Canadian Public Health Association

2006 Annual Report

The voice of public health in Canada since 1910
The Canadian Public Health Association (CPHA) is one of the world’s oldest national public health associations. CPHA is an independent, not-for-profit voluntary association composed of health and other professionals from over 25 disciplines. CPHA stresses its partnership role by working with federal and provincial government departments and international agencies, non-governmental organizations and the private sector in conducting research and health services programs.

CPHA’s members believe in universal and equitable access to the basic conditions which are necessary to achieve health for all Canadians.

mission

CPHA’s mission is to constitute a special national resource in Canada that advocates for the improvement and maintenance of personal and community health according to the public health principles of disease prevention, health promotion and protection and healthy public policy.

goals

CPHA achieves its mission through the following nine goals:

1. Acting in partnership with a range of disciplines including health, environment, agriculture, transportation, other health-oriented groups and individuals in developing and expressing a public health viewpoint on personal and community health issues;
2. Providing an effective liaison and partnership between CPHA’s Provincial/Territorial Branches/Associations;
3. Providing an effective liaison and network both nationally and internationally in collaboration with various disciplines, agencies and organizations;
4. Encouraging and facilitating measures for disease prevention, health promotion and protection and healthy public policy;
5. Initiating, encouraging and participating in research directed at the fields of disease prevention, health promotion and healthy public policy;
6. Designing, developing and implementing public health policies, programs and activities;
7. Facilitating the development of public health goals for Canada;
8. Identifying public health issues and advocating for policy change;
9. Identifying literacy as a major factor in achieving equitable access to health services.

board structure

CPHA is governed by a Board of Directors, which consists of the Chair, Chair Elect, five Directors, one Student Director, two Directors from the Advisory Council of Provincial and Territorial Public Health Associations and Partner Organizations and two External Directors appointed by the Board. The CEO is Secretary to the Board.

Since 1910, CPHA has been the voice for Public Health in Canada. The Association:

• encourages citizen involvement in Public Health policy and programming;
• brings together diverse individuals and organizations, creating a united voice on Public Health issues in Canada and around the world; and
• champions universal and equitable access to the basic conditions necessary to achieve health for all.
The membership is the strength and spirit of CPHA. Members give the Association credibility, direction and authority, as well as expertise and human resources, both nationally and internationally, that are unparalleled. In return, the Association provides members with an opportunity to speak out on broader public health issues, outside discipline boundaries.

Membership in CPHA is voluntary, not mandatory for any professional reason. The composition of members encompasses professionals in public health practice, professors and researchers in universities and colleges, government employees and individuals interested in issues that affect community and public health.

Membership is open to any individual who subscribes to the objectives of the Association and is engaged or interested in community or public health activities.

One resolution was presented to and voted on by the membership of the Canadian Public Health Association at the Annual General Meeting (AGM) in Vancouver, British Columbia, May 30, 2006. The resolution, entitled “Healthy Eating at the 2010 Olympics”, proposes that CPHA endorse British Columbia Premier Campbell’s goal of leading the way in North America in healthy living and physical fitness and the Public Health Association of British Columbia’s commitment to supporting health promotion efforts to prevent chronic diseases. CPHA will also endorse efforts to ensure that the athletes in the Olympic Village and the spectators attending events have access to a healthy diet.

Furthermore, CPHA will urge suppliers and vendors of food at the Olympics to feature affordable healthy food among their menu choices and will urge food industry sponsors of the Olympics to only promote healthy products. CPHA will report the findings of its efforts to the World Federation of Public Health Associations before the commencement of the 2010 games. To further this goal, CPHA wrote letters of endorsement to the Premier, Minister of Health and Opposition Health Critic of British Columbia, BC Healthy Living Alliance and the 2010 Legacies Now Olympic committee.

