducing STBBI-related stigma. Topics included an advanced discussion about STBBIs and stigma, stigma and syndemics as drivers of recent syphilis infection among gay and bisexual men, and reducing STBBI-related stigma through the protection of privacy and confidentiality.

### *Medical assistance in dying*

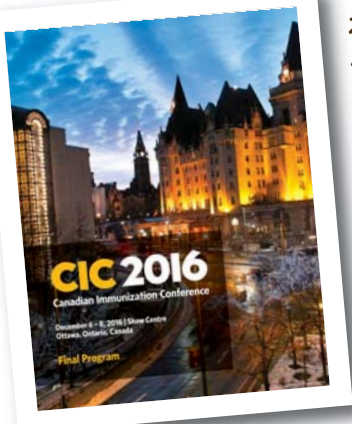
In April, CPHA's Board approved a position statement that underscored the need for decisions regarding medical assistance in dying to be based on the best available medical information for each case and the moral and ethical concerns of both the person requesting assistance and the health professional(s) providing the service.

## **Convening partners to identify solutions**

CPHA works with various partners and stakeholders to support the development and dissemination of public health initiatives and evidence-based policy alternatives. This work is accomplished through both bilateral (one-on-one) and multilateral (networks) relationships with like-minded, traditional and non-traditional partner organizations.

### **Public Health 2016**

The annual gathering of public health professionals, researchers, policy-makers, academics, students and trainees hosted by CPHA in collaboration with an ever-growing number of collaborators was another huge success, with 855 delegates (23% of whom were CPHA members). A remarkable 92% of participants indicated that their personal learning needs were met. This year's program included four plenary sessions, over 45 panel and workshop sessions, over 300 oral and poster presentations, and a variety of networking events. With an overwhelming response to the Call for Abstracts – over 575 submitted – the quality of research was exceptional. Sara Kirk, Scientific Chair, helped ensure the excellent quality of scientific presentations.



### **2016 Canadian Immunization Conference**

Approximately 815 participants gathered at the Canadian Immunization Conference in December in Ottawa. The conference featured four plenaries, 15 symposiums, seven workshops, 50 oral presentations, over 125 posters, and four co-developed learning activities. This high-calibre event brought together experts from across Canada and around the world to share and learn about immunization research excellence, advances in surveillance, programs and practice and the latest in policy innovations. CIC 2016 was hosted by CPHA in collaboration with the Canadian Association for Immunization Research and Evaluation, the Canadian Paediatric Society, and the Public Health Agency of Canada.

### **Canadian Journal of Public Health**

CJPH published six issues in 2016, including a supplement on Retail Food Environments in Canada and special sections on Epidemiology (Vol 107, No 1) and Global Health (Vol 107, No 4-5).

#### *New CJPH editorial policy related to sex and gender*

In an effort to close the knowledge gap in relation to the implications of both sex and gender in the public health research evidence base, the CJPH adopted an editorial policy requiring authors to ensure that their manuscripts speak to these concepts, where applicable. In keeping with the international trend in sex and gender reporting in health research, the aim of this policy shift is for CJPH to continue to advance excellence in the field of public health research, policy and practice in Canada and internationally.

The **CJPH Editorial Board** is responsible for supporting the development and the quality of the Journal. Its members included:

#### *Editor in Chief*

✦ Louise Potvin

#### *Senior Editors*

✦ Pierre Ayotte

✦ Linda Dodds

✦ Trevor Hancock

✦ Thierry Lang

✦ Jeff Masuda

✦ Lindsay McLaren

✦ Eric Mykhalovskiy

✦ Janet Smylie

✦ Paul Villeneuve

✦ Reg Warren

✦ Christina Zarowsky

# CPHA represents the public health community's interests in public health system renewal

As the only national, non-governmental organization focused exclusively on the broad range of public health issues and practices, CPHA is uniquely positioned to advise decision-makers on and advocate for public health system reform in support of the public health community's interests. In order to preserve, renew and strengthen the public health system and practice, CPHA collaborates with a wide range of public health organizations in the accomplishment of this goal.

