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CANADIAN PUBLIC HEALTH ASSOCIATION
ASSOCIATION CANADIENNE DE SANTÉ PUBLIQUE

CANADIAN PUBLIC HEALTH ASSOCIATION
2014 Annual Report

Since 1910, the Canadian Public Health Association (CPHA) has been Canada's independent voice for public health. A membership-based, not-for-profit organization, CPHA speaks on issues of critical importance to the health and well-being of Canadians and people around the world.

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.

We believe that these statements manifest the dual, core values of the Association: health and social justice.

CPHA exercises national leadership in policy development and advocacy by demonstrating the value of an evidence-based public health approach to policy that seeks to safeguard health while reducing health inequities. By convening flagship events, such as our annual conference, the Association supports meaningful knowledge exchange opportunities for researchers, policy-makers, educators, practitioners and students from a wide range of disciplines and sectors related to public health. We also nurture strategic partnerships that support the Association's mission, and we work with public and private sector partners to support a pan-societal approach to critical public health issues.

Diversity in all aspects of our work

CPHA respects and values diversity and inclusiveness in all aspects of its work. The Association recognizes that Canada and its membership are increasingly diverse. In order to contribute to a healthier and more equitable world, CPHA is committed to being an inclusive organization that respects dignity and human rights.

CPHA is dedicated to diversity and inclusiveness as core considerations in its governance (e.g., nominations), operations (e.g., staffing), and other activities (e.g., annual conference). In accordance with its vision and mission, CPHA recognizes that participation from diverse perspectives contributes to a more creative and flexible Association that will lead to improved decision-making processes and policy advice for equitable health outcomes.



CPHA is committed to identifying and addressing structural barriers that prevent diverse and inclusive participation in its work.

Membership

Membership in CPHA is voluntary. Our members include public health nurses, medical officers of health, dietitians, epidemiologists, administrators, researchers, academics, educators, students, ethicists, emergency response and management professionals, and public health officials at the federal, provincial/territorial and municipal levels. Together, our members represent a wide range of disciplines and professions, encompassing the breadth and depth of the Association's work on issues of significance to public health's frontline and at the national level.

CPHA's student and early-career professional members continue to be actively engaged in our annual conference, which features several events aimed at students involved in public health research, policy and practice. CPHA's Student Awards Program recognizes excellence in the next generation of population and public health researchers, policy-makers, practitioners, and academics.

2014 Board of Directors

CPHA is governed by a skills-based, volunteer Board of Directors that provides strategic leadership for the Association.

Chair

Lynn McIntyre, MD, MHSc, FRCPC

Chair-Elect

Ardene Robinson Vollman, PhD, RN

Directors

Annie Duchesne, MScPH

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Suzanne Jackson, PhD, MSc, BSc

Joel Kettner, MD, MSc, FRCSC, FRCPC

Ann Pederson, MSc

Robert Schwartz, PhD

Isaac Sobol, MD, CCFP, MHSc

Shannon Turner, BA, BSc, MSc

Honoring our leaders

Each year, CPHA honours individuals who, or organizations that, provide outstanding service to their community and profession. In 2014, we were proud to bestow Honorary Awards on the following members and public health leaders:

R.D. Defries Award

✦ *Dr. David Mowat*

Ron Draper Health Promotion Award

✦ *Dr. Jim Frankish*

Certificate of Merit

✦ *Connie Clement*

National Public Health Hero Award

✦ *Juliet Guichon*

Dr. John Hastings CPHA Student Award

✦ *Laura Struik, University of British Columbia*

Population and Public Health Student Awards

Masters Level

✦ *Kyla English*

✦ *Brian Condran*

PhD Level

✦ *Megan Lefebvre*

✦ *Jessica Wu*

Protecting and promoting the health of Canadians

A new approach to illegal psychoactive substances

In a report released at Public Health 2014, CPHA argued that drug policies based on prohibition have failed to prevent the use of illegal psychoactive substances. Instead, they have caused serious harm, often for the most vulnerable Canadians. There is growing evidence, awareness, and acceptance that prohibition and criminalization are not achieving their intended objectives of reducing drug use and associated harms.

