

CPHA  ACSP

CANADA'S PUBLIC HEALTH LEADER
LE LEADER CANADIEN EN SANTÉ PUBLIQUE

2008 Annual Report

Public health measures have been responsible for many of the major improvements in the health of Canadians. The dramatic advances in life expectancy, overall health and quality of life that occurred in the twentieth century were primarily the result of public health initiatives that provided vaccinations, clean water, pasteurization, tobacco control and better living conditions.

Since the late 1800s, public health in Canada has been helping individuals take care of themselves, their families and communities. Public health:

- ✦ ensures that water and food are safe;
- ✦ makes communities and workplaces safer;
- ✦ monitors risks for disease and injury;
- ✦ prevents disease and injury in adults and children;
- ✦ informs and strengthens individual and community efforts for active and healthier lives;
- ✦ prepares for and responds to emergencies, including natural events, accidents and/or criminal or terrorist acts; and
- ✦ works for social justice and health for all.

The Canadian Public Health Association (CPHA) is the independent voice for public health in Canada with links to the international community. As the only Canadian non-governmental organization focused exclusively on public health, CPHA is uniquely positioned to advise decision-makers about healthy public policy. Working with the public health community, CPHA helps guide initiatives to safeguard Canadians' personal and community health and the health of people around the world. With a diverse membership, a track record of success, a collaborative approach and international reach, CPHA is Canada's Public Health Leader.

Membership

CPHA's membership is the Association's strength and spirit; they are public health nurses, medical officers of health, dietitians, epidemiologists, administrators, researchers, academics, ethicists, emergency response and management professionals, and public health officials at the federal, provincial / territorial and municipal levels. By providing expertise, these members 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.

Membership in CPHA is voluntary and represents over 25 disciplines, encompassing the breadth and depth of the Association's work on issues of significance to public health's front line and at the national level. CPHA is keenly interested in supporting an active, new generation of public health leaders. Its student membership has grown, thanks in large part to the increased training and funding for graduate students, the expansion of Master of Public Health programs, the development of the Pan-Canadian Core Competencies for Public Health, and increased opportunities for involvement for student members of CPHA.



*CPHA... committed to collaborative engagement
in public health policy and programming*

2008 CPHA Board of Directors

CPHA is governed by a skills-based, volunteer Board of Directors that provides strategic leadership for the Association and on public health issues in Canada, establishes policies and guides the Association's development.

Chair

Ron de Burger, BA, CPH, CPHI(C)

Chair-Elect

Cordell Neudorf, BSc, MD, MHSc, FRCPC

Treasurer

Paul Hanvey, BA, CA

Chief Executive Officer (ex officio)

Debra Lynkowsky, LIB

Patron

Her Excellency the Right Honourable
Michaëlle Jean, C.C., C.M.M., C.O.M., C.D.
Governor General of Canada

Directors

Erica di Ruggiero, BSc, MHSc, RD

Joel Finlay, MPH

Sue Hicks, BN, MES

Maureen Law, MD, FRCPC

John M. Maxted, MD, MBA, CCFP, FCFP

Lynn McIntyre, MD, MHSc, FRCPC

Jennifer Spencer

Ingrid Tyler, MD, MHSc, CCFP

Additionally, an **Advisory Council** provides strategic advice and counsel on public health issues to the Board of Directors both on request and proactively. Its membership includes the provincial/territorial public health associations as well as a number of allied health organizations.

Doing business differently

CPHA is making considerable progress in transforming its business processes to emerge stronger and even better focused on its mission.

CPHA's revitalized branding and **website** – www.cpha.ca – is now complete, reflecting the diversity and depth of Association activities, policy and advocacy work. New features for 2008 include a student site featuring activities, awards, resources and access to tailored annual conference services for students; a new Health Literacy Portal providing easy access to key information about health literacy in Canada; an evidence-based online tool kit on chronic disease prevention and management; and a revitalized immunization site **immunize.cpha.ca**, offering a database of resources for health professionals.

In 2008, CPHA's Board of Directors committed to a Board-based review of membership to be developed and implemented in 2009. A fresh look at **membership** will bring a new perspective to how CPHA attracts and retains members across diverse practice fields of public health. CPHA would like to create a sustainable and synergistic relationship with the many institutions, organizations and agencies involved in public health whose employees contribute to CPHA's intellectual resources to advance public health training, education, research, and practice.