## A dynamic and engaged membership

CPHA's membership is the Association's strength and spirit. By providing expert advice, they give CPHA credibility, direction and authority. In return, the Association represents their interests on critical and strategic public health issues that impact Canadians and also provides an important forum for discussion and debate. In 2016, CPHA's members demonstrated their commitment in so many ways:

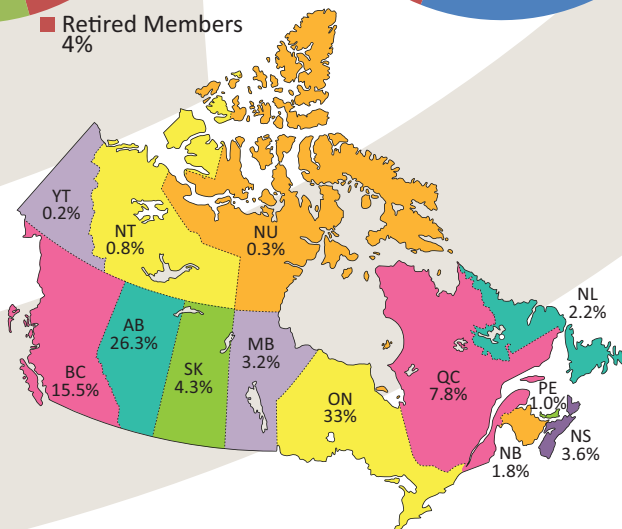
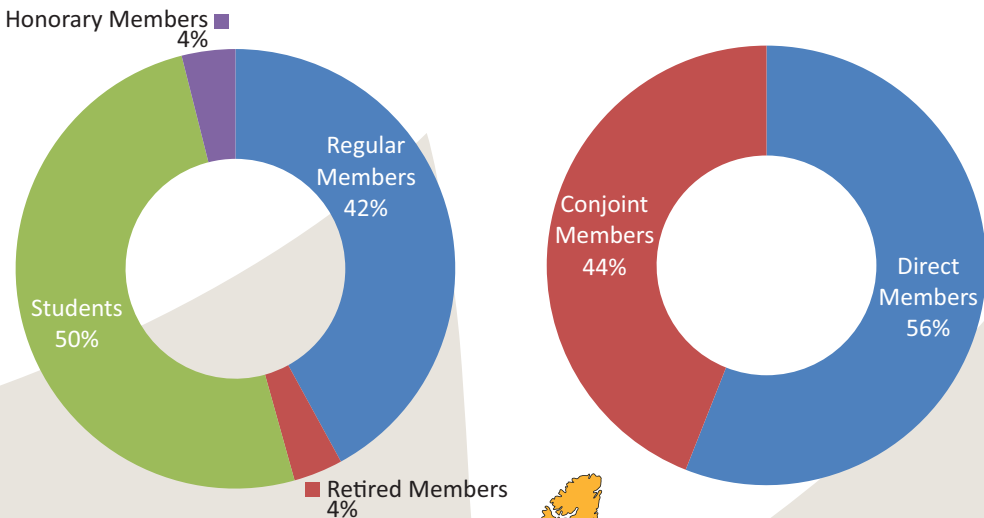
- ✦ The call for nominations resulted in 12 highly-qualified candidates for four positions on CPHA's Board of Directors.
- ✦ Over 60 positions on CPHA's committees and working groups were filled by members who volunteered over **973 hours** of their time – a truly priceless contribution.
- ✦ A total of **320 members** registered for four webinars in the *A Career in Public Health – Shaping Your Future* webinar series. Evaluation feedback for the webinars has been overwhelmingly positive.
- ✦ Four hundred and nine (409) members responded to two member surveys sent in 2016, providing the Association with valuable and constructive feedback that will be used for quality improvement.

