



CANADIAN
PUBLIC HEALTH
ASSOCIATION

The Voice of Public Health

CHAMPIONING HEALTH EQUITY, SOCIAL JUSTICE AND EVIDENCE-INFORMED DECISION-MAKING

2020 ANNUAL REPORT

www.cpha.ca

2020 AN HISTORIC YEAR

Many of you remain intensely engaged in the daily demands of responding to COVID-19 in our communities. While COVID-19 dominated all aspects of our lives in 2020, it also brought public health and the people who work in it into sharp focus for Canadians. Your efforts, although often unseen by the public, have made and will continue to make the crucial difference in how deep the impacts of this global pandemic are felt within our borders. We see you; we applaud you; and we encourage you to continue.

The global pandemic and other national and international events have heightened our awareness of the injustices present in our world and how the social determinants of health play out so predictably and with devastating impact on the health and well-being of recognizable and underserved populations. COVID-19 — the ‘great revealer’ — laid bare the frayed edges and gaping holes in our social safety nets.

We need to be especially aware of the need to partner with and learn from First Nations, Inuit and Métis communities so that we may speak the truth and work towards meaningful reconciliation. The need to take action on issues of stigma, racism and white supremacy has never been greater. As public health professionals committed to social justice, we each have a responsibility to examine our own beliefs and actions, and counter racism at the personal, organizational and community levels.

As we navigate our way through a global pandemic, much of what we recognized as ‘normal’ has shifted or disappeared. While incredible advances in science have been gained, the human and economic costs are staggering.

Throughout it all, CPHA continues to be the voice of public health and we will continue to speak out on the public policy issues that matter to you. That has been our role since 1910 and will continue to be for as long as the Association exists. We hope that is a legacy you will continue to support.



TRUTH & RECONCILIATION

Indigenous Advisory Council

As part of our ongoing commitment to **Truth and Reconciliation with First Nations, Inuit, and Métis peoples**, CPHA established an Indigenous Advisory Council. The Council supports CPHA in fulfilling its role as a trusted advocate for public health that works towards addressing the historic and contemporary health inequities faced by Indigenous communities by bringing Indigenous perspectives to all aspects of the Association's policies, practices and programs. The inaugural members of the Council are:

- Gabriella Emery, member-at-large;
- Margo Greenwood, representing the Assembly of First Nations;
- Maureen Gustafson, member-at-large;
- Sheri McKinstry, member-at-large;
- Michele Mousseau Bailey, member-at-large;
- Deborah Van Dyk, representing Inuit Tapiriit Kanatami; and
- Eduardo Vides, representing the Métis National Council.

The observers to the Council are the:

- Chair of the Board of Directors, *ex officio*;
- Chair-elect of the Board of Directors, *ex officio*; and
- Executive Director, *ex officio*.

Adopting anti-racism as a sixth pillar of the *Canada Health Act*

CPHA supports the call for the federal government to adopt anti-racism as a sixth pillar of the Canada Health Act, prohibiting discrimination based on race and affording everyone the right to the equal protection and benefit of the law. We ask that you (as an individual) and your organization endorse this call. **It is time to act.**

CJPH adopts requirement for meaningful engagement of First Nations, Inuit, Métis, and Indigenous Peoples

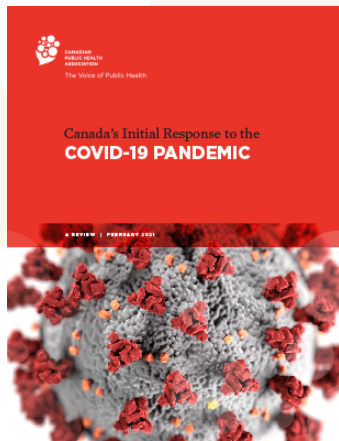
In recognition of the inherent rights of Indigenous Peoples to self-determine their economic, social, cultural and knowledge development, the *Canadian Journal of Public Health* (CJPH) now requires all authors to clearly describe how relevant Indigenous Peoples were engaged in order to be considered for publication. To our knowledge, the CJPH is the first scientific journal in Canada to adopt such a **policy**.

COVID-19

Throughout the pandemic, CPHA continued its efforts to respond to public health issues by developing evidence-informed approaches and policy alternatives.

