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# WELCOME TO PUBLIC HEALTH 2015



On behalf of the Canadian Public Health Association, it is my pleasure to welcome you to Public Health 2015 and to the City of Vancouver.

Public Health 2015 is the meeting place where the public health community connects, collaborates, innovates, inspires, shares and learns. It is a gathering of leaders and change agents from public, private and voluntary organizations that contribute to health and wellness.

Hosting Public Health 2015 is one of the ways that CPHA lives up to its mission to enhance the health of people in Canada and to contribute to a healthier and more equitable world. To be a convenor and to bring together the public health community is one of the strategic priorities of our Association and we are particularly delighted to work with a broad range of collaborators, including:

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

Another of our strategic priorities is to be the independent evidence-based voice for public health in Canada. In so doing, we use the evidence that so many of you have helped create to build credible policy alternatives for some of the pressing issues of the day.

At Public Health 2015, CPHA will launch its latest discussion document on the ecological determinants of health. This new paper challenges the public health community to recognize that all life plays a role in maintaining human health. That being the case, we must take into account how our actions affect the natural world in order to deepen our collective respect, care and sensitivity towards the diversity of life on the planet. Our health and our continued existence as a species depend on healthy natural ecosystems, and on the interdependent web of life comprising these ecosystems.

I offer a special thank you to the members of the Conference Steering Committee who have volunteered their time and expertise to assemble another excellent program. The Scientific Review Committee and all of our Scientific Reviewers deserve our collective gratitude for their dedication to putting together a scientific program of the highest quality. In particular, I would like to express our heartfelt thanks to Marjorie MacDonald for serving as our Scientific Chair.

And last, I would like to extend sincere thanks to our conference delegates; your continued participation is what makes our Conference a success. Enjoy this year's program; learn from each other, share your insights and make your mark on public health!

ARDENE ROBINSON VOLLMAN  
Chair  
Canadian Public Health Association

# COLLABORATORS



The **Canadian Public Health Association** (CPHA) is the national, independent, not-for-profit, voluntary association representing public health in Canada. CPHA's members believe in universal equitable access to the basic conditions which are necessary to achieve health for all Canadians.

## CPHA IS PLEASED TO HOST PUBLIC HEALTH 2015 IN COLLABORATION WITH:



The **Canadian Institute for Health Information** (CIHI) collects and analyzes information on health and health care in Canada and makes it publicly available. Canada's federal, provincial and territorial governments created CIHI in 1994 as a not-for-profit, independent organization dedicated to forging a common approach to Canadian health information. CIHI's goal: to provide timely, accurate and comparable information. CIHI's data and reports inform health policies, support the effective delivery of health services and raise awareness among Canadians of the factors that contribute to good health.



The **Canadian Institutes of Health Research** (CIHR) is the Government of Canada's health research investment agency. CIHR's mission is to create new scientific knowledge and to enable its translation into improved health, more effective health services and products, and a strengthened Canadian health care system. Composed of 13 Institutes, CIHR provides leadership and support to more than 14,100 health researchers and trainees across Canada. The CIHR-Institute of Population and Public Health (IPPH) and the Institute of Aboriginal Peoples' Health (IAPH) represent CIHR on the CPHA Conference Steering Committee. CIHR-IPPH aims to improve the health of populations and promote health equity in Canada and globally through research and its application to policies, programs, and practice in public health and other sectors. CIHR-IAPH fosters the advancement of a national health research agenda to improve and promote the health of First Nations, Inuit and Métis peoples in Canada, through research, knowledge translation and capacity building. The Institute of Infection and Immunity (III) supports research and helps to build research capacity in the areas of infectious disease and the body's immune system. Through the Institute's programs, researchers address a wide range of health concerns related to infection and immunity including disease mechanisms, disease prevention and treatment, and health promotion through public policy.



The **First Nations Health Authority** (FNHA) is the first province-wide health authority of its kind in Canada. In 2013, the FNHA assumed the programs, services, and responsibilities formerly handled by Health Canada's First Nations Inuit Health Branch – Pacific Region. FNHA's vision is to transform the health and well-being of BC's First Nations and Aboriginal people by dramatically changing healthcare for the better. FNHA plans, designs, manages, and funds the delivery of First Nations health programs and services in BC. These community-based services are largely focused on health promotion and disease prevention, such as:

- Primary Care Services
- Mental Health and Addictions Programming
- Health Infrastructure Environmental Health and Research
- Non-Insured Health Benefits



The six **National Collaborating Centres for Public Health** (NCCPH) promote and support the use of scientific research and other knowledge to strengthen public health practices and policies in Canada. The six Centres are located across Canada, with each focusing on a different priority area: Aboriginal health (NCCAHA), environmental health (NCCEH), infectious diseases (NCCID), healthy public policy (NCCHPP), determinants of health (NCCDH) and methods and tools (NCCMT). The NCCPH's mission is to translate relevant evidence produced by researchers so that it can be used by public health practitioners and policy makers. The Centres aim to make public health programs and policies more effective by:

- Increasing awareness of new and existing knowledge;
- Identifying and helping address public health priorities;
- Collaborating with established public health networks; and
- Identifying gaps in knowledge and relevant applied research.



**Pan American Health Organization (PAHO)**, founded in 1902, is the world's oldest international public health agency. It provides technical cooperation and mobilizes partnerships to improve health and quality of life in the countries of the Americas. PAHO is the specialized health agency of the Inter-American System and serves as the Regional Office for the Americas of the World Health Organization (WHO). Together with WHO, PAHO is a member of the United Nations system. PAHO's mission is to lead strategic collaborative efforts among Member States and other partners to promote equity in health, to combat disease, and to improve the quality of, and lengthen, the lives of the peoples of the Americas.



**Public Health Physicians of Canada (PHPC)** represents the interests of Royal College public health and preventive medicine specialists and public health physicians in Canada. The PHPC promotes the inclusion of a population and public health perspective in the development and implementation of health policy. The mission of the PHPC is to establish and promote Canadian Public Health and Preventive Medicine Specialists as recognized and respected leaders in health protection and promotion, and disease and injury prevention.



Public Health Association of BC

The **Public Health Association of British Columbia (PHABC)** is a voluntary, non-profit, non-government organization whose mission is to preserve and promote the public's health. The Association works toward this mission through its activities in disease and injury prevention, health promotion, health protection, and advocacy for healthy public policy. The Board of Directors is composed of public health leaders from various locales including Health Authorities, the Ministry of Health, post-secondary institutions, and the non-profit sector. The Association was founded in 1953 and is a provincial branch of the Canadian Public Health Association (CPHA). PHABC has close to 500 members and its website averages over 200,000 page views per month.

## SPONSORS

The Canadian Public Health Association recognizes the generous support of the following organizations:

### LEGACY BENEFACTOR



### FRIENDS OF PUBLIC HEALTH



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### PUBLIC HEALTH PATHFINDERS



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# GENERAL INFORMATION

## REGISTRATION AND INFORMATION DESK

Registration will be available daily on the Plaza Level of the Hyatt Regency Hotel as follows:

- |                     |               |
|---------------------|---------------|
| ▪ Monday, May 25    | 07:00 – 17:00 |
| ▪ Tuesday, May 26   | 07:00 – 17:00 |
| ▪ Wednesday, May 27 | 07:00 – 17:00 |
| ▪ Thursday, May 28  | 07:00 – 10:00 |

## BADGE IDENTIFICATION

Badges are colour-coded based on your registration category and allow admission to all conference sessions and social events. Badges must be worn at all times.

## ACCREDITATION

This event is an Accredited Group Learning Activity eligible for up to 16.5 Section 1 credits as defined by the Maintenance of Certification program of the Royal College of Physicians and Surgeons of Canada. This program has been reviewed and approved by UBC Division of Continuing Professional Development. Each physician should claim only those credits he/she actually spent in the activity.

## STUDENTS' CORNER

CPHA and its partners are committed to building capacity among the next generation of public health leaders. Look for the special student icon 🎓 in the program to highlight presentations that are being given by students and join the Student Mix & Mingle on Monday, May 25.

## SCENT-FREE ENVIRONMENT

For the comfort of all delegates, we ask your cooperation in refraining from wearing scented products while attending the conference.

## CELL PHONES

All cell phones should be turned to silent upon entering session rooms.

## SPEAKER READY ROOM – King George, Convention Level (Third Floor)

The Speaker Ready Room, located in the King George room on the Convention Level, is set aside as a quiet room for reviewing your presentation material, or for any last-minute presentation changes. Speakers are asked to check in with the onsite Presentation Technician at least 4 hours prior to your presentation. The computers are configured with the same hardware and software as those in the meeting rooms. We encourage you to preview your presentation and ensure graphics, text, and media files display as needed. The room will be open:

- |                     |               |
|---------------------|---------------|
| ▪ Monday, May 25    | 07:00 – 17:00 |
| ▪ Tuesday, May 26   | 07:00 – 17:00 |
| ▪ Wednesday, May 27 | 07:00 – 17:00 |

## EXHIBIT HALL – Convention Level (Third Floor)

The Exhibit Hall provides an opportunity to meet and discuss pertinent issues with exhibitors and conference participants. Make sure to visit the Exhibit Hall and enhance your personal network of contacts.

## CYBER CAFÉ – Plaza Level (Second Floor)

To access email while in Vancouver, a Cyber Café is available on the Plaza Level. In consideration of others, we request that delegates limit your time to 10 minutes.

## GREEN INITIATIVES

Your name badge and delegate bag are made from post-consumer recycled materials, including plastic beverage and food containers. In addition, this program is printed on recycled paper by Gilmore Printing, an FSC Certified Printer.

## MOBILE APP

Download CPHA's conference app to get the most out of your conference experience. This easy-to-navigate app lets you quickly browse and search the conference program, build your own schedule, evaluate sessions, find and bookmark speakers, sessions and trade show exhibitors, and share your experiences via social media.

## WIFI

Wireless network: hyatt\_meetings

Login: ph2015

Password: cpha

**09:00 – 18:00 PRE-CONFERENCE SESSION****PHPC Pre-Conference Session****ENGLISH BAY, 34TH FLOOR**

This session will engage public health and preventive medicine (PHPM) specialists in sharing, responding to and discussing key public health issues. The role of PHPM specialists, and contexts in which they practise, will be emphasized throughout.

**Learning Objectives:**

- Identify and discuss current and emerging public health issues from a public health physician perspective.
- Learn about the role of public health physicians in implementing innovative approaches in response to these issues.
- Leave participants with key resources for future reference and continued learning.

The session will consist of short presentations providing a synopsis of a number of topic areas followed by interactive discussion.

This Group Learning Activity is intended for PHPM specialists and public health physicians. Additional registration fee required (Resident - \$100; Physician - \$150).

*Presented by the Public Health Physicians of Canada*

## MONDAY, MAY 25

**09:30 – 11:45 PRE-CONFERENCE SESSION****Containing growth in medical care spending to invest more in the social determinants of health****PLAZA A & B, SECOND FLOOR**

There is a growing risk that medical care spending crowd out fiscal capacity to invest in the social determinants of health. Canadians now publicly spend over \$40 billion more per year on medical care than we would have had we maintained government spending at the percentage of our economy it represented in 1976. Total general revenue for governments remained flat during the same period.

Canada ranks above average among OECD countries for total public medical care spending per capita. But Canada ranks below average for per capita doctor consultations, access to MRIs, CT scans, etc. Many countries that spend less per capita achieve higher levels of patient satisfaction.

Such evidence invites questions about the value we get for increased investment in health care, along with opportunity costs that result from not investing outside the health care system. Spending on the social determinants of health, especially for younger generations, has not kept pace with medical care spending. Since 1976, data reveal decreases in GDP allocated in combination to family services, cash transfers to families, and education.

This session will feature leading experts to explore why we should consider containing growth of medical care spending to invest more in the social determinants, along with the most equitable, efficient and politically pragmatic opportunities to facilitate reallocation.

**Learning Objectives:**

- Examine medical care spending in the context of total government social spending as urged by the “health in all policies” framework recommended by the Rio Declaration.
- Examine the most promising policy opportunities to contain the growth of medical care spending, or disinvest, for the purpose of reallocation to policies that shape the social determinants of health.
- Explore interventions that have potential to build cultural support for slowing the growth in medical care spending and increasing investment in social determinants.

**Speakers:**

- Bob Evans, Professor, Department of Economics and Centre for Health Services and Policy Research, University of British Columbia
- Paul Kershaw, Interim Associate Director, Human Early Learning Partnership, School of Population and Public Health, University of British Columbia
- Craig Mitton, Professor, School of Population and Public Health, University of British Columbia

*Presented by Generation Squeeze, Association for Generational Equity, Human Early Learning Partnership, Office of the Provincial Health Officer of BC and Public Health Association of BC.*



# MONDAY, MAY 25

12:00 – 12:30

OPENING CEREMONY

REGENCY BALLROOM, THIRD FLOOR

## Welcome Remarks

- Squamish First Nation Chief Ian Campbell
- Ardene Robinson Vollman, Chair, Canadian Public Health Association
- Nancy Edwards, Scientific Director, Institute of Population and Public Health, Canadian Institutes of Health Research
- Joel Kettner, President, Public Health Physicians of Canada

12:30 – 14:00

PLENARY I

REGENCY BALLROOM, THIRD FLOOR

## Public health in the Anthropocene: Responding to the ecological determinants of health

Changes in the Earth's ecological systems are driven principally by our social and economic systems, and by the collective values and institutions that underlie them – in other words, by the social determinants of health. By expanding its concerns to the natural world, public health will be in a position to address the health challenges of the 21st century, including human-induced global climate change, resource depletion, ecotoxicity and loss of biodiversity. In the face of both growing inequity and an ecologically unsustainable way of life, valuable lessons can be learned from such concepts as OneHealth and EcoHealth. Panelists will discuss public health's need to adopt an ecosocial approach to health that links and addresses the social and ecological determinants of health at all levels from the local to the global. This plenary will encourage delegates to lead the charge to integrate the social determinants of health with the ecological determinants of health to transform health equity for future populations.

## Learning Objectives:

- Describe the role of public health to address the health challenges in the 21<sup>st</sup> century.
- Explore how an ecosocial approach can address the social and ecological determinants of health.
- Identify opportunities to integrate the social determinants of health with the ecological determinants of health to impact health equity.

## Speakers:



Anthony Capon, Director,  
International Institute  
for Global Health,  
United Nations University



Margot Parkes, Canada  
Research Chair in Health,  
Ecosystems and Society,  
Associate Professor, School  
of Health Sciences, University  
of Northern British Columbia



David Waltner-Toews,  
Professor Emeritus, Ontario  
Veterinary College,  
Department of Population  
Medicine, University of Guelph

## Moderator:



Trevor Hancock, Professor and Senior Scholar, School of  
Public Health and Social Policy, University of Victoria





## 14:20 – 15:50 CONCURRENT SESSIONS

**Ebola in Canada: What have we learned from this outbreak that we didn't know before?**

PLAZA C, SECOND FLOOR

The Ebola virus disease outbreak(s) in West Africa have raised several issues for public health and health care, especially with respect to infection prevention and control in health and other settings. The issues have ranged from world travel policy to personal protective equipment protocols. As with many similar public health events in the past (e.g., SARS, H1N1 influenza), the scientific foundations, valid and relevant surveillance data, estimates of risk and burden, effectiveness of interventions, principles and ethics, priorities and goals should provide the basis for evidence-informed, wise and fair decisions. These decisions may result in reaffirmation or change of policies, programs and practice and often have many consequences, including levels of preparedness and response, resource allocation, protocol changes, and specific education and advice for health practitioners and others working and living in the settings of everyday life. These, in turn, can be expected to affect attitudes and behaviour in society. What have we learned (or should we learn) from this outbreak that we didn't know (or should have known) before? To address these issues from a knowledge translation perspective, panel members will provide the stimuli for interactive responses from the audience and other members of the panel for what promises to be an engaging and educational event.

**Learning Objectives:**

- Describe the scientific, practical, political and ethical considerations for policy and program decisions for a low-probability, high-consequence public health event in Canada.
- Debate the balance of roles and responsibilities of Canadian public health practitioners and health care providers between outbreak control in another country and preparedness/response at home.
- Assess how well we have learned lessons from previous outbreaks at home and abroad – and how well we have advanced our ability to apply those lessons.
- Identify what is new about the Ebola outbreak that requires new ways of thinking about public health preparedness and response in Canada and beyond.

**Speakers:**

- Eilish Cleary, Chief Medical Officer of Health, New Brunswick
- Paul Gully, Public Health Consultant; Adjunct Professor, School of Population and Public Health, University of British Columbia
- Bonnie Henry, Deputy Provincial Health Officer, Ministry of Health, British Columbia
- Michael Rekart, Clinical Professor, Medicine and Global Health, School of Population and Public Health, University of British Columbia
- Richard Schabas, Medical Officer of Health, Hastings and Prince Edward Counties
- Gregory Taylor, Chief Public Health Officer, Public Health Agency of Canada

**Session Chair:**

- Joel Kettner, President, Public Health Physicians of Canada

*This panel is co-sponsored with PHPC by the National Collaborating Centre for Infectious Diseases, International Centre for Infectious Diseases*

**Public Health: Towards systems thinking 6.0**

GEORGIA A, SECOND FLOOR

This panel is the sixth in an ongoing series at this conference that examines why public health in Canada still feels like and operates as a collection of parts rather than as an integrated system. The following themes emerged from previous panels:

- Challenges of the system(s) – 'horizontal' and 'vertical' – still persist;
- Need for improved governance for health – an overly health-centric system creates barriers to working with other sectors;
- Need for sound evidence to inform advocacy and action – moving towards providing practical solutions to decision-makers; and
- Better collaboration among the actors in public health is required.

This year's panel will examine health promotion and well-being strategies and attempt to better understand how *systems thinking* can be applied to reinforce the infrastructure of health promotion for better health. The panelists will reflect on the changes needed in the way public health thinks and acts to inform future research, policy and practice efforts.

**Learning Objectives:**

- Identify current horizontal and vertical system challenges facing public health system(s) in Canada.
- Analyze and examine how *systems thinking* can be applied to health promotion and well-being strategies in public health services to improve population health problems.