The **governance structure** continues to assist the Association through greater efficiencies and more rapid decision-making, especially in the area of policy development. The Board of Directors is reviewing the responsibilities of the Advisory Council to enhance its role in providing strategic advice on key public health issues, which will support both the work of the Association and its Advisory Council partners.



*CPHA's business is to support
public health in Canada.*

The Association completed its strategic restructuring, initiated in 2007, and is now focused on enhancing its business lines to increase fiscal stability and growth:

- ✦ **CPHA Publication Sales** is increasing the number of titles, and CPHA continues to gain revenue from ongoing sales of successful project deliverables. The Travel Immunization Record has been redesigned and launched under a new promotional campaign.
- ✦ CPHA's strategic review of the **Canadian Journal of Public Health (CJPH)** resulted in a revitalized journal to more effectively meet the needs of the Canadian public health community. The CJPH now has 10 years of back issues online and will be launching its online manuscript submission and review system in 2009, improving the way in which it interacts with authors and reviewers.
- ✦ Under a new strategic direction, CPHA's **Conference Planning Services** is expanding its reach and now markets event management services to government and NGOs nationwide. New software is streamlining processes, reducing redundancies and improving data collection and communication capacities. In 2008, CPHA organized meetings for the Public Health Agency of Canada, Health Canada, the National Collaborating Centre for Determinants of Health, the World Health Organization and the Pan American Health Organization.
- ✦ CPHA's **Plain Language Services (PLS)** offers expert advice to help a wide range of clients create health information at a reading level appropriate for the intended audiences. PLS has begun a formal assessment of its services and reach, which will be completed in 2009.
- ✦ CPHA is actively seeking to **partner with corporations** and foundations that share its vision, values and commitment to public health. To support this search, the Association has produced a new marketing plan and materials that highlight the opportunities, benefits and values of partnerships between the voluntary and private sectors. In December 2008, CPHA's Board of Directors approved a comprehensive, new Corporate Sponsorship Policy that provides clear guidelines on the terms and conditions of all future partnerships. A Corporate Social Responsibility Working Group will be established to help guide this new process.



Collaborative relationships

CPHA members know that health depends on many factors – income, education, social support networks, health care, genetics, the environment – all elements of the social fabric and environmental reality. They also understand that a healthy workforce and an effective public health system support productivity and competitiveness in a global economy. Therefore, CPHA partners with many organizations in order to address the strategic priorities set by the Board and to strengthen the collective voice of public health workers and stakeholders in Canada. The Association builds on the work of others and enhances the capacity of communities to protect and promote the health of their citizens.

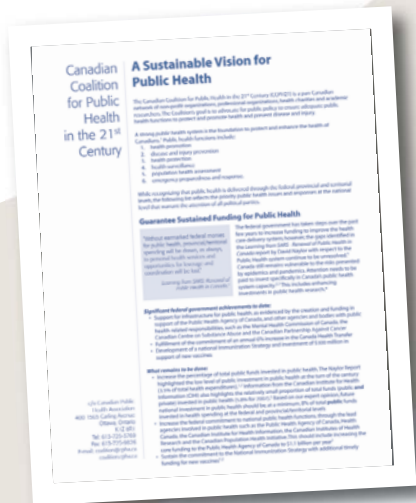
CPHA works in partnership with all levels of government, national and international professional associations, academic institutions, multilateral agencies, NGOs, the private sector and the public in response to health concerns. In addition to its national agenda, CPHA has worked in the international public health arena for nearly 25 years, providing technical assistance in over 60 countries.

Through its leadership and expertise, CPHA brings together diverse organizations, creating a united voice on public health issues in Canada and globally.

The Association reviews requests and opportunities for collaborative relationships on an ongoing basis. Criteria used for these reviews include: relevance to CPHA's work and to public health priorities; multi-sectoral involvement; the potential for CPHA to make a unique contribution; the potential to maximize the Association's impact; and the Association's capacity and resources.