A review of Canada's Initial Response to the COVID-19 Pandemic

This [report](#) provides a non-governmental perspective and overview of the public health measures taken during the first wave of the pandemic, and those actions taken to address the



social determinants of health in Canada. It is not meant to provide a detailed analysis of the actions taken. This report identified the need to strengthen supply chains for PPE and to improve collection of race-based and socio-demographic data,

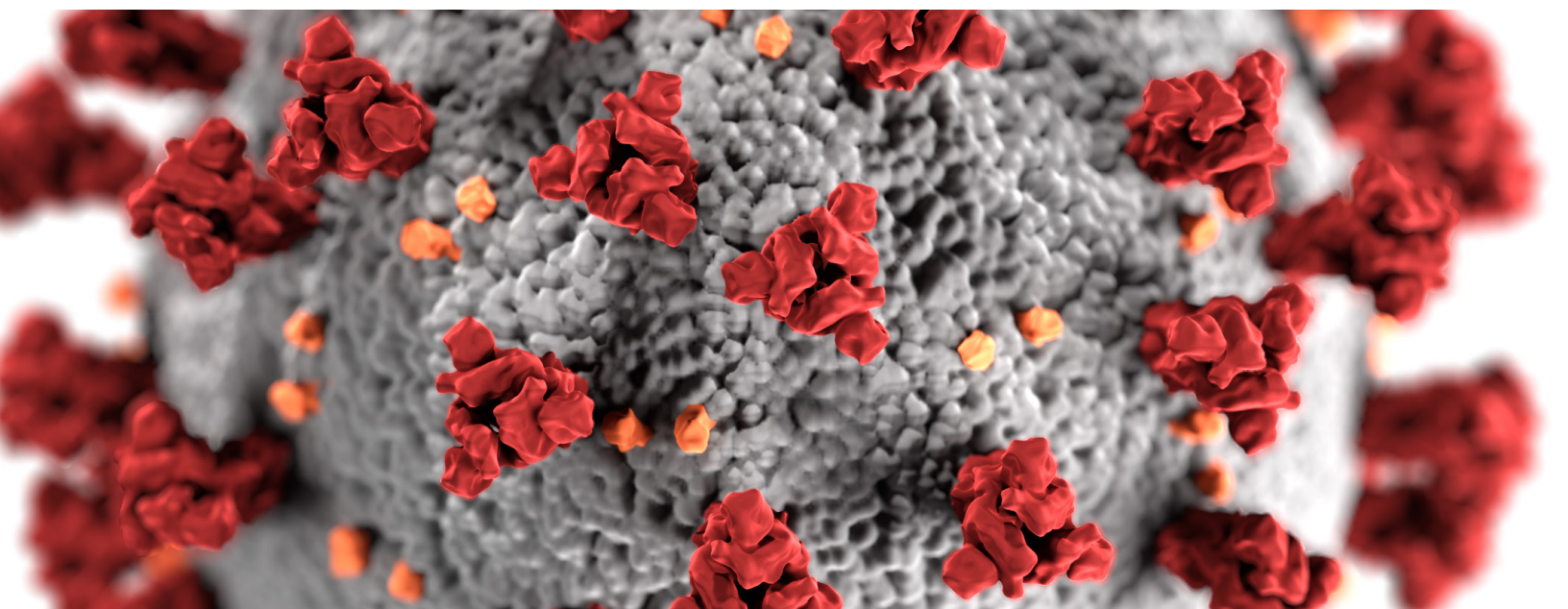
while recommending consideration of a basic income for Canada and the need for a federal public health act.

Support for Chief Public Health Officer of Canada

In light of public comments, CPHA reaffirmed its [support for Dr. Theresa Tam](#), Chief Public Health Officer of Canada, the Public Health Agency of Canada, and the provincial/territorial and local public health authorities responding to the COVID-19 pandemic.

CPHA calls for culturally safe collection and use of socio-demographic and race-based data

Recognizing CPHA's commitment to health equity, anti-racism and reconciliation, we advocated for a nimble response to collaborating with and being accountable to communities that are disproportionately affected by COVID-19 to ensure the [collection and responsible use of race-based and socio-demographic data](#) that will enable appropriate service response during this and upcoming waves of COVID-19, and provide the basis for improved data collection in the future.





