

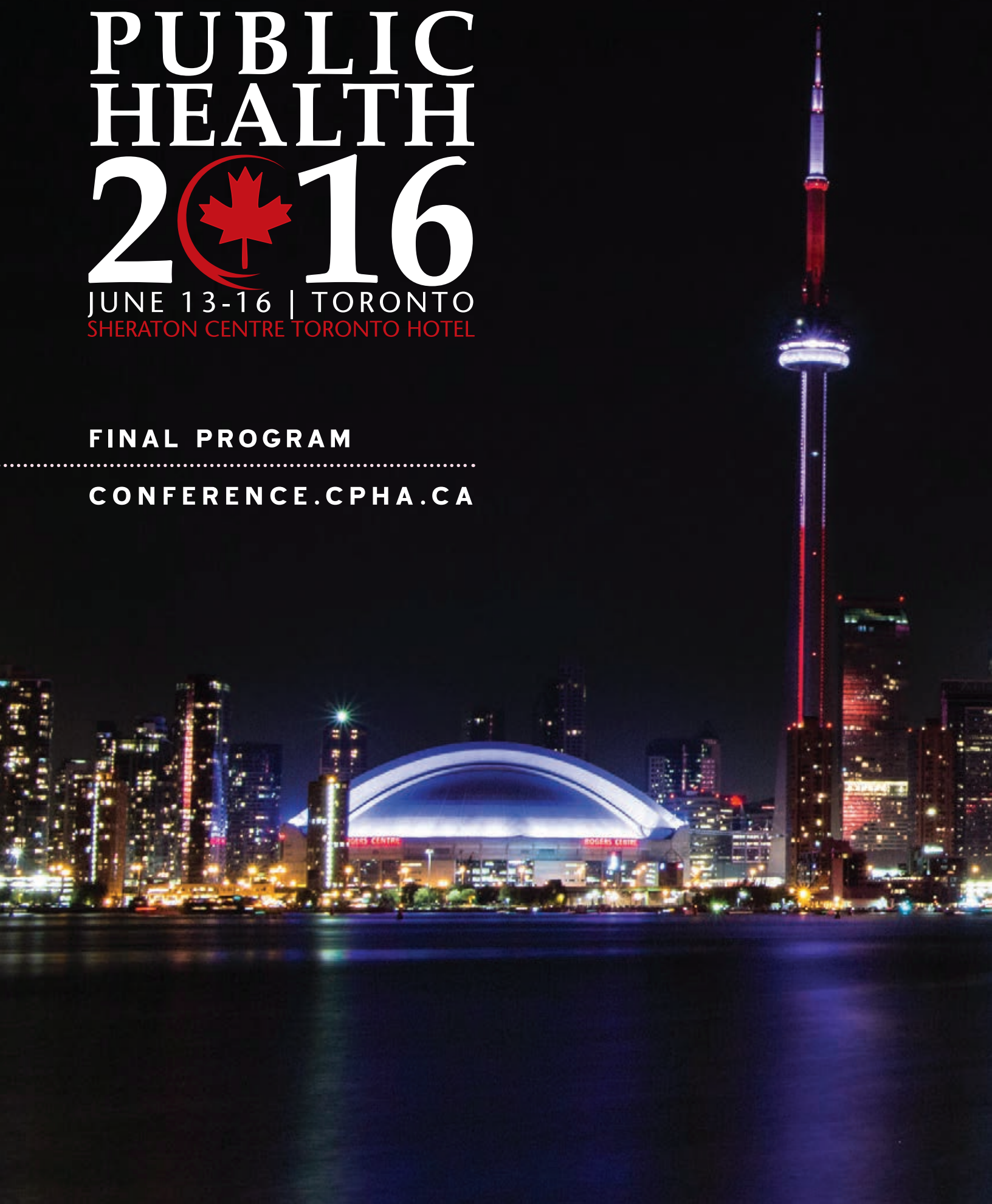
PUBLIC HEALTH 2016

JUNE 13-16 | TORONTO
SHERATON CENTRE TORONTO HOTEL

FINAL PROGRAM

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WELCOME TO TORONTO!

CPHA has never been shy about addressing the most pressing and sensitive public health topics of the time. Public Health 2016 is no exception. CPHA is bringing forward important topics that need to be addressed as a society. The time has come to have a conversation not only about the root causes and extent of these topics but also on actions that we in public health can undertake to address them. Public health will not make progress toward the goals of achieving health and health equity if we ignore these issues.

I encourage you to participate fully in all the activities the Conference has to offer - including plenary sessions featuring exceptional speakers from Canada and abroad; concurrent workshop and panel sessions that promise to provide delegates with concrete skills; oral and poster presentations that showcase leading science, policy and practice; and networking opportunities to develop professional relationships that will last for years to come.

CPHA is using the Conference to launch many exciting endeavours. It will unveil its latest position statement on Early Childhood Education and Care, which calls for a national strategy on early childhood development. Recognizing that members are the powerful voice of the Association, CPHA will announce the winners of the 2016 member-get-a-member recruitment campaign at the closing plenary. Finally, CPHA will introduce an eight-part webinar series on career development and skills-building targeted to student and early career members of the Association.

I thank everyone who contributed to the success of the Conference, especially the countless hours devoted by Steering and Scientific Committee members. A special appreciation goes out to all delegates for supporting the Conference through your presence and active participation.



ARDENE ROBINSON VOLLMAN
Chair
Canadian Public Health Association



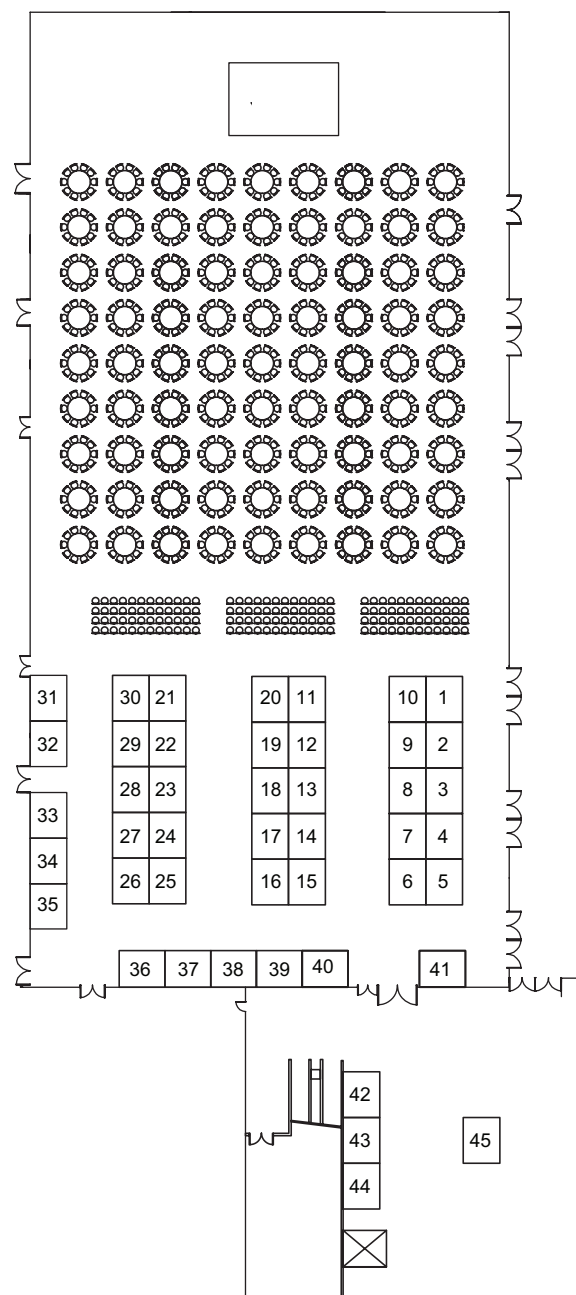
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EXHIBIT HALL

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Tuesday, June 14	Wednesday, June 15
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Dedicated Show Hours

Tuesday, June 14	Wednesday, June 15
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12:00–13:30	12:00–14:00
15:00–15:30	
17:00–19:00	

COLLABORATORS & COMMITTEES



CPHA is pleased to host Public Health 2016 through a unique and effective collaboration with:



Assembly of First Nations



Canadian Institute for Health Information



Canadian Institutes of Health Research



National Collaborating Centres for Public Health



Ontario Public Health Association



Pan American Health Organization



Public Health Physicians of Canada

A conference of this magnitude is the result of hard work and commitment from the dedicated members of the conference Steering and Scientific Committees. Our ongoing collaboration continues to create a unique knowledge exchange opportunity, grounded in a high-caliber scientific program.

STEERING COMMITTEE

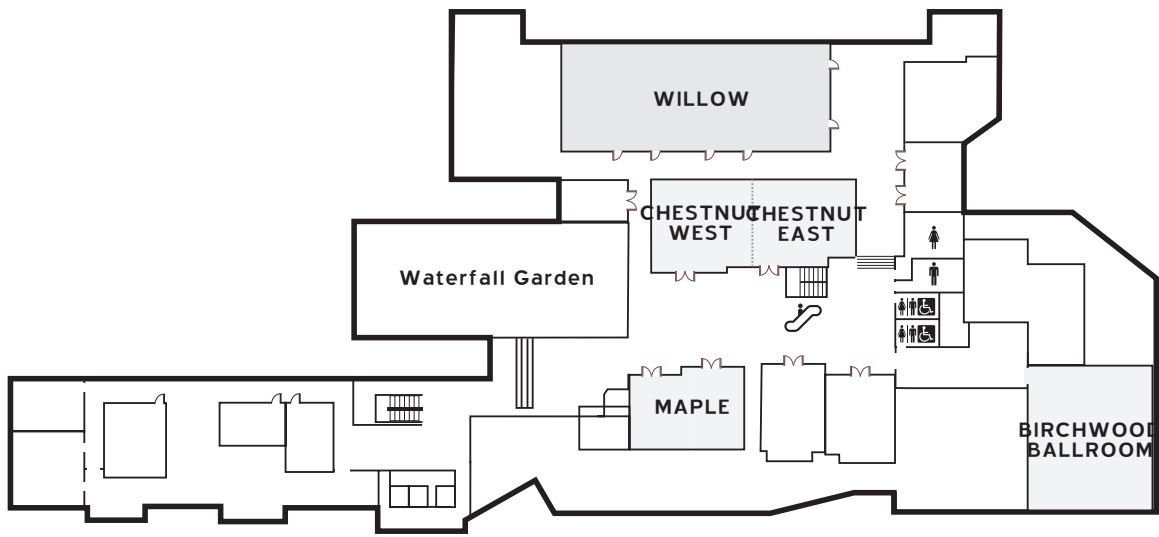
- Ian Culbert, Canadian Public Health Association (Chair)
- Sara Kirk, Dalhousie University (Scientific Chair)
- Alannah Brown, CIHR - Institute of Population and Public Health (until April 2016)
- Maureen Dobbins, National Collaborating Centres for Public Health
- Jean Harvey, Canadian Institute for Health Information, Canadian Population Health Initiative
- Odette LaPlante, Public Health Physicians of Canada
- Marlene Laroque, Assembly of First Nations
- Jane Lyster, Ontario Public Health Association
- Jessie-Lee McIsaac, Dalhousie University
- Pemma Muzumdar, National Collaborating Centres for Public Health
- Nnamdi Ndubuka, Northern Inter-Tribal Health Authority
- Dionne Patz, Pan American Health Organization, World Health Organization
- Cynthia Stirbys, Canadian Institutes of Health Research, Institute of Aboriginal Peoples' Health
- Julie Stratton, Peel Public Health
- Shannon Turner, Canadian Public Health Association, Board of Directors

SCIENTIFIC COMMITTEE

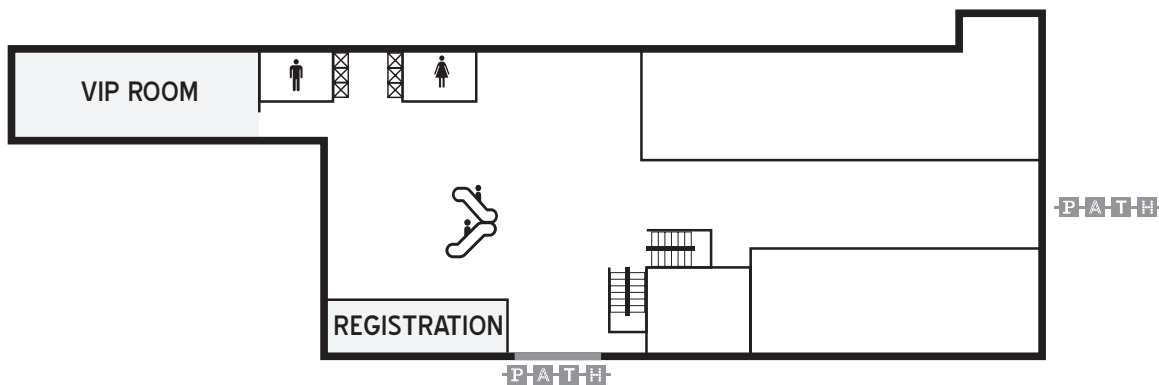
- Sara Kirk, Dalhousie University (Chair)
- Alannah Brown, CIHR - Institute of Population and Public Health (until April 2016)
- Luis Gabriel Cuervo, Pan American Health Organization
- Katie-Sue Derejko, Assembly of First Nations
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- Margaret Haworth-Brockman, National Collaborating Centres for Public Health
- Joel Kettner, Public Health Physicians of Canada
- Odette LaPlante, Public Health Physicians of Canada
- Julie Stratton, Peel Public Health
- Tin Vo, Ontario Public Health Association

FLOOR PLANS

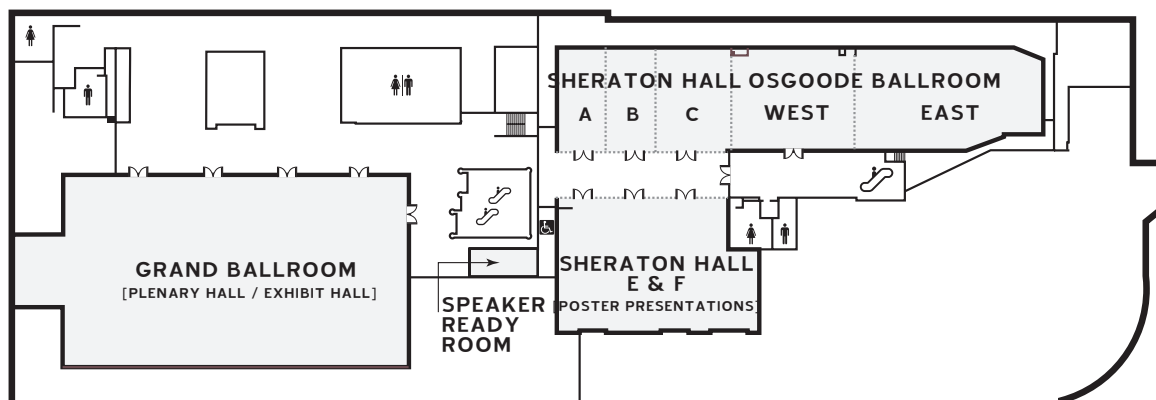
MEZZANINE LEVEL



CONCOURSE LEVEL



LOWER CONCOURSE LEVEL



PROGRAM OVERVIEW

PRE-CONFERENCE SESSIONS					
8:30 - 13:00	8:30 - 13:00 Addressing Indigenous health inequities: The role of health professionals and educators in Canada and Australia Sheraton Hall B	9:00 - 12:30 Addressing the ecological determinants of health: Implications for ongoing public health education and practice Sheraton Hall C	8:30 - 12:30 Creating and implementing an evidence base for improved built environment standards and codes Chestnut East	9:00 - 12:00 How to evaluate the impact of sex and gender effects on health outcomes using secondary data Maple Room	
	8:30 - 12:30 Public health programming in the Canadian Arctic: Progress, challenges and opportunities VIP Room	9:00 - 13:00 Outdoor play, risky play and healthy child development Chestnut West	8:30 - 13:00 Student and early-career researchers’ forum Osgoode Ballroom West	10:00 - 12:00 We now have more HIV prevention options in our toolbox: New evidence and implications for service providers Sheraton Hall A	
13:30 - 15:00	PLENARY I: TECHNOLOGY AND PUBLIC HEALTH David Buckeridge				
15:00 - 15:30	BREAK				
15:30 - 17:00	CONCURRENT SESSIONS				
Collaborator Sessions	CIHR presents: Interrogating context and consequences of population health solutions: Where to next?				
Symposiums	Geography, land, and environment as determinants of Indigenous peoples’ health and well-being in Canada	Health promotion: Passing the torch to the next generation	Hepatitis C: It’s a whole new world	How can we contain health costs and improve health equity?	Innovative partnerships to reach high-priority populations with barriers to smoking cessation supports: A Documentation of Practice study
Workshops	Applying a framework to promote effective communication of public health guidance to emergency department clinicians	“Data Jam”: Interactive tools for monitoring health status and health inequalities in Canada	From message to behaviour change: A systematic approach to evaluating the impact of health communication efforts	Leadership and influence: Building capacity for policy engagement	TB elimination in Canada: Time to get serious about it
17:00 - 19:00	NCCPH NETWORKING DINNER Grand Ballroom, Lower Concourse [Pre-registration required]				



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OPENING REMARKS:

- Ardene Robinson Vollman, Chair, Canadian Public Health Association
- Camara Jones, President, American Public Health Association
- Sara Kirk, Public Health 2016 Scientific Chair & Canada Research Chair in Health Services Research, School of Health and Human Performance, Dalhousie University
- Nancy Edwards, Scientific Director, CIHR - Institute of Population and Public Health

TECHNOLOGY AND PUBLIC HEALTH

Technology plays an important role in shaping public health. The explosion of technological innovations in recent years has heightened this relationship. Health and wellness programs that utilize technology to improve health can extend the reach of health professionals and improve program quality and efficiency while reducing costs. But is this enough? What are we missing? With the use of illustrative examples, this plenary session will explore the current and predicted future role of technology and digital media in shaping the public's health including opportunities and risks. This understanding is critical to ensure a productive uptake of technology and appreciation of where its application can be most helpful. Ideally technology can be used to lessen rather than inadvertently expand health inequities.

Learning Objectives:

- Describe the role of technology and digital media in shaping the public's health.
- Recognize the underlying factors and conditions that enable digital technologies to influence attitudes, behaviour and health.
- Examine the challenges and opportunities with implementing new technology and identify strategies for addressing them.
- Explore how technology can shape dialogue and engagement and influence community well-being.

Moderator:



Nancy Edwards
*Scientific Director,
CIHR-Institute of Population and Public Health*

Speaker:



David Buckeridge
*Associate Professor, Department of Epidemiology,
Biostatistics and Occupational Health,
McGill University & CIHR-IPPH/PHAC Applied
Public Health Chair*



SHERATON HALL B
LOWER CONCOURSE



INTERROGATING CONTEXT AND CONSEQUENCES OF POPULATION HEALTH SOLUTIONS: WHERE TO NEXT?