The **Membership Working Group** assists in mapping the way forward and identifying strategies to achieve the strategic goal of having a dynamic and engaged membership. Its members included:

- ✦ Hope Beanlands, Member-at-Large
- ✦ Ian Culbert, Executive Director
- ✦ Halla Elmobayad, Member-at-Large
- ✦ Adam Ladak, Member-at-Large
- ✦ Jim Mintz, Board Member
- ✦ Jane Underwood, Member-at-Large

## Membership by the numbers

On 31 December 2016, CPHA had 1,268 members:



## 2016 Board of Directors

The Board of Directors are elected by CPHA members for a two-year term. Their complementary skills and professional backgrounds enable them to provide strategic leadership to the Association.

### Chair

- ✦ Ardene Robinson Vollman, PhD, RN

### Chair-Elect

- ✦ Suzanne Jackson, PhD, MSc, BSc

### Directors

- ✦ Annie Duchesne, MScPH
- ✦ Jacqueline Gahagan, PhD
- ✦ James Mintz, BA
- ✦ Manasi Parikh (Student Director)
- ✦ Ann Pederson, MSc
- ✦ Julie Stratton, BSc, MHSc
- ✦ Ingrid Tyler, MD, CCFP, MHSc, MEd, FRCPC
- ✦ Eric Robert Young, MD, BSc, MHSc, CCFP, FRCPC



## Honouring our outstanding members

Each year, CPHA honours individuals who, or organizations that, provide outstanding service to their community and profession. In 2016, CPHA was proud to bestow Honorary Awards on the following members and public health leaders:

### R.D. Defries Award

- ✦ Lynn McIntyre

### Honorary Life Membership

- ✦ Lydia Drasic

### Ron Draper Health Promotion Award

- ✦ Grand Chief Doug Kelly

### R. Stirling Ferguson Award

- ✦ iDAPT Centre for Rehabilitation Research, Toronto Rehabilitation Institute

### Dr. John Hastings Student Award

- ✦ Genèvieve Jessiman-Perreault

The **Honorary Awards Committee** supports the Board in recognizing individuals who and organizations that have made significant contributions to public health. Its members included:

- ✦ Jacqueline Gahagan, Board Member (Chair)
- ✦ Ian Culbert, Executive Director
- ✦ Marie des Anges Loyer da Silva, Member-at-Large
- ✦ Manasi Parikh, Student Board Member
- ✦ Ardene Robinson Vollman, Board Chair
- ✦ Ellen Wodchis, OPHA Representative

The **Nominating Committee** supports Board sustainability through succession planning and the implementation of a nominating process by which Board members are elected by the membership. Its members included:

- ✦ Suzanne Jackson, Board Chair-elect (Chair)
- ✦ Lilliane Bertrand, Member-at-Large
- ✦ Claire Betker, Member-at-Large
- ✦ Ian Culbert, Executive Director
- ✦ Jacqueline Gahagan, Board Member
- ✦ Manasi Parikh, Student Board Member
- ✦ Maura Ricketts, Member-at-Large
- ✦ Ardene Robinson Vollman, Board Chair

## Nomination Committee

The Nominating Committee makes a strategic contribution to the work of the Board and the Association by ensuring that candidates are individuals who can contribute significantly to achieving the goals of CPHA. In 2016, a roster of twelve candidates competed for four positions on the Board of Directors.

## Core financial activities

The Association made efforts to improve financial stability and resilience and undertook a number of activities to diversify its funding base. Notable increases in revenue were seen around projects, conferences, and National Office. The 2016 fiscal year ended with an excess of \$23,516, despite a planned deficit of \$68,197.

The complete 2016 financial statements, audited by OHCD LLP, are available at [www.cpha.ca](http://www.cpha.ca). Below are the Association's Statement of Financial Position and the Statement of Operations for the fiscal year ending December 31, 2016.