**Speakers:**

- Allan Best, Managing Director, InSource Research Group; Associate Scientist, Centre for Clinical Epidemiology and Evaluation, Vancouver Coastal Health Research Institute; Clinical Professor, School of Population and Public Health, University of British Columbia
- Nancy Edwards, Scientific Director, Institute of Population and Public Health, Canadian Institutes of Health Research
- Armenee Kazanjian, Professor, School of Population and Public Health, University of British Columbia
- Victoria Lee, Interim VP Population and Public Health and Chief Medical Health Officer, Fraser Health Authority
- Irving Rootman, Adjunct Professor, School of Public Health and Social Policy, University of Victoria; Co-Chair, Capacity-Building Committee, Public Health Association of British Columbia

**Session Chair:**

- Garry Aslanyan, Manager, Partnerships and Governance, TDR, World Health Organization

### Building Public Health System Capacity - 1

### Cypress, 34th Floor

- The best burger I've ever had: A somewhat radical, auto-ethnographic analysis where public health and social justice meet – Debra Kriger 🍷
- Pursuing health: Intervening to improve health care of underserved populations in Canada – Thomas Piggott 🍷
- An acute care intervention designed to mitigate health inequities in Edmonton's inner city – Elaine Hyshka 🍷
- Social inclusion/exclusion: Low-income and Aboriginal mothers and grandmothers participating in a rural Alberta community – Sharon Yanicki 🍷
- Addressing health inequities and the social determinants of health in environmental health practice – Karen Rideout

### Building Public Health System Capacity - 2

### English Bay, 34th Floor

- Playing outside the sandbox: The challenges of intersectoral collaboration for health – A regional case study – Alejandra Dubois 🍷
- Achieving quality improvement through a systems approach to public health nursing documentation – Isabelle Mogck
- Comparing public health systems across Canada: Data and gold standards – Ak'ingabe Guyon
- Building capacity of the tobacco control workforce: An evaluation of the program training and consultation centre's technical assistance services to local public health units – Irene Lambraki
- Ontario Healthy Babies Healthy Children Program process implementation evaluation: Methods and results – Heather Manson

### Health Assessment and Disease Surveillance - 1

### Prince of Wales, Third Floor

- Leveraging cross-sectional accelerometry to emphasize weather's role in active living policy – Tarun Katapally 🍷
- Health policy and climate change in British Columbia: An uncertain climate for migration and settlement – Tim Takaro
- Filling the gap: A public health advocacy strategy to reinstate health care for refugees and refugee claimants in Alberta – Melody Cesar
- Immigrant status and having a regular doctor among Canadian adults – Michelle Degelman 🍷
- South Asian immigrant's perspectives of colorectal cancer and screening – Joanne Crawford 🍷

### Health Assessment and Disease Surveillance - 2

### Oxford, Third Floor

- The Canadian Surveillance System for Poison Information – Shaun Hosein
- Development of priority indicators for surveillance of health equity in British Columbia – Drona Rasali
- Using hospital administrative databases to monitor in-hospital infection rates: Findings from a validation study – Mary Elias
- The Ontario Health Profile: Advancing population health assessment and surveillance reporting through the use of infographics and interactive web-based reports – Ruth Sanderson
- Overview and changes in the Canadian Community Health Survey and Canadian Health Measures Survey – Scott McLean

### Health Interventions - 1

### Seymour, 34th Floor

- 'Makimautiksat': Building a foundation within one's self: An evidence-based youth wellness and empowerment intervention for Nunavut youth – Ceporah Mearns
- Using 'Code Clubs' to build mental health resilience in Inuit youth in Nunavut – Taha Tabish
- Exploring the mediating pathways between neighbourhood characteristics and obesity among Canadian children – Andrew Tu
- Research ethics and research with vulnerable and at-risk children and youth – James Bray
- Adolescent problem gambling as a public health issue: A call to action – Tara Elton-Marshall

### Health Interventions - 2

### Stanley, 34th Floor

- Big causal stories: Policy roots of food insecurity in Canada – Lynn McIntyre
- FRESH (Food Retail Environments Shaping Health): Preliminary results from a quasi-experimental healthy food retail intervention study – Leia Minaker
- Geographic and socio-economic disparities in nutritional status of women in Pakistan: National Nutritional Survey 2011 – Naveed Janjua
- Addressing food insecurity and dietary modification challenges in underserved populations diagnosed with type 2 diabetes – Maria Thomson
- Use of antibiotic in elective laparoscopic cholecystectomy in diabetic patients: Experience from a tertiary hospital in Bangladesh – Sahla Mahjabin

## 14:20 – 15:50 ORAL ABSTRACT SESSIONS

### Health Promotion - 1

### Georgia B, Second Floor

- Health status and risk factors for chronic disease in the homeless population, Metro Vancouver, 2013-2014 – Maritia Gully
- Promoting youth-oriented HIV and HCV testing throughout Atlantic Canada: Key findings from the Our Youth, Our Response Study – Jacqueline Gahagan
- How zombies (yes, zombies) can save a life – Krista Orendorff
- Relationship between nutritional status, biomarkers of inflammation and serum lipid levels in adolescents – Silmara Mastroeni
- Trends in income-related inequality: A focus on smoking and COPD hospitalizations – Erin Pichora

### Health Promotion - 2

### Plaza A, Second Floor

- The relationship between intimate partner violence, health and work – Nadine Wathen
- Is alcohol a carcinogen? Evidence vs. public perceptions – Norman Giesbrecht
- Age at 1st drink and drinking cultures: Current evidence and emerging issues – Norman Giesbrecht
- A framework for developing municipal alcohol policies – Jason LeMar
- Encouraging a culture of moderation: A pilot study examining the efficacy of posting standard drink information and Canada's National Low-Risk Alcohol Drinking Guidelines on alcohol containers among adults in Ontario – Erin Hobin

### Health Promotion - 3

### Plaza B, Second Floor

- The effects of social mixing on children and youth: A realist review and a call for place-based initiatives – Sharon Yu 🗣️
- Student engagement: Potential of choice architecture and participatory approaches – Amy Beck 🗣️
- Does social support help explain unexpected health states in Canadian young people? – William Pickett
- Young, alienated and excluded: Youth mental health and labour force participation, 2003-2012 – Anita Minh 🗣️
- Young, alienated and excluded: Youth mental health, labour force participation and socio-economic status – Anita Minh 🗣️

### Health Protection - 1

### Grouse, 34th Floor

- Housing First and unprotected sex: A structural intervention – Milad Parpouchi
- Structural determinants of health among international migrants in the indoor sex industry: Experiences of migrant sex workers and managers/owners in metropolitan Vancouver – Shira Goldenberg
- A longitudinal analysis of factors correlated with mental health diagnoses in a cohort of female sex workers in Vancouver – Nitasha Puri
- Bill C-36 and health and safety in the sex industry in Canada: Placing the focus on people who purchase sexual services – Chris Atchison
- Guidelines for the implementation of mother-child units in Canadian correctional facilities – Ruth Martin

### World Café - 1

### Brighton/Kensington, Fourth Floor

- Tackling violence and inequity at multiple levels – Annette Browne
- Advocacy for social change – Lesley Dyck
- Imagining Inclusion: A PhotoVoice project on the health and well-being of individuals with lived experience of mental illness – Ania Landy
- Engaging residents to develop a poverty reduction strategy in rural BC – Diana Daghofer, Helen Lutz

## 15:50 – 16:15 TRANSITION BREAK

Session rooms are located on the second, third, fourth and 34<sup>th</sup> floors. Please use this time to transition sessions accordingly as it may take time to travel between levels.

DID YOU KNOW?



### Children Vulnerable in Early Areas of Development: A Determinant of Child Health

Did you know that 1 in 4 kindergarten children in Canada are vulnerable in areas of early childhood development? What is the vulnerability rate in your jurisdiction? What programs and policies are in place to improve early childhood development? Find out this and more in *Children Vulnerable in Early Areas of Development: A Determinant of Child Health*, a report from the Canadian Institute for Health Information (CIHI) available at [www.cihi.ca](http://www.cihi.ca)



### WORKSHOP



## Developing discipline-specific competencies and a national network for health promoters

PRINCE OF WALES/OXFORD, THIRD FLOOR

Building upon the 'Core Competencies for Public Health in Canada', Canadian health promoters have been working towards the establishment of a set of discipline-specific competencies for health promotion. Considering the variety of potential training paths in the field of health promotion and inconsistencies in position descriptions, greater clarity is needed regarding the competencies necessary for practice. Through a contribution agreement with the Public Health Agency of Canada, a committee supporting the Pan-Canadian Network for Health Promoter Competencies has: validated a competency set through provincial consultations, developed a toolkit to support implementation, and is building a practice-based network for health promoters across the country. This workshop will describe the health promoter competencies and toolkit development. Input will be invited to further refine supports for health promoters, including formation of the national health promoter network. Linkages with other networks will be addressed.

### Learning Objectives:

- Describe the development of discipline-specific competencies for health promotion practitioners across Canada.
- Assess a toolkit of professional supports for health promoters.
- Recommend input into the building of a national network of health promoters.

### Speakers:

- Lesley Barnes, Professor, School of Health and Human Performance, Dalhousie University
- Kevin Churchill, Manager, Lambton Public Health
- Rebecca Fortin, Research and Policy Advisor, Peel Public Health
- Don Gamache, Manager, Northern Health Region Authority
- Irving Rootman, Adjunct Professor, School of Public Health and Social Policy, University of Victoria
- Jan Schmalenberg, Acting Director, Manitoba Health
- Morgane Stocker, Health Promoter, Nova Scotia Capital Health

### Workshop Facilitator:

- Brent Moloughney, Public Health Consultant, BWM Health Consultants Inc.



## The ecological determinants of health: Taking public health action

GEORGIA A, SECOND FLOOR

The CPHA discussion paper on the ecological determinants of health (EDH) makes a number of recommendations for public health action. Within the public health professions, these actions range from amended ethical codes through improved education about and research into the EDH, to routine monitoring and reporting of the EDH and environmentally responsible health care systems.

In the wider context of population health promotion, panelists will present and discuss recommendations for public health professionals and organizations to work together to address social norms and values, and establish policies and methods that create more ecologically sustainable and healthy societies and communities. Delegates will be encouraged to use their roles and responsibilities to protect the population from the adverse impacts of ecological change and policies and practices that harm health.

### Learning Objectives:

After attending the session, participants will be able to:

- Explain the actions that can be taken to address the global ecological changes that threaten the health of the population,
- Identify steps that can be taken to establish ecologically sustainable and healthy societies and communities.

### Speakers:

- Trevor Hancock, Professor and Senior Scholar, School of Public Health and Social Policy, University of Victoria
- Joined by other authors of the discussion paper

*Presented by the Canadian Public Health Association*



#PublicHealth15

## 16:15 – 17:45 CONCURRENT SESSIONS



## Lifecycle of social determinants and its impacts on First Nations, Inuit and Métis children's health

### PLAZA B, SECOND FLOOR

Today, there are more First Nations, Inuit and Métis (FNIM) children-in-care than there were at the height of residential schools (Blackstock, 2008). We know that indigenous children under 14 years of age represent over 50% of children-in-care, while indigenous peoples represent only 4.3% of Canadians. This highlights the need to ensure that child welfare includes linkages with their communities and traditional ways of knowing, as well as safe environments and opportunities to mitigate the negative outcomes that impact future health outcomes.

The session will examine the pathway starting from pre-pregnancy through pregnancy, infancy and childhood, including First Nations, Inuit and Metis children-in-care and how this impacts their health through to adulthood. The session will incorporate indigenous and traditional ways of knowing, sharing and learning as participants listen from first-hand stories. The panelists will use pictures and objects to anchor their stories and catalyse a discussion on lessons learned, existing interventions, and how to continue to develop innovative solutions to improve ultimate health outcomes for children-in-care.

#### Learning Objectives:

- Describe the impact on health of children-in-care and how it affects First Nations, Inuit and Métis over the full life course, from pre-natal, through pregnancy childhood and adulthood..
- Identify existing barriers and systems that contribute to the lifecycle from childhood through adulthood for children-in-care.
- Describe innovations and success stories that can be used to improve public health interventions with First Nations, Inuit and Métis communities across the country.

#### Speakers:

- Sharon Acoose, Associate Professor, Indigenous Social Work, Department of Indigenous Education, Health and Social Work, First Nations University of Canada
- Crystal Phillips, Child Protection Mediator, British Columbia Ministry of Justice

#### Session Chair:

- Mary Teegee, Executive Director, Child and Family Services, Carrier Sekani Family Services; President, BC Aboriginal Child Care Society

*Presented by the Canadian Institutes of Health Research –  
Institute of Population and Public Health and Institute of Aboriginal Peoples Health*



### WORKSHOP

## Research methods workshop: Creating vignettes for today's intractable public health policy controversies

### ENGLISH BAY, 34TH FLOOR

This workshop will offer practical training in vignette-based interviewing, a method that generates discussion on beliefs, values, and persuasive argumentation which can be applied to examine all sides of a debate in public health policy controversies. Those new to the method will learn about potential applications, and those with previous vignette experience will find value in the creative exercise that is part of this workshop.

Drawing on examples of vignette applications in our own research, we will outline the process of vignette development. We will then engage delegates through a facilitated open-space technique to identify intractable policy controversies in their public health work, and then draft vignettes for deliberation in small groups. The session will conclude with a debrief of the draft vignettes developed by attendees, and group discussion on the potential utility of this method in their work.

#### Learning Objectives:

- Identify examples of intractable policy issues that can be examined using vignettes.
- Describe the principles of vignette design and application.
- Create their own vignettes applying to an intractable policy issue related to their own practice, policy or research activities.

#### Speakers:

- Laura C. Anderson, Postdoctoral Fellow, Department of Community Health Sciences, University of Calgary
- Catherine L. Mah, Assistant Professor, Health Policy, Division of Community Health and Humanities, Memorial University
- Lynn McIntyre, Professor, Department of Community Health Sciences, Cumming School of Medicine, University of Calgary; Associate Scientific Director, O'Brien Institute for Public Health



### PANEL

## **“Share, Poke, Tag”: Social media and sexual health promotion**

### STANLEY, 34TH FLOOR

This panel draws on the expertise of health researchers, advocates and program managers working with clients of sexual health promotion programs across the country. Presenters will speak briefly about their own work in the use of social media for prevention and control of STIs, with particular emphasis on factors that lead to success and ongoing challenges. The moderator will help to connect key issues from each presentation and facilitate a conversation among the presenters to identify promising practices as well as opportunities for new knowledge. The moderator will then initiate a discussion with the audience to allow for a more robust, free-flowing conversation on drawbacks and advantages of using social media.

Topics will include how social media has been used for contact tracing, encouraging testing, providing information on sexual health, and alerting users to health services. Issues and questions regarding appropriate evaluation methods will be a focus encouraged by the moderator.

#### **Learning Objectives:**

- Describe how social media are used in sexual health promotion programs.
- Identify and compare the outcomes of social media programs in STI prevention and control.
- Assess gaps and opportunities for measuring success (evaluating) social-media-based sexual health programs.

#### **Speakers:**

- Chris Buchner, Regional Director of Prevention, Vancouver Coastal Health
- Brian Condran, Graduate Student, Health Promotion, Dalhousie University
- Jody Jollimore, Program Manager, Health Initiative for Men
- Roberto Ortiz, Agent à la recherche et au développement, Rézo
- Joss Reimer, Medical Officer of Health, Winnipeg Regional Health Authority

#### **Session Chair:**

- Rick Harp, Project Manager, National Collaborating Centre for Infectious Diseases



### WORKSHOP

## **Starting from square one: An equity model of burden of disease**

### PLAZA A, SECOND FLOOR

In follow-up to the development of methods and concept papers, NCCID explored gaps and potential for an alternate model of burden of disease (BOD). This workshop will include short presentations and group work to engage participants in creative, analytical exercises to unpack standard methods and discourses on BOD, and to help shape a novel model and framework for assessing disease burden.

Facilitated discussion will centre on a model's potential for prompting sufficiently inclusive and fair measurement of outcomes attributable to influenza, for associating upstream determinants with the burden of influenza, and for identifying burden that may be modifiable through public health intervention. Participants may provide their perspectives on questions and considerations that should be taken into account in developing a broader and deeper framework for the measurement of burden of disease, and its relevance for their role in health assessment or public health decision-making. A full-group discussion will consider the utility of such an approach for prioritizing public health interventions and reducing health inequities.

#### **Learning Objectives:**

- Distinguish commonality and/or variability in the discourse on burden of disease.
- Define standard methods used to estimate the burden of disease.
- Identify gaps and limitations in standard methods to estimate BOD, with consideration of applications in public health and infectious disease control.
- Assess potential for a new model of BOD as a broader and deeper framework for analysis of infectious disease priorities for public health, with consideration of upstream determinants and equity.

#### **Speakers:**

- Margaret Haworth-Brockman, Senior Program Manager, National Collaborating Centre for Infectious Diseases
- Harpa Isfeld-Kiely, Senior Project Manager, National Collaborating Centre for Infectious Diseases

#### **Workshop Facilitator:**

- Joel Kettner, Scientific Director, National Collaborating Centre for Infectious Diseases



## 16:15 – 17:45 CONCURRENT SESSIONS

## WORKSHOP



## Strengthening organizational capacity for evaluative thinking and practices in public health and health systems

GEORGIA B, SECOND FLOOR

The focus of this workshop is building capacity for developing evaluative thinking and practices at an organizational level for improving public health and health systems. Participants will engage in interactive, case-based learning using the Public Health Agency of Canada's new learning and improvement strategy for its multisector partnership program. By the end of the workshop, participants will be able to a) identify learning needs of different audiences for multisector partnership initiatives, b) translate principles of learning organizations into strategy and action, and c) apply components of a learning and improvement strategy to their own setting.

Workshop leaders from research, policy and practice sectors will use varied formats, including brief presentations, small- and large-group discussions to engage participants and achieve the workshop objectives. Early experiences from designing and implementing the PHAC strategy will be shared, and participants will have an opportunity to identify insights that they can apply to their own initiatives.

### Learning Objectives:

- Identify learning needs of different audiences for evaluating multisector partnership initiatives.
- Translate principles of learning organizations into evaluation strategy and action.
- Apply components of a learning and improvement strategy within their own evaluation practice and settings.

### Speakers:

- John Garcia, Professor of Practice/Associate Director, Graduate Professional Programs, School of Public Health and Health Systems, University of Waterloo
- Julie Greene, Manager, Diabetes Program and Tobacco Program, Public Health Agency of Canada
- Cameron Willis, Scientist, Propel Centre for Population Health Impact
- Barb Riley, Executive Director, Propel Centre for Population Health Impact



## PANEL

## Surveillance of pharmaceutical opioid-associated harms in Canada: A public health imperative

SEYMOUR, 34TH FLOOR

Opioid analgesic medications are invaluable in managing pain. However, their rising use in Canada in recent years has been paralleled by increases in associated morbidity and mortality. Pharmaceutical opioid use and harm surveillance is of paramount importance in understanding and responding to this urgent public health challenge. Surveillance of pharmaceutical opioid-related harms includes identifying relevant sources of information; collecting, analyzing, and interpreting the data; and sharing findings with key stakeholders. These processes are fundamental to developing, implementing, and evaluating evidence-based strategies to prevent or reduce harms associated with pharmaceutical opioids. A coordinated approach to this issue must involve engagement and collaboration across various sectors and disciplines. Accordingly, this panel brings together experts in research, harm reduction, public health, and health services to present current knowledge, describe existing and planned surveillance strategies, and discuss varying perspectives in addressing this complex issue.

### Learning Objectives:

- Describe recent trends in opioid prescribing practices and related harms in Canada, drawing on evidence from a variety of sources.
- Appraise current capacity for assessment and surveillance of pharmaceutical opioid-associated harms and indicate future directions for developing capacity.
- Identify key elements of a comprehensive surveillance framework and discuss potential strategies for implementation at local, provincial, and national levels.

### Speakers:

- Jane Buxton, Harm Reduction Lead, BC Centre for Disease Control; Professor, School of Population and Public Health, Faculty of Medicine, University of British Columbia
- Brian Emerson, Medical Consultant, Population and Public Health Division, BC Ministry of Health
- Emilie Gladstone, Pharmaceutical Policy Researcher, Centre for Health Services and Policy Research, School of Population and Public Health, Faculty of Medicine, University of British Columbia
- Megan McLarnon, Science Policy Fellow, Population and Public Health Division, BC Ministry of Health; Postdoctoral Fellow, Centre for Addictions Research of BC, University of Victoria

### Session Chair:

- Kenneth Tupper, Director, Problematic Substance Use Prevention, BC Ministry of Health



### PANEL

## **Tackling health inequities: The role of research in shrinking the gap**

### GROUSE, 34TH FLOOR

In 2011, CIHR's Institute of Population and Public Health and partners funded several programmatic grants that addressed two strategic research priorities: pathways to health equity and population health intervention research.

This panel brings together scientists from four of those teams to discuss lessons learned to date with regard to strategies that both improve health and reduce health inequities. Each team is focused on different approaches for tackling inequity: Brownell and Nickel's research evaluates programs aimed at improving child health vis-à-vis their impact on health inequity; Majid's work examines social policies around the world aimed at addressing poverty and gender inequities; Browne's team explores how the health effects of structural inequities can be addressed through primary health care interventions with diverse populations; Pauly's research examines the role that public health services – particularly prevention of harms of substance use and mental health promotion – play in reducing inequities. Similarities and differences in conceptualization and measurement of equity, and the impact of interventions to address health equity, will be discussed among panel members.

#### **Learning Objectives:**

- Differentiate between the concepts of health inequity and health inequality.
- Describe various conceptualizations of health equity.
- Explain different approaches to measuring health equity, health inequities, and health equality and the rationale/considerations behind each approach, e.g., measuring equity across socio-economic gradient; examining how inequities vary within and across groups; measuring gender inequity.
- Describe methods for assessing changes in health equity over time and measuring a program's impact on health equity.
- Describe strategies that have been successful at reducing health inequities in a variety of contexts.

#### **Speakers:**

- Annette J. Browne, Professor, School of Nursing, University of British Columbia
- Marni Brownell, Senior Research Scientist, Associate Professor, Manitoba Centre for Health Policy, Department of Community Health Sciences, College of Medicine, Faculty of Health Sciences, University of Manitoba
- Farhan Majid, Post-Doctoral Research Fellow, McGill Institute for Health and Social Policy
- Nathan C. Nickel, Research Scientist, Assistant Professor, Manitoba Centre for Health Policy, Department of Community Health Sciences, College of Medicine, Faculty of Health Sciences, University of Manitoba
- Bernie Pauly, Associate Professor, School of Nursing, University of Victoria; Scientist, Centre for Addictions Research of British Columbia

#### **Session Chair:**

- Nancy Edwards, Scientific Director, Institute of Population and Public Health, Canadian Institutes of Health Research



### PANEL

## **What values drive public health practice? The Ontario experience**

### CYPRESS, 34TH FLOOR

Research has demonstrated that personal values “silently give direction to hundreds of decisions made at all levels of the organization” and that value congruence (i.e., alignment between personal values and organization/system values) is critical for ensuring employee satisfaction and organizational performance. However, given its importance, surprisingly little is known about the core values that ‘drive’ public health practice. To address this knowledge gap, extensive work has been done in Ontario over the past two years to assess the public health workforce's core values at the provincial, organizational and personal levels. This includes the development of Ontario's first provincial public health strategic plan.