An alternative to prohibition and criminalization exists: a public health approach that is based on the principles of social justice, attention to human rights and equity, evidence-informed policy and practice, and addressing the underlying determinants of health. Such an approach puts health promotion and the prevention of death, disease, injury, and disability as the central mission to guide all related initiatives. It also bases those initiatives on evidence of what works or shows promise of working.

CPHA supports the development of public health approaches for addressing the needs of people who use illegal psychoactive substances while recognizing the requirement for a public-health-oriented regulatory framework for the production, manufacture, distribution, product promotion, and sale of these products. To support the development and implementation of such a framework, CPHA's discussion paper describes how a shift to a public health approach can improve outcomes, articulates a vision for 2025, and provides a framework for action.

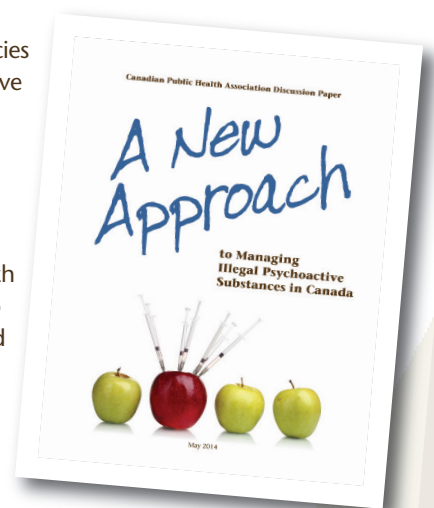
Supervised injection sites and the federal *Respect for Communities Act*

Bill C-2, the *Respect for Communities Act*, lays out 27 information requirements that are required before the Minister of Health can permit the establishment of a supervised consumption facility. These requirements are in stark contrast to the five criteria identified by the Supreme Court. It is CPHA's position that, if enacted in its current form, Bill C-2 will:

- ✦ impede development of supervised consumption facilities in communities where they are needed,
- ✦ prevent the continuing operation of the only supervised consumption facility in Canada, and
- ✦ fail to honour the spirit of the unanimous Supreme Court of Canada decision.

CPHA appealed to the Government and opposition members to be granted standing before the House of Commons Standing Committee on Public Safety and National Security to voice our concern.

CPHA has continued its advocacy of these initiatives by participating in a parliamentary round table on the benefits of a public health approach to managing illegal psychoactive substances, and by providing written commentary to the Standing Committee on Public Safety and National Security on Bill C-2, the *Respect for Communities Act*.



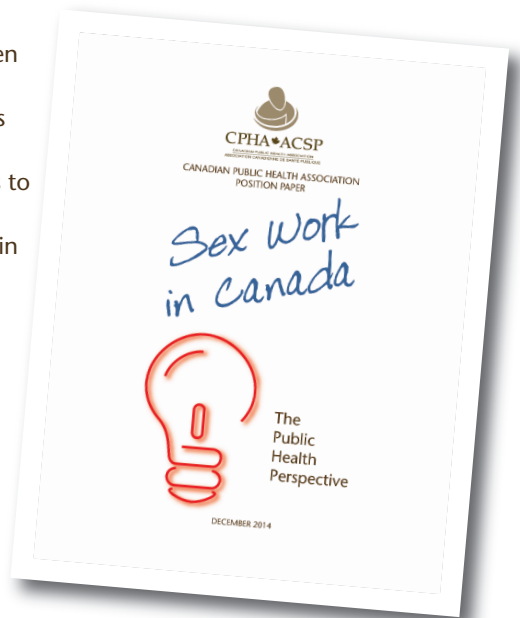
Murdered and Missing Aboriginal Women

In October, on behalf of the public health community across Canada, CPHA called on the federal government to conduct an evaluation of the actions taken as a result of previous inquiries, reports and investigations into missing and murdered Aboriginal women and to implement an integrated action plan for violence prevention that addresses its root causes. The initiative should be led by First Nations, Inuit and Métis partners and engage all levels of government and civil societies. CPHA has long recognized violence as a public health priority in Canada. In 1990, our members approved a resolution that recognized violence as a pervasive and destructive force in society and pledged to advocate strongly for its elimination. Living with violence, or in fear of violence, is in opposition to the fundamental conditions and resources for health. A thorough understanding of violence requires information on its epidemiology, the social values underlying human relationships and effective strategies used to prevent violence and reduce its effects.