To improve population health and health equity globally, public health professionals need to be well versed in the "science of solutions" – which focuses on research about how policies, programs and practices work, for whom, under what contextual circumstances and at what cost and scale, within and outside of the health sector. This session will extend the dialogue from the Sparking Population Health Solutions International Summit by critically exploring provocative and forward-thinking catalytic questions and themes.

The panelists will explore and respond to the following two illustrative catalytic questions:

1. In the wake of the Truth and Reconciliation Commission of Canada's final report, how can the population health leadership mainstream a decolonizing agenda, and in doing so, redefine the core premise of population health in Canada to address this injustice?
2. What values and evidence should underpin decisions to invest in, or disinvest from, population health interventions?

These two questions will be explored through the following lenses:

- What features of context(s) are most important to understand and measure – why and how?
- What are the unintended consequences of population health policies and programs?
- Participation at the Summit is not necessary to fully engage in this session.

Learning Objectives:

- Critically explore catalytic questions and themes arising from the Sparking Population Health Solutions Summit with a Public Health audience.
- Debate possible solutions arising from the Sparking Population Health Solutions Summit with a Public Health audience.
- Contribute to shaping the population health intervention research agenda through a critical and provocative dialogue.

Speakers:

- Charlotte Loppie, Professor in the School of Public Health and Social Policy, Faculty of Human and Social Development, University of Victoria
- Lynn McIntyre, Adjunct Professor in the Department of Community Health Sciences, Cumming School of Medicine, University of Calgary.
- Robert Geneau: Director, Social Determinants and Science Integration Directorate, Public Health Agency of Canada, Editor-in-Chief of Health Promotion and Chronic Disease Prevention in Canada: Research, Policy and Practice

Session Chair:

- Nancy Edwards, Scientific Director, CIHR - Institute of Population and Public Health



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**CHESTNUT WEST
MEZZANINE LEVEL**

GEOGRAPHY, LAND, AND ENVIRONMENT AS DETERMINANTS OF INDIGENOUS PEOPLES' HEALTH AND WELL-BEING IN CANADA

This expert panel takes the approach that existing literature is focused on how the "social" determines human (ill) health or (lack of) well-being, often to the exclusion of, or marginalization of other forces, such as colonization, ecology, geography, and Indigenous peoples' relationships to and knowledge systems of the land. Dr. Sarah de Leeuw will argue for the need to reorient thinking about the determinants of health for Indigenous peoples that accounts for the important role played by geography, including the physical places and spaces as experienced by Indigenous communities and individuals. Dr. Chantelle Richmond will further this discussion by presenting how reduced access to land, and opportunities for land-based activities, have compromised the special relationship that Indigenous peoples have with the environment. She will examine how ongoing environment disruptions impact culture, traditional knowledge, and the health and well-being of the Indigenous people, and in particular, young people.

Learning Objectives:

- Analyze health inequities solutions that are currently being discursively produced and circulated.
- Demonstrate that for many Indigenous communities, there is an inalienable connection with and right to specific ecologies which is inseparable from human health, yet cannot be simply an extension of the "the social".
- Interpret narratives of Anishnabe Elders from Pic River First Nation to widen the discussion of critical population health thinking in research and policy about the significant role of land in the conceptualization of cultural identities and social relationships and how geographies have been considered, lived, and embodied by Indigenous peoples as determinants of health.
- Advance the conceptualization of determinants of health to place, space, territory, geography, and land as a broadened framework to move towards achieved health equity amongst Indigenous peoples in Canada.

Speakers:

- Sarah de Leeuw, Associate Professor, Northern Medical Program, University of Northern British Columbia and Research Associate, National Collaborating Centre for Aboriginal Health
- Chantelle Richmond, Associate Professor, Department of Geography, University of Western Ontario

Session Chair:

- Donna Atkinson, Manager, National Collaborating Centre for Aboriginal Health



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**SHERATON HALL A
LOWER CONCOURSE**

HEALTH PROMOTION: PASSING THE TORCH TO THE NEXT GENERATION

At the 2011 CPHA Conference, in a special plenary session focussed on the 25th anniversary of the Ottawa Charter for Health Promotion, Trevor Hancock suggested that although the Charter has stood the test of time, "its time has not yet really come". His message to the next generation of public health professionals was: "Here, catch! It's yours, and do a better job that we have in realizing the ideals of the Ottawa Charter over the next 25 years." This session, on the 30th Anniversary of the Ottawa Charter, will provide an opportunity for members of the next generation of health promotion practitioners, researchers and policymakers to discuss and debate with each other and the audience what they have done to catch the torch and what else might be done individually and collectively to "catch the torch" of the Ottawa Charter using innovative ideas and approaches.

Learning Objectives:

- Explore how the Charter remains relevant today and what progress has been made in implementing health promotion according to the ideals of the Ottawa Charter over the last five years.
- Identify new ways to implement the ideas of the Ottawa Charter in Canada and elsewhere.
- Discuss opportunities for leadership development of new generation in Health Promotion.

Speakers:

- Rebecca Fortin, Health Promotion and Public Health, Peel Region Department of Public Health and Chair, Health Promotion Canada (formally Pan-Canadian Network for Health Promoter Competencies)
- Trevor Hancock, Professor and Senior Scholar, School of Public Health and Social Policy, University of Victoria
- Sume Ndumbe-Eyoh, Knowledge Translation Specialist, National Collaborating Centre for Determinants of Health
- Valéry Ridde, Associate Professor, Department of Social and Preventive Medicine, University of Montreal, and CIHR applied research chair

Session Chair:

- Rosie Dhaliwal, Health Promotion Specialist, Health and Counselling Services, Simon Fraser University





**CHESTNUT EAST
MEZZANINE LEVEL**

HEPATITIS C: IT'S A WHOLE NEW WORLD

Hepatitis C contributes to a significant burden of illness both because of the rate of infection and the sequelae of chronic infection. A number of direct-acting antiviral treatments are now available which can achieve high cure rates, thereby preventing both ongoing hepatitis C transmission and the development of chronic sequelae. However, barriers to successful treatment include undiagnosed infections, challenges in accessing comprehensive care (particularly for high risk groups), and the high costs of the medication. Because treatment can prevent ongoing transmission of hepatitis C (referred to as "treatment as prevention"), the role of public health in supporting treatment requires further examination.

In this session, the epidemiology of hepatitis C in Ontario and Canada will be reviewed. An overview of direct-acting antiviral treatments will be presented, as well as systems for providing clinical care. Potential roles for public health in supporting access to, and compliance with, hepatitis C treatment will be explored.

Learning Objectives:

- Describe the epidemiology and risk factors for hepatitis C in Canada.
- Interpret the implications of newly available directly-acting antiviral medication for preventing chronic sequelae and preventing ongoing transmission of hepatitis C.
- Identify potential roles for public health in facilitating the diagnosis of hepatitis C and access to and completion of treatment.

Speakers:

- Shelly Bolotin, Scientist, Public Health Ontario
- Gary Garber, Chief, Infection Prevention and Control, Public Health Ontario
- Tony Mazzulli, Medical Microbiologist, Public Health Ontario
- Jennifer Pritchard, Nurse Consultant, Public Health Ontario
- Andrea Saunders, Communicable Diseases Specialist, Public Health Ontario

Session Chair:

- Bryna Warshawsky, Public Health Physician, Public Health Ontario

**MAPLE ROOM
MEZZANINE LEVEL**

HOW CAN WE CONTAIN HEALTH COSTS AND IMPROVE HEALTH EQUITY?

This session explores the evidence and ethics behind how we proportion, or think we should proportion, our investments in health. The session will include presentations about macro-economic forces affecting health budgets, and about the experiences of senior provincial health leaders grappling with how to lower costs and improve health. The public health decision-makers will speak to the evidence and arguments they are using to advocate for greater investments in upstream work, counter arguments they are facing, and where they need more evidence. The speakers will share experiences with increasing demands for acute and chronic disease care dollars, and the evidence that investments in health protection are key to a health system focused on equitable health.

Learning Objectives:

- Describe some of the societal conditions that fuel demands to revisit health budget allocations.
- Identify economic research used to argue for greater upstream investment in health.
- Describe ways that decision-makers have used economic arguments to press for large population health budgets.
- Define some of the research gaps, and ethical tensions in making the case for greater upstream investments.

Speakers:

- Christine Kennedy, Associate Medical Officer of Health, Grey Bruce Health Unit
- Armine Yalnizyan, Senior Economist, Inequality Project, Canadian Centre for Policy Alternatives

Session Chair:

- Lesley Dyck, Knowledge Translation Specialist, National Collaborating Centre for Determinants of Health



**VIP ROOM
CONCOURSE LEVEL**

INNOVATIVE PARTNERSHIPS TO REACH HIGH PRIORITY POPULATIONS WITH BARRIERS TO SMOKING CESSATION SUPPORTS: A DOCUMENTATION OF PRACTICE STUDY

The reduction of tobacco-related health inequities has been identified as a major area of concern. While there are strong calls to action to address health inequities, how to effectively reach these populations is a question raised by public health tobacco control practitioners. This symposium describes how and why three Ontario PHUs collaborated with different sectors and were able to successfully reach and motivate use of smoking cessation supports amongst low SES populations facing barriers to such services. This realist study was conducted as part of The Program Training and Consultation Centre's Documentation of Practice Project.

Learning Objectives:

- Describe how to collaborate with other sectors in order to deliver smoking cessation support to marginalized communities and why such collaboration is important.
- Recognize the underlying factors and conditions that enabled these collaborative supports to reach marginalized communities and motivate low SES residents to use smoking cessation supports.
- Examine the challenges with reaching marginalized communities and identify strategies for overcoming them.

Speakers:

- Theresa Chambers, Public Health Nurse, Simcoe Muskoka District Health Unit
- Marie Chaves, Health Promoter, Lambton Public Health
- Brian Hyndman, PhD Candidate, School of Public Health and Health Systems, University of Waterloo
- Lara Lorge, Community Health Broker, Niagara Region Public Health Department

Session Chair:

- Brian Hyndman, PhD Candidate, School of Public Health and Health Systems, University of Waterloo

**LINDEN
MEZZANINE LEVEL**

TB ELIMINATION IN CANADA: TIME TO GET SERIOUS ABOUT IT

TB rates in Canada have been slow to decline, with cases increasingly concentrated in the foreign-born from high-burden countries, indigenous Canadians particularly in the middle and high north, and the inner city poor and homeless. Threats to our progress include drug-resistant TB, complacency and competing financial demands, TB in HIV positive and other immunocompromised groups, and significant supply chain difficulties with shortages and costing of TB drugs and diagnostics. In 2014 the WHO released a framework for TB elimination in low-burden countries, including Canada. Where are we at now – what are the key populations and issues? What will it take to move us to TB elimination? Join a panel of clinical and TB program experts from the Canadian TB Elimination Network.

Learning Objectives:

- Describe key features and trends in TB epidemiology, in Canada and globally.
- Identify the key elements of the new WHO framework for TB elimination and how they relate to the Canadian context.
- Identify priority strategies, technologies, and areas of focus, in moving toward TB elimination in Canada—with particular emphasis on foreign-born and indigenous communities.

Speakers:

- Elizabeth Rea, Associate Medical Officer of Health, TB Program, Toronto Public Health
- Victoria Cook, Medical Head, BC Tuberculosis Program, British Columbia Centre for Disease Control
- Elaine Randell, Communicable Disease Specialist, Nunavut



SHERATON HALL C LOWER CONCOURSE

APPLYING A FRAMEWORK TO PROMOTE EFFECTIVE COMMUNICATION OF PUBLIC HEALTH GUIDANCE TO EMERGENCY DEPARTMENT CLINICIANS

This workshop will expand participants' knowledge of effective communication of public health guidance in the setting of emerging public health incidents at the local level. A developed framework based on new qualitative research will be presented to the participants, who then have the opportunity to seek clarification and provide feedback through plenary discussion. In small groups, using case scenarios, participants can apply the knowledge generated through the study findings. These scenarios will highlight different types of relevant incidents and different local public health/health-care settings. Continuing in small groups, participants will then have the opportunity to brainstorm on developing an implementation plan for their scenario, using components of the Framework. At the end of the session, participants will explore and establish the foundations for an action plan to apply the framework in practice.

Learning Objectives:

- Describe the new Framework for communicating PH guidance to emergency department clinicians, and be able to translate it into a real world scenario.
- Explain how the Framework applies to their practice.

Workshop Facilitators:

- Moira Grant, Education Specialist, Public Health Ontario
- Yasmin Khan, Consultant physician, Public Health Ontario
- Kieran Moore, Associate Medical Officer of Health, KFL&A Public Health
- Sarah Nayani, Research Coordinator, Public Health Ontario
- Shannon Tracey, Research Assistant, Public Health Ontario

BIRCHWOOD BALLROOM MEZZANINE LEVEL

"DATA JAM" - INTERACTIVE TOOLS FOR MONITORING HEALTH STATUS AND HEALTH INEQUALITIES IN CANADA

The session offers an overview of three publicly available, interactive online platforms allowing quick access to robust, national and subnational population health data: the Canadian Chronic Disease and Injury Indicator Framework (CDIIF - developed to facilitate ongoing, up-to-date, consistent reporting of indicators for chronic disease and injury, including socio-demographic breakdowns), the Pan-Canadian Health Inequalities Reporting Initiative (which provides data for 50+ health status and health determinants indicators, including measures of the magnitude and impact of inequalities at the population level), and the Health Inequalities Interactive Tool (which provides annual snapshots and trends for nine indicators of population health status and health determinants, by income level over time).

Participants will engage in group learning activities to acquire knowledge and build skills in accessing and using open data for chronic disease, injury, and health inequalities. The session will be interactive in nature, and will allow participants to examine, explore and interpret population health status, health inequality and inequality trends.

Learning Objectives:

- Apply interactive data tools to generate knowledge to support research, policy and program development and implementation to address population health and health inequalities in Canada.
- Explore the distribution of health status and health determinants across sub-groups in the population to identify the greatest variations in chronic disease risk factors.
- Examine and interpret the magnitude of health inequalities across population sub-groups.
- Examine how income-related health inequalities have changed within the past decade.

Workshop Facilitators:

- Malgorzata Miszkurka, Senior Analyst, Public Health Agency of Canada
- Erin Pichora, Program Lead, Canadian Institute for Health Information
- Karen Roberts, Epidemiologist, Public Health Agency of Canada



**OSGOODE
BALLROOM WEST
LOWER CONCOURSE**

FROM MESSAGE TO BEHAVIOUR CHANGE: A SYSTEMATIC APPROACH TO EVALUATING THE IMPACT OF HEALTH COMMUNICATION EFFORTS

The Pipeline Approach to Measuring Health Communication Impact is a straightforward tool that allows public health practitioners to develop health communication campaigns with built-in evaluation tactics and processes. The campaign cycle – design, implement, evaluate – requires timely, relevant and credible evidence based on valid and reliable data collection and analysis. The tool offers a methodology to reduce uncertainty and advance the design and implementation of evidence-informed practices that will lead to optimal delivery of health communication efforts and fulfillment of specific performance expectations.

In this workshop, participants will be introduced to this methodology and will learn how to use the tool's user-friendly worksheets to gather and integrate evidence into the campaign cycle to increase the strength of causal inferences based on available evidence. Practitioners will build their evaluation capacity within the context of evidence-informed practices and gain the necessary insights to validate the impact of their health communication efforts.

Learning Objectives:

- Apply the necessary skills to integrate evaluation processes and tactics in the development of health communication campaigns that will allow them to fulfill specific performance expectations.
- Demonstrate skills to gather and analyze timely, relevant and credible evidence based on valid and reliable data collection and analysis to make evidence-based decisions on messaging strategy and outreach approaches.
- Develop skills to effectively link both formative data and proxy measures to outcome indicators in order to increase the strength of causal inferences between health communication efforts and desired health outcomes.

Workshop Facilitators:

- Sophie Rosa, Health Promotion Consultant, Public Health Ontario
- Jason Haug, Program and Project Management Officer, Ottawa Public Health

**OSGOODE
BALLROOM EAST
LOWER CONCOURSE**

LEADERSHIP AND INFLUENCE: BUILDING CAPACITY FOR POLICY ENGAGEMENT

Public health agencies have a discrete set of programs and limited funding, but a far-reaching vision for a healthier society. Achieving our most ambitious goals will require both leveraging support from other sectors, and influencing decision-makers. Speakers will share their experiences in influencing public policy, and related learnings. Cases will include advocacy for federal policy to support young people and families, building political momentum for a Basic Income Guarantee, and shifting paradigms about climate change.

After an overview of panel members' successes, participants will select up to four areas of public policy using interactive technology. Participants will form groups based on their interests, and will then use a negotiation/influence framework to plan next steps in their policy engagements. Materials and a process guide for this workshop will be shared with participants who wish to further disseminate these learnings.

Learning Objectives:

- Identify effective strategies to influence public policy.
- Describe the key elements that achieved influence in several case examples related to public policy decisions.
- Apply these strategies to current challenges facing session participants.

Workshop Facilitators:

- Courtney Howard, Member, Board of the Canadian Association of Physicians for the Environment & Emergency room physician
- Christopher Mackie, Medical Officer of Health and CEO, Middlesex-London Health Unit & Assistant Professor, Clinical Epidemiology and Biostatistics, McMaster University & Co-chair, City of London's Mayor's Advisory Panel on Poverty
- Lisa Simon, Associate Medical Officer of Health, Simcoe Muskoka District Health Unit.

PROGRAM OVERVIEW

8:30 - 10:00	PLENARY II: PUBLIC HEALTH AND THE PREVENTION OF VIOLENCE Etienne Krug Alessandra Guedes Sylvia Maracle			
10:00 - 10:30	BREAK			
10:30 - 12:00	CONCURRENT SESSIONS			
Collaborator Sessions	<i>AFN presents:</i> From RCAP to the TRC: Challenges of revolutionizing First Nations public health		<i>CPHA presents:</i> Public Health – Towards Systems Thinking 7.0	
Oral Presentations	Building Public Health System Capacity	First Nations, Inuit, and Métis Communities	Health Assessment, Disease Surveillance, Program Evaluation and Research	Health Promotion
	Health Protection	Partnerships and Collaborations	Policy and Program Interventions	Vaccine Hesitancy
12:00 - 13:30	NETWORKING LUNCH WITH EXHIBITORS			
13:30 - 15:00	CONCURRENT SESSIONS			
Collaborator Sessions	<i>PAHO presents:</i> Transitioning from the Millennium Development Goals to the SDGs: What's next for health?		<i>CJPH presents:</i> Publishing in the Canadian Journal of Public Health: Tips from Senior Editors	
Symposiums	Biomonitoring in Canada: The Canadian Health Measures Survey and the Arctic	Canada's Tobacco Endgame Initiative	EveryBODY Matters: Addressing weight stigma in public health research, practice and policy	Integrating Indigenous community planning into a healthy built environment
Workshops	Cross-sectoral advocacy: Climate change and water	Ethical challenges in public health evaluation	Policy approaches to reducing health inequalities	The Policy Readiness Tool: Increasing local capacity for healthy public policy change
15:00 - 15:30	BREAK			
15:30 - 17:00	CONCURRENT SESSIONS			
Collaborator Sessions	<i>NCCPH presents:</i> Success and Lessons Learned About Knowledge Translation and Social Media Strategies: Ten Years On		<i>CPHA presents:</i> Public health benefits from and public health action to support Canadian efforts to contain global heating to <2°C	
Oral Presentations	Building Public Health System Capacity	First Nations, Inuit, and Métis Communities	Health Assessment, Disease Surveillance, Program Evaluation and Research	Health Promotion
	Partnerships and Collaborations	Policy and Program Interventions	Vaccine Hesitancy	World Café
17:00 - 18:30	NETWORKING RECEPTION WITH EXHIBITORS			
19:00 - 21:00	PREVENTION OF VIOLENCE CANADA PUBLIC FORUM			

WELCOME REMARKS:

- Judy Whiteduck, Director, Safe, Secure and Sustainable Communities, Assembly of First Nations
- Jean Harvey, Director, Canadian Population Health Initiative, Canadian Institute of Health Information
- Maureen Dobbins, Scientific Director, National Collaborating Centre for Methods and Tools

PUBLIC HEALTH AND THE PREVENTION OF VIOLENCE

Violence has a major impact on global health and the wellbeing of populations. Canada spends an estimated \$12 billion annually on the consequences of reported violence. The General Social Survey indicates that up to 88% of sexual assaults in persons aged 15 or older are unreported. The seemingly ubiquitous nature of violence in society might suggest to some that it is simply part of the human experience and cannot be prevented. Voices around the globe are refuting this argument and identifying concrete steps that can be taken to create a safe society.