In this engaging presentation, public health leaders and scholars will present and discuss a) the importance of values congruence, b) the approaches and results of their extensive values identification work, and c) how values can be operationalized to improve employee engagement and public health performance across Canada.

#### **Learning Objectives:**

- Explore public health values research, the importance of “value congruence,” and how values relate to public health and population health ethics.
- Describe how Ontario and the Middlesex-London Health Unit assessed and identified core public health values (as well as the results of this work, and how these values were operationalized to improve public health service delivery).
- Discuss approaches and tools that can be applied in their organizations to identify core values and link their values to practice.

#### **Speakers:**

- Arlene King, Former Chief Medical Officer of Health, Province of Ontario
- Marjorie MacDonald, Professor, School of Nursing, University of Victoria
- Christopher Mackie, Medical Officer of Health and CEO, Middlesex-London Health Unit

#### **Session Chair:**

- Ross Graham, Leader, Physician Performance Enhancement, Island Health

**16:15 – 17:45 CONCURRENT SESSIONS****WORKSHOP**

## You don't get harmony when everybody sings the same note: Partners and process in foodborne outbreak investigations

**PLAZA C, SECOND FLOOR**

Foodborne outbreaks occur across Canada on a regular basis. On rare occasions, these outbreaks result in media headlines. Typically such outbreaks are investigated by public health professionals and any actionable findings are communicated to the public through recalls or alerts in ways that allow the public to take clearly defined actions to reduce their risk of illness. Outbreak investigations are complex, with many different agencies and partners playing different roles. While the goal of controlling the outbreak remains the same throughout the outbreak investigation, the objectives change as the outbreak investigation progresses.

Understanding the roles of partners and the steps taken during outbreak investigations is key to the success of an outbreak investigation. This workshop will use an interactive approach to work through a real foodborne illness outbreak and allow participants the rare opportunity to engage in some of the challenging decision making that is required during an outbreak investigation.

**Learning Objectives:**

- Describe the steps in a foodborne outbreak investigation.
- Explain the roles of different partners during an outbreak investigation.
- Assess outbreak-associated information, including its application to policy, communications, and local public health practice.

**Speakers:**

- Eleni Galanis, Physician Epidemiologist, British Columbia Centre for Disease Control
- Stephen Moore, Manager, Enteric Zoonotic and Vector-Borne Diseases Unit, Public Health Ontario
- Marsha Taylor, Epidemiologist, British Columbia Centre for Disease Control
- Bryna Warshawsky, Public Health Physician, Public Health Ontario

**17:45 – 19:00 STUDENT MIX N' MINGLE****REGENCY C, THIRD FLOOR**

Join us at the Networking Event and engage with public health leaders from across the country. During discussions, students and trainees will have the opportunity to build a professional network and gain insight from the experts working in the field of public health. Food will be provided to fuel the conversation between current and future public health leaders.

**17:45 – 19:00****WELCOME RECEPTION AND NETWORKING WITH EXHIBITORS****REGENCY FOYER, THIRD FLOOR**

Wrap up the first day of sessions with a casual networking reception with exhibitors. Meet fellow attendees from across the country and sample food and beverage selections as you mingle, network and make lasting connections.





# MONDAY, MAY 25

## 19:00 – 21:00 PREVENTION OF VIOLENCE CANADA PUBLIC FORUM REGENCY E & F, THIRD FLOOR

The 11<sup>th</sup> Prevention of Violence Canada National Town Hall meeting is an open forum designed to connect and empower Canadians to address violence in your communities. This event offers an unparalleled opportunity to engage with musicians, experts and advocates as they explore how we can build a safer healthier future for Canadians using evidence-based strategies for violence prevention.

The Town Hall is the national opportunity to discuss progress on the World Health Organization's recommendations for violence prevention. An update on the use of social media, new legislation and the National Violence Prevention Charter process will foster future discourse on this important public health issue.

This uniquely moderated event will open with local musician Blake Havard and youth performers, Marie Cusson and Josh Bogert and throughout the evening you will hear from experts who champion violence prevention across Canada.

- Gregory Taylor, Chief Medical Health Officer of Canada;
- Irvin Waller, President, International Organization for Victim Assistance; and
- Peter Donnelly, President and CEO, of Public Health Ontario

Immerse yourself in the stories from advocates who will ensure a rich and constructive dialogue that will help us reimagine our collective future.

- Sheldon Kennedy of the Sheldon Kennedy Child Advocacy Centre and Respect Group;
- Carol Todd of the Amanda Todd Legacy Society;
- Shelley Cardinal, National Aboriginal Advisor for the Red Cross; and
- Red Cross youth leaders describe their work in taking action against bullying.

*Presented by the Prevention of Violence Canada, Canadian Public Health Association, Public Health Association of BC, Canadian Red Cross, and Bridge for Health*

# TUESDAY, MAY 26

## 07:00 – 08:15 BREAKFAST SESSIONS

### Meet and greet for Alberta delegates and friends

#### PLAZA B, SECOND FLOOR

Join us for coffee and conversation. Information about the Alberta Public Health Association (APHA) and the O'Brien Institute for Public Health (O'Brien Institute) will be provided, and input into APHA's ongoing strategic planning will be sought. All are welcome, including members of APHA and/or the O'Brien Institute, as well as those interested in learning more about APHA and/or the O'Brien Institute. This session is sponsored by the Alberta Public Health Association and the O'Brien Institute for Public Health.

*Presented by the Alberta Public Health Association and the O'Brien Institute for Public Health, University of Calgary*



### Public Health Strategies for Measles Prevention

#### GEORGIA B, SECOND FLOOR

This session will identify public health interventions in response to recent measles outbreaks in Canada, and discuss their impact on immunization coverage reducing the risk of disease transmission.

*Presented by Immunize Canada*

08:30 – 09:00

WELCOME

REGENCY BALLROOM, THIRD FLOOR

## Welcome

- Opening blessing
- Margo Greenwood, Academic Leader, National Collaborating Centre for Aboriginal Health
- Jean Harvey, Director, Canadian Population Health Initiative, Canadian Institute for Health Information
- Joe Gallagher, Chief Executive Officer, First Nations Health Authority
- Francisco Becerra, Assistant Director, Pan American Health Organization/World Health Organization

08:30 – 10:30

PLENARY II

REGENCY BALLROOM, THIRD FLOOR

## The dawn of a new era in BC First Nations health: Lessons from our story

Over the last several years, First Nations leadership has worked with the federal and provincial governments to take significant steps towards changing the way health care is delivered to First Nations People in BC. Reflecting on the First Nations health policy context prior to the Transformative Change Accord, this session will explain the need for a new approach and discuss the creation and evolution of a new First Nations health governance structure, which marks an unprecedented moment in the history of First Nations health in Canada. Together, the First Nations Health Authority, First Nations Health Council, and First Nations Health Directors Association are working to address some of the key public health issues affecting BC First Nations, with the vision of healthy, self-determining and vibrant BC First Nations children, families and communities in mind.

Following the presentation, Carl Roy and Joe Gallagher will participate in a moderated dialogue to discuss the work being done by First Nations Health Authority, Regional Health Authorities and Ministry of Health to “hardwire” cultural safety/humility into the fabric of BC health services through practice and accountability standards.

### Learning Objectives:

- Review the historical context of First Nations health in BC and the transformation of the current health system, which is being led by the First Nations Health Authority in partnership with the federal and provincial governments
- Describe the unique structure and approach of the First Nations Health Authority, including the emphasis on a First Nations Perspective on Wellness
- Explore some of the key public health issues affecting BC First Nations and be inspired by some innovative initiatives being undertaken to address them
- Discuss the importance of leadership in influencing system and practice change

### Speaker:



Joe Gallagher, Chief Executive Officer,  
First Nations Health Authority

### Dialogue Session:



Carl Roy, President and Chief  
Executive Officer, Provincial Health  
Services Authority

### Moderator:



Margo Greenwood, Academic  
Leader, National Collaborating  
Centre for Aboriginal Health

10:30 – 11:00

NUTRITION BREAK

REGENCY FOYER, THIRD FLOOR





### Current challenges and future directions for public health education in Canada

GEORGIA A, SECOND FLOOR

Public health practice and research is evolving to meet the local and global challenges of new infectious, environmental and behavioural threats superimposed on rapid changes in demographic and epidemiological knowledge. While there has been an observed threefold expansion in the number of public health schools in Canada, with a rich variety of subject areas of focus and degree options, it is not clear whether public health education is adapting to the changes in practice and the needs of a public health workforce. It is important to track and understand the evolving public health education system in Canada in order to determine its role in supporting a competent public health workforce. New trends and technology advances in learning and an increased demand for supportive professional education are also leading a push for innovation in public health education.

Panelists will identify the current challenges and predict the future of public health education and training in Canada.

#### Learning Objectives:

- Examine the impact of a threefold increase in Canadian schools offering public health education on public health practice in Canada.
- Understand the challenges in sustaining relevant public health education to train the future public health workforce.
- Discuss the future direction of public health education in Canada.

#### Speakers:

- Karen Dickenson Smith, Director, Population and Public Health, Fraser Health Authority
- Annie Duchesne, Research Coordinator, Old Brewery Mission
- Erica Frank, Professor and Canada Research Chair, School of Population and Public Health, University of British Columbia; Founder, President and Executive Director, NextGenU.org
- John Garcia, Professor of Practice/Associate Director, Graduate Professional Programs, School of Public Health and Health Systems, University of Waterloo
- Andre La Prairie, Manager, Skills Enhancement for Public Health, Public Health Agency of Canada
- Andrew Papadopoulos, Associate Professor, Department of Population Medicine; Coordinator, Master of Public Health, Ontario Veterinary College, University of Guelph
- Kate Tairyan, Senior Lecturer, Faculty of Health Sciences, Simon Fraser University; Director of Public Health, NextGenU.org

*Presented by the Canadian Public Health Association and the Public Health Agency of Canada*



### Population mental health and public health practitioners: What are the needs?

PLAZA C, SECOND FLOOR

As “there is no health without mental health,” all public health practitioners should consider population mental health in their day-to-day practice. Poor mental health and mental disorders are among the top disease burdens in the world and in Canada. Together they greatly impact societies’ social and economic functioning, as well as general health and well-being, and have a disproportionate effect on those who are socially and economically disadvantaged. In this challenging context, the National Collaborating Centres for Public Health (NCCPH) support public health practitioners in their roles and activities aimed at population mental health.

To assess public health practitioners’ needs, a survey was conducted between June and October 2014. Through panel presentations, facilitated dialogue and group discussion, this session will highlight the findings of the needs assessment from the six NCC perspectives and offer participants opportunities to collectively discuss and deepen the analysis of emerging needs, while also reflecting upon their own public health practices.

#### Learning Objectives:

- Recognize the links between mental health and public health.
- Identify public health practitioners’ needs for population mental health.
- Analyze the implications of public health practitioners’ needs for various settings and contexts.

#### Speakers:

- Francois Benoit, Lead, National Collaborating Centre for Healthy Public Policy
- Maureen Dobbins, Scientific Director, National Collaborating Centre for Methods and Tools
- Lesley Dyck, Knowledge Translation Specialist, National Collaborating Centre for Determinants of Health
- Margo Greenwood, Academic Leader, National Collaborating Centre for Aboriginal Health
- Margaret Haworth-Brockman, Senior Program Manager, National Collaborating Centre for Infectious Diseases

*Presented by the National Collaborating Centres for Public Health*



**Building Public Health System Capacity - 3****Cypress, 34th Floor**

- The population health approach within primary care: A northern Ontario case study – Jean Harvey
- Scale Up Readiness Assessment Framework: Key actions and elements in the successful scale-up of an existing population health intervention – Duyen Nguyen 🐼
- Finding research evidence efficiently using Search Pyramid – Katie Tulloch
- Understanding and improving evaluation practices for applied prevention research centres: Results of a modified Delphi process – Barbara Riley
- Scoping review: Addressing food insecurity in health settings – Lynn McIntyre

**Building Public Health System Capacity - 4****English Bay, 34th Floor**

- Organizational governance as a determinant of the capacity of public health associations to have an impact on human health – James Chauvin
- Leveraging partnerships for improved National Public Health Institutes – Kate Klein
- Keys to interdisciplinary learning – Suzanne Jackson
- Participatory evaluation strategies to strengthen a policy research project – Nancy Edwards
- Understanding variations in health system efficiency in Canada: A descriptive multiple case study – Yu Janice Zhang

**First Nations, Métis, and Inuit Communities - 1****Grouse, 34th Floor**

- The critical role of trust in health research partnerships between Indigenous peoples and academic researchers – Cindy Jardine
- The Xpey' Relational Environments: A tree model for understanding Indigenous health equity – Alexandra Kent 🐼
- Social and economic patterning of self-reported discrimination among on-reserve First Nations women and men in Saskatchewan – Bonnie Janzen
- Intergenerational transmission of historical trauma: The role of Canada's Indian residential schools in the respiratory health of contemporary First Nations – Tarun Katapally 🐼
- Chronic hepatitis C care cascade, from screening to clearance in a marginalized, largely Aboriginal medical clinic in Vancouver – Piotr Klakowicz

**Health Assessment and Disease Surveillance - 3****Prince of Wales, Third Floor**

- Post-concussion syndrome: Parent and youth experience with school and ongoing concussion symptoms – Kelly Russell
- The Online Concussion Awareness Training Toolkit – Shelina Babul
- Body composition, physical activity and physical fitness of Canadian shift workers – Sarah Neil-Sztramko 🐼
- Burden and cause of injuries in Vancouver Coastal Health region – Megan Oakey

**Health Interventions - 3****Seymour, 34th Floor**

- Evaluation of a syphilis outbreak intervention among men who have sex with men in Vancouver – Ellen Demlow
- Using digital media to respond to an outbreak of syphilis in the Winnipeg Health Region – Joss Reimer
- Visitor experiences of the British Columbia SmartSexResource website – Alexandra Nunn 🐼
- Responding to the changes in the HIV epidemic in Vancouver: Reorienting outreach services to provide an effective prevention intervention for at-risk individuals – Elizabeth Holliday
- Investigating the correlates and impacts of financial pressure on health and safety among female sex workers in Metro Vancouver – Julie Sou 🐼

**Health Interventions - 4****Stanley, 34th Floor**

- Children's nature-based risky play: Influencing physical and mental health through natural outdoor play spaces and risky play – Mariana Brussoni 🐼
- Risky Play Meets Nature Play: The influence of natural outdoor play spaces and risky play on child development – Mariana Brussoni 🐼
- A community development and process based framework applied to child health – Odette Laplante
- Applying a health equity promotion lens to prenatal care for inner-city families – Lynda Tjaden
- Intersectoral partnerships can improve child health outcomes: Sharing evidence from uncovering the mechanisms underlying the RICHER social pediatrics initiative – Judith Lynam

### Health Promotion - 4

#### Georgia B, Second Floor

- Models of intersectoral action for health: A regional multiple case study in Quebec – Alejandra Dubois 🐾
- Promoting health through intersectoral action: The case of British Columbia, 2004-2014 – Simon Carroll
- A realist synthesis of the evidence on the implementation and sustainability of health in all policies – Simon Carroll
- Key factors that influence health promotion policy and practice in a multi-sectoral system – Lori Baugh Littlejohns 🐾
- Looking at patient flow through a health equity lens – Sande Harlos

### Health Promotion - 5

#### Plaza A, Second Floor

- An introduction to gender transformative health promotion: Promoting health outcomes and gender equity – Nancy Poole
- Pathways to primary health: Advancing innovation in measuring and understanding LGBTQ health in Nova Scotia – Jacqueline Gahagan
- End-of-life conversations with older LGBT adults: Needs of an “invisible” community – Jacqueline Gahagan
- Use of latent class analysis approach to examine sex scene patterns among a sample of urban gay, bisexual and men who have sex with men in Toronto – Syed Noor
- Workplace determinants of safe sex: Views of sex workers and clients in the Canadian sex industry – Cecilia Benoit

### Health Promotion - 6

#### Plaza B, Second Floor

- Factors associated with perceived abuse in the health care system among a population of long-term opioid users – Heather Palis 🐾
- The SALOME study: Recruitment strategies into a clinical trial offering injectable diacetylmorphine and hydromorphone for opioid dependency – Kirsten Marchand 🐾
- Peer engagement in harm reduction in British Columbia – Jane Buxton
- Participants’ profile in a trial testing treatment with injectable opioids under supervision for long-term heroin injectors: Implications for patient eligibility for these treatments – Eugenia Oviedo-Joekes
- Substance-using street-involved youth perspectives on negative experiences in school environment – Robert Rivers 🐾

### Health Protection - 2

#### Oxford, Third Floor

- Evaluating and supporting research utilization among injury prevention organizations – Jennifer Boyko
- Testing of a Booster Seat APPLication to identify the the appropriate seat for a child – Chris Thrasher
- Twenty years of PFD non-wearing and wearing In Canada: 2,000 lives and 4 billion dollars lost – Peter Barss
- Evaluation of a look-back investigation into a dental office with breaches in infection control – Karin Goodison
- Environmental exposures associated with antimicrobial-resistant Escherichia coli causing urinary tract infections – Ameer Manges

### World Café - 2

#### Brighton/Kensington, Fourth Floor

- The assessment of an integrated, comprehensive competency-based framework for public health – Hazel Gilchrist
- Evidence to action: National public health guidance for health promotion and chronic disease prevention – Karen Grimsrud
- Leadership in health equity: A case study of the social determinants of health public health nurse initiative – Karen Fish
- Application of criteria-based resource allocation in local public health – Ross Graham 🐾

## 12:30 – 13:30 NETWORKING LUNCH WITH EXHIBITORS

### REGENCY BALLROOM, THIRD FLOOR

Buffet lunch included

## 12:30 – 13:30 PAHO FILM SESSION

### REGENCY E & F, THIRD FLOOR

### Best practices on public health in the Region

A collection of short videos produced by the Pan American Health Organization (PAHO) highlighting public health initiatives in the Americas will be presented. This presentation will provide participants with a visual perspective of PAHO's work with governments, communities and other partners. The films will be followed with a Q & A session. Lunch will be provided. Videos will include:

- Paraguay: Improving Health and Access to Health Services in the Paraguayan Chaco
- Peru: Health for the Most Vulnerable Populations in the Amazon Region

*Presented by the Pan American Health Organization*



13:30 – 15:00 CONCURRENT SESSIONS

## WORKSHOP

**BalancedView: Addressing weight bias and stigma in health care****PLAZA B, SECOND FLOOR**

Weight bias and stigma in health care settings are well documented in the literature. Evidence suggests that health care professionals may endorse stereotypes and negative attitudes about overweight and obese patients and that there is a significant impact of weight bias on mental and physical health. The development and implementation of effective strategies for reducing weight bias and stigma in the health system is a priority to promote overall health and well-being of patients.

BC Mental Health and Substance Use Services (BCMHSUS) has developed an evidence-informed, online resource to address weight bias and stigma in the health care setting. *BalancedView* is a resource designed to:

- educate health professionals about the prevalence of weight bias and stigma in health care;
- increase awareness of the potential harms associated with weight bias and stigma; and
- provide tools for reducing weight bias and stigma in practice.

Participants will engage in dialogue and experiential activities. Discussion will focus on reflections on weight bias and stigma in health care, and discussion of barriers/enablers to implementing health-centred approaches.

**Learning Objectives:**

- Understand weight bias and stigma within health care.
- Reflect on personal attitudes/beliefs about weight and body size.
- Identify strategies for reducing weight bias and stigma in practice.
- Discuss the *BalancedView* resource in the context of health care.

**Speakers:**

- Charlene King, Project Manager, Health Literacy, BC Mental Health and Substance Use Services
- Kimberley Korf-Uzan, Project Manager, Health Literacy, BC Mental Health and Substance Use Services

**Building health systems resilience in Latin America and the Caribbean****PLAZA C, SECOND FLOOR**

In this session, the Pan American Health Organization (PAHO) will present and discuss two priority areas for Latin America and the Caribbean (LAC) and highlight Canada's significant role in supporting the health of the peoples of the Americas.

PAHO Member States recently approved the resolution on Universal Access to Health and Universal Health Coverage (October 2014), where Canada played a leadership role. This resolution calls for health systems to implement actions based on four recommendations pertaining to access, stewardship and governance, financing and multisectoral coordination. Presenters will describe the conceptual framework and implications for its application.

In response to the WHO declaration of the Ebola Virus Disease outbreak in West Africa, the PAHO Director instructed the Secretariat to prioritize technical cooperation to Member States to enhance preparedness to respond to epidemiological outbreaks in LAC. This presentation will explore the steps taken to ensure coordination across the Region.