Sex Work in Canada: A Public Health Perspective

The exchange of sexual services for money or goods has taken place in one form or another since the dawn of time and will likely continue for the foreseeable future. Public Health works within this context and acknowledges the real life situation involved in sex work. The goal of a Public Health approach is to make sex work safe for both the sex worker and client. In December, CPHA released a position statement on sex work in Canada that addresses the issue from a public health perspective. Based on the available evidence, CPHA recommended that governments in Canada:

- ✦ Establish a regulatory framework for sex work;
- ✦ Provide exit strategies and programs to support sex workers who wish to leave or were coerced into sex work;
- ✦ Develop and implement programs to address the root causes which result in the unwilling entry of people into sex work;
- ✦ Develop and evaluate, with First Nations, Inuit and Métis communities, those actions and programs necessary to respond to their specific situations; and
- ✦ Strengthen efforts to prevent and end domestic and international human trafficking.



E-cigarettes: Balancing harm reduction and the precautionary principle

E-cigarettes are the subject of debate among public health practitioners and tobacco-control advocates. While some welcome them as a potential pathway to reduced tobacco use, others characterize them as products that could undo years of declines in smoking rates in this country. CPHA was invited to appear as a witness before the House of Commons Standing Committee on Health in October 2014. The Association's presentation included a series of recommendations calling on the federal government to:

- ✦ Review all e-cigarettes under the Canada Consumer Product Safety Act;
- ✦ Ban the use of e-cigarettes in all public places under its jurisdiction;
- ✦ Place restrictions on e-cigarette advertising, promotion and sponsorship similar to those in place for tobacco products;
- ✦ Prohibit e-cigarette solutions with fruit or candy flavours until evidence shows that such flavours are not attractive to minors. The Government should also ban the sale of e-cigarette products to minors.
- ✦ Require manufacturers and importers to disclose to governmental authorities information about the contents and emissions of their e-cigarette products; and
- ✦ Invest in additional research.

Antimicrobial resistance in animal agriculture

The medical community is concerned about the improper use of antimicrobial compounds and has provided clear direction to medical practitioners and to the general public regarding their appropriate use in the treatment of human disease. The veterinary community is also concerned about the inappropriate use of antimicrobials in animal agriculture. CPHA subsequently examined the public health issues arising from the use of antimicrobials in animal agriculture, issued a statement of concern that included the following recommendations:

- ✦ The use of antimicrobials in animal agriculture be restricted to the treatment of disease under the direction of a veterinarian;
- ✦ The use of medically important antimicrobial compounds be prohibited in animal agriculture;

- ✦ The “own use” provision for the importation of antimicrobial compounds be rescinded from *the Food and Drugs Act* and Regulations; and
- ✦ Surveillance activities be implemented to better identify the types of antimicrobial compounds in animal agriculture and the extent of their use.

Knowledge exchange and development

Canadian Journal of Public Health

The *Canadian Journal of Public Health* welcomed Louise Potvin, PhD as the new Editor-in-Chief, effective January 1, 2014. Dr. Potvin is working with her new Editorial Board to improve the Journal’s impact in the field of public health practice and research; to expand international coverage of Canadian research and practices in the field of public health; to integrate Web 2.0 as a means of communicating with all of the players involved in the production, dissemination and use of the Journal; and, of course, to improve the quality and relevance of the articles published while maintaining the bilingual character of the publication.

A certified public health professional designation framework for Canada

With funding from the Public Health Agency of Canada (PHAC), CPHA is undertaking a three-year project to pilot test a national certification program for public health professionals. CPHA conducted key informant interviews and a search and analysis of existing certification programs in Canada in fields other than public health, existing public health certification programs available outside of Canada, and material pertaining to assessing need and considerations for the successful development and implementation of certification programs. These scoping activities will inform next steps in the current project and provide recommendations for the Certified Public Health Professional designation and certification strategy.

Resources for Developing Core Competencies for STBBI Prevention

The prevention of sexually transmitted and blood borne infections (STBBIs), such as HIV, hepatitis, chlamydia, gonorrhea, syphilis and human papillomavirus, continues to represent an issue of public health importance in Canada. In an effort to support front-line service providers in the provision of STBBI prevention services, CPHA has developed a number of resources that reflect the knowledge and skills required to enhance services and improve health outcomes for those at risk of or living with STBBIs.