Also, in 2006 the CPHA Board of Directors appointed a Task Force to review CPHA’s resolution and policy development role and methods, with particular focus on member input. Task Force members included:

- Sheilah Sommer, Co-Chair of the Task Force and CPHA Chair 2006
- Cory Neudorf, Co-Chair, a Director and as of 2007 Chair Elect
- Brian Brodie, CPHA Member
- Brian Emerson, CPHA Member
- Catherine Donovan, CPHA Member
- Denise DePape, CPHA Member

The Task Force took a broad approach to the question of how an association like CPHA can develop policies and positions and made recommendations to the Board of Directors which were discussed and accepted at their meeting held January 25-27, 2007:

1. Over the next year, the Board should review how it establishes association policy and positions.
2. The Board should consult CPHA members and moderate a discussion on this topic

As an interim measure while discussions are continuing, the Board issued a Call for Draft Resolutions based on the strategic directions and priorities identified by the Board, for consideration by members at the September 17, 2007 AGM.

Through the dedication of its membership, CPHA continues to be represented on numerous external committees, task forces and workshops which provide valuable input to and help shape the future of Canada’s health system.

Editorials in the Canadian Journal of Public Health address national and international health and social issues, while conferences provide a forum for both members and the public to debate major health issues. Through representation on external committees and task forces, the Association’s views are presented and contribute to the decision-making process relevant to public health issues.

Another of the Association’s major activities is representation through lobbying and presentations to Parliamentary and Senate Committees. To keep the membership informed of CPHA’s activities in the area of advocacy, brief reports are included from time to time in the CPHA Health Digest.

CPHA continued as the secretariat for the Canadian Coalition for Public Health in the 21st Century (CCPH21). This network has grown to more than 40 national organizations including professional associations, research organizations, academic institutions, and voluntary sector groups. CCPH21 has a three-pronged policy platform: strong national leadership for public health, adequate financing to the front line for public health, and strengthened human resources for public health.

The Canadian Public Health Association (CPHA) has been going through a period of significant change. While the Issues Based Plan, developed in 2004, has served the
organization well over the past nearly three years, the Board has determined that a revitalization of the strategic direction is required, given the turbulent environment and the challenging financial situation.

In 2006, the Board of Directors began a four-phase, inclusive yet fast-paced, process as outlined below:

• Phase One – Generation of Ideas: April/May
• Phase Two – Review of Ideas: June-October
• Phase Three – Validation of Ideas: October-December

The generation of ideas included gathering input from members via an electronic survey as well as at the Annual General Meeting held in May, 2006 in Vancouver. At that time, strategic idea generation discussions were also held with the Board and the Advisory Council.

Through the summer of 2006, the ideas were refined by staff and input was received from the Advisory Council in advance of the October board meeting when the draft plan was reviewed and most specifically, the strategic framework was discussed at length by the Board. Based on this feedback, a communication strategy was created to inform and engage members in discussions about CPHA’s future. Management also developed a short-term investment and resourcing strategy for review by the Board on the December teleconference. The plan was finalized at the face-to-face meeting of the Board in January 2007.

The five objectives for the strategic plan 2007-2010 are as follows:

• Objective One – Transform CPHA into a financially resilient organization.
• Objective Two – Strengthen CPHA’s current collaborative relationships.
• Objective Three – Mobilize stakeholders, initially through the development and execution of a public awareness strategy.
• Objective Four – Enhance capacity in the public health sector.
• Objective Five – Focus on advocacy and develop appropriate strategies and resources.

2006 board of directors

Chair
Sheilah Sommer, MSc, BScN

Chair-Elect
Ron de Burger, BA, CPH, CPHI(C)

Members
Erica di Ruggiero, BSc, MHSc, RD
Colleen Davison, BSc/HBOR, BEd, MPH, PhD(c)
Paul Hanvey, BA, CA
Sue Hicks, BN, MES
Bretta Maloff, RD, Med
Cordell Neudorf, BSc, MD, MHSc, FRCPC
Jennifer Spencer
Minnie Wasmeier, MD

Ex officio
Elinor Wilson, RN, PhD, Chief Executive Officer
Patricia Huston, MD, MPH, Honorary Scientific Editor (until June 2006)
Jeanette Ward, MBBS, MHPEd, PhD, FAPPHM (from July 2006)

Patron
Her Excellency the Right Honourable Michaëlle Jean, CC, CMM, COM, CD
Governor General of Canada
communicating public health

Canadian Journal of Public Health
The Canadian Journal of Public Health (CJPH) is the official publication of the Canadian Public Health Association. It is distributed on a bi-monthly basis exclusively to paid subscribers and to the Association membership. The CJPH is a professional journal which carries a wide variety of in-depth articles on all aspects of public health, including epidemiology, nutrition, family health, environmental health, sexually transmitted infections, gerontology, behavioural medicine, rural health, health promotion and public health policy. The editorial is peer reviewed, and the editorial board is made up of public health experts from across Canada.