**Learning Objectives:**

- Review the Strategy for Universal Access to Health and Universal Health Coverage in LAC and its implications.
- Examine the threat of Ebola in LAC and how to build preparedness for an event that has not occurred.
- Discuss implications for public health practice in the Region.

**Speakers:**

- Roberta Andraghetti, Regional Advisor – International Health Regulations, Pan American Health Organization/World Health Organization
- James Fitzgerald, Director, Health Systems and Services Department, Pan American Health Organization/World Health Organization

**Session Chair:**

- Francisco Becerra, Assistant Director, Pan American Health Organization/World Health Organization

*Presented by the Pan American Health Organization*



#PublicHealth15



### Key factors that promote children's mental health

GEORGIA A, SECOND FLOOR

A lifetime of well-being and the resilience to address unforeseen events is based on the foundations that are established growing up. The return on investment associated with mental health and resiliency is great, with direct costs saving of 7 to 1 and a total return of 36 to 1; these figures do not include the emotional and social costs. CPHA members recognize this relationship and have asked the Association to establish policy and advocacy directions for child and youth mental health promotion. Although some of our partners and stakeholders have made significant progress in de-stigmatizing mental illness and developing programs and services to treat mental illness in children, there have been fewer coordinated and focused investments in mental health promotion.

Promoting mental health is an upstream activity which promises to create an atmosphere in Canada that will truly foster long-term well-being in children and their families. CPHA wants to contribute to a coordinated policy position to promote children's mental health. The purpose of this session is to discuss policy and program initiatives in Canada that promote children's mental health, and identify leading factors for policy work by CPHA in this area. The session presenters will direct facilitated table discussions to gain your feedback.

#### Learning Objectives:

- Explain the existing initiatives associated with child and youth mental health promotion in Canada.
- Identify the key factors for policy development related to child and youth mental health promotion.

#### Speakers:

- Suzanne Jackson, Chair-Elect, Canadian Public Health Association
- Ingrid Tyler, Public Health Physician, Health Promotion Chronic Disease and Injury Prevention, Public Health Ontario

#### Session Chair:

- Frank Welsh, Director, Policy Development, Canadian Public Health Association

*Presented by the Canadian Public Health Association*



### PANEL

### Life after Housing First: How can we better support the integration and participation of formerly homeless citizens in our communities?

STANLEY, 34TH FLOOR

Supported housing programs, such as Housing First, have demonstrated success in helping transition the most vulnerable homeless individuals into independent housing. The Housing First model offers choice and immediate access to housing in the community, with flexible recovery-oriented services. However, evidence suggests that many homeless citizens with mental health issues face ongoing challenges integrating into the community once housed, and can often remain socially isolated.

This session will explore key components and dimensions of community integration from a recent scoping review. Discussion will be informed by front-line insights on unmet and continuing needs of formerly homeless individuals. Former participants from the Vancouver site of the national At Home/Chez Soi project will also contribute their peer expertise, sharing first-hand experiences and impacts of Housing First in their lives, thus strengthening the dialogue on research, policies and practices to more effectively integrate formerly homeless persons into the broader community. The role of public health in supported housing will be discussed.

#### Learning Objectives:

- Illustrate the importance of housing as a social determinant of health and mental health.
- Identify the hidden health and social needs of vulnerable populations.
- Discuss the role of supported housing as a population/public health intervention and mechanism towards community integration and long-term recovery.

#### Speakers:

- Sindi Addorisio, Housing First Program Analyst, Homeward Trust Edmonton; Coordinator and Field Office Manager, Vancouver At Home/Chez Soi Project, Centre for Health Evaluation and Outcome Sciences, University of British Columbia
- Faith Eiboff, PhD Student, School of Population and Public Health and Department of Psychiatry, University of British Columbia
- Jim Frankish, Professor, School of Population and Public Health, University of British Columbia
- Members of the Vancouver Housing First Speakers Bureau, RainCity Housing and Support Society

#### Session Chair:

- Jim Frankish, Professor, School of Population and Public Health, University of British Columbia



## 13:30 – 15:00 CONCURRENT SESSIONS

## WORKSHOP



## Notifiable disease reporting in Canada: Online resources and an exploration into the past, present and future of national notifiable disease policy and data

GEORGIA B, SECOND FLOOR

Notifiable disease surveillance is a core priority and function of public health in Canada. As our capacity to monitor and respond to infectious disease outbreaks and epidemics is improved, it is important to keep in mind that surveillance data should always be interpreted within the context of its collection. The Public Health Agency of Canada (PHAC) and the National Collaborating Centre for Infectious Diseases (NCCID) both offer online resources to assist public health practitioners, researchers and decision makers interpret past and present data on notifiable diseases in Canada.

This workshop will demonstrate the functionality of these resources, and orient participants to important data limitations and other nuances. Public health students, analysts and specialists will benefit from this user-friendly session involving a combination of presentations, hands-on learning and interactive discussion. A personal computer or tablet is not necessary but will add to the experience of the workshop.

### Learning Objectives:

- Locate and operate two useful Canadian public health resources for notifiable disease information.
- Recognize the context and potential limitations of notifiable disease reporting in Canada so as to facilitate interpretation and stimulate discussion about past and present notifiable disease trends.

### Speakers:

- Shivoan Balakumar, Project Manager, National Collaborating Centre for Infectious Diseases
- Elspeth Payne, Epidemiologist, Centre for Communicable Diseases and Infection Control, Infectious Disease Prevention and Control Branch, Public Health Agency of Canada



## WORKSHOP

## Organizational capacity for public health equity action: Are MPH graduates prepared?

PLAZA A, SECOND FLOOR

In this workshop, participants will reflect on how Master of Public Health (MPH) graduates contribute to public health capacity to reduce health inequities. The workshop is aimed at participants who are currently enrolled in a Canadian MPH program, have graduated from an MPH program, are responsible for hiring MPH graduates, or who work with MPH graduates.

The session will describe the Conceptual Framework of Organizational Capacity for Public Health Equity Action (OC-PHEA), focusing on workforce development, and summarize what is known about the equity focus in current Canadian MPH programs. Participants will then have an opportunity to a) use the OC-PHEA framework to reflect on current and/or desired knowledge and skills related to promoting health equity in MPH programs, and b) recommend minimum expectations for revising current MPH program guidelines to strengthen the equity focus.

### Learning Objectives:

- Describe current Canadian MPH program guidelines and summarize key findings of a MPH program scan, regarding equity content.
- Apply the Conceptual Framework of OC-PHEA to analyze how MPH programs currently provide necessary knowledge/skills for graduates to contribute to public health capacity to reduce health inequities in the Canadian public health setting.
- Recommend minimum expectations to revise current MPH guidelines to strengthen equity content.

### Speakers:

- Benita Cohen, Associate Professor, College of Nursing, Faculty of Health Sciences, University of Manitoba
- Trina Arnold, Instructor II, College of Nursing, Faculty of Health Sciences, University of Manitoba
- Hannah Moffatt, Population Health Equity Lead, Winnipeg Regional Health Authority

### DID YOU KNOW?



The **Canadian Institutes of Health Research (CIHR)** invests in nine large initiatives that translate research into results for Canadians' wellbeing and the global community. Examples include:

- **Pathways to Health Equity for Aboriginal Peoples:** CIHR has allocated \$23 million for work to improve oral health, tuberculosis, diabetes/obesity and suicide prevention in Indigenous communities.
- **Environments and Health:** CIHR will provide \$40million for research that addresses complex Canadian environmental and health-related challenges, like agri-food production, resource development and urban form.



### PANEL

## Preventing overdose deaths by expanding access to community-based naloxone programs

SEYMOUR, 34TH FLOOR

Naloxone is a safe, prescription-only medication that restores breathing in the event of an opioid overdose. The BC Take Home Naloxone (THN) program began in August 2012 to reduce deaths and other harms associated with opioid overdose. At participating sites, clients are trained on how to prevent, recognize and respond to an opioid overdose, and eligible clients receive a naloxone kit. By January 2015, the program has been implemented at over 62 sites across BC; over 2,700 people have been trained, 1,700 kits dispensed and 162 overdose reversals reported. This panel will share the successes and challenges of implementing similar programs in Canada, as well as showcase some unique ways in which this life-saving service is being provided despite regulatory barriers.

### Learning Objectives:

- Explain the basic requirements for setting up a THN program.
- Describe the utility of THN programs in reducing harms and deaths from problematic opioid use.
- Identify ways to reduce barriers for people who use opioids to access naloxone.

### Speakers:

- Keren Mitchell, Nurse Practitioner, Inner City Youth Mental Health
- Andrea Kyle, THN Program Coordinator, Primary Outreach Services
- Alex Scott, Peer Programs Coordinator, Vancouver Coastal Health
- Erika Thomson, STOP HIV Outreach Worker, Warmzone
- Jeff Walsh, Harm Reduction Coordinator, Interior Health Authority



### WORKSHOP

## Program sustainability in chronic disease prevention: Lessons learned from five years of CLASP

ENGLISH BAY, 34TH FLOOR

Many chronic disease prevention interventions cease to exist after short funding periods or are interrupted by changes from political cycles. Influencing program and policy change is an effective method to sustain efforts from these interventions beyond the end of their initial implementation. In addition, population and public health professionals may lack crucial skills in program sustainability. Through the Coalitions Linking Action and Science for Prevention (CLASP) initiative, many lessons have been learned related to program sustainability in Canada.

During this session, speakers will share lessons learned and tools from successful sustainability efforts of three completed CLASP projects. Participants will then have an opportunity to build their skills in program sustainability and apply an internationally recognized tool on sustainability to their own work during an interactive component of the workshop. Participants should come prepared with a program in mind to assess its sustainability.

### Learning Objectives:

- Explore CLASP sustainability experiences and apply key aspects of program sustainability to their chronic disease prevention work.
- Identify a program's sustainability strengths and weaknesses by using an internationally recognized sustainability assessment tool.
- Identify and discuss a program's sustainability actions and next steps.

### Speakers:

- Deb Keen, Director, Prevention and Research, Canadian Partnership Against Cancer
- Kami Kandola, Deputy Chief Medical Health Officer, Government of Northwest Territories
- Christopher Politis, CLASP Lead, Canadian Partnership Against Cancer

### Workshop Facilitator:

- Christopher Politis, CLASP Lead, Canadian Partnership Against Cancer



13:30 – 15:00 CONCURRENT SESSIONS



## PANEL

## Realist synthesis: A methodology for the systematic review of public health evidence in complex systems

CYPRESS, 34TH FLOOR

This session is an interactive forum, where a panel of leading researchers in the area of the application of realist synthesis in public health will come together for a dialogue about the emerging experiences, opportunities and challenges in using this approach to the systematic review of evidence in relation to complex public health topics.

The panelists are leading researchers, holding peer-reviewed funding from the Canadian Institutes of Health Research to conduct realist syntheses on a variety of public health topics. They will use their collective knowledge to share with the audience the rationale for, and some of the exciting results emerging from, the use of this approach. In particular, the panel will explore how and why realist synthesis offers a way of addressing the difficulties of synthesizing evidence of public health interventions/policies that are themselves complex adaptive intervention systems intervening in complex adaptive social systems.

### Learning Objectives:

- Describe the rationale for using realist synthesis for complex public health topics.
- Appraise the emerging findings of several realist syntheses.
- Identify several key challenges and opportunities in using the realist synthesis approach in public health.

### Speakers:

- Simon Carroll, Assistant Teaching Professor, Department of Sociology, University of Victoria
- Marjorie MacDonald, Professor, School of Nursing, University of Victoria
- Sue Mills, Clinical Associate Professor, School of Population and Public Health, University of British Columbia
- Ketan Shankardass, Assistant Professor, Department of Health Sciences, Wilfrid Laurier University; Research Scientist, Centre for Research on Inner City Health, St. Michael's Hospital; Assistant Professor, Epidemiology, Dalla Lana School of Public Health, University of Toronto

### Session Chair:

- Justin Jagosh, Senior Research Fellow, Centre for Advancement in Realist Evaluation and Syntheses, Institute of Psychology Health and Society, University of Liverpool



## PANEL

## Re-thinking determinants of Indigenous Peoples' health in Canada

GROUSE, 34TH FLOOR

Contributors to the 2015 National Collaborating Centre for Aboriginal Health (NCCAH) book, *Determinants of Indigenous Peoples' Health in Canada: Beyond the Social*, demonstrate that colonialism continues to be a fundamental determinant of Indigenous health and well-being in Canada and that Indigenous knowledges and ways of being in the world are the primary frame of reference for understanding current health realities in Indigenous communities.

Dr. Charlotte Loppie examines historical and contemporary root causes of health disparities experienced by Aboriginal peoples in Canada, including racist colonial policies and practices and the lasting legacies which continue to place First Nations, Inuit and Métis peoples at marked disadvantage in the present day. Métis scholar Dr. Brenda Macdougall charts the importance of stories and narrative genealogy to the health and well-being of Indigenous peoples in Canada. Shirley Tagalik points to Inuit Qaujimajatuqangit, or Inuit worldview, which confirms the central role of holism – relationality and reciprocity – in all aspects of Inuit life. As part of this exploration, Tagalik shows how core concepts of connectedness, belonging, and respectful relationship building are essential to Inuit understandings of well-being.

### Learning Objectives:

- Compare mainstream and Indigenous understandings of social determinants of health.
- Examine how legacies of colonialism perpetuate marked health disparities between Indigenous and non-Indigenous peoples in Canada.
- Explore health and wellness through Indigenous epistemologies, narratives and worldviews.

### Speakers:

- Charlotte Loppie, Director, Centre for Aboriginal Health Research, University of Victoria
- Brenda Macdougall, Chair of Métis Research, University of Ottawa
- Shirley Tagalik, Inukpaujaq Consulting

### Session Co-chairs:

- Margo Greenwood, Academic Leader, National Collaborating Centre for Aboriginal Health
- Sarah de Leeuw, Research Associate, National Collaborating Centre for Aboriginal Health

### World Café - 3

### Brighton/Kensington, Fourth Floor

- Addressing practical challenges in implementing equity principles in public health work – Elizabeth Dyke
- We're all in this together: Developing cross-sectoral partnerships to impact structural factors that contribute to HIV risk for men who have sex with men – Elizabeth Holliday
- Translating knowledge for gender transition in Nova Scotia – Kirk Furlotte
- First do no harm: Addressing the risks to public health from humanitarian interventions – Adam Houston



### From research to action: Examining the link between early childhood outcomes, government spending, and interventions supporting healthy child development

#### PLAZA C, SECOND FLOOR

The early years of life are crucial in influencing a range of health and social outcomes across the life course. Many challenges for adults—mental health, obesity, cardiovascular disease, criminality, competence in literacy and numeracy—have their roots in early childhood. Providing supportive conditions for early childhood development is more effective and less costly than attempting to address the consequences in later life. Like the general pattern of health disparities found in the adult population, the social determinants of health are central to challenges facing Canada's children, and the generations raising them. However government investments in these social determinants (such as spending on parental time, early care and education services, and cash transfers) occur primarily outside of Ministries of Health and may compete for government resources. Interventions enriching childhood environments have the potential to reduce adversities and support healthy child development.

This session will highlight findings from a pan-Canadian comparison of vulnerability rates in children, discuss changes in government spending over time on early child development and discuss some of the federal and provincial policies and interventions that support families with young children. Presenters will explore key drivers in and barriers to effective implementation of such interventions that can create vital, productive communities for our children and the adults raising them.

#### Learning Objectives:

- Examine the link between early child development and the health system and present findings from a pan-Canadian comparison of vulnerability rates in children.
- Examine government commitments to fund policies for the generation raising children relative to the growth in medical care spending, and discuss both in the context of government revenue collection.
- Explore a promising intervention that starts in very early childhood, focusing on BC's evaluation of the Nurse-Family Partnership program as an exemplar for addressing social determinants of health while also improving children's mental health and development.

#### Speakers:

- Babita Gupta, Program Lead, Canadian Population Health Initiative, Canadian Institute for Health Information
- Paul Kershaw, Associate Professor, School of Population and Public Health, University of British Columbia; Founder, Generation Squeeze; Associate Director, Human Early Learning Partnership
- Charlotte Waddell, Canada Research Chair in Children's Health Policy, Professor and Director, Children's Health Policy Centre, Faculty of Health Sciences, Simon Fraser University

#### Session Chair:

- Jean Harvey, Director, Canadian Population Health Initiative, Canadian Institute for Health Information

*Presented by the Canadian Institute for Health Information*

#### DID YOU KNOW?



The six **National Collaborating Centres (NCCs) for Public Health** promote and improve the use of scientific research and other knowledge to strengthen public health practices and policies in Canada. They identify knowledge gaps, foster networks, and help to identify and address public health priorities. Find out more at [www.nccph.ca](http://www.nccph.ca)



**15:30 – 17:00 CONCURRENT SESSIONS****Publishing in the Canadian Journal of Public Health: Tips from senior editors****GEORGIA A, SECOND FLOOR**

As the only Canadian peer-reviewed publication dedicated to public health in Canada, the *Canadian Journal of Public Health* (CJPH) should be a venue of choice for Canadian researchers and graduate students to publish original results from their research projects. Publishing in peer-reviewed journals, however, is often a hazardous journey. Typically, the CJPH receives 400 papers per year for consideration, two thirds of which are rejected outright, i.e., without being sent to peer review. In this workshop, senior editors from CJPH will share with participants some of the basic rules for developing and successfully submitting a manuscript for a peer-reviewed journal.

**Learning Objectives:**

- Identify key aspects of presenting a manuscript to CJPH.
- Compose an informative abstract.
- Develop a manuscript to publish results of original quantitative or qualitative research.