The **Finance Committee** supports the Association's operational planning and budgeting processes while developing and monitoring a long-term financial plan. Its members included:

- ✦ Annie Duchesne (Chair)
- ✦ Luis Caceres, Member-at-Large (until 2016-09)
- ✦ John Charalampopoulos, Chartered Accountant
- ✦ Beverly Milligan, Chartered Accountant
- ✦ Nancy Quattrocchi, Member-at-Large
- ✦ Julie Stratton, Board Member (from 2016-11)
- ✦ Ardene Robinson Vollman, Board Chair
- ✦ Ian Culbert, Executive Director

### Statement of Financial Position

	<b>2016</b>	<b>2015</b>
<b>Assets</b>		
Current		
Cash and cash equivalents	\$716,364	\$ 1,043,094
Accounts receivable	107,438	96,883
Inventory	25,748	27,740
Prepaid expenses	45,524	37,755
	895,074	1,205,472
Long-term Investments	204,495	204,495
	1,099,569	\$ 1,409,967
<b>Liabilities and Net Assets</b>		
Current		
Accounts payable and accrued liabilities	184,117	\$ 111,036
Deferred revenues	401,151	808,146
	585,268	919,182
<b>Net Assets</b>		
Internally restricted for contingencies and extraordinary services	425,000	425,000
Unrestricted	89,301	65,785
	514,301	490,785
	\$ 1,099,569	\$ 1,409,967

### Statement of Operations

	<b>2016</b>	<b>2015</b>
<b>Revenue</b>		
Projects and Conferences	\$1,945,098	\$1,639,015
National Office	743,572	\$380,887
Journal	159,284	\$166,845
Publication Sales	97,247	\$78,888
Investment Income	14,800	\$15,594
	\$2,960,001	\$2,281,229
<b>Expenses</b>		
Projects and Conferences	\$1,945,098	\$1,639,015
National Office	783,443	\$685,878
Journal	146,408	\$153,808
Publication	61,536	\$69,481
	\$2,936,485	\$2,548,182
<b>Excess (deficiency) of revenues over expenses</b>	\$23,516	(\$266,953)

**Our Corporate Partners**

CPHA gratefully acknowledges the following corporate supporters for their outstanding contributions to public health in Canada:

**Presenting Partner**

- ✦ Merck Canada Inc.



**Public Health Champion**

- ✦ Astra Zeneca
- ✦ Novartis Vaccines
- ✦ Sanofi Pasteur



**Friends of Public Health**

- ✦ Pfizer Canada
- ✦ Schulich Interfaculty Program in Public Health, Western University
- ✦ University of Alberta School of Public Health



**Public Health Pathfinders**

- ✦ Mental Health Commission of Canada
- ✦ University of Waterloo School of Public Health and Health Systems



**Public Health Supporters**

- ✦ Economical Select
- ✦ GSK
- ✦ Innovative Medicines Canada
- ✦ Dalla Lana School of Public Health, University of Toronto



**Our Collaborators**

CPHA was proud to host Public Health 2016 through a unique and effective collaboration with the:

- ✦ Assembly of First Nations;
- ✦ Canadian Institute for Health Information;
- ✦ Canadian Institutes of Health Research;
- ✦ National Collaborating Centres for Public Health;
- ✦ Ontario Public Health Association;
- ✦ Pan American Health Organization; and
- ✦ Public Health Physicians of Canada.



National Collaborating Centres for Public Health  
Centres de collaboration nationale en santé publique



Founded in 1910, CPHA is the independent voice for public health in Canada with links to the national and international communities. As the only Canadian non-governmental organization focused exclusively on public health, CPHA is uniquely positioned to advise decision-makers about healthy public policy and to guide initiatives to help safeguard the personal and community health of Canadians and people around the world.

CPHA is a national, not-for-profit, voluntary membership-based association. CPHA's members believe in universal and equitable access to the basic conditions that are necessary to achieve health for all. Our members comprise a range of health disciplines and professional backgrounds, which enable the Association to act as a powerful and reputable voice to undertake evidence-informed advocacy.

**Our Vision**

A healthy and just world

**Our Mission**

CPHA's mission is to enhance the health of people in Canada and to contribute to a healthier and more equitable world.

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