Following the September 2005 decision by the Board of Directors to examine the option of outsourcing publishing of the Journal, proposals from leading publishing firms were received and reviewed by a special working group headed by Honorary Scientific Editor, Jeanette Ward. Following review by the Board of Directors, CPHA entered into formal negotiations with one of the companies. These discussions are ongoing.

Health Resources Centre
The Health Resources Centre carries a full catalogue of public health publications published by CPHA and numerous other North American and European publishers. As a Canadian distributor of World Health Organization and Pan American Health Organization publications, the Health Resources Centre plays an integral role in ensuring that crucial monographs and periodicals are available to thousands of Canadian health professionals, students, educators and researchers.

Plain Language Service
CPHA established its Plain Language Service in 1997. Plain language is a way of organizing and presenting information that is easy to read and understand for the intended audience. We assess documents for language level, identify changes that should be made, undertake basic or technical revisions in English and French, and present text and graphics in a clear format. Our clients include government departments and agencies, non-governmental organizations, and the private sector.

Canada Health Day
On May 12th, community health organizations, public health units, seniors’ residences, schools, health facilities and agencies join together in celebrating Canada Health Day. Canada Health Day recognizes exciting and new developments in the public health field. It is also a time to reflect on past public health accomplishments, to appreciate the people who deliver public health services, and to consider future public health needs and public health system capacity. The 2006 theme, ‘Public Health: Working for You’, reflected a focus on communities and individuals to prevent disease, promote health and protect the public.

Conferences, Workshops and Symposia
The Association’s role in providing a forum through conferences, workshops and symposia for the purpose of addressing key health and social issues in Canada continued in 2006 with CPHA’s 97th Annual Conference (What Determines the Public’s Health) in Vancouver, British Columbia from May 27-31, 2006 in partnership with the Canadian Institute for Health Information – Canadian Population Health Initiative (CIHI-CPHI), Canadian Institutes of Health Research – Institute of Population and Public Health (CIHR-IPPH), and the Public Health Agency of Canada (PHAC) and in association with the Public Health Association of British Columbia.

Over nine hundred people attended the conference which focused on the ever-changing landscape of public health in Canada. This conference creates opportunities for CPHA and our partners to raise the profile of public health and provide leadership in ongoing efforts across jurisdictions to address the determinants of health. By exploring current research, policy and practice domains of public health, and the linkages among them, this conference aims to improve the health of citizens in Canada and abroad by supporting sound decision-making and informed action at all levels. An unprecedented number of abstracts, 536 in total, were submitted for consideration. A total of 204 were accepted, along with 12 sessions organized by the Steering Committee. An exhibit program was also featured which consisted of 35 exhibits.

Keynote speakers included The Honourable Tony Clement, Sir Michael Marmot, Dr. Monique Bégin, Dr. John Frank, Dr. David Butler-Jones, Dr. Perry Kendall, Dr. Charles Godue, Dr. Stephen Corber, Dr. Janet Smylie, Dr. Clyde Hertzman, Dr. David Hay, Dr. James Dunn, Dr. Lawrence Frank, Dr. Cordell Neudorf, André Picard and Dr. Jeanette Ward. Fourteen pre-conference and special events were also offered during the conference. Monday evening featured the Public Forum, a special evening panel presentation moderated by Vaughn Palmer, Vancouver Sun Reporter, Voice of BC; Dr. Perry Kendall, Provincial Health Officer, Ministry of BC; Jill Davidson, Homeless Policy Coordinator, City of Vancouver; and Michael Clague, Community Development Consultant. The CPHA National Public Health Hero Award was given to former Vancouver Mayors Philip Owen and Senator Larry Campbell, in recognition of their contributions and commitment to harm reduction and promoting public health.
2006 National Public Health Programs and Projects
CPHA manages a number of public health programs and projects which support the Association in achieving its mission and goals.