**Speakers:**

- Trevor Hancock, Professor and Senior Scholar, School of Public Health and Social Policy, University of Victoria
- Jean Shoveller, Professor, School of Population and Public Health, University of British Columbia

**Session Chair:**

- Louise Potvin, Professor, Department of Social and Preventive Medicine, Faculty of Medicine, University of Montréal

*Presented by the Canadian Journal of Public Health***15:30 – 17:00 ORAL ABSTRACT SESSIONS****Building Public Health System Capacity - 5****Cypress, 34th Floor**

- Effective argumentation for policy change on household food insecurity: An analysis of Canadian policy entrepreneurs – Laura Anderson 🐾
- Civil society and food policy – Wanda Martin
- Policy metaphors and the ethics of policy on food advertising to children – Catherine Mah
- Impact of a large-scale nutrition labelling system on purchasing of calories, saturated fat, and sodium in supermarkets in Ontario – Jocelyn Sacco
- Feasibility study of Toronto Public Health's savvy diner menu labelling pilot project – Dia Mamatis

**Building Public Health System Capacity - 6****English Bay, 34th Floor**

- Implementation and impact of public health policies: A comparison of British Columbia and Ontario – Marjorie MacDonald
- A population and public health surveillance plan for British Columbia – Mike Pennock
- For good measure: Performance measurement for improved public health practice – Monali Varia
- Complex networks and epidemics – Simon Carroll
- Politics and policy experiments – The rise and fall and rise again of Bill C-32: An Act to amend the Tobacco Act – Raphael Lencucha

**First Nations, Métis, and Inuit Communities - 2****Grouse, 34th Floor**

- Outcomes of primary maternity care in the Northwest Territories – Patricia Janssen
- The social determinants of substance use during pregnancy: Supporting wellness among young Aboriginal mothers – Sana Shahram 🐾
- Healthy weights interventions in Aboriginal children and youth – Martin Cooke
- Social determinants of Inuit youth mental health in Nunavik: A multilevel analysis – Andrew Gray 🐾
- Correlates of physical activity among adult Métis – Christopher Ryan

**Health Assessment and Disease Surveillance - 4****Prince of Wales, Third Floor**

- Development of an STI clinic-based surveillance system in British Columbia – Jason Wong
- Health equity assessment of STI clinical nursing guideline – Cheryl Prescott
- Improving STBBI prevention and reducing associated stigma and discrimination: Analysis of environmental scan and key informant interview findings – Rachel MacLean
- The return of infectious syphilis – Michael Whelan
- Enhanced HIV contact tracing is highly effective at diagnosing new cases of HIV in Vancouver – Logan Chinski

### Health Interventions - 5

### Oxford, Third Floor

- Successful community engagement to implement recommendations from an Ottawa-based harm reduction needs assessment – Aileen Reynolds
- Strengthening the service community to address the diverse needs of women receiving opiate substitution therapy – Shannon Dowdall-Smith
- A cost-benefit/cost-effectiveness analysis of unsanctioned supervised injection facility in the downtown eastside of Vancouver – Ehsan Jozaghi 🇮🇷
- A public health approach for controlling currently illegal drugs – Mark Haden
- Street drug testing: Does Canada have a public health blind spot? – Kenneth Tupper

### Health Interventions - 6

### Seymour, 34th Floor

- Strengthening knowledge syntheses at Public Health Ontario: Processes and tools used by health promotion, chronic disease and injury prevention – Justin Thielman
- Getting to best: Putting promising practices in health promotion and chronic disease prevention on the Public Health Agency of Canada Canadian Best Practices Portal – Suzanne Jackson
- Best practices: Linking public health professionals and training internationally – Ilya Plotkin
- The face of chiropractic in Canada: Evidence-based? – Jacob Shelley 🇺🇸
- Social media and public health: A cross-Canada study of public health practitioners – Cynthia Weijs 🇺🇸

### Health Interventions - 7

### Stanley, 34th Floor

- Economic benefits of risk factor reduction in Canada – Hans Krueger
- Regulating electronic nicotine delivery systems – Brent Friesen
- The utility of critical ethnography to address underlying mechanisms that link complex influences on smoking – Duns Oladele
- Flavoured alternate tobacco use is associated with cigarette smoking susceptibility among Canadian youth: Findings from the Youth Smoking Survey 2012/2013 – Leia Minaker
- Effect of smoke-free patio policy of restaurants and bars on exposure to second-hand smoke – Leia Minaker

### Health Promotion - 7

### Georgia B, Second Floor

- One size does not fit all: Introducing an equity framework into a tobacco reduction strategy – Lorraine Greaves
- Strategies for evaluating a diverse and complex Healthy Community Partnership program – Judith Eigenbrod
- Sustainable Childhood Obesity Prevention (SCOPE) through community engagement: Achieving collective impact to raise generations of healthier kids – Shazhan Amed
- On the path to better health: Ten years of chronic disease prevention in British Columbia – Rita Koutsodimos
- The McMaster Optimal Aging Portal: A one-stop shop for evidence-based information on healthy aging – Susannah Watson

### Health Promotion - 8

### Plaza A, Second Floor

- The Youth Engagement Toolkit: Bringing youth voice and inclusion to comprehensive school health – Katherine Eberl Kelly
- Evaluating the effectiveness of comprehensive school health on student achievement: Developing a set of core indicators and measures – Katherine Eberl Kelly
- School and community partnerships moving knowledge to action: Did we do that? – Donna Murnaghan
- What are the costs of implementing a health-promoting schools program? – Jessie-Lee McIsaac 🇺🇸
- The status of evaluations of school nutrition policies: A synthesis of Canadian research – Michelle Vine

### Health Promotion - 9

### Plaza B, Second Floor

- Fostering healthier food environments in Alberta recreation facilities to support community wellness – Lisa McLaughlin 🇺🇸
- Examining the role of street design in creating healthy and engaging communities – Nadha Hassen 🇺🇸
- The public health potential of transit ridership in a mid-sized Canadian city: A longitudinal analysis of commute pattern changes among employees at Queen's University – Patricia Collins
- Conceptualizing neighbourhood for population health research – Novella Martinello 🇺🇸
- Public health impacts of hydraulic fracturing: Seismic activity and potential risks – Anne-Marie Nicol

### World Café - 4

### Brighton/Kensington, Fourth Floor

- Health promotion in Canada: What does it mean to be 'Alive and Kicking'? – Irving Rootman
- Working towards health equity in Newfoundland – Martha Traverso-Yepetz
- The social and ecological determinants of health: Where to from here? – Maya Gislason
- Public health and do-it-yourself urbanism – Ross Graham 🇺🇸

**17:00 – 20:00 NETWORKING EVENT****Making connections: The National Collaborating Centres for Public Health networking event****REGENCY E & F, THIRD FLOOR**

Join the NCCs for Public Health on May 26 for a networking dinner!

The six National Collaborating Centres for Public Health (NCCs) have served public health staff across Canada for almost a decade. A unique knowledge hub, the NCCs provide the public health system with an array of evidence-based resources, multi-media products, project networks, and knowledge translation services.

As proud collaborators for Public Health 2015, the NCCs are pleased to provide delegates with an opportunity to network with colleagues from across the country and explore options for the future.

Looking to the next five years:

- How can the NCCs help you apply knowledge and evidence in your everyday practice?
- What are the opportunities for the NCCs to mobilize public health knowledge across Canada?

Join us for a not-to-be-missed dinner event on Tuesday, May 26, starting at 5 p.m. Please note that space is limited and that event registration must be completed during the Public Health 2015 conference registration process.

*Presented by the National Collaborating Centres for Public Health*

**18:00 – 19:30 NETWORKING EVENT****Healthy Networking 101****GROUSE, 34TH FLOOR**

A healthy networking environment needs three things: cocktails, canapés and conversation. We're providing the first two – we just need you to start the conversations.

Once again, the School of Public Health is pleased to host this informal get-together for conference delegates. Join Dean Kue Young for a healthy dose of discussion and idea sharing, and maybe some laughs too. Networking is good for you. Come and get (re)connected with the University of Alberta's School of Public Health.

*Presented by the University of Alberta School of Public Health*

The **National Collaborating Centre for Environmental Health (NCCEH)** specializes in current and emerging environmental public health issues associated with both the natural and built environment. We provide evidence-based resources including reviews, guidance documents, and workshops on a wide range of topics such as bed bugs, built environment, drinking water, food safety, indoor air, mould, shale gas, and radon. To learn more, visit [www.ncceh.ca](http://www.ncceh.ca)

**DID YOU KNOW?****DID YOU KNOW?**

The **Public Health Association of BC's** Policy, Advocacy, and Research Committee focuses on strengthened partnerships and affecting policies that reduce health inequities. The association also has a public health blog (<https://povertybadforhealth.wordpress.com/>) our healthy voices social media campaign, which speaks out on the need for: poverty reduction, increased investment in public health, and a reduction in inequities in health.

# POSTERS

**TUESDAY, MAY 26 & WEDNESDAY, MAY 27**  
**PLAZA FOYER, SECOND FLOOR**

1. Can eating be a risk-free activity? Conceptualizing public policy initiatives aimed at improving food-related health outcomes – Shannon Majowicz
2. Cross-sectional analysis of a community-based cooperative grocery store intervention in Saskatoon – Larisa Lotoski 🍷
3. Examining food purchasing patterns from sales data at a full-service grocery store intervention in a former food desert – Larisa Lotoski 🍷
4. Prevalence of kidney disease among Métis individuals in Ontario – Danielle Nash
5. Is the word being heard? A cross-sectional examination of the relationship between physical activity and sedentary behaviour and self-perceived health – Amy Schneeberg 🍷
6. Scoping review of physical activity self-management in children with chronic illness – Lise Olsen
7. Introduction des solides et trio sucre – sel – gras : il est temps d'agir pour l'alimentation des tout-petits – Lucie Granger
8. The live 5-2-1-0 Family Physician Toolkit: A pilot study to integrate health promotion into primary care pediatric visits to achieve healthy childhood weights – Stephanie Shea
9. Disparity in early childhood development vulnerability in British Columbia – Li Rita Zhang
10. An analysis of dental emergency cases managed at the BC Children's Hospital – Jennifer Park 🍷
11. Effectiveness of vision screening programs for children ages 1-6 years: results of a systematic review – Ingrid Tyler
12. Popularity of electronic cigarette use among young people in Canada – John Stevenson
13. A picture is worth a thousand words: Examining school-based health environments through photographs – Julia Kontak
14. Capturing the wisdom and the resilience: How the pinnacle program fosters connections for alternative high school students – Genevieve Creighton
15. Does a history of sexual coercion influence adolescents' access to and use of sexual health care services? – Lucia O'Sullivan
16. The short-term effects of a rural teen pregnancy program – Rebecca Purc-Stephenson
17. Housing as a determinant of health for young mothers in rural Nova Scotia – Jacqueline Gahagan
18. Postpartum depression help-seeking experiences among immigrant and refugee women – Joyce O'Mahony
19. Immigrant women's experience of postpartum depression in Canada: A narrative synthesis systematic review – Joyce O'Mahony
20. Comparative healthcare systems program: Inspiring a new generation of public health workers through first-hand experiences of the Canadian and Taiwanese health systems – Gordon Hua 🍷
21. Community development learning needs: Assessment of the public health workforce in northern Canada – Marnie Bell
22. An evaluation of the flipped classroom model in a master's level environmental and occupational health course – Lindsay Galway 🍷
23. STI certified nursing practice in British Columbia: Supporting expanded scope of RN practice through collaboration with the CRNBC and BCCDC – Cheryl Prescott
24. Improving data: A quality improvement initiative to enhance vaccine-preventable disease surveillance in Ontario – Kenny Wong
25. To close or not to close: A review of the recent evidence on school closures for influenza – Harpa Isfeld-Kiely
26. Influenza immunization by pharmacists in British Columbia – Monika Naus
27. Varicella and zoster epidemiology in British Columbia in the pre/post vaccine era – Monika Naus
28. Improving access to primary care for men who have sex with men – Elizabeth Holliday
29. Systematic review of repeat sexually transmitted infections: Chlamydia cohort studies – Ozge Goktepe
30. Systematic review of repeat sexually transmitted infections: Gonorrhea cohort studies – Jasmine McEachern
31. Enhanced surveillance of antimicrobial-resistant gonorrhea in Canada – Elspeth Payne
32. HPV vaccine uptake in Alberta 2007-2013: The impact of vaccine funding – Xianfang Liu
33. Factors influencing parental decisions about HPV immunization for their daughters in the greater Sudbury area – Xu Wang 🍷
34. Extending Ontario's HPV vaccination program to include males – Rebecca Yeung 🍷
35. Spatial epidemiology of invasive pneumococcal disease in the Winnipeg Health Region – Joss Reimer 🍷
36. What was old is new again: The Anonymous HIV Testing (AHT) pilot in British Columbia – Bobbi Brownrigg
37. British Columbia SmartSexResource website: Who's using it and what are they looking for? – Alexandra Nunn 🍷
38. Consommations à risque pour la santé et pratique vaccinale en population française – Guillaume Velut
39. Mapping opioid overdoses and deaths in British Columbia – Ashraf Amlani 🍷
40. Intersectoral action for health equity: Engaging the public to reduce poverty – Karen Fish
41. Criminalization of the poor in Vancouver's downtown eastside – Ehsan Jozaghi 🍷





## 07:00 – 08:45 CPHA ANNUAL GENERAL MEETING

### REGENCY E & F, THIRD FLOOR



CPHA's Annual General Meeting (AGM) is open to all delegates at the conference; however, only CPHA members may vote. Prior to the start of the session, members are asked to check in at the AGM desk to obtain their voting cards. CPHA members whose membership has lapsed but who wish to attend the AGM and be eligible to vote may renew their membership just before the AGM. Anyone wishing to take out a new CPHA membership can do so by May 26<sup>th</sup>, 2015 at the registration desk. Breakfast will be provided.

## 09:00 – 10:30 POSTER VIEWING PLAZA FOYER

Delegates are invited to browse the posters and engage with presenters during the dedicated viewing sessions.

## 09:00 – 10:30 CONCURRENT SESSIONS

### WORKSHOP



### Assessing capacity to consent for health care in individuals who misuse substances

#### PLAZA A, SECOND FLOOR

Individuals who misuse substances and who are homeless or unstably housed (IMSH) are at risk of acquiring communicable diseases such as HIV, sexually transmitted infections and blood-borne infections. They have greater health needs than the general population but are often reluctant to access health care facilities, especially when substance use is involved. BC law states that individuals who are 19 years of age or older have the right to consent to or refuse health care, provided they do not lack the capacity to consent. Many health care providers find assessing clients' capacity to consent for health care challenging as, until recently, no clear guidelines have been available.

This workshop will assist clinicians with understanding the unique needs that some clients have related to consent. The Capacity Assessment Instrument for People who misuse Substances (CAIPS) aims to reduce health inequities among IMSH by reducing the risk of clients being refused care due to substance use or receiving care that they did not consent to. CAIPS will be introduced and participants have the opportunity to use the interactive instrument and then discuss the assessments through facilitated dialogue.

#### Learning Objectives:

- Describe concepts that are essential to assessing whether clients have capacity to consent to health care.
- Apply the concepts by scoring the CAIPS instrument for hypothetical clinical encounters via video clips.

#### Speakers:

- Cheryl Prescott, Professional Practice Leader and Nurse Educator, BC Centre for Disease Control
- Darlene Taylor, Research Program Manager, BC Centre for Disease Control



### The BC First Nations perspective on wellness

#### GEORGIA A, SECOND FLOOR

In partnership with BC First Nations, the First Nations Health Authority (FNHA) is working towards the vision of healthy, self-determining and vibrant BC First Nations children, families and communities using a holistic wellness approach. The First Nations Perspective on Wellness recognizes that wellness starts from every human being taking responsibility, yet it also means paying attention to social, cultural, economic and environmental determinants of health. The FNHA is working to improve First Nations public health by focusing on wellness and addressing First Nations public health issues at various levels. This session will highlight some FNHA wellness initiatives that have been impactful in transforming the wellness of individual First Nations people and communities in BC, as well as work being done in partnership with the provincial government to address the social determinants of First Nations health at a broader policy level.

#### Learning Objectives:

- Discuss the First Nations Perspective on Wellness and Wellness Streams as a unique approach to addressing First Nations public health and social determinants of health issues.
- Explore the importance of a two-way dialogue on the Perspective on Wellness in contributing to greater cultural safety of the health system and greater health literacy amongst First Nations citizens.
- Identify wellness initiatives supported by the First Nations Health Council and FNHA that have been successful in improving First Nations wellness at an individual and community level in BC.

#### Speakers:

- Evan Adams, Chief Medical Officer, First Nations Health Authority
- Leonard George, FNHA Elder Advisor, Tsleil-Waututh Nation
- Grand Chief Doug Kelly, Chair, First Nations Health Council

*Presented by the First Nations Health Authority*



### PANEL

## Canadian children's oral health: Where good partnerships matter!

SEYMOUR, 34TH FLOOR

First, a review of the current oral health status of Canadian children will be presented through different reports and studies, with a special emphasis on Indigenous populations. Next, panel members will discuss two examples where collaboration and partnership have been successful in implementing oral health projects addressing health inequalities. The Trilateral First Nations Health Senior Officials Committee (TFNHSOC) includes opportunities for all three levels of government (First Nations, provincial, and federal) to work together. Within the priority area of public health, a major focus of the committee has been on improved dental services.

Two Northern Ontario Dental Projects will be discussed as examples of collaboration through this trilateral process. Another example will look at the BC experience with the Children's Oral Health Initiative through research and clinical field-worker perspectives. A general discussion will then follow looking at how collaborations are established and work to impact and improve children's oral health.

### Learning Objectives:

- Analyze and interpret the current oral health data relating to children's oral health in Canada.
- Recognize the relevance of creating strong collaborations with diverse partners.
- Identify the role of social determinants of health.

### Speakers:

- David Ciriani, Practising Dentist and Clinical Supervisor, Children Oral Health Initiative and Dental Therapy, First Nations Health Authority
- Martin Chartier, Acting Chief Dental Officer, Public Health Agency of Canada
- Kavita Mathu-Muju, Assistant Professor, University of British Columbia, Faculty of Dentistry
- Linda Ogilvie, Public Health Advisor, Chiefs of Ontario
- Elizabeth Walker, Director, Public Health Planning and Liaison Branch, Ontario Ministry of Health

### Session Chair:

- Michael Spowart, Regional Director –Western Region, Public Health Agency of Canada



### WORKSHOP

## Citizen engagement utilizing the Anishinaabek Medicine Wheel Teachings

PRINCE OF WALES/OXFORD, THIRD FLOOR

Researchers, practitioners, decision and policy makers need to be made aware of how Indigenous Peoples' traditional knowledge systems dramatically conflict with the larger medical paradigm that still takes an illness approach to health. During this 90 minute workshop, we will focus on Indigenous principles of wellness that naturally foster the critical need for taking personal responsibility for self-care. This workshop provides a whole, holistic model (medicine wheel teachings) that addresses how this can be done individually and cooperatively between community, public health practitioners and agencies. Delegates will leave this workshop with a better understanding of how current approaches to citizen engagement and in particular patient-oriented research can be enhanced to ensure meaningful participation that addresses barriers that reinforce an illness paradigm. The aim of this workshop is for delegates to leave with new information that can inform policies, (research) practices and processes that actually meet the needs of communities and individuals.

### Learning Objectives:

- Explore the teachings of the 5 Directions of the Medicine Wheel as part of Indigenous (Algonkin/Ojibway) wisdoms and wellness system.
- Describe how to use the Medicine Wheel model in a practical way as it relates to public/personal health and well-being.
- Explore citizen engagement with First Nations, Inuit and Metis communities as a means to transition away from a system of illness to a focus on wellness.
- Illustrate how citizen engagement is about empowering the individual to not only work collaboratively but to also foster personal responsibility for self-care.

### Opening words, remarks and closing prayer:

- Roberta Price, Coast Salish Elder, Snuneymuxw and Cowichan

### Speakers:

- Cynthia Stirbys, Associate Director, Institute of Aboriginal Peoples' Health, Canadian Institutes of Health Research
- Tim Yearington (Grey Thunderbird), Author, Aboriginal Knowledge Keeper/Elder, Odawa Native Friendship Center

## 09:00 – 10:30 CONCURRENT SESSIONS



## WORKSHOP

**Facilitating dialogue to promote health equity: A workshop about workshops**

GEORGIA B, SECOND FLOOR

A skilled and enabled workforce at all levels of a public health organization is essential for taking action to promote health equity action. Winnipeg Regional Health Authority's Population and Public Health held a staff development half-day session to engage staff in dialogue about taking action to promote health equity. In this workshop, facilitators will guide participants through a mini-workshop using WRHA's staff engagement process. By reflecting on lessons learned and walking through the workshop process, participants will gain knowledge and skills in facilitating health equity learning events.

Participants will examine presentation slides about key health equity concepts, discuss facilitation techniques, and review other materials used to support the development and implementation of health equity workshops (facilitator's guides and evaluation forms). Using an innovative format of "workshopping a workshop", participants will engage in dialogue about building workforce capacity to promote health equity.

**Learning Objectives:**

- Explore the use of networking processes to share information and ideas about advancing health equity at different levels of a public health organization.
- Apply facilitation techniques to generate dialogue about promoting health equity actions within public health organizations.
- Examine presentation slides about key health equity concepts; review facilitator's guides to support workshop development; and assess evaluation forms to gather participant feedback.

**Speakers:**

- Sande Harlos, Medical Officer of Health, Winnipeg Regional Health Authority
- Hannah Moffatt, Population Health Equity Initiatives Leader, Winnipeg Regional Health Authority
- Louis Sorin, Community Area Director Downtown and Point Douglas, Winnipeg Regional Health Authority
- Lynda Tjaden, Population and Public Health Program Director, Winnipeg Regional Health Authority



## WORKSHOP

**Introduction to practical ethics for public health**

ENGLISH BAY, 34TH FLOOR

In this session, presented by the National Collaborating Centre for Healthy Public Policy (NCCHPP), participants will consider some of the whats, whys and hows of practical ethics for public health practitioners. The goal is to help participants to identify and address ethical issues in their sectors. Examples from various sectors of public health practice will be used throughout. The field of ethics is vast, and rather than selecting one approach over another, we will consider how different theories, approaches, principles and frameworks in public health ethics can have different implications. We will briefly introduce and then practice applying:

- theories such as utilitarianism and deontology;
- principle-based ethical frameworks; and
- key values and principles relating to public health.

In the second half of the session, smaller groups will deliberate on a case study in order to practise applying principles using an ethics framework.

**Learning Objectives:**

- Identify and distinguish key concepts for public health ethics.
- Apply those concepts to public health practice-specific cases in order to identify ethical issues, make ethical judgements, and justify the decisions they make.
- Ethical deliberation in small groups.

**Speakers:**

- Olivier Bellefleur, Research Officer, National Collaborating Centre for Healthy Public Policy
- Michael Keeling, Research Officer, National Collaborating Centre for Healthy Public Policy

## DID YOU KNOW?



The **National Collaborating Centre for Healthy Public Policy (NCCHPP)** has over 100 resources relating to healthy public policy, including webinars and online courses. All resources are available both in French and English on their website. Find out more at: [www.ncchpp.ca](http://www.ncchpp.ca)

### WORKSHOP



## The McMaster Optimal Aging Portal: Learn how to use this one-stop shop for evidence-based information on healthy aging

PLAZA B, SECOND FLOOR

This workshop will teach participants how to use the McMaster Optimal Aging Portal to access the best available evidence on optimal aging. Launched in October 2014 as part of the Labarge Optimal Aging Initiative, the Portal is a website that provides citizens, caregivers, clinicians, public health professionals and policy makers with easy-to-understand information, based on the best available scientific evidence. The Portal offers a combination of features that no other single site provides, and is a one-stop shop for high-quality information about how to remain healthy, active and engaged as we grow older.