In 2015, the United Nations passed support for sustainable development goals with specific targets for violence prevention and the World Health Organization calls for a public health approach to violence prevention. Public health has an important role to play in population-level violence prevention efforts through early identification and the use of evidence-informed interventions. As in so many other aspects of modern life, public health can drive social change in a way that will have a lasting impact on future generations.

This session will explore the practical steps that those working in public health can take to prevent violence and promote healthy communities. Making the link between the social determinants of health and violence prevention and using tools such as a collective impact framework or settings-based approaches, public health can make a difference.

Learning Objectives:

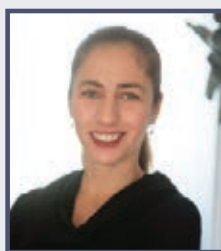
- Describe the impact of violence on the well-being of populations and identify strategies to create a safer society.
- Explore violence as a social determinant of health.
- Identify the role of public health in prevention efforts and in the development of evidence-informed population health interventions.
- Implement practical measures to prevent violence and promote development of safe and healthy communities.

Moderator:



Peter Donnelly
*President and CEO,
Public Health Ontario*

Speaker:



Alessandra Guedes
*Regional Advisor,
Family Violence,
Pan American Health Organization*

Speakers:



Etienne Krug
*Director, Department for
Management of Noncommunicable
Diseases, Disability, Violence and
Injury Prevention
World Health Organization*



Sylvia Maracle
*Executive Director,
Ontario Federation of Indigenous
Friendship Centres*



**SHERATON HALL B
LOWER CONCOURSE**



CLOSING THE GAP ON FIRST NATIONS PUBLIC HEALTH IN CANADA: FROM RCAP TO THE TRC

Evident health disparities affecting First Nations in Canada are attributable to multifaceted interdependent factors recognised as the determinants of health. Conventional determinants of health frameworks overlook the historical and structural arrangements that reinforce inequities in the health status of First Nations in Canada.

This session will emphasize Indigenous-led reflection on the prospects and burdens in First Nation's public health practice and policy. Remedies to alleviate public health disparities in First Nations communities will be explored in the context of the Calls to Action from the Truth and Reconciliation Commission of Canada (2015), recognizing the foundational work of the 1996 Royal Commission on Aboriginal Peoples. The present day public health profile of First Nations confirms the need for immediate action; Indigenous leaders will communicate the wellness goals of Canada's First Nations Peoples.

Learning Objectives:

- Describe the factors that contribute to health disparities in First Nations communities in Canada.
- Define factors that impact First Nations public health practice and policy.
- Identify potential roles for public health in facilitating Indigenous ways of knowing and conceptualizations into community well-being.

Speaker:

- Regional Chief Isadore Day, Wiindawtegowinini & Assembly of First Nations Regional Chief, Ontario

Moderator:

- Judy Whiteduck, Director, Safe, Secure and Sustainable Communities, Assembly of First Nations

**SHERATON HALL A
LOWER CONCOURSE**



PUBLIC HEALTH – TOWARDS SYSTEMS THINKING 7.0

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

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

This year's panel will examine the changing landscape of public health governance and financing in an attempt to better understand how systems thinking can be applied to public health integration within the health system(s) reforms. The panellists 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:

- Peter Donnelly, President and CEO, Public Health Ontario
- Monika Dutt, Medical Officer of Health, Public Health Services (Cape Breton, Guysborough, Antigonish), Nova Scotia Health Authority
- Nancy Edwards, Scientific Director, CIHR - Institute of Population and Public Health
- Larry Stinson, Director of Operations, Peterborough County-City Health Unit & Former President, Ontario Public Health Association
- Michael Moore, CEO, Public Health Association of Australia & President, World Federation of Public Health Associations

Session Chair:

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



**VIP ROOM
CONCOURSE LEVEL**

FACTORS THAT INFLUENCE VACCINE HESITANCY: PART I –COMPLACENCY

- Theoretical aspects of complacency – Noni MacDonald, Professor, Department of Pediatrics, IWK Children's Hospital, Dalhousie University
- Complacency issues in Canada – Eve Dubé, Resesarcher, Institut national de santé publique du Québec
- How to communicate about vaccines to reduce complacency – Ian Roe, Content Strategist, BC Centre for Disease Control

Moderator:

- Shelley Deeks, Medical Director, Immunization and Vaccine Preventable Diseases, Public Health Ontario & Associate Professor, Dalla Lana School of Public Health, University of Toronto

**OSGOODE
BALLROOM WEST
LOWER CONCOURSE**

BUILDING PUBLIC HEALTH SYSTEM CAPACITY

- Evolving understandings of health equity and health equity action in British Columbia – Marjorie MacDonald
- Indicators to guide health equity work in Ontario Public Health Units – Benita Cohen
- Public health discipline-specific competencies: Guidance for equity focused practice – Lesley Dyck
- Promoting health for all in the Winnipeg Health Region: A long term journey – Hannah Moffatt
- Leveraging the Population Health & Wellness Accreditation Standard to promote health equity – Hannah Moffatt

**OSGOODE
BALLROOM EAST
LOWER CONCOURSE**

FIRST NATIONS, INUIT, AND MÉTIS COMMUNITIES

- Estimating the burden of injuries among the Métis Nation of Alberta – Diana Carolina Sanchez Ramirez
- De-normalizing excessive alcohol consumption among Nunavummiut using digital storytelling – Jakob Gearheard
- How can Indigenous-developed programs inform health equity strategies for reducing the harms of substance use in public health systems in BC? – Sana Shahram
- Inuit-specific HIV prevention research: Examining the alignment of Inuit Qaujimajatuqangit and principles of community-based participatory research – Jenny Rand
- The Village of Wellness (VOW) Toolkit: Developing and implementing a holistic approach to HIV testing in First Nations communities – Sarah Levine

**BIRCHWOOD
BALLROOM
MEZZANINE LEVEL**

HEALTH ASSESSMENT, DISEASE SURVEILLANCE, PROGRAM EVALUATION AND RESEARCH

- A brilliant or heinous idea? Why food waste diversion renders policy discussants apoplectic – Lynn McIntyre
- Planning the evaluation of a framework: The New Brunswick Public Health Nutrition Framework for Action experience – Laura Brennan
- Experience of using new technologies to support investigation of foodborne disease – Wanda Martin
- Lessons learned from a point source outbreak investigation in Brant, ON using the incident management system – Tin Vo
- Foodbook: An update and highlights from the Canadian Food, Water and Animal Exposure Study – Nadia Ciampa



**CHESTNUT WEST
MEZZANINE LEVEL**

HEALTH PROMOTION

- Health-related quality of life in older adults residing in subsidised seniors' buildings in Ontario – Gina Agarwal
- Investigating age-friendly communities through walkability for improved senior well-being – Emerald Lee
- Getting a room: Older residents' perspectives on intimacy and sexuality in the long-term care environment – Mariah Malone
- Living longer, healthier and working longer – Yves Decady
- It is time to reconsider population-based mammography screening – Anne Kearney

**SHERATON HALL C
LOWER CONCOURSE**

HEALTH PROTECTION

- Functional and data standards for a national network of immunization registries in Canada – Claudia Brown
- Improving immunization data in Ontario by enabling interoperability – Karen Hay
- One Root, many routes: Impact of user-based system design on immunization delivery and monitoring – Maureen Perrin
- An audit of the Panorama Public Health IT System - Office of the Auditor General of BC, August 2015 – Sarah Riddell
- Canadian Immunization Research Network: Immunization information systems in Canada: Attributes, functionality, strengths and challenges – Sarah Wilson

**CHESTNUT EAST
MEZZANINE LEVEL**

PARTNERSHIPS AND COLLABORATIONS

- Building municipal climate change resiliency – Stewart Dutfield
- TransformTO - Climate action for a healthy, equitable, prosperous Toronto – Stewart Dutfield
- A Climate of Concern: Climate Change and Health Strategy for Toronto – Carol Mee
- Collaborating to create complete communities: Implementing the healthy development assessment at the Region of Peel – Patrick Moores
- Unusual allies: Social movements and public health - A case-study of the Canadian Transition Town movement – Blake Poland

**MAPLE ROOM
MEZZANINE LEVEL**

POLICY AND PROGRAM INTERVENTIONS

- Healthy public policy: Organizational setups to support this practice among Canadian public health authorities – Ak'ingabe Guyon
- Placing the social determinants of health on the public policy agenda – Dennis Raphael
- Implementation of Health in All Policies: Does politics get in the way? – Ketan Shankardass
- The sharp truth: Exploring the barriers to implementing & accessing needle exchange program – David Absalom
- Legislating Health in All Policies: The use of legal mandates in policy implementation – Alix Freiler



**SHERATON HALL B
LOWER CONCOURSE**



TRANSITIONING FROM THE MILLENNIUM DEVELOPMENT GOALS TO THE SDGS: WHAT'S NEXT FOR HEALTH?

In this session, the Pan American Health Organization (PAHO) will discuss approaches to address the sustainable development goals (SDGs) from global and regional perspectives. In addition to examining how to approach the health-centered SDG 3, mechanisms will be identified to ensure that health remains a fundamental part of all 17 SDG, by exploring linkages between health and development. PAHO, Regional Office of the World Health Organization, adopted a Regional Plan of Action on Health in All Policies (HiAP), identified as a key enabler to achieve health equity through multisectoral coordination. Presenters will discuss how HiAP can be leveraged for the SDGs; what lessons from the MDGs can be applied; and, the information requirements.

Learning Objectives:

- Explore the PAHO approaches to address the sustainable development goals from global and regional perspectives.
- Identify mechanisms to ensure that health is central to the 17 proposed SDGs.
- Apply lessons learned from Millennium Development Goals and describe the Regional Plan of Action on Health in All Policies (HiAP) to achieve health equity.

Speakers:

- Lauren Barredo, Manager, Sustainable Development Solution Network, United States
- Luis Galvao, Senior Researcher, Pan American Health Organization, Fio Cruz, Brazil
- Nelly Salgado de Snyder, Director, Global Health Program National Institute of Public Health, Mexico

Moderator:

- Kira Fortune, Acting Chief, Special Program on Sustainable Development and Health Equity, , Pan American Health Organization/ World Health Organization, United States

**MAPLE ROOM
MEZZANINE LEVEL**



PUBLISHING IN THE CANADIAN JOURNAL OF PUBLIC HEALTH: TIPS FROM SENIOR EDITORS

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, Senior Editor, CJPH; Professor and Senior Scholar, School of Public Health and Social Policy, University of Victoria
- Jeff Masuda, Senior Editor, CJPH; Associate Professor, School of Kinesiology and Health Studies, Queen's University

Session Chair:

- Louise Potvin, Editor-in-Chief, CJPH; Professor, Department of Social and Preventive Medicine, Faculty of Medicine, University of Montréal



**VIP ROOM
CONCOURSE LEVEL**

BIOMONITORING IN CANADA: THE CANADIAN HEALTH MEASURES SURVEY AND THE ARCTIC

The Canadian Health Measures Survey (CHMS) is an on-going national survey that is led by Statistics Canada, in partnership with Health Canada and the Public Health Agency of Canada, which collects information from Canadians about their general health. In addition to an interview and direct physical measurements, blood and urine samples provide information on human biomonitoring data that contribute to our understanding of exposure to chemicals. The CHMS does not examine and is not representative of northern populations, but research initiatives through the Northern Contaminants Program provide data on biomonitoring in the circumpolar region. Data from three cycles of the CHMS are available. Public health professionals may be interested in these data for establishing baselines, analyzing trends or comparing populations. In this symposium, the key components of the CHMS and other biomonitoring in the Arctic will be presented. Delegates will be able to discuss how these data may help to inform their own work.

Learning Objectives:

- Describe the CHMS and its components; describe biomonitoring activities and results in the Canadian Arctic.
- Determine CHMS access points and key information; locate partners in Arctic biomonitoring.
- Explore opportunities to use CHMS data through self-directed analyses, partnerships and networks.

Speakers:

- Bryan Adlard, Scientific Evaluator, Population Biomonitoring Section, Health Canada
- Brent Day, Senior Analyst, Statistics Canada
- Julie Yome, Senior Scientific Evaluator, National Biomonitoring Section, Health Canada

Session Chair:

- Cheryl Khoury, Senior Scientific Evaluator, National Biomonitoring Section, Health Canada

**CHESTNUT WEST
MEZZANINE LEVEL**

CANADA'S TOBACCO ENDGAME INITIATIVE

Although there have been tremendous gains in reducing smoking prevalence in Canada, tobacco products continue to be, by a wide margin, the number one single preventable cause of death and disease in Canada, and will be for the foreseeable future.

A Steering Committee for Canada's Tobacco Endgame has been formed consisting of leaders in tobacco control, law, ethics, policy, public health, science, professional associations, and cancer control. Our goal of < 5% smoking prevalence by 2035 ("Less than 5 by 35") will save hundreds of thousands of Canadian lives in this century.

Novel and potentially radical strategies will be needed to put a stop to the tobacco epidemic more rapidly than an incremental approach, and to reach the tobacco "endgame". This symposium will introduce the corpus of Endgame measures being discussed and, in some cases, implemented around the world.

Learning Objectives:

- Describe the need for moving from tobacco control to tobacco endgame and assess what are and are not endgame measures.
- Assess the evidence for key tobacco endgame measures.
- Apply Endgame thinking to advocacy, practice and policy discussions.

Speakers:

- Elizabeth Eisenhauer, Head Department of Oncology, Queen's University & Cancer Program Medical Director, Kingston General Hospital
- Robert Schwartz, Executive Director, Ontario Tobacco Research Unit & Associate Professor, Dalla Lana School of Public Health, University of Toronto
- Emily Taylor, Research Officer, Ontario Tobacco Research Unit, University of Toronto

Session Chair:

- Robert Schwartz, Executive Director, Ontario Tobacco Research Unit & Associate Professor, Dalla Lana School of Public Health, University of Toronto



**CHESTNUT EAST
MEZZANINE LEVEL**

EVERYBODY MATTERS: ADDRESSING WEIGHT STIGMA IN PUBLIC HEALTH RESEARCH, PRACTICE AND POLICY

This symposium will highlight how weight stigma research might influence current public health research, practice and policy. Weight stigma towards individuals living with obesity is prevalent within health systems, including public health. This symposium will share current research and highlight emerging strategies to help address and reduce weight stigma within public health policies and practice.

Learning Objectives:

- Describe how weight stigma affects physical and psychological health and wellbeing.
- Appraise current research and initiatives that address weight stigma.
- Select practical strategies on how to best serve individuals living in large bodies through research, policy or practice.
- Argue for a greater focus on interdisciplinary collaborative professional development opportunities in the area of weight bias over the longer term.

Speakers:

- Angela Alberga, Banting CIHR Postdoctoral Fellow, University of Calgary
- Sara Kirk, Professor of Health Promotion and Canada Research Chair, Dalhousie University
- Jodi Krah, Public/Patient Advisor, Canadian Obesity Network

Session Chair:

- Arya Sharma, Scientific Director, Canadian Obesity Network

**SHERATON HALL A
LOWER CONCOURSE**

INTEGRATING INDIGENOUS COMMUNITY PLANNING INTO A HEALTHY BUILT ENVIRONMENT

Linkages between the natural and built environment, economy and health are important considerations in Indigenous community planning. To successfully integrate health, we must use knowledge, methods and practice to promote self-reliance, resiliency and respect for culture. The importance of these linkages needs to be recognized when working with under-served Indigenous communities. A holistic approach considers environmental, economic, social, cultural and governance factors when approaching health and sustainability. The built environment includes community design, housing, infrastructure, air and water quality. Awareness and application of culturally appropriate practices, standards and ethics, and effective communication using oral and visual histories and traditional ecological knowledge, will promote respect, trust, mutual learning and cooperation helping to improve built environment conditions that impact health.

Learning Objectives:

- Describe the unique cultural dimensions, characteristics and historical challenges to planning a healthy built environment for Indigenous, rural communities.
- Formulate different approaches towards a healthy built environment into an Indigenous context as presented in cases of comprehensive community planning for rural settings.
- Apply tools, techniques and methodologies appropriate to the planning of healthy built environments in under-served, Indigenous communities.

Speakers:

- Jeff Cook, Instructor, School of Regional and Community Planning, University of British Columbia and Principal, Beringia Community Planning Inc.
- Catherine Donovan, Associate Professor, Public Health, Division of Community Health & Humanities, Memorial University of Newfoundland
- Jeremy Seesequasis, Band Councillor, Beaudy's and Okemasis First Nation
- Roberta Stout, Research Associate, National Collaborating Centre for Aboriginal Health

Session Chairs:

- Donna Atkinson, Manager, National Collaborating Centre for Aboriginal Health
- Tom Kosatsky, Scientific Director, National Collaborating Centre for Environmental Health & Medical Director, Environmental Health Services, BC Centre for Disease Control



**SHERATON HALL C
LOWER CONCOURSE**

CROSS-SECTORAL ADVOCACY: CLIMATE CHANGE AND WATER

Climate change policies and water policies have significant health impacts around the world and in Canada. Adequately responding to the concerns in those areas will be challenging in years to come and the public health sector will need to work closely with other sectors to develop policies to protect the environment and meet the expectations of populations in the country and around the world. Those two environmental sectors are marked by significant contribution of non-governmental organizations to the development of the public narrative around the policy making process.

Learning Objectives:

- Describe the utility of health data for environmentalists working on climate change and water.
- Create a framework for engagement with non-health professionals advocates.
- Translate public health information for use by other sectors when working in climate change and water.