Adolescents and Alcohol
With funding from Canada’s Drug Strategy, Health Canada
Alcohol is the most frequently used drug in the adolescent population and high-risk drinking, in particular binge drinking, can lead to intoxication, alcohol poisoning, impaired driving, physical injury, risky sexual behaviour, chronic disease, and lowered academic performance. This public awareness campaign targeted adolescents and provides factual information about the harms associated with high-risk drinking as well as strategies for avoiding those harms. Youth provided input and played a key role in the development of this initiative.
www.drinkingfacts.ca

Canadian Coalition for Immunization Awareness & Promotion
With funding from CCIAP’s Sponsor Members, PHAC Division of Immunization, and in-kind contributions from all member organizations.
CPHA provides the Secretariat for the CCIAP, a partnership of national non-governmental, professional, health, consumer, government and private-sector organizations with a specific interest in promoting the understanding and use of vaccines recommended by the National Advisory Committee on Immunization. The goal of the CCIAP is to increase awareness of the benefits and risks of immunization for all ages via education, promotion, advocacy and media relations. National Immunization Awareness Week in the spring and the Influenza immunization awareness campaign in the fall are complemented by year-round promotion and advocacy.
www.immunize.cpha.ca

Climate Change and Public Health
With funding from the Climate Change and Health Office, Health Canada
There has been an increase in droughts, floods, heat waves and violent storms, which could be the result of increased average global temperature. Climate change can potentially have a serious impact on the health of Canadians. CPHA conducted 30 key informant interviews with the public health community in Canada to understand the degree to which they consider climate change risks in their policies and planning and their ability to respond to potential impacts. The results are captured in the report Snapshot of Adaptation and Response Capacity in Public Health, which is available on-line.
www.cpha.ca/english/natprog/natprog.htm#climate

Canadian Hepatitis C Information Centre
With funding from the Public Health Agency of Canada
The Canadian Hepatitis C Information Centre provides information on hepatitis C prevention, care, and treatment to community-based organizations, health and education professionals, resource centres and others with hepatitis C information needs in Canada.
www.hepc.cpha.ca

Climate Change and Health Vulnerability Assessment
With funding from the Climate Change and Health Office, Health Canada
CPHA was contracted to review the draft technical and synthesis reports of the Climate Change and Health Vulnerability Assessment 2007 and comment on the tone, information, messaging, and selection of key issues captured in the synthesis document as being of most interest and most appropriate for public health professionals in Canada.

Expert Panel on Health Literacy
With funding from the Health and Learning Knowledge Centre of the Canadian Council on Learning and the National Collaborating Centre—Determinants of Health
CPHA has been a leader in health literacy since 1994. In 2006, CPHA assembled an expert panel to investigate the current state of health literacy in Canada and generate a report including recommendations on future research, policy and programming initiatives. The findings in the report will be based on a comprehensive review of the literature as well as numerous consultations with a variety of stakeholders across the country. It is intended to inform policy-makers and practitioners and to generate discussion, debate and most importantly, action to improve health literacy in Canada.
www.healthliteracy.cpha.ca

Flu Pandemic Communications
With funding from the Strategic Policy, Communications and Corporate Services branch, Public Health Agency of Canada
A pandemic influenza outbreak has the potential to overwhelm Canada’s healthcare system, disrupt the economy and contribute to social unease. Advance preparation and consistent messaging from a variety of...
credible sources should help to slow the spread of the disease. CPHA worked with many partners to strengthen the capacity of Canadian organizations to communicate information about pandemic influenza. Our goal was to promote awareness of how to prevent, prepare for, and protect against an influenza pandemic by complementing government communications. The goal was met with the establishment of a communications network and an evidence-based toolkit.

www.pandemic.cpha.ca

HIV/AIDS Affiliate to the Canadian Health Network
With funding from the Public Health Agency of Canada
The Canadian Health Network (CHN) is a national, non-profit, bilingual web-based health information service. CHN's goal is to help Canadians find the information they are looking for on how to stay healthy and prevent disease. The HIV/AIDS Affiliate, which is housed at CPHA, provides quality e-information on HIV and AIDS for the CHN.

www.canadian-health-network.ca

Increasing the Skills of NGOs Working in Chronic Disease Prevention
With funding from the Office of Public Health Practice, Public Health Agency of Canada
CPHA worked with the Skills Enhancement Program at the Public Health Agency of Canada (PHAC) to conduct a needs assessment to determine: the level of interest within the NGO sector in participating in skills enhancement training; the level of support of senior management in this type of continuing education; and the specific skill needs of NGO staff. The final report summarized the results of the needs assessment and made recommendations regarding future actions to engage the NGO sector in the Skills Enhancement Program.