Participants are encouraged to bring a smart device to participate in a live demonstration of the site features, perform practice searches with example scenarios, learn how to access research evidence and filter out low-quality information, and propose strategies for how the Portal could best fit within their own scope of practice.

### Learning Objectives:

- Explore the content available on the Portal and identify the highest-quality, most trustworthy and reliable information about optimal aging.
- Perform practice searches on the Portal using example scenarios.
- Develop skills to search for, use, and put into action what we learn online.

### Speakers:

- Maureen Dobbins, Professor, School of Nursing, McMaster University; Scientific Director, National Collaborating Centre for Methods and Tools
- Susannah Watson, Project Coordinator, Health Evidence, School of Nursing, McMaster University



### PANEL

## Public engagement: Promoting social innovation towards health and well-being for all

GROUSE, 34TH FLOOR

Intersectoral collaboration in public health and public policy requires different methods, tools and approaches to promote meaningful engagement and action across sectors. This panel will highlight several initiatives taking place across Canada to gain better understanding of tools, processes and theories that drive public engagement to strengthen representative democracy and promote health and well-being in communities. This session will include a panel discussion, as well as an interactive dialogue session using fishbowl format to be able to fully engage the audience in the discussion.

Participants will learn about various local, regional and online public engagement platforms and be able to identify limitations and opportunities that arise when engaging across various levels of government, businesses and civil society. The conclusion of the discussion will create opportunities to collaborate towards building a stronger democracy that supports a health equity agenda.

### Learning Objectives:

- Examine the power and pitfalls of social data, social media and public engagement.
- Assess how democracy is supported by engaging communities, businesses and municipalities.
- Appraise social innovation tools and processes to democratize health.

### Speakers:

- Paola Ardiles, Founder, Bridge for Health; Adjunct Professor, Health Sciences, Simon Fraser University
- Colleen Hardwick, Chief Executive Officer, PlaceSpeak
- Shannon Turner, Co-chair, Prevention of Violence Canada

### Session Chair:

- Irving Rootman, Adjunct Professor, School of Public Health and Social Policy, University of Victoria

### DID YOU KNOW?



The **National Collaborating Centre for Infectious Diseases (NCCID)** is offering new resources for public health? The Notifiable Diseases Database compares reportable disease criteria in every jurisdiction in Canada. And cross-sectoral work on influenza is bringing together the approaches of many disciplines in the response to this disease. These advances and many more are available at [nccid.ca](http://nccid.ca).





## PANEL

## Three perspectives on integrating equity into reporting: Community, public health and research

### CYPRESS, 34TH FLOOR

Purposeful reporting has been identified as a promising practice to drive action on the social determinants of health and improve health equity. The National Collaborating Centre for Determinants of Health (NCCDH) hosted a year-long learning circle to explore this further, and subsequently led a collaboration with the other NCCs to develop an “action framework” that describes the components of an equity integrated approach to population health status reporting.

The action framework includes three main sectors that are essential to the effective integration of equity into reporting that results in action on the social determinants of health. This panel will include representatives from each of the three sectors (community, public health, research), and each panelist will share their personal experiences integrating equity issues into population health status reporting. Participants will be introduced to the framework and will have an opportunity to discuss in small groups how this framework can be applied in an operational setting.

#### Learning Objectives:

- Apply the “action framework” for integrating health equity into population health status reporting in the local operational context.
- Recognize the important role each sector plays in population health status reporting that integrates health equity and drives action on the social determinants of health.

#### Speakers:

- Lydia Drasic Executive Director, BC Centre for Disease Control Operations and Chronic Disease Prevention
- Meg Holden, Associate Professor, Urban Studies and Geography, Simon Fraser University
- Jat Sandhu, Regional Director, Public Health Surveillance, Vancouver Coastal Health



## What is stigma and how does it impact STBBI prevention efforts in Canada?

### PLAZA C, SECOND FLOOR

CPHA's project *Impacting attitudes and values: Engaging health professionals to decrease stigma and discrimination and improve sexually transmitted and blood-borne infection (STBBI) prevention* aims to enhance STBBI prevention and reduce the stigma and discrimination that often hamper individuals' access to and use of available STBBI prevention services in Canada.

This workshop will explore STBBI-related stigma, including the many types of stigma, the levels at which it may manifest and impact STBBI prevention efforts, and the various ways in which stigma may be reduced at individual and organizational levels. Participants will be provided with an opportunity to complete a new stigma self-assessment tool and, in turn, reflect on the potential impact of their own attitudes and values on STBBI prevention efforts.

#### Learning Objectives:

- Discuss the various forms of stigma and the levels at which it may manifest and be confronted.
- Describe the potential impact of attitudes and values on STBBI prevention efforts and engage in an exercise of self-reflection.
- Explore the use of a stigma self-assessment tool.

#### Speakers:

- Rachel MacLean, Project Officer, STBBI Protection, Canadian Public Health Association
- Greg Penney, Director of National Programs, Canadian Public Health Association

*Presented by the Canadian Public Health Association*

#### DID YOU KNOW?



**Public Health Physicians of Canada** initiated a new CPD intervention called Population Oriented Evidence that Matters (PopEMs). Geared to both specialist and non-specialist Public Health Physicians, PopEMs will help public health practitioners stay up-to-date on a broad range of topics relevant to their practice. PopEMs will introduce readers to current evidence and help them make connections as to how this new information may impact and improve their practice. To learn more, visit our website <http://nsscm.ca>



### PANEL

## Workplace wellness in rural and remote settings: WoWing the north through partnerships in BC, the Yukon and Northwest Territories

STANLEY, 34TH FLOOR

Workplace wellness can work outside of an office environment. Working on Wellness (WoW) will share our lessons learned to date on working in rural, remote and northern work sites. WoW benefits from a partnership approach, led by strong leaders who provide knowledge and relationships within the three WoW jurisdictions – BC, Yukon Territory and Northwest Territories. Our panelists will bring the different perspectives of their geographic and sectoral experiences and the importance they place on the workplace setting to the discussion.

WoW addresses two targets in need of a tailored approach to workplace wellness: men in rural and remote work camps – a growing trend in the NWT and BC's resource industries – who are much less likely to seek out health promotion resources. In the Yukon, through the leadership of the Council of Yukon First Nations, WoW's pilot work sites are the administrative offices within First Nations communities. All of our pilots provide new perspectives on workplace wellness in the Canadian context.

### Learning Objectives:

- Describe the importance of a context-specific approach to implementing workplace wellness programs.
- Examine four different examples of workplace wellness programs – Wellness Fits, WoW BC, WoW Yukon and WoW NWT – and the requirements of adjustments for geographic and target audience differences.
- Explain the ways in which WoW has adapted to support the needs of the different target populations, and how a targeted approach will support sustainability.

### Speakers:

- Fionna Blackman, Project Manager, Working on Wellness, Canadian Cancer Society, BC and Yukon Division
- Barbara Dobson, Principal Researcher, Goodson Consulting
- Lori Duncan, Health and Social Director, Council of Yukon First Nations
- Kami Kandola, Deputy Chief Medical Health Officer, Government of the Northwest Territories

### Session Chair:

- Mary Collins, Director, BC Healthy Living Alliance Secretariat



## CPHA Policy Forum: Looking to the future

GEORGIA A, SECOND FLOOR

This Forum provides participants with an opportunity to express their point of view concerning the Association's policy-related activities. In preparation for this session, CPHA asked members to complete surveys to: identify their level of satisfaction with the Association's work during the past year; help prepare an advocacy playbook for the upcoming federal election; and examine possible advocacy activities for policy development following the election. This session will be used to review the results of the surveys, identify and clarify items for inclusion in the playbook and explore activities for policy development following the election. Contributions to discussions will be managed through facilitated table discussions. Both CPHA members and non-members are welcome to participate.

### Learning Objectives:

- Explain CPHA's main advocacy themes leading up to the 2015 federal election.
- Summarize CPHA's policy initiatives and activities for the period following the election.

### Speakers:

- Suzanne Jackson, Chair-Elect, Canadian Public Health Association
- Frank Welsh, Director, Policy Development, Canadian Public Health Association

*Presented by the Canadian Public Health Association*

### DID YOU KNOW?



The **National Collaborating Centre for Aboriginal Health (NCCAH)** has over 120 knowledge resources available on its website related to four broad themes: Indigenous Child, Youth and Family Health; Social Determinants of Health and Indigenous Peoples; Emerging Priorities in Indigenous Public Health; and Setting the Context for Indigenous Health. Download PDF publications on popular topics such as cultural safety, parenting, early childhood development, social justice, nutrition or chronic diseases from the website [www.nccah.ca](http://www.nccah.ca)

**11:00 – 12:30 CONCURRENT SESSIONS****Social innovation and public health****PLAZA C, SECOND FLOOR**

The major public health challenges of our time tend to be persistent, complex and inter-related. Social innovation is emerging as a powerful force for developing the collaborative solutions required to address them. A broad approach that can involve social entrepreneurship and financing, social innovation is being used to address society's most complex issues, from reducing poverty to creating environmentally-sustainable energy sources.

This session will provide insight into the success behind social innovation, supplying participants with a new set of tools to apply to their public health challenges.

**Learning Objectives:**

- Explain what social innovation is and how it relates to public health.
- Describe and analyze successful examples of social innovation.
- Identify applications of social innovation that exist within, or could be applied to, their own work.

**Speakers:**

- Sara Blenkhorn, Leverage Lab Director, Future Strategies
- Roger Wheeler, Professor, Okanagan School of Business, Okanagan College

**Session Chair:**

- Paola Ardiles, Founder, Bridge for Health; Adjunct Professor, Health Sciences, Simon Fraser University

*Presented by the Public Health Association of British Columbia*

**11:00 – 12:30 ORAL ABSTRACT SESSIONS****Building Public Health System Capacity - 7****Cypress, 34th Floor**

- An innovative approach to enhance the utilization of public health core competencies: The application of competency management software at Canadian public health organizations – Hazel Gilchrist
- Skills online: 10 lessons in 10 years – Andre La Prairie
- Competency-based training for medical officers of health: A model of collaborative continuing professional development – Maureen Dobbins
- Building capacity to support evidence-informed public health: An innovative knowledge broker mentoring program – Heather Husson
- Community participation and empowerment in health promotion interventions: Lessons from a professional development program – Sara Torres 🐾

**Building Public Health System Capacity - 8****English Bay, 34th Floor**

- Tackling inequalities in oral health and dental care in Canada – Paul Allison
- Providing access to equitable dental care to underserved, vulnerable populations: A case study – Bruce Wallace
- Exploring oral health within equity-oriented interventions for marginalized populations in Canada – Bruce Wallace
- Participatory research: A mediator for oral health promotion among vulnerable populations – Rana Annous 🐾
- Demand and burden of dental care in Canadian households – Mustafa Andkhoie 🐾

**Building Public Health System Capacity - 9****Grouse, 34th Floor**

- A framework for supporting informal knowledge use in public health decision-making – Jennifer Boyko
- Program Budgeting and Marginal Analysis: A priority setting and resource allocation tool for public health – Lydia Drasic
- Building capacity for an integrated smoking cessation system at the local level: People, context, technology and the role of public health – Alison Kernaghan
- Alberta Heat Alert Response System – Karina Thomas
- A review of the quality of guidelines for the management of gonococcal infections – Catherine Dickson 🐾

**Health Assessment and Disease Surveillance - 5****Prince of Wales, Third Floor**

- Monitoring access to substance-use treatment services in Canada – Tyler Pirie
- Implementation of routine overdose surveillance within Vancouver Coastal Health – Tianxin Chu
- Detecting a signal in the noise: Results of a pilot project to monitor the global spread of new drugs by monitoring media – Matthew Young
- Psychiatric medications prescribed for adolescents and young adults in Western Canada – Bernie Paillé
- Time-use patterns and the recreational use of prescription medications among youth in rural Canadian settings – Ariel Pulver 🐾

### Health Interventions - 8

#### Seymour, 34th Floor

- Public health nurses' experiences during the 2009 H1N1 response – Alana Devereaux 🐾
- Ready for a digital injection? Parents' perceptions with regard to immunization record keeping – Cassie Frazer
- Recommendations to improve the influenza immunization campaign in Nunavut – Sally (Yue) Lin 🐾
- Implementation of the BC Influenza Prevention Policy: A cross-sectional survey of healthcare facilities – Alexandra Nunn 🐾
- The epidemiology of invasive meningococcal disease in Ontario, Canada, 2000-2013 – Kenny Wong

### Health Interventions - 9

#### Stanley, 34th Floor

- It takes a community: Building community capacity to mobilize for youth suicide prevention in Ontario – Sophia Briard
- Suicide prevention: Experiences on how to research and provide policy recommendations on sensitive healthy public policy issues – Ashleigh Dalton
- The relationship between childhood physical abuse and self-esteem in adulthood: Findings from a Canadian population-based study – Faith Eiboff 🐾
- Risk factors of antenatal anxiety: A systematic review – Hamideh Bayrampour 🐾
- He'd rather die than talk about it': Using photovoice to explore the issue of rural men's depression and suicide – Genevieve Creighton

### Health Interventions - 10

#### Oxford, Third Floor

- Effectiveness of social marketing campaigns to promote physical activity in adults: A systematic review – Sameer Deshpande
- Highly walkable neighbourhoods are associated with greater levels of objectively-measured moderate-to-vigorous physical activity among Canadians – Justin Thielman
- Greater BMI associated with increased length of time in Canada among immigrants. Results from the My Health My Community survey, Vancouver Coastal Health Authority, 2013-2014 – Eleni Kefalas
- Failing Forward' in a healthy corner store conversion Project – Brian Cook
- Food knowledge and food security strategies employed by early-age mothers in British Columbia – Anna Carson

### Health Promotion - 10

#### Georgia B, Second Floor

- Intersectoral collaboration in public health – Bernie Pauly
- Mobilizing the implementation of entry-to-practice public health nursing competencies for undergraduate nursing education and PHN workforce – Susan Duncan
- What matters to people?: Preferences and mode of dissemination for health-related information by community health brokers in high-priority areas within the Niagara Region – Diane Mack
- A framework for integral involvement of First Nations people in health policy decision-making – Alycia Fridkin 🐾
- Developing culturally safe public health information – Peter Hutchinson

### Health Promotion - 11

#### Plaza A, Second Floor

- Promoting the health of rural early childhood educators and children in their care: An innovative educator-focused physical literacy and physical activity intervention – Amanda Froehlich Chow 🐾
- Nutrition Standards in Child Care Project: Understanding the practices that contribute to healthy eating environments in regulated day care centres – Misty Rossiter
- Priority Populations Project: A proportionate approach – Ingrid Tyler
- Components of positive parenting programs: A systematic review – Ingrid Tyler
- Engaging child care professionals in radon action and awareness: Results and implications of the Canadian Partnership for the Children's Health and Environment / Canadian Child Care Federation Vanguard Initiative – Erica Phipps

### Health Promotion - 12

#### Plaza B, Second Floor

- Access across birth settings: Understanding sources of conflict and controversy among maternity providers – Saraswathi Vedam
- Pre-pregnancy body mass index and gestational weight gain as independent predictors of birth weight of Brazilian newborns – Marco Mastroeni
- Developing morally sensitive policy in the NICU: Donation after cardio circulatory death – Nicole Kain 🐾
- Standardizing breastfeeding surveillance in Ontario Public Health Units: A feasibility study – Gillian Alton
- "Topping up": Intention to exclusively breastfeed and the in-hospital introduction of non-breast milk fluids – Julia Temple Newhook



**12:30 – 13:30****NETWORKING LUNCH WITH EXHIBITORS****REGENCY BALLROOM, THIRD FLOOR**

Buffet lunch included

**13:30 – 15:00****CONCURRENT SESSIONS****WORKSHOP****Assessing food environments: Building local public health capacity through partnerships and hands-on training****PLAZA B, SECOND FLOOR**

Communities across Canada are beginning to recognize food environments as important determinants of public health. To date, food environment assessment and surveillance have been inconsistent, rendering it difficult to compare food environments between jurisdictions and over time. This workshop will introduce participants to a new tool designed to assess food environments in Canada, recognizing that urban, suburban, rural, and remote communities face different challenges and facilitators to assessing and improving food environments. Participants will engage with various stakeholder perspectives, learn about new and existing resources to assess and act on food environments, and will engage in active, hands-on learning to begin the process of food environment assessment in their own communities.

**Learning Objectives:**

- Establish a plan to assess their community's food environment.
- Identify resources available to them to conduct a food environment assessment.
- Determine the value of non-traditional partners in their contexts (including various private and public stakeholders).

**Speakers:**

- Brian Cook, Health Research Specialist, Toronto Food Strategy, Toronto Public Health
- Catherine L. Mah, Assistant Professor, Health Policy, Division of Community Health and Humanities, Memorial University
- Leia Minaker, Scientist, Propel Centre for Population Health Impact; Policy Analyst, Office of Nutrition Policy and Promotion, Health Canada

**Session Chair:**

- Leia Minaker, Scientist, Propel Centre for Population Health Impact; Policy Analyst, Office of Nutrition Policy and Promotion, Health Canada

**PANEL****Building codes and the public's health: Lessons learned from the case of stairway dimensions****SEYMOUR, 34TH FLOOR**

Stairs in our homes are both very common and extensively used. While stair climbing offers many public health benefits, falls and injuries on stairs can be a major threat to our health. Over 100,000 stair-related injuries are recorded annually in Canada, leading to emergency room visits totalling approximately \$500 million in health care costs. The indirect burden of falls can include physical consequences and psychological effects estimated at 10 times the direct health care spending. The capacity of people to use stairs throughout their life also has comparably large societal impact, affecting public health.

Current Canadian building codes are the worst among English-language building codes. This panel will provide an overview of the building code modifications first proposed decades ago to increase stair safety and usability. With these modifications having been adopted in public buildings in 1995 but not in homes, the public health community began to advocate on this issue; it was not until approximately 2002 that progress was made in addressing home stair safety code. Challenges with the Canadian Commission on Building and Fire Codes will be explored and specific examples will be presented. Panelists will discuss the important issues affecting home safety and usability and examine issues that can either facilitate or obstruct progress on stair safety.

**Learning Objectives:**

- Describe the importance of the issue of home step dimensions as it impacts public health.
- Identify the factors that have impacted and improved Canadian building codes.
- Identify and recommend future advocacy and other action on the issue of step dimensions.
- Describe how Canada can be a world leader in protecting the health of Canadians using the powerful instrument of building codes.

**Speakers:**

- Jake Pauls, Principal Consultant, Jake Pauls Consulting Services
- Richard Stanwick, Chief Medical Health Officer, Vancouver Island Health Authority
- Linda Strobl, Public Health Nurse, Injury Prevention Program, City of Hamilton Public Health Services
- Bob Thompson, Senior Codes Administrator, Office of Housing and Construction Standards, Province of British Columbia

**Session Chair:**

- James Chauvin, Independent Public Health Advocate and Consultant



### WORKSHOP

## Can poor planning lead to poor health? Considering health impacts in our transportation and development decisions

### PLAZA A, SECOND FLOOR

Decision-makers are often faced with a variety of trade-offs and competing priorities, particularly with respect to transportation and development. However, transportation and development decisions have the potential to impact health on both the local and regional scale. Tools like Health Impact Assessments (HIA) provide government staff with procedures to evaluate the positive and negative health impacts of proposed policies, plans, programs and projects. HIA is not yet broadly utilized in Canada, and policy-makers and health professionals report limited experience working with HIA. To facilitate HIA use in BC, Metro Vancouver, BC Healthy Communities and EcoPlan International collaborated with health authorities and planners to compile an HIA Guidebook.

This workshop will increase participants' familiarity with the use of Health Impact Assessment for assessing the health impacts of planning and/or transportation policies, plans and projects. Working from a case study, participants will walk through the key elements of an HIA, assisted by structured decision-making tools developed for the HIA Guidebook. The session presents an opportunity to discuss the common challenges and opportunities public health practitioners might face with HIAs and to look at different approaches to HIA.

### Learning Objectives:

- Describe the characteristics, rationale for, and the steps of an HIA.
- Identify how they would apply an HIA process to land use and transportation in their own work.
- Identify and apply new tools for doing an HIA related to built environment and health, including the HIA Guidebook.