Workshop Facilitators:

- Gabriel Blouin Genest, Assistant Professor, Department of Political Science, ASPECT Affiliate Faculty, Virginia Tech USA
- Catherine Habel, Public Health and preventative medicine resident, University of Montreal
- Yassen Tcholakov, Public health and preventative medicine resident, McGill University

**OSGOODE
BALLROOM WEST
LOWER CONCOURSE**

ETHICAL CHALLENGES IN PUBLIC HEALTH EVALUATION

Public Health Ontario's Framework for the Ethical Conduct of Public Health Initiatives emphasizes core public health ethics principles that guide evidence generating initiatives, including, respect for persons, concern for welfare, and justice. Through the use of case studies, participants will analyze key ethics concepts such as risk, conflict of interest, privacy and consent within the public health context. The benefits of including ethics principles and strategies into public health evaluations, including improving evaluation quality and rigor and increasing community/public trust, will be discussed. Using standard stages of an evaluation process and considering the various types of evaluations, we will identify the main ethical challenges that evaluators face during key stages of an evaluation, how to address these challenges and the role of evaluators in ensuring ethical integrity. This workshop is designed to be highly interactive with the intention of providing participants with tangible examples and strategies that can be used in their practice.

Learning Objectives:

- Assess the ethical challenges facing evaluators in the public health context.
- Describe core public health ethics principles and strategies and the role of evaluators when addressing ethical challenges.
- Apply core public health ethics principles and strategies to evaluation case studies.

Workshop Facilitators:

- Allison Meserve, Health Promotion Consultant, Public Health Ontario



**OSGOODE
BALLROOM EAST
LOWER CONCOURSE**

POLICY APPROACHES TO REDUCING HEALTH INEQUALITIES

This workshop is intended to enable public health actors to more easily distinguish between the most widespread policy approaches that have been proposed to reduce health inequalities. These approaches are: political economy, macro social policies, intersectionality, lifecourse, settings approach, approaches that aim at living conditions, those that target communities, and finally approaches aimed at individuals.

We will seek to clarify how these different approaches are grounded theoretically and how they affect inequalities differently. To better understand the different potential impacts of these approaches, we shed some light on two interrelated dimensions that are often overlooked or misunderstood. Firstly, we will clarify the distinction between the types of determinants (of health or of health inequalities) that may be targeted by the various approaches to reducing health inequalities. Secondly, using the categories proposed by the Commission on the Social Determinants of Health, we consider the different potential effects (on social stratification, on exposure to risk factors, on the vulnerability of certain groups to particular conditions, and on the inequitable consequences of disease) that may be produced by these different approaches. This will be done using a mixture of short presentations and group work in the workshop.

Learning Objectives:

- Differentiate between seven different policy approaches to reducing health inequalities.
- Classify each approach as acting on either the determinants of health or the determinants of health inequalities.
- Illustrate how adopting one or another of the policy approaches will affect the potential reduction of health inequalities differently.

Workshop Facilitators:

- Val Morrison, Research Officer, National Collaborating Centre for Healthy Public Policy

**BIRCHWOOD
BALLROOM
MEZZANINE LEVEL**

THE POLICY READINESS TOOL: INCREASING LOCAL CAPACITY FOR HEALTHY PUBLIC POLICY CHANGE

Developing healthy public policy is a key strategy for improving public health. The Policy Readiness Tool (PRT) is an evidence-based, practitioner-oriented tool that was developed to increase the capacity of local actors to encourage healthy public policy development. Workshop participants will be introduced to the three main components of the PRT: (1) an assessment of readiness (11 self-administered items to assess a community or organization's readiness for policy change); (2) strategies for working with communities or organizations at different stages of readiness for policy change; and, (3) a resource list to help promote the adoption of healthy public policy.

The goals of this interactive workshop are to: (1) increase participants' capacity for healthy public policy change to improve public health; (2) address potential resource capacity issues by providing strategies and suggested resources to encourage policy development at all levels of readiness; and, (3) build knowledge through intersectoral collaboration.

Learning Objectives:

- Identify level of readiness for policy change for a community or organization of their choosing around a personal topic of interest using the Policy Readiness Tool.
- Describe how the Policy Readiness Tool can be applied in their setting and potential challenges and opportunities with this application.
- Create connections with intersectoral colleagues to learn from others around future healthy public policy development.

Workshop Facilitators:

- Candace Nykiforuk, Associate Professor, School of Public Health, University of Alberta and CIHR/PHAC/AI-HS Applied Public Health Chair
- Laura Nieuwendyk, Project Coordinator, PLACE Research Lab, School of Public Health, University of Alberta
- Jennifer Ann McGetrick, Doctoral Student, School of Public Health, University of Alberta



**SHERATON HALL B
LOWER CONCOURSE**



National Collaborating Centres
for Public Health
Centres de collaboration nationale
en santé publique

SUCCESS AND LESSONS LEARNED ABOUT KNOWLEDGE TRANSLATION AND SOCIAL MEDIA STRATEGIES: TEN YEARS ON

The practice of knowledge translation (KT) in public health can be daunting. Questions, considerations and challenges exist at all stages of the process. During this session, members from the National Collaborating Centres for Public Health will reflect on lessons learned in knowledge translation over the first 10 years, specifically those strategies with greatest effect and impact, as well as those that were tried, failed and stopped. Join us to learn about innovative KT approaches and practical communications tools and technologies as they apply to different KT contexts.

Learning Objectives:

- Describe lessons learned from the NCCPH experience in knowledge translation and use of social media
- Identify successful KT strategies, as well as those where challenges were encountered challenges and the lessons learned.
- Create opportunities to integrate KT approaches, communications tools and technologies into the public health setting.

Speakers:

- Donna Atkinson, Manager, National Collaborating Centre for Aboriginal Health
- François Benoit, Lead, National Collaborating Centre for Healthy Public Policy
- Maureen Dobbins, Professor, School of Nursing, McMaster University & Scientific Director, National Collaborating Centre for Methods and Tools
- Rick Harp, Communications Coordinator, National Collaborating Centre for Infectious Diseases
- Lydia Ma, Manager, National Collaborating Centre for Environmental Health
- Jeannie Mackintosh, Communications Coordinator, National Collaborating Centre for Methods and Tools
- Sume Ndumbe-Eyoh, Knowledge Translation Specialist, National Collaborating Centre for Determinants of Health

Session Chair:

- Yoav Keynan, co-Scientific Director, National Collaborating Centre for Infectious Diseases



SHERATON HALL A
LOWER CONCOURSE



PUBLIC HEALTH BENEFITS FROM AND PUBLIC HEALTH ACTION TO SUPPORT CANADIAN EFFORTS TO CONTAIN GLOBAL HEATING TO <2°C

At the November 2015 Paris Conference of the Parties on Climate Change, Canada presented a position quite different from its previous stance. Canada committed to reduce our economy-wide greenhouse gas emissions by 30% below 2005 levels by 2030. This session will seek to reinforce the commitments made in Paris by exploring the health benefits of Canadian action to contain global heating to <2°C. Given the potential Canadian and global health benefits of a shift away from fossil fuels and to a low-carbon society, public health can play an important role in supporting the transition at all levels of Canadian society and helping to ensure the commitments made at COP21 are kept.

Learning Objectives:

- Identify the principal actions necessary in Canada to contain global heating to under 2°C.
- Identify the health benefits and co-benefits of action to contain global heating not only for Canadians, but globally; and
- Identify what public health can do to bolster policy implementation for changes needed to reduce carbon emissions and contain global heating to under 2°C.

Speakers:

- Irene Henriques, Professor of Sustainability & Economics, Schulich School of Business, York University
- Trevor Hancock, Professor of Public Health, University of Victoria
- Mustafa Koç, Professor of Sociology, Ryerson University
- Carol Mee, Manager, Healthy Public Policy, Toronto Public Health

Session Chair:

- Colin Soskolne, Professor Emeritus, University of Alberta, Canada & Adjunct Professor, Faculty of Health, University of Canberra, Australia.



VIP ROOM
CONCOURSE LEVEL

FACTORS THAT INFLUENCE VACCINE HESITANCY: PART II – CONVENIENCE

- Theoretical aspects of convenience; Issues in Canada – Shannon MacDonald, Assistant Professor, Faculty of Nursing, University of Alberta
- Effective strategies to increase access to vaccination services or enhance convenience of services for migrants – Charles Hui, Associate Professor of Paediatrics, Faculty of Medicine, University of Ottawa & Chief of Infectious Diseases, Children's Hospital of Eastern Ontario
- Impact of pharmacists as vaccine providers on increased access to vaccination services or enhanced convenience of services for clients – Jennifer Isenor, Assistant Professor, College of Pharmacy, Faculty of Medicine, Dalhousie University

Moderator:

- Eve Dubé, Resesarcher, Institut national de santé publique du Québec

OSGOODE
BALLROOM WEST
LOWER CONCOURSE

BUILDING PUBLIC HEALTH SYSTEM CAPACITY

- CulturallyConnected.ca as a tool to promote health equity using a cultural humility approach – Ann Pederson
- The use and impact of digital technologies for population health and health equity gains – James Chauvin
- The Vaccine Sentimeter: Monitoring online media discussion of vaccines in Canada – Guido Antonio Powell
- Review results in 140 characters or less: Using social media to link decision makers to evidence – Olivia Marquez
- Webinars to disseminate public health research evidence for use in policy and practice: An effective knowledge translation strategy – Olivia Marquez



**OSGOODE
BALLROOM EAST
LOWER CONCOURSE**

FIRST NATIONS, INUIT, AND MÉTIS COMMUNITIES

- Using strength-based approaches to engage Indigenous youth in health risk communication – Cindy Jardine
- Cuystwi (Let's Go!) Indigenous youth wellness – Nancy Laliberte
- Ilagiilluta – "Let's Be a Family" Program, Nunavik – Faisca Richer
- Comparison between the Aboriginal Children's Health and Well-being Measure and Medicine Wheel – Nancy Young
- A novel process for identifying at-risk youth through school-based screening on a First Nation reserve – Nancy Young

**BIRCHWOOD
BALLROOM
MEZZANINE LEVEL**

HEALTH ASSESSMENT, DISEASE SURVEILLANCE, PROGRAM EVALUATION AND RESEARCH

- Prioritizing climate-sensitive infectious diseases for public health interventions – Valerie Hongoh
- The evolving face of public health crises in Canada, are we ready? – Nicole Kain
- Bon voyage or bad voyage? Surveillance of travel-related infectious disease in Peel – Gregory Kujbida
- OutbreakHelp.ca: A new knowledge sharing platform for evidence-based information on infection prevention, management and control of Ebola Virus Disease in Canada – Kristin Read
- Hypothesis generation methodology and source identification during human enteric illness outbreak investigations: A scoping review – Danielle Reimer

**CHESTNUT WEST
MEZZANINE LEVEL**

HEALTH PROMOTION

- What's the value of healthy living? A social return on investment analysis using wellbeing valuation – Craig Joyce
- Healthy urbanization: Regional framework for scaling up and expanding healthy cities in the Western Pacific (2011-2015) – Findings of an evaluation project – Michelle Amri
- The moderating effect of depressive symptoms on associations between objective and perceived built environment measures and neighborhood walking among older U.S. women – Stephanie Orstad
- CASTLE: Creating Access to Screening and Support in the Living Environment – Angela Frisina
- Measuring the cancer prevention system in Ontario: The Prevention System Quality Index – Caroline Silverman



#PublicHealth16



**CHESTNUT EAST
MEZZANINE LEVEL**

PARTNERSHIPS AND COLLABORATIONS

- Systems theory to guide the implementation of Health in All Policies – Ketan Shankardass
- What is this thing called knowledge translation? Integrating scientists and end users in a knowledge translation experiment – Susan Elliott
- Building a theory-based approach to evaluation of small development NGOs: A case study from Canada – Stephanie Lu
- The Global Charter for the Public's Health: The next steps – Implementation – Michael Moore
- Is the future of "population/public health" divided?: Reflections from within the field – Kelsey Lucyk

**MAPLE ROOM
MEZZANINE LEVEL**

POLICY AND PROGRAM INTERVENTIONS

- Impact of Canadian tobacco packaging on quit line utilization: An interrupted time series analysis of call volume and new callers – Neill Baskerville
- Mass media tobacco control campaigns, quit attempts, and rate of relapse: A longitudinal population based study – Michael Chaiton
- Motivated to quit, but can they do it by themselves? A mixed methods study of young men's tobacco use and cessation motivation – Simone Kaptein
- Tobacco control initiatives in Ontario since 2010: Understanding impact and contextual factors – Sue Keller-Olaman
- Investigating Canadian young adult experiences and use of smoking cessation aids – Darly Dash

**SHERATON HALL C
LOWER CONCOURSE**

WORLD CAFÉ

- Intersectionality and health equity: Exploring an evidence-based framework for influencing intersecting systems of power – Samiya Abdi
- Advocacy for health equity: Understanding how power informs our advocacy work and helps us advocate effectively – Lesley Dyck
- Health equity knowledge partnerships: Are many heads better than one? – Hannah Moffatt
- Building public health competencies to address health inequities: Unique challenges of working in the nexus between the social and ecological determinants of health – Margot Parkes

Wrap up an exciting 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.

**GRAND BALLROOM
LOWER CONCOURSE**



The 12th Prevention of Violence Canada National Town Hall meeting is an open public forum designed to connect and empower Canadians to address violence in your communities. This event offers an unparalleled opportunity to engage with experts and advocates as they explore how we can build a safer healthier future for Canadians using evidence-based strategies for violence prevention.

This year we are honoured to hear from Natan Obed, President of the national Inuit Organization - Inuit Tapiriit Kanatami. Natan's leadership in suicide prevention and the creation of healthy communities suggests a pathway forward for Inuk society. We will also hear from Audette Shephard, from the Ontario Office for Victims of Crime. Audette Shephard's only child Justin Garth Shephard was murdered on June 23, 2001, at the age of 19. Justin had been one of Canada's most promising upcoming basketball players and he dreamed of joining his half-brother Jamaal Magloire in the NBA. Out of much sorrow came much resolve for Ms. Shephard, as she developed a strong passion towards helping youth and finding solutions to end youth violence.

PROGRAM OVERVIEW

7:00 - 8:15	Dalla Lana School of Public Health Alumni Breakfast			
8:30 - 10:00	PLENARY III: HEALTH EQUITY, SOCIAL JUSTICE AND THE RACIALIZATION OF CANADIAN SOCIETY Desmond Cole Charlotte Loppie David McKeown Ingrid Waldron			
10:00 - 10:30	BREAK			
10:30 - 12:00	CONCURRENT SESSIONS			
Collaborator Sessions	<i>CIHI presents:</i> Measuring health inequality in Canada – Lessons learned. Where to next?		<i>CPHA presents:</i> Strategies and Tools to Address Sexually Transmitted and Blood-borne Infections and Related Stigma	
Oral Presentations	Building Public Health System Capacity	First Nations, Inuit, and Métis Communities	Health Assessment, Disease Surveillance, Program Evaluation and Research	Health Promotion
	Health Protection	Partnerships and Collaborations	Policy and Program Interventions	Vaccine Hesitancy
12:00 - 14:00	NETWORKING LUNCH WITH EXHIBITORS			
	CPHA ANNUAL GENERAL MEETING			
14:00 - 15:30	CONCURRENT SESSIONS			
Collaborator Sessions	<i>OPHA presents:</i> Public Health – The Force Awakens		<i>CPHA presents:</i> Mapping Public Health Principles for Cannabis Policy Reform in Canada	
Symposiums	A Call to Action: Pathways to First Nations, Inuit and Métis health equity in Canada	Doing health equity work using a collective impact approach	Growing health promotion practice: Looking forward to the next 30 years	Public Health Systems and Services Research: The 'kid' is growing up but still needs support
Workshops	Balancing health promotion, disease prevention and stigma reduction: Creating positive public health communication campaigns	Evaluating home stairway plus bath/shower facilities and implementing safety plus usability improvements for all users	Making friends with systematic reviews: Be comfortable with assessing the quality of reviews and interpreting forest plots in 90 minutes!	Public health research priority setting: The example of suicide prevention research
15:30 - 17:30	NETWORKING WITH POSTER PRESENTERS			
17:30 - 19:00	UNIVERSITY OF ALBERTA SCHOOL OF PUBLIC HEALTH NETWORKING RECEPTION Pinnacle Room, 43rd Floor [Pre-registration required]			

7:00 - 8:15 BREAKFAST SESSION

SHERATON HALL C, LOWER CONCOURSE



DALLA LANA SCHOOL OF PUBLIC HEALTH ALUMNI BREAKFAST

Celebrate the Dalla Lana School of Public Health's expanding footprint as Canada's leading research, teaching and service Faculty. All alumni, faculty and students attending Public Health 2016 are welcome to attend a breakfast to enjoy a light breakfast and good conversation.

WELCOME REMARKS:

- Dionne Patz, Public Health Policy and Program Advisor, Office of the Assistant Director, Pan American Health Organization/ World Health Organization
- Pegeen Walsh, Executive Director, Ontario Public Health Association

HEALTH EQUITY, SOCIAL JUSTICE AND THE RACIALIZATION OF CANADIAN SOCIETY

Racism is deeply and structurally embedded in Canadian society and within our practices, programs and policies. This acknowledgement is a vital first step in discussing and taking action on this important determinant of health. Racism harms health in a variety of ways, including economic and social deprivation, socially inflicted trauma, and inadequate health and social services. Given the current environment and recent events, this is an opportunity to have an open and constructive conversation about racism and how it manifests itself in our own thoughts and actions and the policies and programs of public health.

In this plenary participants will consider their own assumptions and will explore racism from diverse perspectives. It will provide participants with tools that will help them talk about racism in meaningful terms, and examples of what can be done to address racism from the public health perspective, and will promote cultural safety and increased understanding more broadly.

Learning Objectives:

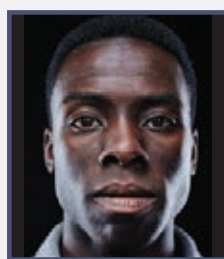
- Describe how racism is embedded within practices, programs and policies and identify the impact it can have on an individual's health, social services, and economic conditions.
- Recognize the underlying factors that impact our personal perceptions.
- Explore how public health can collaboratively implement practical strategies and take action to promote culturally safe, anti-racist and healthy communities.

Moderator:



Sume Ndumbe-Eyoh
*Knowledge Translation
Specialist, National
Collaborating Centre for
Determinants of Health*

Speaker:



Desmond Cole
Freelance Journalist

Speakers:



Charlotte Loppie
*Professor, School of Public
Health and Social Policy,
Faculty of Human and Social Development,
University of Victoria*



Ingrid Waldron
*Assistant Professor,
School of Nursing,
Dalhousie University*



David McKeown
*Medical Officer of Health,
Toronto Public Health*



**SHERATON HALL B
LOWER CONCOURSE**



Canadian Institute
for Health Information
Institut canadien
d'information sur la santé

MEASURING HEALTH INEQUALITY IN CANADA – LESSONS LEARNED. WHERE TO NEXT?