Through the dedication of its members, CPHA continues to collaborate with external committees, task forces and working groups that focus on Canada's health system, efforts which in 2008 included:

- ✦ Active Living Alliance for Canadians with a Disability Advisory Committee
- ✦ Ad Hoc Expert Working Group on HIV Testing and Counselling, Public Health Agency of Canada (PHAC)
- ✦ Canadian Association for School Health (Steering Committee)
- ✦ Canadian Heart Health Strategy and Action Plan (CHHS-AP) (Steering Committee)
- ✦ Canadian Reference Group on the Social Determinants of Health
- ✦ Chronic Disease Prevention Alliance of Canada
- ✦ Expert Roundtable on Practicing Public Health from a Social Determinants of Health Perspective, National Collaborating Centre for Determinants of Health and Wellesley Institute
- ✦ Focus Group on Best Practices Portal, PHAC
- ✦ Global Consultative Group on HIV/AIDS, International Affairs Directorate, Health Canada
- ✦ Health Action Lobby (HEAL)
- ✦ Health and Learning Knowledge Centre (Steering Committee)
- ✦ Mental Health Commission Working Group, Mental Health Literacy Symposium
- ✦ National Advisory Committee on Immunization, PHAC
- ✦ National Drug Prevention Advisory Committee, Health Canada
- ✦ Network on Healthy Eating, Health Canada
- ✦ Pan-Canadian Interactive Literacy Forum, Council of Ministers of Education
- ✦ Women's Health and Gender Equity Workshop, National Collaborating Centre for Determinants of Health



CPHA has taken a lead role in revitalizing the work of the **Canadian Coalition for Public Health in the 21st Century (CCPH21)**. This pan-Canadian network of non-profit and professional organizations, health charities and academic research organizations advocates for strong public health functions to protect and promote health and prevent disease and injury in Canada. CCPH21's new platform focuses on public health leadership, infrastructure and investment. At the time of the federal election, CCPH21 developed an election primer entitled *A Sustainable Vision for Public Health* and distributed it to all candidates.

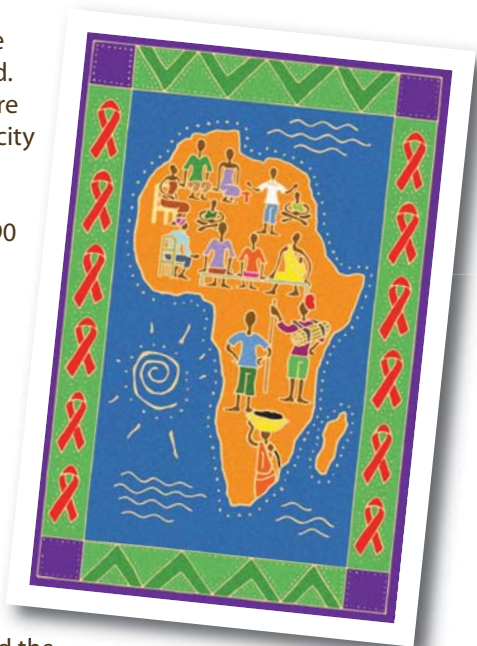
CPHA is increasingly engaged in **strategic partnerships** with national and global public health organizations, such as the Canadian Medical Association, the Canadian Nurses Association, the World Health Organization, the Pan American

Health Organization, the U.S. Centers for Disease Control and Prevention and UNICEF. Committed to a strong World Federation of Public Health Associations (WFPHA), CPHA was re-elected to the WFPHA Executive Board (2008-2010) and took on a WFPHA project to survey WFPHA members about their structure and governance/operational processes.

Supported by the Canadian International Development Agency (CIDA), CPHA's **Strengthening of Public Health Associations (SOPHA) Program** continues to build public health association capacity in countries around the world. Currently, SOPHA collaborates with public health associations in Cameroon, Congo (Brazzaville), Haiti, Malawi, Mozambique, Nicaragua, and Niger.

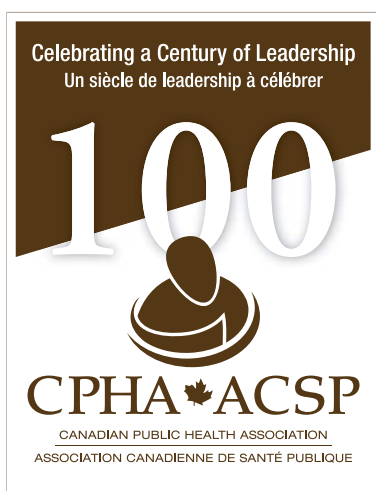
Another CIDA-funded initiative, the **Canadian International Immunization Initiative (CIII)** provided technical assistance in 13 developing countries in 2008 through the deployment of 30 Canadian experts in immunization.