Increasing Understanding of the Impact of Low Health Literacy on Chronic Disease Prevention and Control
With funding from the Centre for Chronic Disease Prevention and Control, Public Health Agency of Canada
Health literacy is about people’s ability to find, understand and use health information to take care of their health and the health of their family. This research project identified three broad areas where change can be made to address health literacy barriers with respect to chronic disease prevention and control: 1) improve health knowledge and health literacy skills of adults with limited literacy; 2) improve the communication skills of service providers; and 3) improve practice and models of service delivery to address health literacy barriers to chronic disease prevention and management.

Informing a Systematic Review of Public Health Practice and Community Programs with Regards to Healthy Living and Chronic Diseases
With funding from the Centre for Chronic Disease Prevention and Control, Public Health Agency of Canada
CPHA undertook a project designed to increase Canada’s understanding of its environment of practice related to healthy living and chronic disease, its risk factors and its determinants of health. Over 30 key informant interviews provided a wealth of information about public health practice in Canada designed to promote healthy living and prevent chronic disease. The results of the project were provided in the form of recommendations and were designed to help inform PHAC’s Observatory of Best Practices for chronic disease-related health promotion, prevention, early detection and management.

Integrating Literacy and Health in Canada:
Outreach Strategy for Engaging Health Sector Partners
With funding from the National Office of Literacy and Learning, Human Resources and Social Development Canada
CPHA is engaged in an outreach strategy to encourage the health sector to consider health literacy in their policy and program development. Communications through
this strategy will address the links between literacy and health and the new concept of health literacy; the relevance of health literacy to health planning, policy and program development; what the health sector can do to address the issue; and what tools exist/are needed to improve health outcomes and quality of care for people with limited health literacy.

**Pot and Driving**

*With funding from Canada’s Drug Strategy, Health Canada*

Young Canadians have one of the highest rates of cannabis use in the world and many choose to drive a motor vehicle after using pot. This campaign, targeted to adolescents 14-18 years of age, has been widely commended for its carefully researched messages, reasonable and respectful tone, and creative yet provocative image. In partnership with the National Aboriginal Health Organization’s Ajunnginiq (Inuit) Centre, CPHA also took the campaign to the North.

[www.potanddriving.cpha.ca](http://www.potanddriving.cpha.ca)

**Primary Care Readiness for a Pandemic Influenza**

*With funding from the Population Health Fund, Public Health Agency of Canada*

Public health can play an important consultative/coordination role in supporting the development of “best practices” in the provision of primary care during a pandemic public health emergency. For this initiative, CPHA worked in partnership with the College of Family Physicians of Canada to develop two fact sheets to assist family physicians in the event of an influenza pandemic: *Preparing for pandemic influenza: What family physicians should know* and *How to maintain your family practice during pandemic influenza*. These fact sheets were evidence-informed through research, key informant interviews, surveys and a roundtable.

[www.pandemic.cpha.ca](http://www.pandemic.cpha.ca)

**Public Health Practice as it Relates to Chronic Diseases**

*With funding from the Centre for Chronic Disease Prevention and Control, Public Health Agency of Canada*

CPHA has been working with a national advisory committee to identify critical success factors for strengthening chronic disease prevention and management. A draft tool for planners and policy-makers has been developed, based on findings of an environmental scan, synthesis of literature, key informant interviews and regional focus groups. The tool includes six success factor areas: determinants of health, public health capacity and infrastructure, primary health care capacity and infrastructure, monitoring, evaluation and evidence-informed practice, and stewardship and investment. For each area, there are guiding questions to open dialogue, promote information exchange, help assess current policy, planning and practice, and identify actions, roles and shared responsibilities for strengthening prevention and management of chronic disease.