Health Equity Impact Assessment

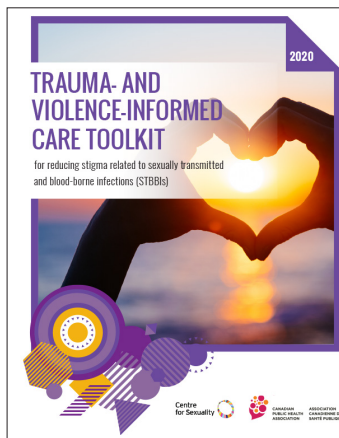
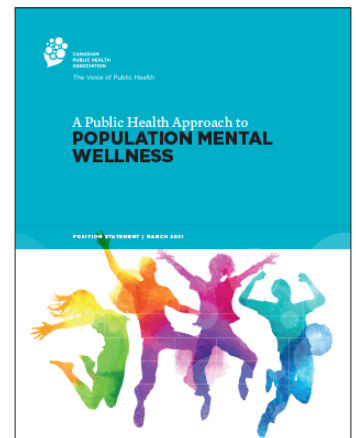
As a component of its Strategic Plan (2016-2020), CPHA committed to inspiring and motivating change in support of health equity, with the desired outcomes of having all policy alternatives and project activities founded on the principle of health equity, and that the Association become a leader in promoting policies and programs that address it. To help accomplish these goals, the Board of Directors approved a **health equity impact assessment tool**, the purpose of which is to:

- Help identify unintended health effects of decision-making;
- Support equity-based improvements in policy and programs;
- Embed equity into decision-making; and
- Build capacity to address and increase awareness of the issues.

This tool will be applied to all future position statements as a means of incorporating health equity in the policy development process.

A Public Health Approach to Population Mental Wellness

Population mental wellness has been an underlying theme in much of the Association's recent work, whether it be to address **children's access to play**, **substance use**, the social determinants of health, **stigma and racism**, **Jordan's Principle** or sexual health. This **position statement** describes how personal, social and ecological determinants of health can affect population mental wellness, and how public health approaches can be applied.



Trauma- and violence-informed care toolkit

Trauma- and violence-informed care (TVIC) is a framework that can reduce barriers to accessing health and social services and promote more caring, compassionate, person-centered and non-judgemental care for all. CPHA developed a **toolkit** with information on how to apply TVIC to provide safer and more inclusive sexual health, substance use and STBBI-related services.

Beyond Cannabasics

The **Beyond Cannabasics workshop** was developed in 2020 to expand on the concepts outlined in Cannabasics within the context of specific age groups. The turnkey workshop resources, including a facilitation manual, a participant workbook and the presentation slides, can help you facilitate a training session in your community.

Infectious diseases and climate change

CPHA has been funded by the Public Health Agency of Canada for a project titled *“Creating a national forum for knowledge exchange, capacity building and collaboration to address infectious diseases and climate change.”* The goal of the project is to increase the knowledge and capacity of, as well as collaborations among, professionals and providers across Canada so that they can inform and educate their communities and respond to the increasing demands posed by climate change and infectious diseases.

Normalizing conversations

CPHA has been funded by Health Canada to partner with a number of communities across Canada to engage people with lived and living experience, professionals, service providers, decision-makers, and first responders who have an impact on current approaches to substance use. Working in partnership with these communities, we will co-develop resources to build the capacity of public health and public safety professionals to implement a public health approach to substance use in their communities.

Contributing to a healthier and more equitable world

MEDIA REQUESTS

60

Change from 2019:

↑30%



TWITTER FOLLOWERS

12,558

Change from 2019:

↑91%



MEDIA MENTIONS

121

Change from 2019:

↑27%



FACEBOOK FAN PAGE LIKES

4,690

Change from 2019:

↑8%



WEBSITE VISITORS

461,046

Change from 2019:

↑43%



LINKEDIN FOLLOWERS

9,602

Change from 2019:

↑114%



WEBSITE PAGE VIEWS

1,114,063

Change from 2019:

↑10%



INSTAGRAM FOLLOWERS

236

[NEW for 2020]



Conferences go virtual!