On June 30, 2008, the 18-year relationship between CPHA, the **Southern African AIDS Trust (SAT)** and CIDA came to an end. This initiative provided financial and technical support to more than 270 national and regional partners to enhance the capacity of community organizations in Southern Africa to design and deliver effective HIV prevention and AIDS care, support and treatment activities. The SAT Programme was launched in 1990 as a CPHA project funded by CIDA. Following 13 years of growth, it underwent an evolutionary transformation to become the Southern African AIDS Trust (SAT) – a regional, autonomous NGO. CPHA remained the Canadian Executing Agency for the CIDA-funded component of SAT, which was renamed the **Developing Community Competence for HIV and AIDS in Southern Africa Project**, until mid-2008, the project's completion date. With the successful transformation from project to organization and the transfer of full ownership of the initiative to its "southern partner" (SAT), the "northern partner" (CPHA) worked itself out of a job. In international development parlance, this has been a very successful and productive partnership. CPHA has documented the transformation process and lessons learned from SAT's organizational transformation in a booklet entitled *Southern African AIDS Trust: Transition from a regional project to an independent regional organization* and in a *CJPH* supplement, "Building HIV and AIDS Competence among Community Organizations in Southern Africa," both released in 2008.



Stakeholder mobilization and public awareness

Working with stakeholders to raise public health's profile continues to be an important element of **CPHA's Annual Conference**, the largest annual gathering of public health experts in Canada. The 2008 Annual Conference "Reducing Health Inequalities Through Evidence and Action" was undertaken in collaboration with the Canadian Population Health Initiative of the Canadian Institute for Health Information (CIHI-CPHI), the Institute of Population and Public Health of the Canadian Institutes of Health Research (CIHR-IPPH), and the Public Health Agency of Canada (PHAC). CPHA was pleased to host the conference in association with the National Collaborating Centres for Public Health (NCCPH) and the Public Health Association of Nova Scotia (PHANS). Over 900 delegates met in Halifax, Nova Scotia to reflect on Canada's progress and to consider our future role in the reduction of health inequalities.

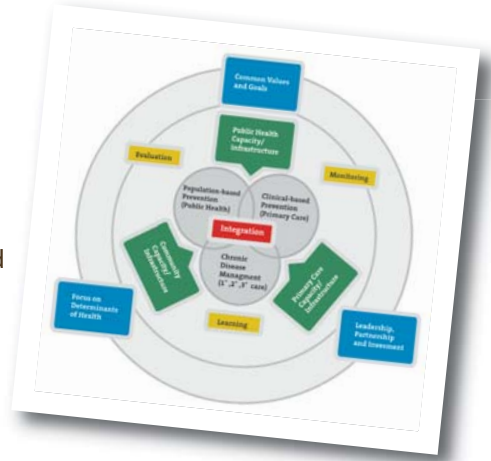


On the occasion of **CPHA's Centenary in 2010**, the Association will be working with many partners to profile both the contributions of CPHA and those of the public health community, its social development roots, accomplishments, milestones and future obligations. CPHA's Centenary Steering Committee is designing special activities to mark the 100th anniversary, during which public health practitioners across the country will be mobilized. The Centenary Conference to be held June 13-16, 2010 in Toronto will be the highlight of the year's activities.

Enhancing public health sector capacity

CPHA's funded project activities have contributed greatly to the development and transfer of important public health knowledge, skills and practice:

- ✦ In collaboration with PHAC, CPHA has been developing the accredited online course for front-line clinicians, entitled **Infectious Disease Outbreaks: Tools and strategies for front-line clinicians**, to increase Canada's capacity to detect, report and contain emerging and re-emerging infectious diseases of public health significance. The course has garnered support among key groups such as the Public Health Network Council and the Ministries of Health of all provinces and territories, and will launch in mid-2009.
- ✦ The **Chronic Disease Portal** of the CPHA website was launched with tremendous response. It offers the tool, *Strengthening Chronic Disease Prevention and Management through Dialogue, Planning and Assessment*, outlining eight Critical Success Factors for strengthening chronic disease prevention and management.
- ✦ In January 2008, the **Health Literacy Symposium** engaged over 60 practitioners, policymakers and researchers with a range of views about literacy, health and learning to envision our future in five years from the founding of an effective nationwide health literacy strategy.
- ✦ **CPHA's Expert Panel on Health Literacy** released its report, *A Vision for a Health Literate Canada*, in March 2008. The report concluded that the majority of Canadian adults do not have the skills needed to respond to daily health information demands. The Panel recommended a pan-Canadian strategy with policies and programs for the special challenges faced by groups most likely to have low levels of health literacy.