In April 2014, CPHA launched a new project that aims to enhance STBBI prevention and reduce STBBI-related stigma and discrimination which undermine prevention efforts by hampering individuals’ access to and use of available health and social services. This will be accomplished through the development and dissemination of learning products targeted at health care, social service and public health professionals, and their organizations.

ImmunizeCA

In March, CPHA, Immunize Canada, and the Ottawa Hospital Research Institute launched ImmunizeCA, a free, bilingual mobile app created to help Canadians and their families keep track of their immunizations. Funded by the Public Health Agency of Canada, ImmunizeCA provides 24/7 access to vaccination schedules based on information specific to people’s home province or territory. This mobile app can help Canadians make the best decisions about their families’ health. Canadians can keep track of their immunizations electronically and quickly access information from trusted sources.

2014 Annual Conference

Almost 1,000 delegates gathered at the Sheraton Centre Toronto from May 26 to 29 to make this year’s CPHA annual conference, Public Health 2014, a great success! Sessions covered a range of topics, including evidence-informed practice, family health, public health education, food safety, youth and gender-related issues, innovation in vaccines, health equity and best practices in health promotion and prevention. The program offered concrete examples of current public health research, policies and practice and delegates discussed, shared and learned about

the evidence needed to achieve better health and health equity for all. The student component continues to thrive at the Conference. With over 175 students attending and over 100 presenting, students were able to recognize the important role they play in the public health community.



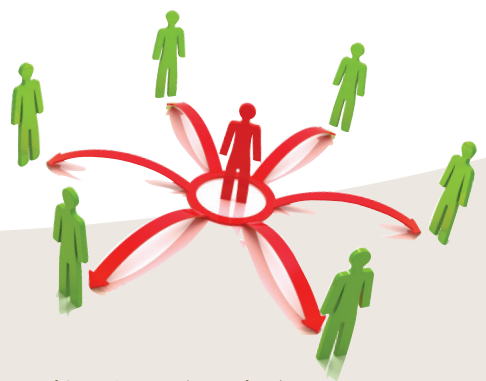
2014 Canadian Immunization Conference

Approximately 880 participants gathered at CIC 2014 from December 2-4 in Ottawa, Ontario. The conference featured over 45 sessions, including plenary, panel, oral and poster abstract sessions and 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 2014 was organized by CPHA in collaboration with the Canadian Association for Immunization Research and Evaluation, the Canadian Paediatric Society, and the Centre for Immunization and Respiratory Infectious Diseases at the Public Health Agency of Canada.

Building partnerships

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. In 2014, our partnerships included:

- ✦ Accreditation Canada – Public Health Services Advisory Committee
- ✦ Canadian Association of Physicians for the Environment
- ✦ Canadian Centre on Substance Abuse
 - National Treatment Strategy Leadership Team
 - National Alcohol Strategy Advisory Committee
 - National Drug Prevention Advisory Committee (member)
- ✦ Canadian Coalition for Action on Tobacco
- ✦ Canadian Coalition for Public Health in the 21st Century
- ✦ Canadian Council on the Social Determinants of Health
- ✦ Canadian Drug Policy Coalition – UNGASS 2016 Working Group (Special Session on Illegal Substances)
- ✦ Canadian Institute for Health Information
- ✦ Canadian Institutes of Health Research
- ✦ Canadian Medical Association
 - Seniors Strategy
 - Strategy for Clinical Guidance Development for the Clinical Care Community during an Influenza Pandemic – Advisory Committee and Communication and Dissemination Working Group
- ✦ Canadian Network of Public Health Associations
- ✦ Canadian Patient Safety Institute
- ✦ Correctional Service Canada
- ✦ Community Consultation Committee on Public Health
- ✦ Health Care Advisory Committee
- ✦ Dignity for All
- ✦ E-Cigarette Meta-Analysis (University of Victoria)
- ✦ Global Coalition for Tobacco Control/Global Tobacco Control Forum
- ✦ Health Action Lobby
- ✦ Immunize Canada
- ✦ National Collaborating Centres for Public Health
- ✦ Network of Schools and Program in Population and Public Health
- ✦ Prevention of Violence Canada
- ✦ Public Health Agency of Canada
 - Canadian Air Quality Standards Development and Review Working Group (member)
 - Chemical Management Plan Advisory Committee
 - Consultative Group on a Global HIV/AIDS Issues
 - National Advisory Committee on Immunization (liaison representative)
 - Network for Healthy Eating
- ✦ Public Health Knowledge Translation Network
- ✦ Public Health Physicians of Canada
- ✦ World Federation of Public Health Associations



Core financial activities

The fiscal year 2014 ended with a surplus of \$145,166, significantly more than the budgeted surplus of \$10,000. The Board of Directors and senior management have taken proactive steps to significantly reduce both operational and infrastructure costs in order to preserve and protect the Association's sustainability.