Join a discussion about the current state of measuring health inequalities to drive action in Canada. Recent pan-Canadian monitoring and reporting initiatives carried out in collaboration among the Canadian Institute for Health Information, the Public Health Agency of Canada, Statistics Canada and others have revealed large and, in some cases, widening health inequalities at the national and provincial/territorial levels. In addition, a recent stakeholder dialogue on equity measurement and reporting in healthcare has provided valuable insights into priority areas for improving data collection and reporting in Canada. Get a glimpse into the highlights, processes and knowledge products from these initiatives and contribute to the conversation on "Where to go next."

Learning Objectives:

- Learn about recent pan-Canadian work on measuring inequalities in health and health care at the national and provincial/territorial levels
- Discuss the approaches taken to select equity stratifiers for measurement and reporting
- Inform the next steps for measuring and monitoring inequalities in health and health care in Canada

Speakers:

- Geoff Hynes, Manager, Canadian Population Health Initiative, Canadian Institute of Health Information
- Beth Jackson, Manager, Equity Analysis and Policy Research, Social Determinants and Science Integration Directorate, Health Promotion and Chronic Disease Prevention Branch, Public Health Agency of Canada
- Andrew Pinto, Scientist and Staff Physician, St Michael's Hospital
- Claudia Sanmartin, Chief and Senior Researcher, Health Services Research, Statistics Canada

Moderator:

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

**SHERATON HALL A
LOWER CONCOURSE**



STRATEGIES AND TOOLS TO ADDRESS STIGMA RELATED TO SEXUALITY, SUBSTANCE USE AND SEXUALLY TRANSMITTED AND BLOOD-BORNE INFECTIONS

This workshop for front-line health and social service providers is focused on reducing stigma related to sexuality, substance use and STBBIs. During this highly interactive workshop, participants will explore STBBI-related stigma, the multiple factors that contribute to stigma, and the potential impacts of stigma on clients as well as public health interventions. In addition, participants will have an opportunity to enhance their skills in discussing sexuality and substance use with their clients and will be provided with several strategies and tools that can be employed to mitigate stigma within their workplace.

Learning Objectives:

- Identify the different types of stigma related to sexuality, substance use and sexually transmitted and blood-borne infections in Canada.
- Analyze and examine the many factors that contribute to stigma, including attitudes, values, beliefs and organizational practices.
- Explore the strategies and tools that can be used to address stigma and contribute to improved dialogue with service users.

Speakers:

- Greg Penney, Director, National Programs, Canadian Public Health Association
- Rachel MacLean, Project Officer, Canadian Public Health Association
- Becky Van Tassel, Community Development Manager, Calgary Sexual Health Centre



**VIP ROOM
CONCOURSE LEVEL**

FACTORS THAT INFLUENCE VACCINE HESITANCY: PART III – CONFIDENCE

- Theoretical aspects of trust – Samantha Meyer, Assistant Professor, School of Public Health and Health Systems, University of Waterloo
- Trust issues in Canada – Eve Dubé, Resesarcher, Institut national de santé publique du Québec
- Developing trust relationships with your patients – Noni MacDonald, Professor, Department of Pediatrics, IWK Children's Hospital, Dalhousie University

Moderator:

- Lucie Marisa Bucci, Senior Manager, Immunize Canada

**OSGOODE
BALLROOM WEST
LOWER CONCOURSE**

BUILDING PUBLIC HEALTH SYSTEM CAPACITY

- Mobilisation in order to protect Quebec public health system's capacity: Impact assessment of unprecedented citizen and professional involvement – Marie-Ève Beauregard
- Guide Priorité Santé (GPS) – A new tool and model for inter-professional collaboration in primary health care – Claire Gagné
- Embracing implementation science: An organizational strategy to support sustainable practice change – Andrea Chambers
- An innovative knowledge broker training program to support research use in local public health – Lori Greco
- Attitudes toward collaboration among agencies serving urban First Nations and Métis children and families – Martin Cooke

**OSGOODE
BALLROOM EAST
LOWER CONCOURSE**

FIRST NATIONS, INUIT, AND MÉTIS COMMUNITIES

- Prioritizing Indigenous health equity in the public health system: Addressing social, structural, and systemic determinants of health – Alexandra Kent
- Health systems performance assessments within First Nations, Inuit, and Métis contexts: Exploring approaches to integrating Indigenous conceptions of wellness into CIHI's Health Systems Performance Measurement Framework – Kevin Lu
- Strength in Numbers: Improving access to quality, reliable and timely First Nations population health information through partnerships – Jennifer MacDonald
- Social determinants of Inuit health – Anna Claire Ryan
- The insistence of Culture: Are we ready as public health practitioners and policymakers to address the inequities of Canada's Aboriginal Peoples? – Sandra Song

**BIRCHWOOD
BALLROOM
MEZZANINE LEVEL**

HEALTH ASSESSMENT, DISEASE SURVEILLANCE, PROGRAM EVALUATION AND RESEARCH

- PEEPing into the lives of people who use drugs and understanding how their experiences are shaped by provider attitudes – Jane Buxton
- Mapping opioid-related fatalities in Toronto: Has naloxone distribution made an impact? – Mike Benusic
- Characteristics and response to treatment among Aboriginal people receiving injectable opioids for the treatment of long-term opioid-dependence – Heather Palis
- Perceived unmet need and barriers to care amongst street-involved people who use illicit drugs in Edmonton, AB – Elaine Hyshka
- Understanding patient capacity to meet the demands of methadone maintenance treatment from the perspectives of people with long-term opioid dependence – Kirsten Marchand



**CHESTNUT WEST
MEZZANINE LEVEL**

HEALTH PROMOTION

- Strengthening prenatal education in Ontario: Using the new key messages to guide your practice – Jo-Anne Robertson
- Preventing Fetal Alcohol Spectrum Disorder (FASD) in Canada: Current practices and future directions – Rose Schmidt
- Representations of motherhood and the production of stigma: FASD public awareness campaigns in Canada – Alexa Norton
- "There's never too much information": An evaluation of Alberta's Healthy Parents, Healthy Children resources with parents vulnerable to poor health outcomes – Carmen Webber
- Confirmatory factor analysis of preschool Child Behavior Checklist (CBCL) (1.5 – 5 yrs) among Canadian children - Kamalpreet Banga

**SHERATON HALL C
LOWER CONCOURSE**

HEALTH PROTECTION

- Is there a case for blood lead reporting in Ontario? – JinHee Kim
- Health Impacts of Resource Extraction and Development (HIRED): Knowledge synthesis and policy insights – Margot Parkes
- The role of socioeconomic position as an effect-modifier of the association between outdoor air pollution and children's asthma exacerbations: An equity-focused systematic review – Laura Andrea Rodriguez-Villamizar
- Environmental burden of cancer in Ontario: Assessing environmental carcinogens and employing a unique methodology to identify environmental pathways of concern – Elaina MacIntyre
- Surveillance of population exposure to environmental hazards using Ontario Poison Centre data – Elaina MacIntyre

**CHESTNUT EAST
MEZZANINE LEVEL**

PARTNERSHIPS AND COLLABORATIONS

- Body language: A dialogue between Ontario youth and public health nurses on the HPV vaccine – Debra Kriger
- Collaboration: Lessons learned from developing an online public health learning network – Ilya Plotkin
- Lessons learned – Engaging community partners in the hard facts syphilis campaign – Noella Whelan
- Including people who use illicit drugs in harm reduction: A scoping review of services, programming, and policy – Sarah Wojcik
- Creation of an online app for urban Aboriginal women in Ottawa: A community-based participatory approach – Francine Darroch

**MAPLE ROOM
MEZZANINE LEVEL**

POLICY AND PROGRAM INTERVENTIONS

- Are home visiting programs for at-risk children effective at reducing population level health and social disparities? A PATHS Equity for Children project – Marni Brownell
- Rationalizations for "Investing" in Child Public Health – Celine Cressman
- Enhancing Canadian Child Advocacy Centres with a Mental Health Component – Oluwatomisin Iwajomo
- Association between accessibility to early childhood intervention (ECI) and children's skills at the kindergarten level – Jessica Langevin
- Learning as we grow: Supporting children and families during the early years in Nova Scotia – Jessie-Lee McIsaac

WEDNESDAY JUNE 15

12:00 - 14:00 NETWORKING LUNCH WITH EXHIBITORS GRAND BALLROOM, LOWER CONCOURSE

12:00 - 14:00 CPHA ANNUAL GENERAL MEETING PROVINCIAL BALLROOM, MEZZANINE LEVEL



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 June 14, 2016 at the registration desk. Lunch will be provided.

14:00 - 15:30  COLLABORATOR SESSIONS

SHERATON HALL B
LOWER CONCOURSE



PUBLIC HEALTH – THE FORCE AWAKENS

Public health has a long history of being a force for social change and promoting individual and community health and wellbeing. With public health being integrated into regional health authorities under different models across the country, how have public health leaders used their mandates to influence their health care colleagues to improve health outcomes?

This session will bring together public health advocates, academics and allies to discuss the implications of these various provincial models, the innovative and collaborative partnerships that are emerging between public health and health care to build understanding about the role of the determinants of health, promote health equity and shift towards more upstream approaches.

The panel will invite delegates to discuss their sense of the challenges and opportunities that lie ahead and what's needed to unleash the full force of the public health sector.

Learning Objectives:

- Explore the collaborative relationship between public health and health care and define factors that impact the successes and overcome challenges.
- Describe the factors that contribute to improved health outcomes.
- Identify potential roles for public health in facilitating opportunities to improve determinants of health, promote health equity and shift towards more upstream approaches.





**SHERATON HALL A
LOWER CONCOURSE**



MAPPING PUBLIC HEALTH PRINCIPLES FOR CANNABIS POLICY REFORM IN CANADA

Canada is poised to enter a select group of countries that have a legal regulatory approach to recreational cannabis use. While the phrase “a public health approach” is being used freely to describe the Federal government’s proposed approach, there are currently no details being provided. Our policymakers face the challenge of developing an evidence-informed, innovative approach that minimizes the associated risks and harms. They can do so by drawing on lessons learned through the regulation of alcohol and tobacco, as well as on the early experiences of select jurisdictions that have already implemented legal regulatory approaches.

This session will include an explanation of the public health conceptual framework and the importance of applying a public health approach as the guiding framework in which cannabis regulation is developed. This will be a working session during which participants will be able to explore and share their insights into the five key issue areas that need to be addressed from a public health perspective.

Learning Objectives:

- Identify risks associated with legalizing cannabis and describe the need to develop evidence informed approaches to minimize risks and harms.
- Describe different legal regulatory approaches implemented in the United States and internationally.
- Analyze and examine what factors will contribute to a public health framework for cannabis regulation.

Speakers:

- Rebecca Jesseman, Canadian Centre on Substance Abuse / Centre canadien de lutte contre les toxicomanies
- Frank Welsh, Director, Policy Development, Canadian Public Health Association

Moderator

- Ian Culbert, Executive Director, Canadian Public Health Association



A collaborative partner in Canada’s largest health sciences research complex, the Dalla Lana School of Public Health is influencing policy in population health, prevention and health systems.

We conduct innovative research to find new approaches to prevent disease and promote healthier individuals and populations.

We work with local, national and international partners to create new knowledge and shape and promote progressive public health policy and practice.

And we deliver exceptional interdisciplinary graduate programs to prepare tomorrow’s public health leaders—researchers, practitioners, clinicians, educators and policy-makers.

- Social & Behavioural Health Sciences (Health Promotion)
- Epidemiology
- Biostatistics
- Occupational & Environmental Health
- Clinical Public Health



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**MAPLE ROOM
MEZZANINE LEVEL**

A CALL TO ACTION: PATHWAYS TO FIRST NATIONS, INUIT AND MÉTIS HEALTH EQUITY IN CANADA

The work of the Truth and Reconciliation Commission has come to an end and reconciliation has begun. Reconciliation includes closing the gap in health inequities experienced by Indigenous peoples. This process requires multi-faceted changes to mainstream education and care delivery, as well as new approaches and understandings of what constitutes Indigenous health and well-being. Dr. de Leeuw will examine historical and contemporary root causes of health disparities, 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. Dr. Makokis will explain why and how the delivery of trauma informed practice can be transformational for Indigenous peoples since many continue to experience the legacies of historic trauma. Using the example of cultural safety training, Ms. Davoren will explore the need to move away from subsuming Métis under First Nations/Aboriginal programming and policies. Ms. Tagalik will refer to Inuit worldviews and traditional teachings as crucial to Inuit understandings of well-being.

Learning Objectives:

- Examine the complex historical and contemporary forms and relationships of racism experienced by, between, and beyond, Indigenous peoples, individuals and communities in Canada which have contributed to unacceptable health inequities (TRC-Call to Action #18).
- Describe how relationships and interactions with mainstream health care systems and providers have prolonged poor health outcomes for Indigenous peoples in Canada (TRC-Call to Action #20 & 23).
- Locate strengths-based, community-driven programs, policies and strategies to combat health inequities, such as trauma-informed practice and cultural competency and safety (TRC-Call to Action #23).
- Explore pathways to First Nations, Inuit and Métis health, healing, and wellness through Indigenous epistemologies, ways of knowing and being, cultural teachings, and ceremonies (TRC-Call to Action #22 & 24).

Speakers:

- Sarah de Leeuw, Associate Professor, Northern Medical Program (University of Northern British Columbia), Research Associate, National Collaborating Centre for Aboriginal Health
- Tanya Davoren, Health Director, Métis Nation British Columbia
- Patricia Makokis, Saddle Lake Cree Nation
- Shirley Tagalik, Principal, Inukpaujaq Consulting

Session Chair:

- Roberta Stout, Research Associate, National Collaborating Centre for Aboriginal Health



#PublicHealth16



VIP ROOM
CONCOURSE LEVEL

DOING HEALTH EQUITY WORK USING A COLLECTIVE IMPACT APPROACH

As a type of collaboration, Collective Impact initiatives are long-term commitments by a group of key actors from different sectors to a common agenda for solving a specific social problem. Their actions are supported by a shared measurement system, mutually reinforcing activities, and ongoing communication, and are staffed by an independent backbone organization. As a sector, public health has an important role to play, particularly in relation to achieving health equity objectives. Participants in this session will learn more about Collective Impact and how different Public Health organizations and their community partners have built on opportunities and overcome barriers by using this approach to get traction on pervasive social issues. The projects being discussed will include the Child & Youth Health Network of the Capital Region (Victoria, BC), the Hamilton Poverty Reduction Initiative, and London's Child and Youth Network.

Learning Objectives:

- Describe the Collective Impact approach and explore how public health can participate as an effective collaboration method to take action on the social determinants of health.
- Describe different ways Public Health has engaged in Collective Impact initiatives and draw on these examples to explore possibilities in other Public Health settings.
- Identify essential skills and competencies for engaging in Collective Impact initiatives.

Speakers:

- Ruby Brewer, Program Manager, Early Years Team and CYN lead, Middlesex-London Health Unit
- Jo Ann Salci, Public Health Nurse, Hamilton Public Health Unit

Session Chair:

- Sume Ndumbe-Eyoh, Knowledge Translation Specialist, National Collaborating Centre for Determinants of Health

OSGOODE
BALLROOM WEST
LOWER CONCOURSE

GROWING HEALTH PROMOTION PRACTICE – LOOKING FORWARD TO THE NEXT 30 YEARS

As we celebrate the 30th anniversary of the Ottawa Charter for Health Promotion, let us explore what comes next. Health Promotion has benefited greatly from the directions set in the Ottawa Charter and the subsequent World Health Organization conferences. However, the context of public health has been rapidly shifting and changing - what are the new directions of focus needed for the 21st century? Ecological determinants of health and social media are two possible areas requiring particular attention. Drawing on reflective and arts-based engagement processes, workshop participants will express, discuss and link perspectives on the key trends, innovations and future directions that inform the next 30 years of Health Promotion practice.

Learning Objectives:

- Identify and synthesize current and future priority directions for Health Promotion practice.
- Create compelling images and narratives for momentum-building on innovations and leadership in HP and public health.
- Apply arts-based reflection and engagement techniques for experiential learning and skill-building.

Speakers:

- Charlotte Lombardo, Program Director MPH in Health Promotion, Dalla Lana School of Public Health
- Suzanne Jackson, Associate Professor, Dalla Lana School of Public Health
- Phyllis Novak, Artistic Director, Sketch Working Arts for Street-Involved and Homeless Youth



**CHESTNUT WEST
MEZZANINE LEVEL**

PUBLIC HEALTH SYSTEMS AND SERVICES RESEARCH – THE 'KID' IS GROWING UP BUT STILL NEEDS SUPPORT

Public Health Systems and Services Research (PHSSR) is "a field of study that examines the organisation, funding and delivery of public health services within communities, and the impact of these services on public health." It is less than a decade since PHSSR was described as "the new kid on the block." Much has happened in Canada and the USA to advance this emerging field. We will provide an overview of PHSSR in both Canada and the USA, the relevance and utility of this work for PH practitioners and policy makers, the challenges in moving this agenda forward, and the prospects for collaboration and mutual learning between Canada and the USA.

Learning Objectives:

- Describe and discuss the field of public health systems and services research (PHSSR).
- Compare and contrast the Canadian and American approaches to PHSSR.
- Summarize key findings from recent Canadian and American PHSSR.
- Identify the relevance of PHSSR to their practice.
- Identify key priorities for the further development and application of PHSSR.

Speakers:

- Marjorie MacDonald, Professor, School of Nursing, University of Victoria and Former CIHR/PHAC Applied Public Health Research Chair
- Heather Manson, Chief of Health Promotion, CD and Injury Prevention, Public Health Ontario
- Glen Mays, Director, Center for Public Health Services and Systems Research and F. Douglas Scutchfield Endowed Professor, Health Services and Systems Research, University of Kentucky

Session Chair:

- Trevor Hancock, Professor of Public Health, University of Victoria and Co-Director of the Research in Public Health Systems and Services (RePHSS) Initiative



#PublicHealth16



SHERATON HALL C LOWER CONCOURSE

BALANCING HEALTH PROMOTION, DISEASE PREVENTION AND STIGMA REDUCTION: CREATING POSITIVE PUBLIC HEALTH COMMUNICATION CAMPAIGNS

During this interactive workshop, participants will explore the relationship between public health communication campaigns and the possible perpetuation of stigma against traditionally marginalized communities and/or persons who engage in so-called high-risk behaviours (e.g., smoking, unhealthy eating, substance use). Through group discussion, participants will critically assess various public health communication campaigns, including HIV prevention and obesity prevention campaigns, and explore the tension between public health messages and the reduction of stigma. Participants will discuss the practical strategies that can be employed to develop positive public health communication campaigns that, rather than contribute to existing stigma, promote overall health and well-being. Finally, participants will be provided with an opportunity to apply these strategies to various public health communication campaigns of relevance to their work.

Learning Objectives:

- Explore the relationship between public health communication campaigns and the possible perpetuation of stigma against traditionally marginalized communities as well as those engaging in so-called high-risk activities (e.g., smoking, substance use, sexual activity).
- Analyze existing public health communication campaigns and identify promising practices for positive public health communication campaigns.
- Identify and apply strategies in order to develop positive public health communication campaigns that do not add to existing stigma, but rather contribute to population health and well-being.