- ✦ The **Training Tools for Community Medicine Specialists and Public Health Physicians** project offered a full-day accredited symposium in June for the National Specialty Society for Community Medicine (NSSCM) to review and apply policy analysis frameworks to community-medicine case studies. NSSCM also worked with CPHA and PHAC to host a joint, accredited webinar on infectious disease outbreaks.

- ✦ CPHA, as ongoing Secretariat, cultivates strong partnerships in immunization through the **Canadian Coalition for Immunization Awareness and Promotion (CCIAP)** and continues to be one of three collaborators of the biannual Canadian Immunization Conference hosted by the Public Health Agency of Canada.
- ✦ In partnership with Reckitt Benckiser, CPHA began phase 2 of the **"Taking Care of You and Your Baby"** initiative that will be launched in the spring of 2009 and available in 12 languages.



CPHA is implementing a new Global Public Health Strategy. Along with the SOPHA Program, CIII and SAT, mentioned above, other global initiatives include the:

- ✦ **Strengthening Civil Society's Voice for Public Health through Public Health Associations in the Balkans** project. The project implemented innovative public health initiatives in Serbia and Bosnia & Herzegovina, including a comprehensive tobacco control program for young adults based on Ontario's "Leave The Pack Behind" initiative and a national study on smoking prevalence and smoking cessation relapse among pregnant and post-partum women.
- ✦ **Strengthening Global Tobacco Control** project, funded by Health Canada and undertaken in collaboration with the Canadian Global Tobacco Control Forum. It supports the efforts of public health associations in Burkina Faso, Tanzania, Mozambique and Niger and other organizations in several countries of Africa, Asia, and the Americas to strengthen local advocacy for the Framework Convention on Tobacco Control (FCTC).
- ✦ **Intersectoral Action for Health (Brazil)** initiative, which works with Brazilian partners in six municipalities to establish a variety of health promotion interventions and local capacity-building activities.

Focus on policy and advocacy

CPHA launched a **Policy Development Process** to improve the manner in which policy issues are identified, renewed and prioritized for consideration and endorsement by the Board. This new process will ensure that the Association is proactive and strategic, while increasing the involvement of CPHA members. CPHA will be posting all resolutions, motions and position statements on the website.

In early 2008, the CPHA **Board of Directors surveyed members** to seek their input on the Association's priority-setting exercise. As a result of this survey, and an earlier Environmental Scan undertaken by CPHA's Advisory Council, CPHA has targeted five priority areas for its attention:

- ✦ Health disparities/poverty/social determinants of health
- ✦ Public health leadership
- ✦ Public health access, including infrastructure and human resources
- ✦ Chronic disease prevention
- ✦ Environment/sustainable development

The results also show that CPHA should continue to pay attention to communicable disease prevention and protection, mental health and addictions, and life course issues, such as child health, adolescent health, and health and aging.

In addition to its lead role in the CPH21, CPHA met with representatives of health and non-health sector organizations to discuss areas of mutual concern in public health and to explore potential areas of collaboration. CPHA's role in pan-Canadian policy, advocacy and communications was highlighted at the Association's 2008 Conference in Halifax. At the Conference's final plenary, CPHA's Chair-Elect and CEO delivered a **Call to Action** addressing the need for structural changes to a broad array of policies and practices in order to reduce health inequalities and improve the lives of Canadians.

CPHA helped to address the commitments made in the Call to Action with subsequent positions and presentations, which are part of the list of advocacy activities below. Several of these policy-related documents and briefs/positions are now available online.

- ✦ *Budget 2008: A passing grade for the public's health?* Response to Federal Budget 2008
- ✦ CPHA Brief to the Senate Subcommittee on Population Health
- ✦ CPHA response to the first *Annual Report of Canada's Chief Public Health Officer*
- ✦ CPHA's statement in support of the BC Supreme Court's ruling granting Insite, Canada's first supervised injection facility, a constitutional exemption from the application of sub-section 4(1) and 5(1) of the Controlled Drugs and Substances Act (CDSA)
- ✦ CPHA Brief to the Standing Committee on Finance for 2009 Budget calling for additional investment in a whole-of-government approach to addressing health inequalities
- ✦ CPHA Response to the Report of the WHO Commission on the Social Determinants of Health with accompanying media and government relations strategies
- ✦ *Campaign 2008: Public Health and the Federal Election - CPHA's 2008 Election Primer*
- ✦ Participation at the Toronto Public Health symposium on health inequalities in urban settings
- ✦ Participation at the UK Response to Social Determinants of Health symposium



The reason for taking action on the social determinants of health in order to promote health equity is one of social justice.