The complete 2014 financial statements, audited by BDO Canada LLP, are available upon request from the Executive Director's office. Below are the Association's Statement of Financial Position and the Statement of Operations for the fiscal year ending December 31, 2014.

Statement of Financial Position

	2014	2013
Assets		
Current		
Cash and cash equivalents	\$ 430,221	\$ 375,709
Accounts receivable	199,330	77,161
Inventory	41,465	35,322
Prepaid expenses	43,404	65,883
	<u>714,420</u>	<u>554,075</u>
Investments	536,032	817,363
Tangible capital assets	—	—
	<u>\$ 1,250,452</u>	<u>\$ 1,371,438</u>
Liabilities and Net Assets		
Current		
Accounts payable and accrued liabilities	\$ 223,650	\$ 135,892
Deferred revenues	269,064	622,974
	<u>492,714</u>	<u>758,866</u>
Net Assets		
Internally restricted for contingencies and extraordinary services	425,000	400,000
Unrestricted	332,738	212,572
	<u>\$ 1,250,452</u>	<u>\$ 1,371,438</u>

Statement of Operations

	2014	2013
Revenues		
Projects and Conferences	\$ 2,041,416	\$ 2,442,455
National Office	762,303	730,004
Journal	149,971	213,446
Publication Sales	80,176	105,376
Investment income	18,690	18,766
	<u>3,052,556</u>	<u>3,510,047</u>
Expenses		
Projects and Conferences	2,041,416	2,442,455
National Office	665,115	601,532
Journal	138,537	120,439
Publication	62,322	64,559
	<u>2,907,390</u>	<u>3,228,985</u>
Excess of revenues over expenses	<u>\$ 145,166</u>	<u>\$ 281,062</u>

Our Sponsors

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

Presenting Partners

- ✦ AstraZeneca Canada Inc.
- ✦ Lysol (Reckitt Benckiser (Canada) Inc.)



Public Health Champion

- ✦ GlaxoSmithKline



Friends of Public Health

- ✦ Dalla Lana School of Public Health, University of Toronto



Public Health Pathfinders

- ✦ Merck Canada Inc.
- ✦ Novartis Pharmaceuticals Canada Inc.
- ✦ Pfizer Canada
- ✦ Schulich Interfaculty Program in Public Health, Western University
- ✦ University of Waterloo School of Public Health and Health Systems



Public Health Supporters

- ✦ NPD Group
- ✦ Canada's Research-Based Pharmaceutical Companies (Rx&D)
- ✦ Canadian Institutes of Health Research – Institute of Aboriginal Peoples' Health
- ✦ Canadian Institutes of Health Research – Institute of Circulatory and Respiratory Health
- ✦ Canadian Institutes of Health Research – Institute of Gender and Health
- ✦ Canadian Institutes of Health Research – Institute of Infection and Immunity
- ✦ Canadian Institutes of Health Research – Institute of Nutrition, Metabolism and Diabetes
- ✦ Canadian Institutes of Health Research – Institute of Population and Public Health

Our Collaborators

CPHA was proud to host its 2014 Annual Conference in collaboration with:

- ✦ Canadian Institute for Health Information;
- ✦ Canadian Institutes of Health Research;
- ✦ National Collaborating Centres for Public Health;
- ✦ Ontario Public Health Association; and
- ✦ Public Health Physicians of Canada



Founded in 1910, 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 public health system reform and to guide initiatives to help safeguard the personal and community health of Canadians and people around the world. CPHA is a national, independent, not-for-profit, voluntary association. CPHA's members believe in universal and equitable access to the basic conditions which are necessary to achieve health for all.

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.

Canadian Public Health Association

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