### Speakers:

- Laurie Bates-Frymel, Air Quality Planner, Metro Vancouver
- John Ingram, Principal and Senior Planner, EcoPlan International, Inc.
- James Lu, Medical Health Officer, Vancouver Coastal Health, Public Health
- Lisa Mu, Medical Health Officer, Fraser Health Authority, Public Health



### WORKSHOP

## Evidence-informed decision-making and health equity: An interactive workshop

### STANLEY, 34TH FLOOR

Using research evidence can strengthen practice and improve population health outcomes, but can be challenging when there is limited evidence on interventions that address issues related to health equity. However, there are equity-focused supports for evidence-informed practice. This workshop will review a seven-step "Evidence-Informed Public Health" (EIPH) process, and will provide an opportunity for participants to become familiar with equity-relevant methods and tools. The resources will help them find, appraise, interpret and disseminate the best available research evidence related to health equity, and help them use that evidence to address health equity issues in practice and policy decisions. This workshop is intended for participants with existing knowledge related to health equity and evidence-informed public health concepts.

### Learning Objectives:

- Describe the seven-step EIPH process, including strengths and challenges in applying evidence to interventions intended to improve health equity.
- Apply equity-relevant methods and tools related to the EIPH process in their own work.
- Identify strategies for using evidence to support work to improve health equity.

### Speakers:

- Maureen Dobbins, Scientific Director, National Collaborating Centre for Methods and Tools
- Lesley Dyck, Knowledge Translation Specialist, National Collaborating Centre for Determinants of Health

### Workshop Facilitator:

- Maureen Dobbins, Scientific Director, National Collaborating Centre for Methods and Tools

DID YOU KNOW?



The **National Collaborating Centre for Methods and Tools** offers a suite of free, interactive and self-paced online learning modules to support every step of evidence-informed public health. Practice your knowledge and skills with online activities! Earn certificates of competence! Create your free account the NCCMT's Learning Centre to get started: <http://www.nccmt.ca/learningcentre/index.php>

13:30 – 15:00 CONCURRENT SESSIONS



PANEL

## Housing, health and the Aboriginal Peoples of Canada

GROUSE, 34TH FLOOR

The session will explore the complex relationship between substandard housing issues and two known environmental contaminants in Aboriginal communities on reserves and in urban environments. While primary prevention is key to protecting the health and well-being of Aboriginal peoples, remediation of mould and radon – two known environmental health risks related to housing in Aboriginal communities – has been accomplished in some instances.

The session will examine successes and challenges of remediation programs targeting mould contamination and radon exposure in homes and will identify aspects that could enable and inform future work in this area.

### Learning Objectives:

- Describe housing conditions on reserve as well as off reserve (urban environments) and the complexities of First Nations community housing programs.
- Apply best practices for mould remediation in Aboriginal peoples' homes.
- Review strategies of success and those issues that challenge radon remediation work in Métis houses with detectable elevated radon levels.

### Speakers:

- Leo Hebert, Executive Director, Prince George Métis Housing Society
- Linda Pillsworth, Manager, Environmental Health Services, First Nations Health Authority
- Mona Shum, Occupational Hygiene and Safety Team Lead, AMEC Environment and Infrastructure
- Louis Sorin, Community Area Director, Winnipeg Health Regional Authority

### Session Chairs:

- Margo Greenwood, Academic Leader, National Collaborating Centre for Aboriginal Health
- Tom Kosatsky, Scientific Director, National Collaborating Centre for Environmental Health



PANEL

## New approaches to advancing health equity and social determinants of health in Canada: Federal, provincial and local initiatives

PLAZA C, SECOND FLOOR

In 2012, Canada and other World Health Organization Member States endorsed the Rio Political Declaration on Social Determinants of Health, a global commitment to address health inequities by acting on the social, economic, environmental, and other factors that shape health.

Consistent with the Rio Declaration, many public health departments across Canada are taking steps to reduce health inequities, often in partnership with other sectors and stakeholders. Initiatives are underway in many jurisdictions to better support vulnerable groups, strengthen the knowledge base through research and evaluation, raise awareness of the importance of equity for health, and foster cooperation and collaboration between sectors. This session will illustrate Canada's diverse approaches to reducing health inequities and acting on the social determinants of health by showcasing a range of recent efforts – at the federal, provincial and local levels – that are contributing to meeting Canada's Rio Declaration pledges.

### Learning Objectives:

- Describe the roles of various sectors in strengthening knowledge, policy, and practice to advance health equity.
- Apply knowledge and insights from the diversity of new initiatives in Canada to improve health equity and act on the social determinants of health.

### Speakers:

- Marie DesMeules, Director, Social Determinants of Health Division, Public Health Agency of Canada
- Michael Routledge, Chief Provincial Public Health Officer, Manitoba Health, Healthy Living and Seniors
- Kieran Moore, Associate Medical Officer of Health, Kingston, Frontenac, Lennox and Addington Public Health

### Discussant:

- Janet Austin, Chief Executive Officer, YWCA Metro Vancouver; Member, Canadian Council on Social Determinants of Health

### Session Chair:

- Gregory Taylor, Chief Public Health Officer, Public Health Agency of Canada



### WORKSHOP

## Popping the bubble wrap: Tools for promoting risky play for child health

ENGLISH BAY, 34TH FLOOR

The current generation of children's access to and opportunity for engaging in risk-taking through play has never been lower. Safety concerns and fears of litigation have resulted in overprotection by parents, schools, parks and others. There are profound unintended negative implications of this anxiety-based and limiting approach to children's risky play. Children are lacking crucial experiences that promote development, physical health and mental health.

This interactive and interdisciplinary workshop will present tools from child development, injury prevention and landscape architecture. We will review the supporting research, and teach participants skills for changing parents', educators' and policy makers' attitudes toward risky play, and for designing play spaces to promote challenge and development.

### Learning Objectives:

- Defend the importance of children's risky play for health and development.
- Prepare to transform key stakeholders' attitudes toward children's risky play.
- Identify attributes of high-quality play spaces for children.

### Speakers:

- Mariana Brussoni, Assistant Professor, University of British Columbia Department of Pediatrics



### PANEL

## Response to threats: Infectious disease outbreaks, and the role of Canadian research

GEORGIA A, SECOND FLOOR

This panel will address a number of aspects relevant to research and public health responses during infectious disease outbreaks. The panelists, representing both the research and public health sectors and with a wide range of expertise, will present multiple perspectives on how research can have an impact on the knowledge base needed to deliver an effective pandemic response, the effect on research capacity, and how synergistic agency relationships can be developed to deliver quality research programs in rapid manner.

### Learning Objectives:

- Identify the benefits of inter-agency collaboration for research response and intervention in a pandemic.
- Describe the benefits of creating and supporting research infrastructure and capacity, and the impact on pandemic preparedness and response.
- Demonstrate how Canadian research expertise enabled the development of vaccines against serious public health threats.

### Speakers:

- Scott Halperin, Professor of Pediatrics and Microbiology and Immunology, Dalhousie University
- Gary Kobinger, Head of Special Pathogens and Head, Vector Design and Immunotherapy, Special Pathogens Program, National Microbiology Laboratory, Public Health Agency of Canada
- Cornelius Schmaltz, Deputy Head of Unit, DG Research and Innovation, Infectious Diseases and Public Health, European Commission
- John Spika, Director General, Centre for Immunization and Respiratory and Infectious Diseases, Infectious Disease Prevention and Control Branch, Public Health Agency of Canada

### Session Chair:

- Marc Ouellette, Scientific Director, Institute of Infection and Immunity, Canadian Institutes of Health Research

### DID YOU KNOW?



The **National Collaborating Centre for Determinants of Health (NCCDH)** hosts a curated online library, linking to more than 150 resources from a wide range of sources. Each resource briefly summarized and accompanied by how-to-use tips written by our Knowledge Translation Specialists. To learn more, visit [www.nccdh.ca](http://www.nccdh.ca)



## 13:30 – 15:00 CONCURRENT SESSIONS

**Salt Smart Americas – Making partnerships work****CYPRESS, 34TH FLOOR**

The Region of the Americas has taken on the challenge of reducing illness and premature mortality due to non-communicable diseases (NCDs). Dietary salt reduction is recognized as the most cost-effective intervention to prevent or reduce hypertension rates in populations and cardiovascular disease-attributable deaths in the Region.

Since 2009, a Pan American Health Organization (PAHO) initiative has supported the countries of the Americas by providing effective tools, strategies, and interventions to reduce sodium intake levels among all people in the Region. In 2012, PAHO established the Salt Smart Consortium, in response to the global momentum to tackle NCDs with holistic “whole-of-society” approaches.

Panelists will provide an overview of the salt reduction initiative, including the program goals, actors and accomplishments. The Salt Smart Consortium will be described, including the multi-sectoral approach that contributes to the salt reduction initiatives to prevent hypertension and cardiovascular disease.

**Learning Objectives:**

- Describe the PAHO salt reduction initiatives to prevent hypertension and cardiovascular disease.
- Discuss cost-effective strategies for dietary salt reduction at the population level and ways to implement them.
- Provide examples of how governments, public health agencies, food companies and civil society can work together to increase demand for low-salt products and/or reduce the salt/sodium content in the food supply.

**Speakers:**

- Norm Campbell, Professor, Department of Medicine, University of Calgary
- Sara Delea, Director, External Affairs and Global Health & Wellness, Mondelez International
- Branka Legetic, Regional Advisor and Unit Chief, Noncommunicable Diseases and Disabilities, Department of Noncommunicable Diseases and Mental Health, Pan-American Health Organization/World Health Organization
- Eduardo Nilson, Technical Advisor for Nutrition, Ministry of Health of Brazil

**Session Chairs:**

- Anselm Hennis, Director, Department of Noncommunicable Diseases and Mental Health, Pan American Health Organization/ World Health Organization
- Hasan Hutchinson, Director General, Office of Nutrition Policy and Promotion, Health Products and Food Branch, Health Canada

*Presented by the Pan American Health Organization and Health Canada*

**PANEL****Social media to improve public health: A panel discussion****GEORGIA B, SECOND FLOOR**

This panel will focus on the use of social media initiatives to improve the health of Canadians, in the context of Canada Health Infoway's Public Health Social Media Challenge. It will appeal to any public health organization looking to understand the current and future technologies that will allow them to connect with the people and populations they serve. Panelists, from public health organizations as well as a social media expert, will discuss their campaigns and the outcomes they achieved during the Challenge, and share advice for those organizations considering using social media.

**Learning Objectives:**

- Describe the required elements of a well-planned and well-executed social media campaign.
- Assess how to apply these in a public health setting.

**Speakers:**

- John Pantherbone, Communications Officer, First Nations Health Authority
- Steve Park, Senior Vice-President, Canada, Edelman Digital
- Salim Rachid, Communications Advisor, Toronto Public Health

**Session Chair:**

- Fraser Ratchford, Group Program Director, Consumer Health and Innovation, Canada Health Infoway

## 15:00 – 15:30

## BEVERAGE BREAK

## THIRD &amp; 34TH FLOORS

## Welcome

- Michael Barnes, Executive Director, Public Health Association of British Columbia

## Grounded Change: Blending design, anthropology, business, and public health theory

Mark has been attending a day program for people with a cognitive disability for the past 14 years, yet his mental health is deteriorating. Dwayne has been homeless and visiting the same drop-in centre for 20 years, but his physical health is deteriorating. Anneke was recently re-housed after spending six months in a domestic violence shelter, and now her social health is deteriorating.

For over 10 years, InWithForward has been working with people like Mark, Dwayne and Anneke to re-design social services and social policies from the ground up in Canada, the Netherlands, the United Kingdom and Australia. With a background in public health theory, InWithForward immerses their process in the study of people and culture and flips the order in how they develop, test and tweak new services and policies.

This session will highlight a first-hand example of what building upstream linkages and coordinating system-wide efforts to address threats related to health inequities can look like. Sarah Schulman will describe a way of working that is experience-led, rather than tool-led, and how InWithForward brings together different disciplines – from psychology, sociology, design, philosophy, politics, economics, history – to debate what makes people tick and what makes change stick.

This plenary will provide delegates the opportunity to draw inspiration from unconventional methods being used to confront the diverse challenges associated with improving the social determinants of health for Canadians. Delegates will learn about how multiple interventions that activate natural networks, shape professional practices, and dismantle stuck systems can result in deep social change.

## Learning Objectives:

- Describe the 7 missing links between social services and good outcomes.
- Explore how user-centred design methods and immersive ethnography can improve social services and policies.
- Identify opportunities to integrate the principles of grounded change.

## Speaker:



Sarah Schulman, Founding Partner  
InWithForward



**08:30 – 12:30 POST-CONFERENCE SESSION PLAZA A. B. C****Finding common cause: Innovative environmental and public health action on Planetary Health**

Public health and the environmental movement share many common causes, because environmental harm almost always results in harm to human health. Both also share many common approaches, including using legal and community development strategies to bring about positive social and environmental change.

One of the major challenges we face is the enormous environmental and health impact resulting from the extraction, transportation, use and export of fossil fuels. In the face of that challenge, public health professionals and environmental organisations are increasingly finding common cause, using innovative legal and social action to confront the fossil fuel industry.

Equally important is bringing about the greater use of sustainable alternatives. Great strides are being made to create clean, green, healthy and sustainable energy systems in BC and across Canada. In this session we will explore two main approaches: taking action on fossil fuels in the Pacific Northwest (including the right to a healthy environment), and creating alternative energy sources.

**8:30 – 8:45 Introduction**

- Anthony Capon, Director, International Institute for Global Health, United Nations University
- Moderator: Trevor Hancock, Professor and Senior Scholar, School of Public Health and Social Policy, University of Victoria

**PART 1 – RIGHT TO A HEALTHY ENVIRONMENT**

Canada is one of a minority of countries where the right to a healthy environment is not enshrined in the Constitution. David Boyd is one of Canada's leading experts on environmental law will discuss the legal and constitutional issues, as well as the potential use of public health legislation and municipal by-laws to secure the right to a healthy environment.

Peter Robinson of the David Suzuki Foundation will discuss the Blue Dot campaign which is working towards the ultimate goal to amend the Charter of Rights and Freedoms to recognize the right to clean air, fresh water and healthy food for all Canadians.

**8:45 – 9:15 Innovative legal approaches**

- David Boyd, Adjunct Professor, Resource and Environmental Management, Simon Fraser University; Associate Faculty, School of Environment and Sustainability, Royal Roads University

**9:15 – 9:40 The Blue Dot Campaign**

- Peter Robinson, Executive Director, David Suzuki Foundation

**9:40 – 10:00 Discussion period****10:00 – 10:30 Nutrition Break****PART II – TAKING SOCIAL AND LEGAL ACTION ON FOSSIL FUELS IN THE PACIFIC NORTHWEST**

There are enormous environmental and health impacts as a direct result of the extraction, transportation, use and export of fossil fuels. Concern for the environment and well-being of Canadians has spurred groups from across the social spectrum to take action against fossil fuels.

Equally important is bringing about the greater use of sustainable alternatives. Great strides are being made to create clean, green, healthy and sustainable energy systems in BC and across Canada. In this section we will explore taking action on fossil fuels in the Pacific Northwest, and creating alternative energy sources.

**10:30 – 11:30 Pecha Kucha Presentations**

*Moderator: Diana Daghofer, Principle, Wellspring Strategies*

- Bruce Amundson, President, Washington Physicians for Social Responsibility (via Skype)
- Marc Lee, Senior Economist, Canadian Centre for Policy Alternatives
- Meg Holden, Associate Professor of Urban Studies, Simon Fraser University
- Cornelius Suchy, CEO, Canadian Biomass Energy Research
- Luke Smeaton, Acting Executive Director, Light House Sustainable Building Centre
- Eric Smiley, Principal, Reid Wylde Engineering
- Lauren Archibald, Western Marketing Manager, Bullfrog Power

**11:30 – 12:10 Policy and Action Perspectives – How do we go to the next step?**

- Tim Takaro, Professor, Faculty of Health Sciences, Simon Fraser University; Lead, BC Climate Change and Health Policy Group
- Tracey Saxby, Co-Founder My Sea to Sky

**12:10 – 12:30 Discussion period**

*Presented by the Public Health Association of British Columbia and the Canadian Public Health Association  
Supported by the International Institute for Global Health, United Nations University*

# CPHA 2015 HONORARY AWARDS PROGRAM

*Each year, CPHA honours individuals who or organizations that provide outstanding service to their community and profession. CPHA members nominate candidates for the following prestigious awards.*

## R.D. DEFRIES AWARDS

### HONORARY LIFE MEMBERSHIP



#### **Dr. Ronald Labonté**

Ronald Labonté, BA, MA, PhD, FCAHS, holds a Tier 1 Canada Research Chair in Globalization and Health Equity and is Professor in the Faculty of Medicine, University of Ottawa and in the Faculty of Health Sciences, Flinders University of South Australia. Ron is also adjunct Professor in the Department of Community Health and Epidemiology, University of Saskatchewan. His earlier work (1974-1998) focused on health promotion, community development, community empowerment and social determinants of health, building on his 15 years' experience working with provincial, municipal and federal public health departments. During the 1990s he worked independently, providing health promotion consultancies in dozens of countries. From 1999 until 2004 he served as inaugural director of the Saskatchewan Population Health and Evaluation Research Unit, before taking up his CRC at the University of Ottawa. For the past 20 years Ron has led research and scholarship on the health equity impacts of contemporary globalization, on which he has published extensively in the scientific and popular literature. From 2005 until 2008 he chaired the Globalization Knowledge Network for the World Health Organization's Commission on the Social Determinants of Health, some of the work of which is published in the book, *Globalization and Health: Pathways, Evidence and Policy* (Routledge, 2009). Current research interests include health equity impacts of comprehensive primary health care reforms; health worker migration; medical tourism; global health diplomacy; globalization, trade and tobacco control; austerity and health; and trade and food security. Ron has published over 200 scientific papers and several hundred popular articles, books and book chapters.

### HONORARY LIFE MEMBERSHIP



#### **Dr. William Osei**

Dr. William Osei is the Medical Health Officer for the Northern Interior region of Northern Health. Originally from Ghana, he moved to Canada in 1990. William has a master's degree in epidemiology and public health from the University of Michigan and a medical degree from the University of Ghana. He worked in several countries with the World Health Organization in the late 1980s and early 1990s, before beginning his professional service in Canada at the British Columbia Centre for Disease Control (BCCDC) and the University of British Columbia. He went on to serve as Saskatchewan's Provincial Epidemiologist for 14 years, co-leading the pilot study on diabetes surveillance in the Prairie provinces— an initiative that led to the development of the National Diabetes Surveillance System (NDSS) and guided the establishment of the National Chronic Disease Surveillance System (NCCDSS). William's other notable contributions include his development of a highly-acclaimed cross-sectoral provincial comprehensive surveillance report of injury in Saskatchewan and an innovative Northern Health communication system delivering health alerts and information directly to communities. He developed a community health alert system (Challies) in the north; he provided summarized health status data for informing staff and stakeholders, and generated ideas and resources to promote the potential of coaches (ECCAW) for healthy development of children in BC's northern communities. He also served as the Associate Editor (Book Reviews) of the Canadian Journal of Public Health from 1996-99. William is adjunct professor of epidemiology at the University of Saskatchewan and the University of Regina and a Fellow of the American College of Epidemiology.

### HONORARY LIFE MEMBERSHIP



#### **Dr. Eric Young**

Dr. Eric Young has been a health-promoting health practitioner since 1974. Eric first came to public notice in 1979 as researcher and main witness in the British Columbia Medical Association's (BCMA) intervention in the judicial enquiry into proposed uranium mining in BC. He also, while practicing family medicine, in subsequent years with the BCMA advocated in the areas of leaded gasoline, pesticide exposure, energy conservation, nuclear power and freedom of information legislation. In 1992 he entered the University of Toronto, achieving a Royal College Fellowship in Community Medicine in 1996. His work in public health has since included battling cryptosporidiosis, West Nile Virus, and child abuse in Saskatchewan, and developing consensus reports at the national level on dietary sodium, hypertension prevention and control and pandemic preparedness. Within BC he has led on pandemic preparedness, drinking water improvement, a clinic for the investigation and treatment of persons with chronic disease of possibly infectious origins, the BC Winter Olympic preparedness, motor vehicle safety and injury prevention, and the development of evidence-based child health indicators. He has also persuaded nine provincial jurisdictions to invest in research that demonstrated the efficacy of a 2-dose HPV vaccine, thus freeing up resources to enable more young women, globally, to access a cancer-preventing vaccine. Throughout his career, Eric has devoted time to mentoring and teaching, and received the 2014 UBC Preventive Medicine Residents Appreciation Award.