Workshop Facilitators:

- Cameron Norman, Principal, Cense Research & Design & Adjunct Professor, Dalla Lana School of Public Health, University of Toronto
- Rachel MacLean, Project Officer, Canadian Public Health Association

CHESTNUT EAST MEZZANINE LEVEL

EVALUATING HOME STAIRWAY PLUS BATH/SHOWER FACILITIES AND IMPLEMENTING SAFETY PLUS USABILITY IMPROVEMENTS FOR ALL USERS

Using easily understood photographic and hands-on examples of defective as well as beneficial features of stairways and bath/shower facilities, in conjunction with videos demonstrating both dangerous and successful use, participants quickly understand what does not work adequately and, more importantly, what does. These teaching tools have been widely employed and the lessons they teach are ergonomically founded; i.e., they are based on evidence that has had extensive, skilled, ergonomic peer review internationally over many years. They are also consistent with the best available, widely used, formal standards for usability and safety of built environment facilities, specifically for stairways and baths/showers. The presenter has worked on such standards for decades and, acceptance of the presented design and retrofit interventions thus has undergone another, rigorous level of peer review. Workshop participants will see these facilities in a new light, one that reveals valuable, applicable insights for understanding and improving their own homes' usability and safety.

Learning Objectives:

- Describe and evaluate three key factors in stairway usability and safety pertaining to visibility, secure footing and points of control.
- Describe and evaluate two key factors in bath/shower usability and safety pertaining to stepping in and out plus what points of control are needed.
- Prioritize interventions, based on such factors, their effectiveness and ease of implementation, that result in improved usability and safety.

Workshop Facilitator:

- Jake Pauls, Independent Consultant/Advocate in Building Use and Safety

Potential workshop attendees who wish to receive pre-workshop reading, please contact the Workshop Facilitator at bldguse@aol.com with 'CPHA Workshop Preparation Reading' in the Subject line.



**BIRCHWOOD
BALLROOM
MEZZANINE LEVEL**

MAKING FRIENDS WITH SYSTEMATIC REVIEWS: BE COMFORTABLE WITH ASSESSING THE QUALITY OF REVIEWS & INTERPRETING FOREST PLOTS IN 90 MINUTES!

Competence using systematic review-level evidence is crucial for public health – many public health questions are answered by systematic reviews, which synthesize all primary studies in one topic area to generate an overall conclusion. This workshop provides an overview of the anatomy of a systematic review, with examples of "good" quality reviews, and where to find the main quality indicators for reviews. The session will take the intimidation out of forest plots (where data are reported for meta-analyses) and remove the mystery from critical appraisal. Participants will leave feeling more confident in their ability to appraise and interpret reviews, as well as knowledge of existing tools and resources to assist them in this activity.

Learning Objectives:

- Describe the anatomy of a systematic review and where to find quality indicators.
- Interpret forest plots (yes, you can learn this in a 90-minute session!).
- Apply quality assessment criteria to a systematic review and learn how to do a quick "QA".

Workshop Facilitators:

- Maureen Dobbins, Professor, School of Nursing, McMaster University & Scientific Director, National Collaborating Centre for Methods and Tools

**OSGOODE
BALLROOM EAST
LOWER CONCOURSE**

PUBLIC HEALTH RESEARCH PRIORITY SETTING: THE EXAMPLE OF SUICIDE PREVENTION RESEARCH

Evidence-based public health action requires that the relevant research to address evidence needs is conducted. Without systematic approaches to prioritizing research activities, it is possible that research activities may not align with the most pressing evidence needs. The Public Health Agency of Canada and the Mental Health Commission of Canada have partnered to develop a process to identify suicide prevention research priorities for Canada. This workshop will present the approach chosen in the context of good practices for health research priority setting as identified by the World Health Organization. Participants will take part in identifying evidence needs to inform suicide prevention research and will apply criteria to identified needs to prioritize topics.

This workshop will allow participants practical experience participating in a prioritization process, as well as taking away general knowledge that can be applied to health research prioritization at other levels (provincial/territorial/municipal) and on other topics.

Learning Objectives:

- Identify good practices for public health research priority setting as described by the World Health Organization.
- Assess potential research priorities against explicit criteria.
- Formulate recommendations, as public health stakeholders, for the current suicide prevention research prioritization process.

Workshop Facilitators:

- Heather Orpana, Senior Policy Analyst, Public Health Agency of Canada, & Adjunct Professor, School of Psychology, University of Ottawa
- Karla Thorpe, Director, Prevention and Promotion Initiatives, Mental Health Commission of Canada

The dedicated poster session and networking event will enable presenters to engage with delegates and present research, program, best practices or policy innovation in a more dynamic setting. The goal of the poster presentation session is to allow delegates to network, and exchange innovative ideas, while facilitating productive discussion and feedback.

1. Effects of residential schooling on obesity: Evidence from the 2012 Aboriginal Peoples Survey – Martin Cooke
2. Evaluating an Outdoor Adventure Leadership Experience (OALE) Program using the Aboriginal Children's Health and Well-Being Measure (ACHWM) – Nancy Young
3. Conception of a resource: Creating a community-based online healthy living app for urban aboriginal women during pregnancy – Francine Darroch
4. Participatory methods in Rigolet: Evaluation of Inuit health programs and collaborative development of a whiteboard video for health promotion – Manpreet Saini
5. Methods and approaches to program evaluation in Indigenous contexts: Results from a scoping review of the grey literature and key informant interview validation – Kriti Chandna
6. Cancer in First Nations in Ontario: Risk factors and screening – Sehar Jamal
7. Understanding and addressing Métis cancer risk factors: An example of participatory research in action – Storm Russell
8. Exploring pathways for achieving and sustaining good wellbeing among Inuit in Nunatsiavut, Labrador – Alexandra Sawatzky
9. Mapping the gaps and opportunities for improved knowledge translation concerning tuberculosis among priority populations in Canada – Geneviève Boily-Larouche
10. Describing cancer in Yukon: A look into mortality and incidence (1993 - 2013) – Jonathan Simkin
11. Polysaccharide Pneumococcal vaccine uptake among Canadian federal inmates – Jonathan Smith
12. Capacity building to manage public health Impacts in the mining sector – A Mongolia-Canada partnership – Craig Janes
13. Of mice and men: Cluster of Hantavirus Pulmonary Syndrome (HPS) in the Canadian Armed Forces – Kirsten Barnes
14. Hypertension in the Canadian Armed Forces: Validating ICD-10 codes for use as population health surveillance indicators – Jennifer LeMessurier
15. Follow-up of Healthcare Workers (HCWs) Caring for the First Patient Diagnosed with Avian Influenza A H5N1 in North America – Deena Hinshaw
16. Determining risk of human West Nile virus infection using cluster detection and poisson modelling – Shruti Mallya
17. Towards the synchronization of expert and general public concerns with regards to prevention and control strategies for West Nile virus – Valerie Hongoh
18. A scoping review of research investigating chikungunya virus and its competent vectors – Sophiya Garasia
19. Using electronic medical records for diabetes prevention surveillance – Karim Keshavjee
20. Integrating public health and primary care strategies for diabetes prevention: Where does Canada stand? – Ghazal Fazli
21. Determinants of diabetes self-management among recent immigrants in Toronto: Implications for systemic change – Ilene Hyman
22. Finding a place for me outside the stereotypes: Creating an action plan to support the mental wellbeing of racialized immigrant women – Judith MacDonnell
23. Impacts of the Interim Federal Health Program on healthcare access and provision for refugees and refugee claimants in Canada: A stakeholder analysis – Valentina Antonipillai
24. Understanding the role of newcomer and Canadian-born women in caesarean section decision-making in Edmonton, AB – Priatharsini (Tharsini) Sivananthajothy
25. Implementation intentions intervention to promote fruit and vegetable intake in childbearing age women at risk for gestational diabetes mellitus: 3-Month follow-up of a randomized controlled trial – Lydi-Anne Vézina-Im
26. Healthy Parents, Healthy Children: An evaluation of a universal health promotion resource for Alberta families and health care providers – Carmen Webber
27. Taking the sting out of school based immunizations – Lucie Marisa Bucci
28. Multi-provincial approach to studying vaccine effectiveness of pertussis: Preliminary case data, Alberta: A CIRN Provincial Collaborative Network study – Jeff Kwong
29. Can high overall Human Papillomavirus (HPV) vaccination coverage hide socio-demographic inequalities? An ecological analysis in Canada – Shelley Deeks
30. Early impact of Ontario's Human Papillomavirus (HPV) vaccination program on anogenital warts (AGWs): A population-based assessment – Shelley Deeks
31. Physicians knowledge of the management of antimicrobial resistant gonorrhea in Canada: Results from two cross-sectional surveys (2014 and 2015) and the Enhanced Surveillance of Antimicrobial-Resistant Gonorrhea Pilot – Michèle Sabourin
32. Getting a grippe on influenza – Margaret Haworth-Brockman

33. High-Dose Inactivated Influenza Vaccine Can Reduce Costs and Improve Outcomes Compared To Standard-Dose Inactivated Influenza Vaccine in Canadian Seniors – Ayman Chit
34. Your best shot: Influenza vaccine uptake among high risk groups in Fraser Health, BC – Shweta Dhawan
35. Trends in influenza vaccine coverage and vaccine hesitancy in Canada, 2007 - 2014 – Sarah Buchan
36. What can history teach us about vaccine hesitancy in Canada? A study of vaccine hesitancy in British Columbia, 1930-1991 – Monica M Brown
37. Creating the big picture: Historical, social and cultural features of vaccine hesitancy – Heather MacDougall
38. Educating parents about pain mitigation during infant vaccination: How much is enough? – Anna Taddio
39. Impact of exposure to hospital microbial environment on infant's gut microbiota composition at 3-4 months – Mon Tun
40. Confirmatory factor analysis of preschool Child Behavior Checklist (CBCL) (1.5 – 5 years) among Canadian children – Kamalpreet Banga
41. What is the best algorithm for identifying children with autism spectrum disorder (ASD) using Manitoba's administrative data? – Helene Ouellette-Kuntz
42. Effect of an intensive multi-modal intervention for Attention-Deficit Hyperactivity Disorder (ADHD) on children's health and educational outcomes - A PATHS Equity for Children Project – Marni Brownell
43. Effectiveness re-examined: Comparing the impact of a peer-led healthy living intervention across diverse participant groups - A PATHS Equity for Children Project – Marni Brownell
44. The association of social environments and positive mental health among adolescents, youth, and adults: Preliminary findings – Hasu Ghosh
45. Socioeconomic status and early childhood development: A comparison of Canadian socioeconomic indices and their relationships with the early development instrument – Simon Webb
46. Socioeconomic gradients in early child development across Canadian jurisdictions – Anita Minh
47. CanU: Introducing a collaborative equity-based program for strengthening educational achievement among children – Trina Arnold
48. Empowering "C.H.A.M.P. (Children's Health and Activity Modification Program) Families" through the development of a comprehensive childhood obesity program – Dalia Hasan
49. How does it work? Exploring researchers' experiences implementing knowledge exchange in school health research – Kristin Brown
50. A protocol for a province-wide process implementation evaluation of a health promotion intervention for children in Ontario – Michelle Vine
51. Secondary school compliance with the Ontario School Food and Beverage Policy: An assessment of school vending machine data from the Compass Study – Michelle Vine
52. Characterizing supportive school ethos for student health and well-being: The development of a multi-dimensional supportive school ethos score – Jessie-Lee McIsaac
53. Creating a culture of healthy eating in recreation and sports settings – Jessie-Lee McIsaac
54. Applying systematic review search methods to the grey literature: A case study examining guidelines for school-based breakfast programs in Canada – Katelyn Godin
55. Research to dialogue to action-seeds to grow community food security – Valerie Blair
56. The Health Canada proposed %DV for total sugars is not indicative of healthier beverages – Jodi Bernstein
57. If you build it they will come': A retrospective logic model and program theory for British Columbia's school food and beverage sales guidelines – Adrienne Levay
58. The differential impact of price discounting on unhealthy food purchasing by neighborhood socioeconomic status – Hiroshi Mamiya
59. Food insecurity and perceived anxiety among adolescents: An analysis of 2009-2010 National Health and Nutrition Examination Survey (NHANES) data – Merryn Maynard
60. Hypothesizing the impact of the elimination of severe food insecurity on the mental health of Canadian adults Genevieve – Jessiman-Perreault
61. Associations of social capital and rurality with adolescent unrealized and unmet need for mental health and substance use services in Atlantic Canada – Bruce Gregoire
62. Utilisation de produits dopants par les jeunes adultes dans un milieu universitaire francophone dans l'Ouest canadien – Alyena Fredette
63. Determinants of mental health and its utilization services in Canada – Mustafa Andkhoie
64. Impacts of childhood maltreatment on self perceived mental health in emerging adulthood – Oluwatomisin Iwajomo
65. Social support and mental disorders among Canadian adults exposed to childhood abuse – Mina Park
66. Measuring positive mental health in Canada: The Positive Mental Health Surveillance Indicator Framework – Heather Orpana

67. The ability of standardized tools to augment the use of school absenteeism syndromic surveillance in Alberta – Ian Johnson
68. Development of sustainable in-house infrastructure for electronic public health surveillance dashboards in Alberta – Hussain R. Usman
69. Working with people who drink non-beverage alcohol to describe perceived harms and proposed harm reduction initiatives – Alexis Crabtree
70. Pathways to Promoting Mental Health: A 2015 survey of Ontario Public Health Units – Monica Nunes
71. Saying when: Increasing awareness of Canada's low-risk alcohol drinking guidelines through an innovative knowledge tool – Monica Nunes
72. Is there an association between trends in alcohol consumption and cancer mortality? Findings from a multi-country analysis – Naomi Schwartz
73. Cancer Risk Assessment in Youth Survey (CRAYS): Differences in flavoured tobacco use, retail tobacco access, and tanning bed use by sexual orientation, immigration status, and linguistic characteristics in a pan-Canadian sample of high school students – Alyssa Zarnke
74. The impact of tobacco retail outlets on smoking cessation: The effects of proximity, threshold, and density in a longitudinal population representative study – Michael Chaiton
75. Leading practices in smoking cessation: Results from three pan-Canadian environmental scans – Michelle Halligan
76. Slim cigarette smoking among Canadian youth: Implications for federal standardized packaging legislation – Maple Ong
77. Facteurs influençant la promotion du renoncement au tabac dans les cliniques dentaires privées au Québec – Pascaline Kengne Talla
78. Development and testing of a questionnaire exploring dentists' intention to use clinical practice guidelines on smoking cessation in Quebec – Pascaline Kengne Talla
79. Evaluation of tobacco policy tools: Analyzing changes in consumption correlated with federal and provincial policies in Canada and Ontario – Michelle Amri
80. Women and Prescription Medication Misuse – Rose Schmidt
81. A comparison of satisfaction with injectable diacetylmorphine and hydromorphone treatment for the treatment of long-term opioid dependence – Kirsten Marchand
82. Histories of victimization and its relationship with years of regular heroin injection among women and men with opioid dependence – Kirsten Marchand
83. Improving health outcomes for survivors of family violence: Building evidence through community interventions – Linda Baker
84. An examination of victim, assailant, and assault characteristics among predatory drug-facilitated sexual assault cases – Daisy Kosa
85. E-learning to improve care for women who experience intimate partner violence and sexual assault: Results from three initiatives – Robin Mason
86. A comparative analysis of Provincial/Territorial Harm Reduction Policy: Implications for expanding access to health services for people who use illicit drugs – Caitlin Sinclair
87. Gender specific predictors of retention in methadone maintenance treatment among long-term opioid users – Heather Palis
88. Non-inferiority of hydromorphone compared to diacetylmorphine for long-term opioid dependence: A randomized clinical trial – Eugenia Oviedo-Joekes
89. HIV incidence among gay, bisexual, and other men who have sex with men in sexually transmitted infection clinics across British Columbia, Canada – Jia Hu
90. The role of peers in reducing the risk of HIV and Hepatitis C virus among crack and methamphetamine users of Vancouver – Hugh Lampkin
91. Patient perspectives and outcomes of a provincial methadone formulation change in British Columbia – Jane Buxton
92. Illicit drug overdose deaths resulting from income assistance payments: Analysis of the 'check effect' using daily mortality data – Jane Buxton
93. Paying people with lived experience in community based work: Challenges and opportunities for inclusion and equity – Jane Buxton
94. On engagement – learning from our PEEPs – Erin Gibson
95. Shifting to a new normal: the future of peer engagement – Erin Gibson
96. Participant perspectives from the BC Take Home Naloxone program – Erin Gibson
97. Understanding lived tobacco use of LGBTTQ youth experiencing homelessness: Exploring the interface of agency, collective health practices, and environmental engagement – Neill Baskerville
98. Examining the effectiveness of physical activity, exercise, and sport interventions to improve levels of physical activity and physical fitness among LGBT people: A systematic review – Paul Gorczynski
99. Examining the relationship between personality, motivation, and physical activity among university staff – Paul Gorczynski