In the 110 years since our foundation, CPHA has weathered pandemics, economic downturns, two world wars, and massive social changes. Staff and volunteer steering committees embraced existing and new technologies that enabled our conferences to proceed online with success!

- 2020 Tobacco and Vaping Control Forum - 430 delegates
- Public Health 2020 - 1,150 delegates
- 2020 Canadian Immunization Conference - 735 delegates

Outstanding contributions to Public Health in Canada

In 2020, the Canadian Public Health Association honoured these very **deserving individuals** for exceptional service to their community and profession.



R.D. Defries Award
Cordell Neudorf



Ron Draper Health Promotion Award
Kim Raine



Certificate of Merit
Anna Taddio



Dr. John Hastings Student Award (Masters)
Shannon Leung



Dr. John Hastings Student Award (PhD)
Heather Morris

Canadian Public Health Association 2020 Board of Directors

CHAIR	Richard Musto, MD, FRCPC
CHAIR-ELECT	Benita Cohen, RN, MSc, PhD
DIRECTORS	Katie-Sue Derejko, MPH, MA, PMP
	Monica Emode, BA, MSc (c)
	Caitlin Johnston, BA, MSc-PPH
	Donika Jones, MPH, BSc, BA
	Nancy Laliberté, MPH
	Sume Ndumbe-Eyoh, Hons BSc, MHSc
	Vamini Selvanandan, BSc, MD, CCFP
	Julie Stratton, BSc, MHSc

Supporters of Public Health in Canada

PUBLIC HEALTH CHAMPION	Canadian Institutes of Health Research
FRIENDS OF PUBLIC HEALTH	Canadian Institute for Health Information
	Heart & Stroke Foundation of Canada
	National Collaborating Centres for Public Health
PUBLIC HEALTH SUPPORTERS	GSK
	Innovative Medicines Canada
	Schulich Interfaculty Program in Public Health, University of Western Ontario
COLLABORATORS	Assembly of First Nations
	Canadian Alliance for Regional Risk Factor Surveillance
	Manitoba Public Health Association
	Métis National Council
	Network of Schools and Programs of Population Public Health
	Pan American Health Organization
	Public Health Agency of Canada
	Public Health Physicians of Canada

Financial Results

For the fiscal year ending 31 December 2020.

Audited financial statements are available at www.cpha.ca.

Statement of Financial Position

CURRENT ASSETS	2020	2019	2018
Cash and cash equivalents	\$1,293,999	\$646,181	\$1,029,229
Accounts receivable	484,761	220,577	234,734
Inventory	21,028	27,812	38,612
Prepaid expenses	140,385	105,527	47,814
	1,940,173	1,000,097	1,350,389
Long-term investments	—	205,995	208,495
	\$1,940,173	\$1,206,092	\$1,558,884
CURRENT LIABILITIES			
Accounts payable and accrued liabilities	\$351,865	\$142,930	\$334,468
Deferred revenue	618,211	764,444	696,797
	970,076	907,374	1,031,265
NET ASSETS			
Internally restricted for contingencies and extraordinary services	425,000	425,000	425,000
Unrestricted	545,097	(126,282)	102,619
	970,097	298,718	527,619
	\$1,940,173	\$1,206,092	\$1,558,884

Statement of Operations

REVENUE	2020	2019	2018
Projects and conferences	\$2,924,754	\$2,426,789	\$3,439,004
National Office	579,000	353,775	610,799
Canadian Journal of Public Health	89,799	152,891	174,773
Publication sales	30,905	54,442	69,896
Canada Emergency Wage Subsidy	518,471	—	—
Investment income	4,115	10,950	8,894
	\$4,147,044	\$2,998,847	\$4,303,366
EXPENSES			
Projects and conferences	\$2,924,754	\$2,426,789	\$3,439,004
National Office	448,802	660,913	563,673
Canadian Journal of Public Health	76,339	91,544	92,111
Publication sales	25,770	48,502	45,277
	\$3,475,665	\$3,227,748	\$4,140,065
Excess (deficiency) of revenues over expenses	\$671,379	(\$228,901)	\$163,301