**Smoking Cessation Resource for Those Who Work with Women**

*With funding from the Tobacco Control Programme, Health Canada*

This resource was based on two smoking cessation publications that were produced in the 1990s, *Stop Smoking: A program for women* and *Asking to Listen: Helping pregnant and postpartum women and their families to quit and reduce smoking*. The two resources were updated, modified and merged as one complementary document. Section 1 sets the context about women and smoking, including information on the Stages of Change Model and the quitting process. Section 2 is a facilitator’s guide with modules for a group program. Section 3 offers one-on-one counseling techniques for health professionals, from brief to more extensive interventions. A wide variety of handouts are included.
2006 Global Public Health Programs and Projects

**Strengthening of Public Health Associations (SOPHA) Program**

*With funding from the Canadian International Development Agency (CIDA)*

The SOPHA Program strengthens the organizational and performance capacity of partner public health associations (PHAs) in low- and middle-income countries, to promote their participation in national public health policy dialogue and program delivery, to enhance national and international leadership in public health, and to facilitate technical exchanges between Canadian and overseas public health practitioners. For the 2006-2011 period, the SOPHA Program will focus with the partner public health associations on the issue of public health human resource development and capacity building.

[www sopha cpha ca](http://www.sopha.cpha.ca)

**Canadian International Immunization Initiative (CIII) – Technical Assistance and Canadian Awareness Components**

*Partners: Canadian International Development Agency (CIDA), World Health Organization (WHO), UNICEF - New York, Rotary Clubs in Canada, Canadian UNICEF Committee*

CPHA identifies and recruits Canadian technical consultants to assist the World Health Organization, UNICEF and Ministries of Health in strengthening national childhood immunization systems to work towards polio eradication, the elimination of measles and the combating of childhood diseases in low- and middle-income countries. As of December 2006, CIII2 has supported 80 technical missions conducted by 66 Canadian experts in immunization, public health and primary health care to 33 countries (including post-conflict Afghanistan and Iraq) to work with Ministries of Health to improve access to immunization services for children and women and to improve the quality of such services. CIII2 is also supporting social mobilization projects in support of immunization awareness and uptake with the Ethiopian Public Health Association and the Public Health Association of Niger.

[http ciii cpha ca](http://ciii.cpha.ca)

**Building Civil Society’s Voice for Public Health Through Public Health Associations in the Balkans**

*With funding from the Canadian International Development Agency (CIDA)*

Building on the success and achievements of the Strengthening of Essential Public Health Functions in the Balkans project (2001-2005), this project works with recently-formed public health associations in the Republic of Serbia and in Bosnia & Herzegovina to build their organizational capacity to become effective advocates and take on leadership roles in public health. The local partners will facilitate and contribute to advocating on and designing and delivering local, national and regional responses to priority public health issues.

**Intersectoral Action for Health (Brazil)**

*With funding from the Canadian International Development Agency (CIDA)*

Building on the experiences and achievements of the former Health Promotion in Action (Brazil) project (1999-2002), this project seeks to expand the dissemination and utilization of health promotion concepts and practice to communities within the framework of the Government of Brazil’s National Social Development Strategy for Sustainable Integrated Local Development. CPHA and its Brazilian partners (ABRASCO and the National School of Public Health) will partner with six municipalities across the country to put into place a mix of health promotion interventions and local response capacity-building activities in support of local development and intersectoral action for health.

**Developing Community Competence for HIV Prevention in Southern Africa (formerly: Southern African AIDS Training Programme, Phase III)**

*With funding from the Canadian International Development Agency (CIDA)*

In partnership with the Southern African AIDS Trust, the CCP works to strengthen the ability of communities to respond to HIV and AIDS. One of its key strengths and accomplishments is its ability to work on capacity building and organizational development with small, emerging, community-level NGOs. Once self-sufficient, these groups graduate, often providing mentorship and training to new organizations. Since the launch of the Phase III initiative, the project has provided assistance to over 150 local NGOs and AIDS Service Organizations in Tanzania, Malawi, Mozambique, Zambia and Zimbabwe.

**Strengthening Global Tobacco Control**

*With funding from Health Canada*

In collaboration with the other members of the Canadian Global Tobacco Control Forum (CGTFC), CPHA is implementing a project supporting the efforts of public health associations in Burkina Faso, Tanzania, Mozambique and Niger and other health sector organizations in several countries of Africa, Asia, and the Americas to strengthen local advocacy for ratification, implementation, and monitoring of the Framework Convention on Tobacco Control (FCTC).