- 100.** Reciprocity beyond the paycheck: Promotion of health and productivity among informal caregivers who are also employed in a university setting – Brad Meisner
- 101.** Key predictors of self-rated health and use of health services among different ethnic groups of undergraduate students in Maritime Canada – Emily Budden
- 102.** The impact of health literacy on access to healthcare services among college students in a Western Canadian university – Jean Moraros
- 103.** Examining the association between area level deprivation and severity of vehicle collisions – Khrisha Alphonsus
- 104.** Pedestrian and cyclist safety in Toronto, ON – Kate Bassil
- 105.** Examining and addressing men's boating safety practices in the Northwest Territories – Catherine Glass
- 106.** Developing an integrated and coordinated system to prevent and manage chronic diseases in Ontario: Results from the Ontario Chronic Disease Prevention Alliance Chronic Disease Indicators Project – Elizabeth Manafo
- 107.** Injury and chronic disease in Alberta – Diana Carolina Sanchez Ramirez
- 108.** Estimating the burden of injuries among the Métis Nation of Alberta – Diana Carolina Sanchez Ramirez
- 109.** Visibility is Viability: A Health Unit's journey towards demonstrating their role in chronic disease and injury prevention in the community – Joanne Beyers
- 110.** Aphasia Camp – An Inclusive Recreation Case Study – Gemma Woticky
- 111.** Improved screening and follow-up procedures to manage iatrogenic exposure to Creutzfeldt-Jakob Disease in a British Columbia health authority – David McVea
- 112.** Empowering people with communication disabilities: Connecting through the experience of a Town Hall meeting – Gemma Woticky
- 113.** Relevant health promotion practices and policies for immigrant mothers of children with developmental disabilities – Nazilla Khanlou
- 114.** Structure evaluation for prenatal care of primary health care services in the regions of Brazil in the context of the National Program for Access and Quality Improvement in Primary Care (PMAQ) – Tauani Cardoso
- 115.** Public health and veterinary partnerships: Demonstrating the equity and utility of the one-health clinic model among homeless pet-owners – Casey Panning
- 116.** Clinical prevention: Charting present and potential roles for a regional public health authority – Ak'ingabe Guyon
- 117.** Public health and primary care collaboration: A comparison of British Columbia and Ontario public health policies renewal – Ruta Valaitis
- 118.** Knowledge and behaviours of Canadian physicians on the use of antibiotics and antimicrobial resistance: Results from a two-cycle national survey in 2014 and 2015 – Courtney R. Smith
- 119.** Making connections and sharing knowledge on the social determinants of health through social media: A survey of public health professionals – Sume Ndumbe-Eyoh
- 120.** Are online learning resources effective to build capacity for evidence-informed decision making? – Maureen Dobbins
- 121.** Swimming with Geoffrey Rose's fish: What is risk? – Debra Kriger
- 122.** Empowering health promoters across Canada to do what they do best: Promote Health – Rebecca Fortin
- 123.** Health system reform in Nigeria through the "Right to Health": Outlines of a blueprint – Uchekukwu Ngwaba
- 124.** Leadership for all: Strengthening leadership in public health – Angela Telford
- 125.** A history of the social determinants of health, 1910-2010: Findings from the Archives of the Canadian Public Health Association – Kelsey Lucyk
- 126.** Public health advocacy: Lessons Learned from the history of the Alberta Public Health Association (1943 - Present) – Isabel Ciok
- 127.** Nous sommes les dents d'une même bouche: une publication collaborative sur la santé dentaire en contexte de vulnérabilité – Rana Annous
- 128.** Expanding the health equity lens to paramedicine in Niagara – Marty Mako
- 129.** A realist evaluation of the knowledge-to-action process in Health Equity Impact Assessment completion – Ingrid Tyler
- 130.** Complex Interventions Assessment When even the gold standard fail – Aziz Guergachi
- 131.** Réflex-iss : Un outil pour observer, comprendre et analyser une intervention de santé publique au regard des inégalités sociales de santé – Valéry Ridde
- 132.** Expanding data potential with the social data linkage environment – Cathy Trainor
- 133.** Community development and social inclusion/exclusion: Supporting the participation of low-income and Aboriginal families in a rural Alberta community – Sharon Yanicki

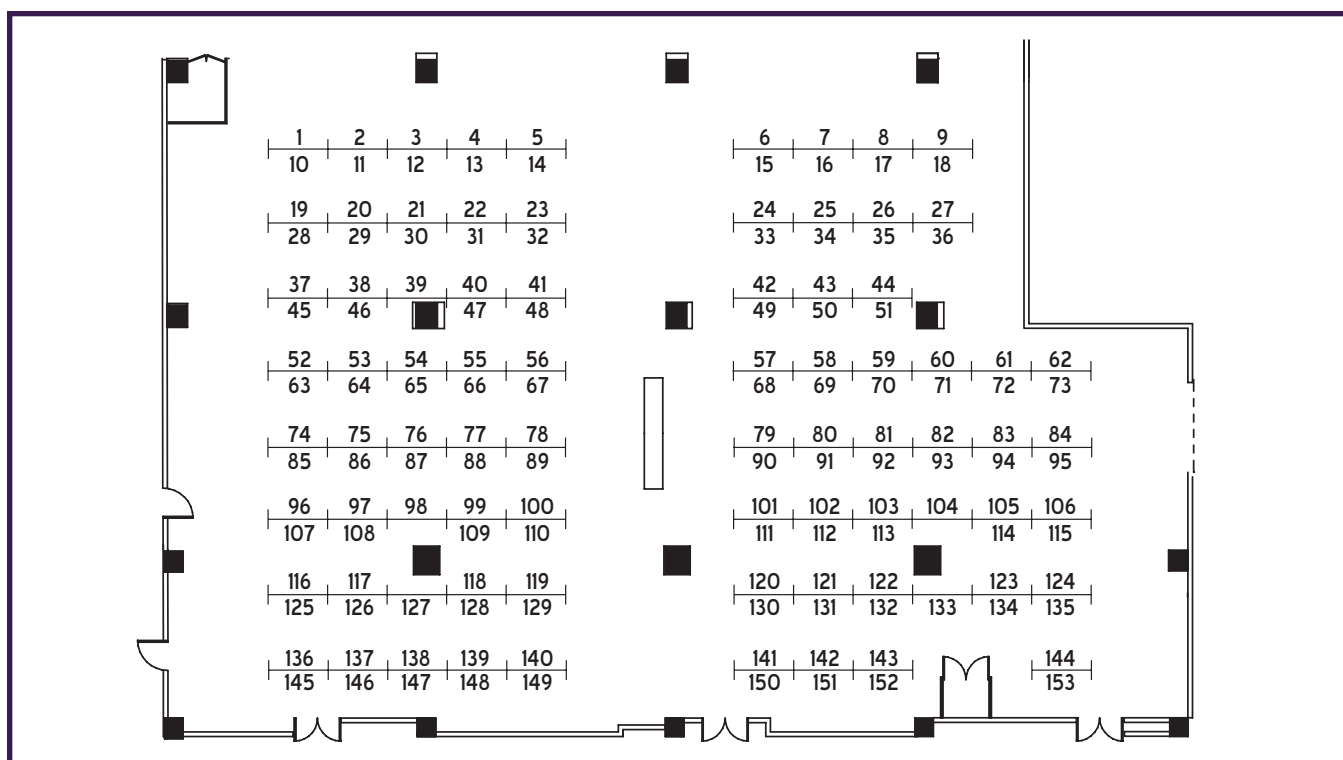
WEDNESDAY JUNE 15

15:30 – 17:30

NETWORKING WITH POSTER PRESENTERS

SHERATON HALL E & F, LOWER CONCOURSE

- 134.** Public health capacity and response to indoor environmental health risks in rental housing: Results of an Ontario survey – Erica Phipps
- 135.** Supporting vulnerable clients to remain housed – Shona Lalonde
- 136.** Extreme cold weather alerts in Toronto: An emerging public health issue – Paul Coleman
- 137.** Shifting gears through partnerships: Integrating health considerations into transportation planning projects in the Region of Peel – Natalie Lapos
- 138.** Policy options for creating healthy built environments in the Caribbean – Ahalya Mahendra
- 139.** Updating sun and UV personal protective action recommendations for Canada: Achieving stakeholder consensus on the current evidence for use in health promotion – Maria Chu
- 140.** The Blob - A climate change monster or just an everyday hydrogeophysical event? – Paul Hasselback
- 141.** Assessing Population Health before and after wind turbine installation: A pre/post study – Leila Jalali
- 142.** Tools for interpreting the results of human biomonitoring of environmental chemicals in Canada – Cheryl Khoury
- 143.** Leadin newcomer women from South & East Asia in greater Toronto area – Abtin Parnia
- 144.** Use and beliefs of Traditional Chinese Medicine amongst Elderly Chinese immigrants in Greater Toronto, ON – Peter Wang
- 145.** Medications and adverse effects during extreme heat: Vulnerability assessment using pharmacy surveillance databases – Rebecca Stranberg
- 146.** A 4-season longitudinal study examining the association between seasonality and sedentary behaviour in 10-14 year old Canadian children – Larisa Lotoski
- 147.** Who is walking and biking to work or school in Saskatoon? An analysis of transportation methods used by Saskatonians – Larisa Lotoski
- 148.** Is neighbourhood walkability associated with sedentary time in a nationally-representative Canadian population? – Justin Thielman
- 149.** Association between neighbourhood walkability and clinical measures influenced by physical activity: A cross-sectional study of adults in Toronto, ON – Jennifer Loo
- 150.** Check the score: Field validation of street smart walk score in Alberta – Candace Nykiforuk
- 151.** The future of physical activity surveillance: The physical activity, sedentary behaviour and sleep indicator framework – Karen Roberts
- 152.** The impact of social position on the relationship between active travel use and body mass index in a sample of urban Canadians – Dana Ramsay
- 153.** Living longer, healthier and working longer – Yves Decady



PROGRAM OVERVIEW

8:30 - 10:30	PHPC ANNUAL GENERAL MEETING					
9:00 - 10:30	CONCURRENT SESSIONS					
Collaborator Session	CPHA Policy Forum					
Oral Presentations	Building Public Health System Capacity	First Nations, Inuit, and Métis Communities		Health Assessment, Disease Surveillance, Program Evaluation and Research		Health Promotion
	Health Protection	Partnerships and Collaborations	Policy and Program Interventions	Vaccine Hesitancy		World Café
10:30 - 11:00 BREAK						
11:00 - 12:30	CONCURRENT SESSIONS					
Collaborator Sessions	PHPC presents: Health Inspectors, Public Health Nurses, Doctors: A Candid Conversation about Collaboration and Adaptation			CPHA presents: Addressing Global Ecological Change Together: Forging New Partnerships		
Symposiums	An overview of health data available from Statistics Canada	Approaches to Community Well-being: A First Nations approach to public health	Physician Outreach: Communicating with Physicians to Influence Practice	Our collective Canadian responsibility: responding to the Syrian refugee crisis		RECIG to Inform Policy: Research on E-Cigarettes
Workshops	How can I choose a public health ethics framework that is suited to my practical needs?	Introducing the PHO MetaQAT, the Public Health Ontario Meta Tool for quality assessment of public health evidence		Mental Health Caregivers Guide: A national partnership resource-development project		The Web Resource Rating tool: Learn to identify and create high-quality online health information using McMaster Optimal Aging Portal's appraisal tool
12:30 - 14:30	LUNCH PLENARY IV: HARM REDUCTION, RISK PERCEPTION AND ALCOHOL Gregory Taylor					



#PublicHealth16

THURSDAY JUNE 16

8:30 - 10:30

PHPC ANNUAL GENERAL MEETING

WILLOW
WEST & CENTRE
MEZZANINE LEVEL



PUBLIC HEALTH PHYSICIANS OF CANADA AGM

Join your fellow members at the PHPC Annual General Meeting to see your specialty society at work for you. Hear an overview of the year's achievements and help shape what priorities lay ahead. Breakfast will be provided.

9:00 - 10:30



COLLABORATOR SESSION

OSGOODE
BALLROOM EAST
LOWER CONCOURSE



CPHA POLICY FORUM

Policy Forum is your opportunity to directly influence the development of CPHA's evidence-based policy alternatives. This year we are asking members to consider, discuss and provide recommendations on two evolving public health issues:

- Tobacco Control: End game vs. risk reduction? and
- HIV and other STBBIs: Exceptionalism or integration?

Participants will be provided short written descriptions of these topics before self-selecting into two working groups that will engage in detailed consideration, debate and identification of points to integrate into the Association's future summary of evidence and position statement on these subjects. The session will end with a Policy Rapid Fire Round during which participants will have up to 30 seconds to present one issue of particular interest. All participants will then be asked to rate the issues to help identify their relative importance for future policy development.

Learning Objectives

- Explain CPHA's main advocacy themes on two evolving policy issues
- Summarize CPHA's future policy initiatives and activities

Co-Moderators

- Ian Culbert, Executive Director, CPHA
- Frank Welsh, Director of Policy, CPHA

9:00 - 10:30



ORAL PRESENTATIONS

VIP ROOM
CONCOURSE LEVEL

FACTORS THAT INFLUENCE VACCINE HESITANCY: PART IV – EVIDENCE-BASED STRATEGIES

- Effective interventions at the provider level on pain – Anna Taddio, Professor, Leslie Dan Faculty of Pharmacy, University of Toronto
- Effective interventions at the P/T level – Noni MacDonald, Professor, Department of Pediatrics, IWK Children's Hospital, Dalhousie University
- Communication interventions / interventions in social media – Ian Roe, Content Strategist, BC Centre for Disease Control

Moderator:

- Eve Dubé, Resesarcher, Institut national de santé publique du Québec



**OSGOODE
BALLROOM WEST
LOWER CONCOURSE**

BUILDING PUBLIC HEALTH SYSTEM CAPACITY

- An overview of the current state of public health in Canada – Iwona Bielska
- Empowering health promoters across Canada to do what they do best: Promote health – Rebecca Fortin
- A compendium and assessment of training modalities for adult learners to guide effective and efficient delivery of professional public health training – Renée Carrière
- Use of online job posters to study Canadian public health workforce education and competency requirements – Renée Carrière
- An analysis of the integration of community engagement principles within the Master of Public Health program at McMaster University – Fran Scott

**SHERATON HALL A
LOWER CONCOURSE**

FIRST NATIONS, INUIT, AND MÉTIS COMMUNITIES

- Cultural food insecurity as experienced by First Nations women in Southwestern Ontario: Urban and rural perspectives – Hannah Tait Neufeld
- A critical analysis of Nutrition North Canada using a food sovereignty perspective – Kevin Lu
- Cost of food in northwestern Ontario - Results of the 2015 Northern Food Basket Survey – Shannon Robinson
- Placing strength, understanding, and knowledge at the heart of community-based environment and health surveillance with Inuit in Canada – Alexandra Sawatzky
- Bill S-8: A continued failure in addressing systemic water inequities for First Nations communities in Canada – Fariyah Ali

**WILLOW EAST
MEZZANINE LEVEL**

HEALTH ASSESSMENT, DISEASE SURVEILLANCE, PROGRAM EVALUATION AND RESEARCH

- Alcohol-attributable hospitalizations: A public health perspective – Chantal Couris
- Alcohol involvement in suicidal behaviour: Evidence from two U.S. national projects – Norman Giesbrecht
- Rate, cost, and geographical distribution of alcohol-attributable hospitalizations in the Wellington-Dufferin-Guelph health region – Eric Jeong
- Best way for the government to reduce alcohol problems: A population perspective – Diana Carolina Sanchez Ramirez
- Warning labels on alcohol containers in Ontario: An experimental evaluation of the perceived effectiveness of alcohol warning labels among adults – Fei Zuo

**CHESTNUT WEST
MEZZANINE LEVEL**

HEALTH PROMOTION

- Under the influence: Body dissatisfaction among Canadian girls and young women in the digital age – Allison Carter
- Fostering resilience as a health promotion approach to disordered eating in youth – Candice Christmas
- Identifying facilitators and barriers to physical activity and healthy eating among secondary school students in Ontario – Rachel Laxer
- The health behaviour in school-aged children in Canada: Focus on relationships – Heather Orpana
- Changes in school-based friendship networks and physical activity in children following school-grade transition: A natural experiment – Kenda Charlotte Swanson

THURSDAY JUNE 16

9:00 - 10:30



ORAL PRESENTATIONS

SHERATON HALL C LOWER CONCOURSE

HEALTH PROTECTION

- Assessing intussusception and rotavirus vaccine safety in Canada using health administrative data – Shelley Deeks
- Canadian Immunization Research Network: Establishing a provincial collaborative research network (PCN) to study pertussis vaccine effectiveness – Jeff Kwong
- Compulsion or co-operation? Ontario's Immunization of School Pupils Act, 1977-2015 – Heather MacDougall
- Confirmatory factor analysis of preschool Child Behavior Checklist (CBCL) (1.5 – 5 yrs) among Canadian children – Kamalpreet Banga
- Population impact of Ontario's infant rotavirus immunization program: Evidence of direct and indirect effects – Sarah Wilson
- Preliminary results: Adverse events after human papillomavirus vaccine (HPV), Alberta 2006-2014 – Christopher Bell

CHESTNUT EAST MEZZANINE LEVEL

PARTNERSHIPS AND COLLABORATIONS

- Collaboration between midwives in birthing centers and maternity care professionals in hospitals in Quebec: What are the barriers and facilitators? – Roksana Behruzi
- Building supportive breastfeeding communities through university-community collaboration: An example from the Waterloo region – Sandy Hoy
- A public health journey: How collaboration has enhanced municipal food system work in Halifax, NS – Valerie Blair
- Identifying mechanisms for facilitating knowledge to action strategies on the built environment to curb obesity epidemics – Ghazal Fazli
- Facilitators and barriers that federal cross-sector partners experienced while implementing a national healthy eating campaign – Melissa Fernandez

MAPLE ROOM MEZZANINE LEVEL

POLICY AND PROGRAM INTERVENTIONS

- Capture the passion – Early adolescent experiences of physical activity – Andrea Graham
- Active living in Saskatchewan: A review of official community plans – Oluwasegun Hassan
- Pathways to Policy: Local level physical activity and built environment policy change learnings from Coalitions Linking Action and Science for Prevention (CLASP) – Christopher Politis
- Association between neighbourhood walkability and clinical measures influenced by physical activity: A cross-sectional study of adults in Toronto, ON – C K Jennifer Loo
- Healing through Architecture – Using spatial elements including natural light, scent, colour and material to help reduce stress in healthcare environments and augment healing – Jennifer Beggs

SHERATON HALL C LOWER CONCOURSE

WORLD CAFÉ

- Collaborating for Health Equity: Building Organizational Capacity – Theresa Healy
- Collaborating for Health Equity: Framing for Action – Lesley Dyck
- Collaborating for Health Equity: Using Health Equity Assessments – Hannah Moffatt
- Collaborating for Health Equity: Using a Network Approach – Sume Ndumbe-Eyoh

10:00 - 11:00

REFRESHMENT BREAK

LOWER CONCOURSE , MEZZANINE LEVEL



SHERATON HALL A
LOWER CONCOURSE



ADDRESSING GLOBAL ECOLOGICAL CHANGE TOGETHER: FORGING NEW PARTNERSHIPS

The recent CPHA Discussion Paper on the Ecological Determinants of Health lays out the scope of emerging ecological changes, key drivers of these changes, and emerging and promising practices for addressing these ecological determinants of health. The paper makes the point that responding to the massive ecological changes now underway will take the collaborative effort of many different stakeholders. Moreover, public health has been largely absent from this work, which others – notably, environmental NGOs and local communities and organizations – have been leading. At the same time, public health professionals and organizations have much to offer, and their engagement in supporting the transition to a healthier, more just and sustainable future will be welcomed.

In this session, we have invited environmental organizations, urban planners and others to talk about what they need from public health to support their work nationally, regionally and locally; as well as two local health units to tell us what they are already doing.

Learning Objectives:

- Describe their work as it relates to the central recommendations of the report.
- Discuss partnerships between public health and other sectors/actors, including challenges and opportunities.
- Identify what they need from public health to best support collaboration to address the ecological determinants of health.

Speakers:

- Ewa Jackson, Manager, ICLEI
- Lorna McCue, Executive Director, London (Southwest Region), Ontario Healthy Communities Coalition
- George McKibbin, Environmental Planner, McKibbin Wakefield Inc.
- Mark Pajot, Climate Change Specialist, Peel Public Health (remote participation)
- Margot Parkes, Canada Research Chair in Health, Ecosystems & Society, University of Northern British Columbia & Co-founder of CoPEH-Canada

Moderator:

- Blake Poland, Associate Professor, Dalla Lana School of Public Health



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SHERATON HALL B
LOWER CONCOURSE



PUBLIC HEALTH INSPECTORS, PUBLIC HEALTH NURSES, AND PUBLIC HEALTH PHYSICIANS AS LEADERS: A CANDID CONVERSATION ABOUT COLLABORATION AND CHANGE

Leadership Competencies for Public Health Practice in Canada 1.0 was released last summer (2015). Funded by the Public Health Agency of Canada, this project was led by Community Health Nurses of Canada, the Canadian Institute of Public Health Inspectors, and the Manitoba Public Health Managers Network. The project's Expert Advisory Committee had representation from seven Public Health disciplines, including the Public Health Physicians of Canada.