# CPHA 2015 HONORARY AWARDS PROGRAM

## CERTIFICATE OF MERIT



### **The Alex Community Health Centre**

For more than 40 years, The Alexandra Community Health Centre (“The Alex”) has responded to the needs of the most vulnerable people in Calgary by tackling tough health and social issues. The Alex offers a wide range of primary health care services. Its Family Health Program offers comprehensive care plus access to a variety of complementary services and recreation. The Centering Pregnancy program provides prenatal group care; the Breastfeeding Clinic provides breastfeeding support; and the Youth Health Drop-In Centre provides a safe and supportive space for youth ages 12-24. The Seniors Health Program focuses on low-income community-dwelling seniors aged 55 and older who are currently without a family physician and face complex health and social needs. In addition, the Seniors Collaborative Community Outreach Team (SCCOT) builds collaborative relationships to build community resilience – this group was extremely important during the 2013 Calgary Flood. The Alex provides accessible care via a mobile system; a Community Health Bus serves approximately 2,000 clients per year; a Youth Health Bus visits 8 schools a week and has 1,600 visits annually for a wide range of health issues; and a Dental Health Bus provides essential preventive oral health services to children in 31 partner elementary schools. Annually, The Alex distributes over 13.7 tonnes of food through its Food Supplement Program and Community Kitchen. In addition, 5,350 hampers a year are distributed and three meals a day are served to the low-income residents of The Alex’s Abbeydale supportive housing complex that helps homeless people leave street life.

## CERTIFICATE OF MERIT



### **James Chauvin**

James Chauvin’s contribution over the years and currently to global and national public health, as well as his ongoing focus on public health policy and advocacy, make him an admirable candidate for this award. Jim worked with CPHA from 1992-2013 where he had a number of roles with CPHA’s Global Health Programs, ultimately assuming the position of Director of Global Health Programs from 2005-2010. Also notable are his overseas postings as CPHA Regional Coordinator for South East Europe for 18 months and Interim Executive Director of the Southern African AIDS Trust for a six-month period. Jim also represented CPHA at the World Federation of Public Health Associations (WFPHA). He was WFPHA President (2012-2014) and is completing his term as Immediate Past-President. He became Director of Policy (2008-2013) and worked with the Board of Directors and the CPHA Membership to establish a process for CPHA’s ongoing policy function and mission. Jim supported CPHA members and the Board in the preparation of briefs and statements and also implemented CPHA action on many important policy issues, including: tobacco control, alcohol policy, illegal psychoactive substances (including the preparation of CPHA’s brief before the Supreme Court of Canada in support of supervised injection facilities), human and ecosystem health and the mining and exporting of chrysotile asbestos. Jim continues to work on a number of policy fronts, including Canadian building and fire codes, global immunization of children and deliberately falsified medicines. In both his CPHA global public health work and his policy portfolio, Jim demonstrated his skill at external representation of the Association and in developing networks with partner organizations and individuals in many parts of the world.

## RON DRAPER HEALTH PROMOTION AWARD



### **Dr. Jane Buxton**

Dr. Jane Buxton is a UBC professor, and a physician epidemiologist and Harm Reduction lead at the BC Centre for Disease Control. Working closely with peers (people who use drugs) and public health colleagues, Jane introduced the BC Take Home Naloxone (THN) program in 2012, which trains lay people how to prevent, recognize and respond to opioid overdose using naloxone. Naloxone is a safe medication which restores breathing during an opioid overdose and has no effect in the absence of opioids. Under Jane’s vision, passion and leadership, BCTHN has been implemented at 70 community sites across the province. Since its inception, program sites report training over 3,100 people, and dispensing 2,000 naloxone kits and 200 overdose reversals. Through the THN Community Advisory Board, Jane works closely with peers and front-line service providers to ensure implementation challenges are identified and addressed. For instance, reports of police confiscating naloxone kits led to the development and distribution of informational handouts for police. A mixed methods evaluation conducted in the first year of the program remains the only published evaluation of a Canadian provincial overdose prevention and response program. The BCTHN program has provided guidance to other jurisdictions looking to set up similar programs, including Alberta, Quebec and Nova Scotia. Jane’s work has influenced numerous national and regional policy initiatives, empowered people who use drugs to learn a life-saving skill, and helped reduce the burden of overdose morbidity and mortality.

# CPHA 2015 HONORARY AWARDS PROGRAM

## RON DRAPER HEALTH PROMOTION AWARD



### **Dr. Jacqueline Gahagan**

Over the past 30 years, Dr. Jacqueline Gahagan has contributed to health promotion research and advocacy at the municipal, provincial and national levels through her work in understanding the key determinants of HIV exposure and the health needs of persons living with HIV/AIDS. Her contributions are also evidenced through her longstanding service to the Ministerial Council on AIDS, her numerous publications related to HIV prevention, and her ongoing engagement with regional and national health promotion organizations. She has also worked to re-orient health services in Nova Scotia to be more responsive to the needs of LGBTQ populations across the province. This work directly engages government and community in efforts to create environments that support health through coordinated research, policy, and community-level action. The impact of this work is evidenced by numerous public health consultations and increased visibility of LGBTQ health research in Nova Scotia and across Canada. Finally, Jacqueline has contributed to public health leadership and the development of healthy public policy in Nova Scotia, and Canada, through her role on the Board of Directors of the Public Health Association of Nova Scotia and of CPHA.

## R. STIRLING FERGUSON AWARD



### **Linda Strobl**

Linda Strobl is a public health nurse, working in the Injury Prevention Program with the City of Hamilton Public Health Services. A consummate networker, she has devoted significant, unprecedented effort to increase public health participation in the public review and advocacy process related to the National Building Code of Canada (NBCC). As a member of two task groups (stairways and grab bars) and as the first representative with public health credentials on the Standing Committee on Housing and Small Buildings of the Canadian Commission on Building and Fire Codes (CCBFC), Linda has proven to be an effective and informed voice for evidence-based codes, both inside and outside the CCBFC process. Beyond extensive networking with other core professionals who are also involved with the NBCC's impact on public health, she has greatly expanded the essential participation of public health front-line staff at both local and national levels. This was most evident in September of 2014 when, beyond participating in a major webinar (hosted by Parachute), Linda motivated about 70 public health professionals to submit significant public comments on the long-awaited changes to improve home stair step dimension rules in the NBCC. This scale of public comment was unprecedented from the public health community, let alone any other stakeholder group involved with NBCC development. In summary, Linda excels at networking and communication, skills that complement her intellect and passion for policy work to impact population health with improved building codes.

## NATIONAL PUBLIC HEALTH HERO



### **Libby Davies, MP**

Ms. Libby Davies was first elected as the Member of Parliament for Vancouver East in 1997 and was the Official Opposition Spokesperson for Health and the Vice-Chair of the Standing Committee on Health from May 2011 until January 2015. Libby is also a co-Chair of the HIV/AIDS Tuberculosis Caucus, and the Chair of the Inter-Parliamentary Union's Advisory Group on HIV/AIDS and Maternal and Child Health. She has been a stalwart supporter of Public Health for many years, with a strong background as a grassroots organizer working in the Downtown Eastside of Vancouver where she co-founded the Downtown Eastside Residents Association and has worked tirelessly to promote services for those living in poverty and those struggling with mental health and addictions. Libby champions a social determinants approach to health and she played a leadership role in Parliament on many health issues, including: the exportation of asbestos; supervised injection facilities; sodium reduction; drug safety; health and safety of sex workers; refugee health; and mental health. Health and social services have been strengthened because of her efforts and she has made a real difference in the health and well-being of her community. Libby's articulate defence of social issues has helped change policies and improve the lives of Canadians, making her a Public Health Hero.

# CPHA 2015 HONORARY AWARDS PROGRAM

## DR. JOHN HASTINGS STUDENT AWARD



**Lindsay P. Galway**

Simon Fraser University

*An evaluation of the flipped classroom model in a master's level environmental and occupational health course*

## POPULATION AND PUBLIC HEALTH STUDENT AWARDS – MASTERS LEVEL



**Catherine Dickson**

University of Ottawa

*A review of the quality of guidelines for the management of gonococcal infections*



**Heather Palis**

University of British Columbia

*Factors associated with perceived abuse in the health care system among a population of long-term opioid users*

## POPULATION AND PUBLIC HEALTH STUDENT AWARDS – PhD LEVEL



**Mustafa Andkhoie**

University of Saskatchewan

*Demand and burden of dental care in Canadian households*



**Sharon Yanicki**

University of Lethbridge

*Social inclusion/exclusion: Low-income and Aboriginal mothers and grandmothers participating in a rural Alberta community*

## NCCPH KNOWLEDGE TRANSLATION GRADUATE STUDENT AWARDS



**Faith Eiboff**

University of British Columbia



**Sara Mathieu-C**

Université de Montréal



**Elinor Keshet**

University of Toronto



**Dalla Lana School of Public Health  
Ebola Working Group**

# COMMITTEES

## PUBLIC HEALTH 2015 STEERING COMMITTEE

- Ian Culbert, Canadian Public Health Association (Chair)
- Marjorie MacDonald, University of Victoria (Scientific Chair)
- Paola Ardiles, Public Health Association of British Columbia
- Danielle Arsenault, Canadian Institutes of Health Research, Institute of Population and Public Health
- David Buckeridge, Public Health Physicians of Canada
- Benita Cohen, University of Manitoba
- Diana Daghofer, Public Health Association of British Columbia
- Alexander Frame, University of British Columbia
- Alycia Fridkin, First Nations Health Authority (until January 2015)
- Margo Greenwood, National Collaborating Centres for Public Health
- Jean Harvey, Canadian Institute for Health Information, Canadian Population Health Initiative
- Odette LaPlante, Public Health Physicians of Canada
- Alia Leslie, BC Centre for Excellence in HIV/AIDS
- Jessie-Lee McIsaac, Dalhousie University
- Pemma Muzumdar, National Collaborating Centres for Public Health
- Dionne Patz, Pan American Health Organization, World Health Organization
- Ardene Robinson Vollman, Chair, Canadian Public Health Association Board of Directors
- Kayla Seratto, First Nations Health Authority (from January 2015)
- Cynthia Stirbys, Canadian Institutes of Health Research, Institute of Aboriginal Peoples Health Initiative

## SCIENTIFIC REVIEW COMMITTEE

- Marjorie MacDonald, University of Victoria (Chair)
- Danielle Arsenault, Canadian Institutes of Health Research, Institute of Population and Public Health
- David Buckeridge, Public Health Physicians of Canada
- Luis Gabriel Cuervo, Pan American Health Organization
- Alexander Frame, University of British Columbia
- Margaret Haworth-Brockman, National Collaborating Centres for Public Health
- Odette LaPlante, Public Health Physicians of Canada
- Alia Leslie, BC Centre for Excellence in HIV/AIDS
- Jessie-Lee McIsaac, Dalhousie University
- Dana Riley, Canadian Institute for Health Information, Canadian Population Health Initiative
- Irv Rootman, Public Health Association of British Columbia
- Isaac Sobol, First Nations Health Authority

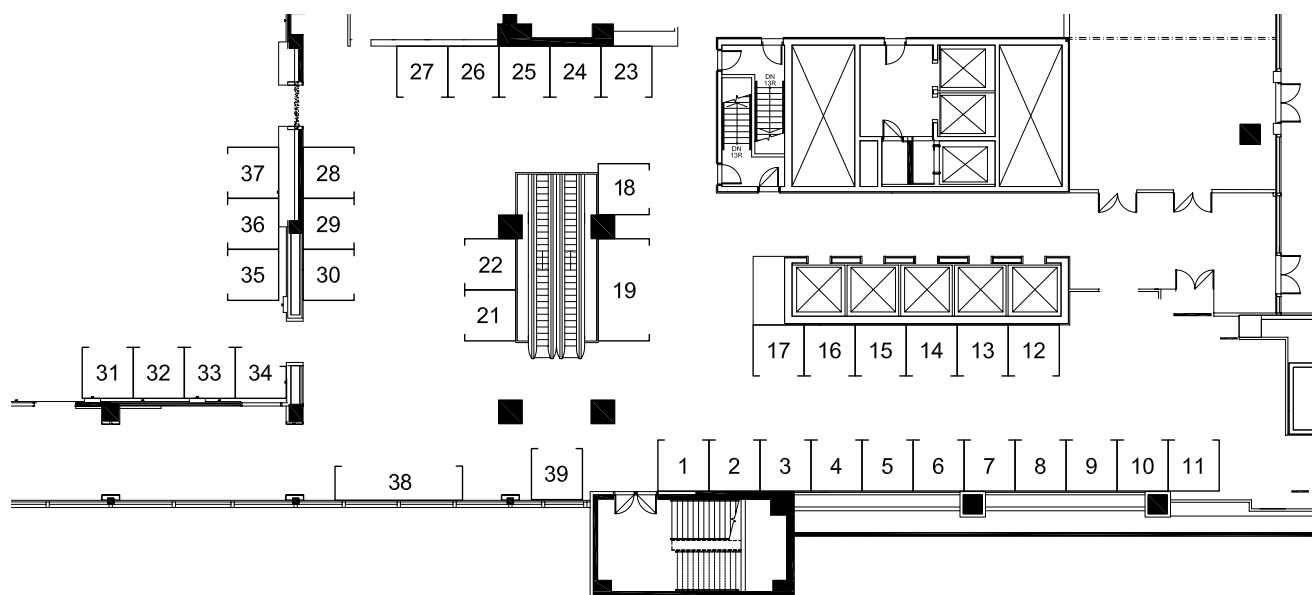
## SCIENTIFIC REVIEWERS

- |                       |                             |                       |                       |
|-----------------------|-----------------------------|-----------------------|-----------------------|
| ▪ Laura Anderson      | ▪ Ghazal Fazli              | ▪ Alia Leslie         | ▪ Irving Rootman      |
| ▪ Paola Ardiles       | ▪ Alexander Frame           | ▪ Heather Lillico     | ▪ Joyce Seto          |
| ▪ Danielle Arsenault  | ▪ Kirk Furlotte             | ▪ Marjorie MacDonald  | ▪ Isidore Sieleunou   |
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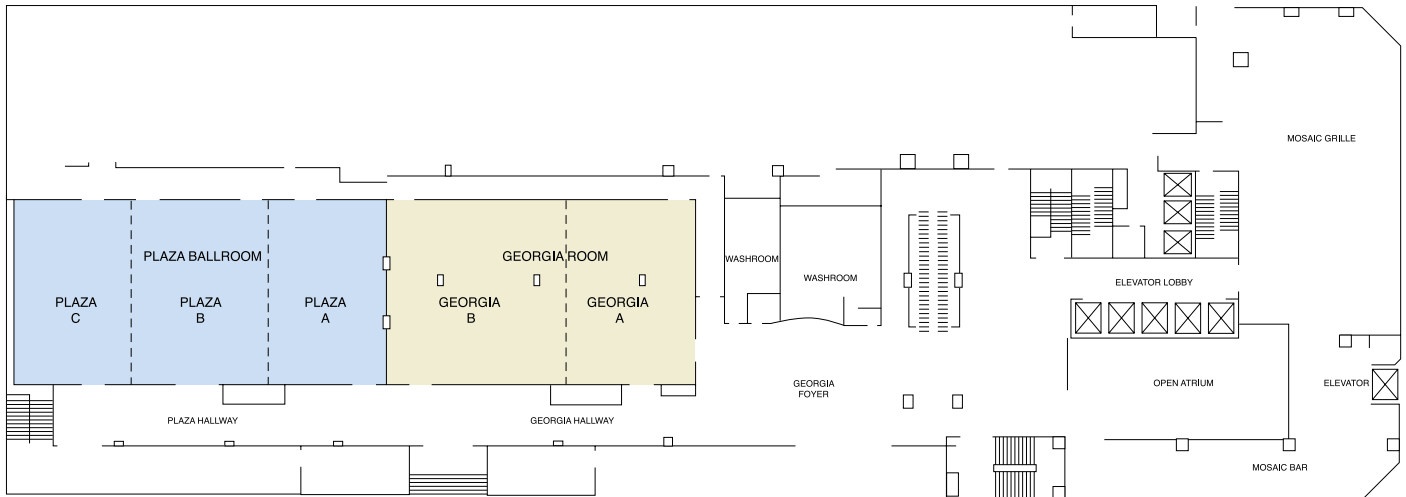
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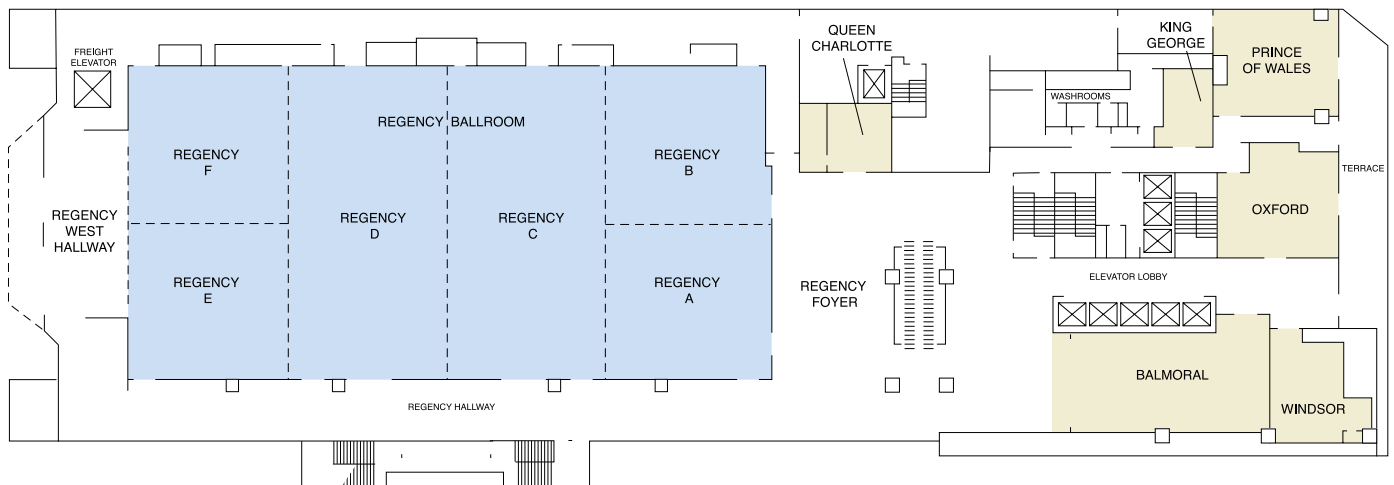


# FLOOR PLANS

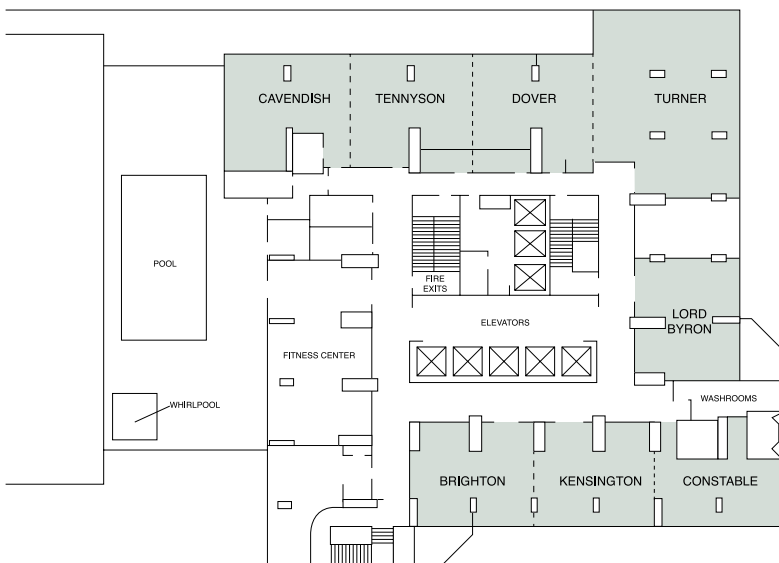
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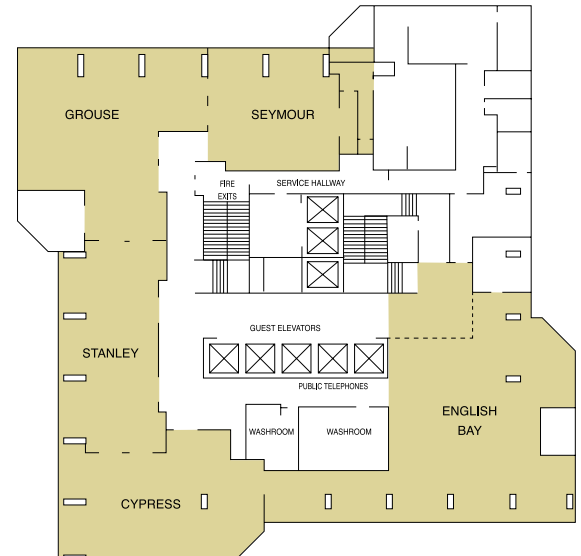
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FOURTH FLOOR



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