**Pilot Survey for the Characterization of the Public Health Workforce**

*With funding from the Pan American Health Organization (PAHO)*

A major challenge to building public health capacity in the Americas region is the lack of scientifically-derived information about the structure of the public health workforce. Through this initiative, research teams in Costa Rica and Mexico implemented a pilot survey developed by a team at Queen’s University, to enumerate and
characterize the public health workforce. The results of the surveys will be used by PAHO to take a decision whether to expand the survey throughout Latin America and the Caribbean.

**Qualitative Study of Training in Tobacco Control for Health Professions Students**

*With funding from the Office of Smoking and Health, Centers for Disease Control and Prevention (CDC)*

CPHA, in association with several overseas public health associations, has been a partner with WHO and CDC in the implementation, analysis and utilization of the data from three tobacco control surveys (Global Youth Tobacco Survey (GYTS); Global School Personnel Survey (GSPS); Global Health Professions Student Survey (GHPSS)). Based on the results of the pilot GHPSS, CDC contracted CPHA to conduct an environmental scan to determine the existence and content of formal training within faculties of medicine, nursing, pharmacology and dentistry in Canada and overseas. The study indicated a lack of formal training on smoking prevention and cessation for health professions students, despite a perception by these students as behaviour change agents for tobacco control and a desire for training.

**Healthier Futures: Improving the Health of Aboriginal and Rural Women in Formosa Province (Argentina)**

*With funding from the Canadian International Development Agency (CIDA)*

CPHA provided technical assistance to the Ministry of Health and Human Development of Formosa Province to improve access to and the quality of primary health care services for three beneficiary groups (youth, women, indigenous people). Three strategies were employed: a) building government capacity in health policy and planning, program development and service delivery; b) supporting community participation in these same areas; and c) disseminating project results across organizations, communities, and provinces in Argentina to ensure project sustainability. Through this project, Canadian models/strategies on aboriginal, youth and women's health were shared with and adapted for local health workers, a syllabus on sexual and reproductive health and women's health was developed and implemented, and access to better quality sexual and reproductive health services for rural and aboriginal people was improved.

**Implementation of the CAREC Strategic Plan for the Prevention and Control of the HIV/AIDS Epidemic in the Caribbean 2002-2006**

*With funding from the Pan American Health Organization (PAHO)*

CPHA provided technical expertise to the Caribbean Epidemiology Centre’s (CAREC) Special Program on Sexually Transmitted Infections (SPSTI) in the areas of disease surveillance and epidemiological research, health promotion strategies for targeted populations, program planning and policy development, HIV/AIDS care and treatment, information delivery, and NGO capacity building. The project included an organizational assessment of CAREC’s Special Programme on Sexually Transmitted Diseases, which is responsible for the regional HIV/AIDS program.

**Malawi Family and Reproductive Health Project (Phase II)**

*With funding from the Canadian International Development Agency (CIDA)*

The Malawi Family and Reproductive Health project increased the utilization and access to improved quality of reproductive health, family planning, and safe motherhood services in Malawi through a more effective collaborative relationship between the community and health service providers in three districts. The project supported the first baseline survey on reproductive health knowledge, attitudes and practices in Malawi, and over 200 health service practitioners were trained in clinical skills to provide safe motherhood and family planning services.

**Zambia Family and Reproductive Health Project**

*With funding from the Canadian International Development Agency (CIDA)*

This project provided support and strengthened capacity of urban and rural health facilities to implement national reproductive health goals and strategies in Zambia. The project focuses on issues of family planning, safe motherhood, adolescent reproductive health, STI control and positive sexual health. Through this project, over 100 health service practitioners were trained in clinical skills to provide safe motherhood, family planning and adolescent health services and traditional birth attendants were trained to provide assistance with deliveries and pre- and post-natal care of mothers and infants.
core financial activities

Revenues

- Project-based Revenue 55.9%
- Other (Investment & Exchange Gain) 8.4%
- Charitable Donations 0.1%
- Health Resources Centre 22.7%
- Canadian Journal of Public Health 9.2%
- Membership 3.6%

Expenditures

- Health Resources Centre 20.8%
- Project-based Expenses 49.5%
- Membership 3.5%
- CPHA Operations 16.1%
- Canadian Journal of Public Health 10.0%

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