Sir Michael Marmot

Core Financial Activities

Fiscal year 2008 was a year of restructuring and rebuilding, and the Association ended the year in a better financial situation than had been projected. Total assets decreased from \$2.78 million in 2007 to \$2.4 million in 2008, and the year ended with a net loss of \$90,000.

In 2008, revenues of \$7.5 million were realized of which \$7.0 million represented flow-through funds from project activities. In 2009, the Association's efforts to strengthen its revenue-generating business lines will be enhanced. CPHA continues to have a strong cash position that will assist us in preparations for celebrating our centenary in 2010.

The complete financial statements, audited by Welch, LLP, are available upon request from the CEO's Office. The following are the Association's Statement of Financial Position and the Statement of Operations for the fiscal year ended December 31, 2008.

Statement of Financial Position: December 31, 2008

Assets	2008	2007
Current Assets		
Cash and cash equivalents	\$ 712,912	\$ 981,768
Accounts receivable	190,602	262,984
Inventories	56,916	55,440
Prepaid expenses	11,869	24,140
	<u>972,299</u>	<u>1,324,332</u>
Investments	1,414,882	1,451,872
Capital Assets	19,978	7,628
	<u>\$ 2,407,159</u>	<u>\$ 2,783,832</u>
Liabilities and Net Assets		
Current Liabilities		
Accounts payable and accrued liabilities	\$ 494,945	\$ 569,146
Deferred revenue	657,560	869,651
	<u>1,152,505</u>	<u>1,438,797</u>
Net Assets		
Invested in capital assets	19,978	7,628
Internally restricted for general reserve	1,087,000	1,087,000
Unrestricted	147,676	250,407
	<u>1,254,654</u>	<u>1,345,035</u>
	<u>\$ 2,407,159</u>	<u>\$ 2,783,832</u>

Statement of Operations: Year Ended December 31, 2008

Revenue	2008	2007
National Office	\$ 165,711	\$ 175,052
Publication Sales	205,262	272,184
Canadian Journal of Public Health	151,153	143,461
Projects and Conferences	7,010,919	10,571,327
	<u>7,533,045</u>	<u>11,162,024</u>
Expenses		
National Office	350,036	163,615
Publication Sales	164,249	215,814
Canadian Journal of Public Health	153,368	158,138
Projects and Conferences	7,010,919	10,571,327
	<u>7,678,572</u>	<u>11,108,894</u>
Net revenue (loss) from operations	(145,527)	53,130
Gain on sale of investments	32,208	6,380
Net revenue (loss) before change in fair value of investment	(113,319)	59,510
Adjustments to held for trading investments	22,938	(22,237)
Net revenue (loss)	<u>\$ (90,381)</u>	<u>\$ 37,273</u>

Moving forward

More than ever, CPHA needs to lead critical policy debates. CPHA members, the Board, the Advisory Council and key stakeholders are the Association's guides to identify the key public health issues for Canadians and all citizens of the world.

With the recent, and imminent, release of a number of landmark documents on the social determinants of health, CPHA has the opportunity to move health inequalities onto the political agenda. There is growing public recognition of health inequalities and the need to address them and, as public health practitioners, we will no longer accept inaction.

The 2010 centenary celebrations present CPHA with the opportunity to highlight the role of public health as a fundamental element of Canada's health system, as well as to articulate what the Association needs to secure the public's health, especially during times of economic contraction. When the public's health and safety are threatened, only a strong, well-supported public health system can respond to such challenges, and that system requires:

- ✦ a specialized and well-trained workforce;
- ✦ sufficient resources;
- ✦ sophisticated and integrated surveillance, monitoring and information systems;
- ✦ adequate and continuously available laboratory support; and
- ✦ the ability to communicate results and health advice rapidly.

As Canada's public health leader, CPHA is prepared to play its role with other sectors to achieve its mission in support of healthy Canadians for the next 100 years.

Contact us

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The truth is that our country – the ninth richest in the world – is so wealthy that it manages to mask the reality of poverty, social exclusion, discrimination, employment erosion, mental health and youth suicides. In doing so, we hide the fact of a very serious national public health problem.

The Honourable Monique Bégin
August 2008

*CPHA... defending the preeminence of public health;
helping to shape the Canadian health system;
providing expertise in critical disease and injury
prevention, health protection and health promotion
strategies; and contributing to an improved
quality of life for Canadians.*