The five domains and 49 Leadership Competency Statements are intended to describe the foundational leadership competencies required to support public health practice in Canada and compliment the core public health competencies (PHAC, 2008) and public health discipline specific competencies. The five domains are systems transformation (9 statements), achieve results (6 statements), lead self (8 statements), engage others (17 statements), and develop coalition (9 statements).

Led by the presidents of CIPHI, CHNC, and PHPC, and using examples of current "hot topics", this session will foster an inter-professional discussion about the importance of trans-disciplinary thinking and collaboration to respond to current challenges and opportunities of balancing ethical and other standards of professional practice with employer expectations and other realities in today's scientific, political and economic environment.

Learning Objectives:

- Analyze the similarities and differences in leadership challenges and opportunities faced by public health inspectors, public health nurses, and public health physicians;
- Identify the challenges and opportunities for inter-disciplinary and trans-disciplinary collaboration to advance public health thinking, decision-making, and other action;
- Apply new knowledge of ideas and realities to the advancement of collaborative inter-disciplinary and trans-disciplinary practice.

Speakers:

- Morag Granger, President, Community Health Nurses of Canada
- Ann Thomas, President, Canadian Institute of Public Health Inspectors
- Joel Kettner, President, Public Health Physicians of Canada

Session Chair:

- Greg Penney, Director, National Programs, Canadian Public Health Association



**CHESTNUT EAST
MEZZANINE LEVEL**

AN OVERVIEW OF HEALTH DATA AVAILABLE FROM STATISTICS CANADA

The Statistics Canada session on health statistics data will begin with an overview of the Canadian Community Health Survey Program, the Canadian Health Measures Survey, the Canadian Health Survey on Children and Youth, the Canadian Cancer Registry, the Vital Statistics Program and many other data sources available from Statistics Canada. The second half of this session will feature an explanation of how to access these data including the Research Data Centres program, Real-Time Remote Access, Remote Submit Options, custom tabulations and partnerships. Finally, this session will conclude with a summary of how delegates can participate in consultation processes for new health-related surveys and revisions of existing surveys.

Learning Objectives:

- Apply the various health-related data sources that are available to support their work.
- Describe how to access available data sources.
- Summarize how to participate in consultation processes for new health related surveys and revisions of existing surveys.

Speakers:

- Andrew MacKenzie, Section Chief, Canadian Community Health Survey, Health Statistics Division
- Brent Day, Senior Analyst, Canadian Health Measures Survey, Health Statistics Division
- Yves Decady, Analyst, Integration and Analysis, Health Statistics Division

Session Chair:

- Andrew MacKenzie, Section Chief, Canadian Community Health Survey, Health Statistics Division

**CHESTNUT WEST
MEZZANINE LEVEL**

APPROACHES TO COMMUNITY WELLBEING: A FIRST NATIONS APPROACH TO PUBLIC HEALTH

The Approaches to Community Wellbeing is an integrated public health system designed for 31 First Nations communities in Northwestern Ontario. As the lead organization designing the system, the Sioux Lookout First Nations Health Authority (SLFNHA) has worked with communities to identify the vision, values, goals, and priority areas for public health. The model includes four main components: Roots for Community Wellbeing, Healthy Living, Safe Communities, and Raising our Children. All of these areas are supported through the Teachings of our People, Positive People, Active Leadership, and Community Ownership. In addition to working with First Nations communities, SLFNHA has worked with federal and provincial partners to identify and resolve jurisdictional issues.

The symposium will outline the need for public health services in First Nations communities, the challenges associated with explaining and translating public health into First Nations cultural understanding, and the jurisdictional challenges faced in developing a unique First Nations system.

Learning Objectives:

- Describe the need for a unique approach to public health in First Nations communities, and analyse how this approach could be applied to your practice.
- Identify jurisdictional barriers to public health services in First Nations communities, and assess the solutions presented.
- Compare the Approaches to Community Wellbeing public health framework to the standards and principles used in your region.

Speakers:

- Natalie Bocking, Public Health and Preventative Medicine Specialist, Sioux Lookout First Nations Health Authority
- Janet Gordon, Chief Operating Officer, Sioux Lookout First Nations Health Authority
- Emily Paterson, Community Wellbeing Project Coordinator, Sioux Lookout First Nations Health Authority
- Francine Pellerin, Health Director, Matawa First Nations Management

Session Chair:

- Elizabeth Walker, Director of the Public Health Planning and Liaison Branch, Public Health Division, Ministry of Health and Long-Term Care

**WILLOW EAST
MEZZANINE LEVEL**

PHYSICIAN OUTREACH: COMMUNICATING WITH PHYSICIANS TO INFLUENCE PRACTICE

Have you ever wanted physicians to do what you want? The need to communicate urgent and routine messages and influence physician behaviour occurs regularly in public health. In a time when everyone, not only physicians, is overwhelmed by advertising and messaging – from emails to text messages, Facebook, Twitter, and other forms of Social Media - how do we engage and capture their attention?

Peel Public Health will present the evidence from their most recent rapid review examining the question “What are effective strategies to influence physician behaviour related to public health?”. Their best practices and approach to physician outreach will be discussed and the new partnership with Public Health Ontario for the Provincial Physician Outreach Community of Practice will be introduced.

Learning Objectives:

- Describe effective evidence-informed strategies for communicating with physicians.
- Develop a successful organizational physician outreach strategy.
- Apply these strategies to their everyday work in communicable disease, family health, environmental health and chronic disease and injury prevention by working through examples and case studies.
- Network and collaborate to address challenges and successes in physician outreach in a Physician Outreach Community of Practice.

Speakers:

- Sharon Lobo, Physician Outreach Specialist, Peel Public Health
- Jill Gumbley, Health Promotion Specialist for Physician Outreach, Toronto Public Health
- Stacie Carey, Knowledge Exchange Specialist, Public Health Ontario

**VIP ROOM
CONCOURSE LEVEL**

OUR COLLECTIVE CANADIAN RESPONSIBILITY: RESPONDING TO THE SYRIAN REFUGEE CRISIS

This session will discuss refugee health in Canada, in the context of the Syrian refugee crisis. Organized by students at the Dalla Lana School of Public Health, a diverse panel of health professionals, academic, and scientists, will discuss various aspects of the refugee emergency : framing the problem in the context of migration and health, available programs and services and potential areas for change.

A guided discussion after the panel will provide a forum for health professionals, allies and trainees to reflect on the services available to the refugees, identify gaps in programs and policy, and discuss potential changes to alleviate these gaps. It is our hope that participants will be able to utilize the tools employed in this session to influence patient-centered care and evidence-based policy development in their individual practice.

Learning Objectives:

- Explore the current and emergent needs of refugee populations in the Canadian context.
- Describe and assess the policies and existing services catered to refugee populations.
- Propose critical, inter-sectoral solutions to program and policy gaps to better refugee population health.

Speakers:

- Paul Caulford, Family Physician and Co-Founder, Canadian Centre for Immigrant and Refugee Healthcare
- Andrea Cortinois, Assistant Professor, Dalla Lana School of Public Health, Global Health Division, University of Toronto
- Ritika Goel, Family Physician, Inner City Family Health Team, Health for All
- Meb Rashid, Medical Director of Crossroads Clinic, Women’s College Hospital
- Yogendra Shakya, Assistant Professor, Dalla Lana School of Public Health & Senior Research Scientist, Access Alliance



**MAPLE ROOM
MEZZANINE LEVEL**

RECIG TO INFORM POLICY: RESEARCH ON E-CIGARETTES

The Ontario Tobacco Research Unit in partnership with CAMH has undertaken a multi-component research study of e-cigarettes (RECIG) to determine the prevalence and patterns of e-cigarette use; review and assess research on health effects and related exposures to nicotine, aerosols and contaminants; explore use of e-cigarettes to reduce, replace or stop smoking traditional cigarettes; and examine the role of e-cigarettes as a "gateway" to uptake of traditional cigarettes. Research findings were validated and enhanced by an International Expert Panel that met in January 2016.

Key findings will be presented and policy implications will be discussed. We will focus in particular on evidence based answers to two key questions: 1) should nonsmokers even consider vaping e-cigarettes considering what is known about health effects? 2) should smokers be encouraged to vape e-cigarettes as a way to stop smoking tobacco cigarettes (which smokers, what kinds of e-cigarettes, what vaping methods, when).

Learning Objectives:

- Describe the potential benefits and risks of the growing use of e-cigarettes.
- Examine the effectiveness of e-cigarettes as cessation aids and be able to translate this knowledge for use in practice and policy decisions.
- Compare the population health impact of using e-cigarettes of different types and in different ways by smokers and non-smokers.

Speakers:

- Shawn O'Connor, Senior Research Associate, Ontario Tobacco Research Unit
- Robert Schwartz, Executive Director, Ontario Tobacco Research Unit & Associate Professor, Dalla Lana School of Public Health, University of Toronto
- Muhannad Malas, Toxics Program Coordinator, Environmental Defence Canada

Session Chair:

- Robert Schwartz, Executive Director, Ontario Tobacco Research Unit & Associate Professor, Dalla Lana School of Public Health, University of Toronto



**WILLOW
WEST & CENTRE
MEZZANINE LEVEL**

HOW CAN I CHOOSE A PUBLIC HEALTH ETHICS FRAMEWORK THAT IS SUITED TO MY PRACTICAL NEEDS?

In this largely discussion-based session, we will focus on getting to know public health ethics frameworks. After identifying what ethics frameworks can help us to do, we will present some of the principal features of frameworks: the main lines along which they are similar to or different from one another. To do this, we will examine two frameworks (their orientations, methodologies, practical guidance, areas of applicability, the values they highlight, etc.) as a guide for analyzing frameworks more generally. The bulk of our time will be spent applying these two frameworks to a case study. Through this exercise, we will practise applying ethics by exploring the case's ethical implications; we will compare the frameworks in terms of the issues they highlight; and we will reflect on how identifying a framework's features can help us choose one for a given situation in our own practices.

Learning Objectives:

- Identify and explore the key features of public health ethics frameworks and the practical, methodological, and philosophical lines along which frameworks vary.
- Analyze ethical issues by applying two distinct public health ethics frameworks to a case.
- Interpret what features and what frameworks function best for the practitioner's particular context.

Workshop Facilitators:

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



**SHERATON HALL C
LOWER CONCOURSE**

INTRODUCING THE PHO METAQAT, THE PUBLIC HEALTH ONTARIO META TOOL FOR QUALITY ASSESSMENT OF PUBLIC HEALTH EVIDENCE

This workshop will focus on critical appraisal in an evidence-based public health context. The Public Health Ontario Meta Tool for quality assessment of public health evidence (MetaQAT) will be introduced and used to practice critical appraisal. The MetaQAT is a new critical appraisal tool developed at PHO that incorporates existing critical appraisal tools into a larger framework. It broadens the scope of appraisal beyond the risk of bias to address issues of application in a public health context. It is a flexible tool, intended to facilitate the use of public health evidence in a wide variety of settings.

Learning Objectives:

- Demonstrate critical appraisal approaches that challenge reliance on the EBM pyramid and is public health focused.
- Apply the MetaQAT framework to common uses in public health organizations.
- Develop critical appraisal skills.

Workshop Facilitators:

- Carolyn Bowman, Senior Research Coordinator, Public Health Ontario
- Beata Pach, Manager, Library Services, Public Health Ontario
- Laura Rosella, Scientist, Public Health Ontario

**OSGOODE
BALLROOM WEST
LOWER CONCOURSE**

MENTAL HEALTH CAREGIVERS GUIDE: A NATIONAL PARTNERSHIP RESOURCE-DEVELOPMENT PROJECT

The "Mental Health Caregivers Guide", a new resource developed by Ottawa Public Health will be unveiled via interactive workshop. This partnership project - between Ottawa Public Health, the Mental Illness Caregivers Association, the Canadian Mental Health Association, and the Canadian Public Health Association - aims to provide caregivers, the individuals they care for, as well as workers, a deeper understanding of their roles, responsibilities, and how to maintain their own wellbeing with practical components.

A brief overview of the project's three key components (Caregivers Guide, Resource Guide, Toolkit for Mobilization) will be provided, then one component, the "Toolkit for Mobilization" will be used to facilitate discussion concerning the application of the guide by drawing upon the experience and knowledge of attendees. The session will also be used to nurture collaborations, networking, and mobilization efforts by attendees to implement this resource in their own community, local public health unit, or agency.

Learning Objectives:

- Explore ways to support mental illness caregivers and those they care for in their daily work.
- Identify opportunities for partnerships in the public health sector to mobilize projects, increase capacity, and maximize resources.
- Assess key resources to help mental illness caregivers, those they care for, as well as their community as a whole. This will give way to ongoing learning and point-of-care coping tools for public health sector workers.
- Determine the resource available in their communities, local public health units and agencies.

Workshop Facilitators:

- Benjamin Leikin, Supervisor, Ottawa Public Health
- Paul McIntyre, President, Mental Illness Caregivers Association
- Julie Turcotte, Public Health Nurse, Ottawa Public Health



**OSGOODE
BALLROOM EAST**

**LOWER
CONCOURSE**

THE WEB RESOURCE RATING TOOL: LEARN TO IDENTIFY AND CREATE HIGH QUALITY ONLINE HEALTH INFORMATION USING MCMASTER OPTIMAL AGING PORTAL'S APPRAISAL TOOL

The Web Resource Rating (WRR) tool developed by the McMaster Optimal Aging Portal team provides a rigorous evaluation of citizen-friendly online health information. A recent evaluation of the WRR tool verified its high reliability and utility to health professionals who wish to independently appraise online health information (not limited to aging topics), including resources from their own organizations. Bring a laptop or device to participate in a live demonstration of the website features, practice web resource assessments with example scenarios, and use the tool to assess the quality of your favourite online information sources. Facilitators welcome and will encourage feedback about how the Portal and the web resource rating feature could best fit within your scope of practice.

Learning Objectives:

- Describe the health information accessible on the Portal and determine approaches to share this information with your patients or clients.
- Appraise resources from your own organizations and design new online resources using the WRR tool as a guide.
- Apply learnings when teaching staff, patients and clients how to critically appraise online health information.

Workshop Facilitators:

- Maureen Dobbins, Professor, School of Nursing, McMaster University & Scientific Director, National Collaborating Centre for Methods and Tools
- Susannah Watson, Research Coordinator, Health Evidence, McMaster University
- Emily Sully, Research Assistant, McMaster University



WELCOME REMARKS:

- Joel Kettner, President, Public Health Physicians of Canada
- Michael Moore, CEO, Public Health Association of Australia & President, World Federation of Public Health Associations

HARM REDUCTION, RISK PERCEPTION AND ALCOHOL

Harm reduction is a fundamental concept in public health that has become synonymous with illicit drug policy. It is a concept, however, that can be applied to a broad range of topics. Risk perception is inextricably linked with harm reduction and effective public health practices recognize and incorporate this link. Using alcohol consumption as one example, Dr. Taylor's presentation will explore harm reduction, the acceptance of risky behaviours and how each play a role in public health responses to numerous different issues.

Learning Objectives:

- Describe harm reduction in the context of public health in Canada.
- Discuss how risk perception influences a harm reduction approach.
- Examine the role of effective public health strategies to reduce the negative consequences of high risk behaviors.

Moderator:



Ardene Robinson Vollman
Chair, Canadian Public Health Association

Speaker:



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

8:00 - 9:00

RESIDENT AND NEW GRAD CAREER PANEL



PHPC Residents Council presents a careers in public health panel for residents and recent grads in Public Health and Preventive Medicine. Do you want to hear about job and career possibilities in public health? Do you want to hear about trends and future opportunities in careers in public health? This dynamic panel of public health physicians from across the spectrum of work settings and stages of career will engage attendees in a critical discussion on the future of careers for our profession.

9:00 - 15:30

CHOOSING WISELY IN PUBLIC HEALTH!

The Public Health Physicians of Canada has engaged with Choosing Wisely Canada to create evidence-informed recommendations for public health practice and to explore ways to integrate public health interests into the campaign.

[Choosing Wisely Canada](#) is a nation-wide campaign to help physicians and patients engage in conversations, and ultimately reduce, unnecessary and potentially harmful tests, treatments and interventions. This day will engage public health physicians in an impactful knowledge translation exercise that leads to better public health practice and better health for Canadians.

This session will review the scope and goals of Choosing Wisely Canada, explore potential recommendations and rationales and provide a forum for the recommendations to be debated and discussed.

This Group Learning Activity is intended for PHPM specialists and public health physicians.

Additional registration fee required (Resident - \$100; Physician - \$150)



8:30 - 16:30

CHARTING THE FUTURE OF DRUG POLICY IN CANADA WILLOW BALLROOM, MEZZANINE LEVEL

This is a critical time in Canada for the development of a new, comprehensive drug policy based in science, public health and human rights. The recently-elected federal government has stated its commitment to evidence-based policies and harm reduction services. It has also committed to legalizing and regulating cannabis and to reviewing criminal law policy more broadly. At the same time, overdose deaths are re-emerging as a public health crisis. Meanwhile unsafe drug injection, and inadequate scope and coverage of harm reduction services, continue to fuel the HIV and hepatitis C epidemics, and these disproportionately affect particular communities (e.g., Indigenous people, prisoners).

It is also an important moment in international drug policy. The United Nations General Assembly Special Session on Drugs (in April 2016), and its preparatory process, are intensifying the global debate about drug policy. There is a growing rhetorical consensus internationally supporting an evidence-informed, public health approach to drug policy and that it should conform with human rights, but the reality on the ground is very different – and tensions are increasingly apparent in the UN system, with a growing number of states defecting from, or at least questioning various aspects of, the predominant approach of drug prohibition.

Building on the first drug policy conference in June 2015, this day-long event will take place as a satellite session following Public Health 2016. This year's conference will provide participants the opportunity to discuss with policy-makers, regulators, researchers, advocates and community members how Canada can and should chart a new future for drug policy in Canada for cannabis and other drugs, hear about the changing global policy environment, and learn from experiences in other jurisdictions (e.g., Portugal's decriminalization of possession of all drugs, Colorado's approach to regulating cannabis).

Simultaneous English/French interpretation will be available for all participants for the full day.

This conference is being co-sponsored by the Canadian Drug Policy Coalition, the Canadian HIV/AIDS Legal Network, the Canadian Public Health Association, the International Centre for Science in Drug Policy, and other partners.

2016 HONORARY AWARDS PROGRAM



R.D. DEFRIES AWARDS & HONORARY LIFE MEMBERSHIP LYNN MCINTYRE

Lynn McIntyre MD, MHSc, FRCPC, FCAHS is an exceptional public health physician who has made outstanding contributions to the broad field of public health in Canada and internationally. For 30 years, Lynn brought and continues to bring a population health and health equity orientation to practice situations, policy issues, and research questions. As a hospital epidemiologist at the IWK Children's Hospital in Halifax, Lynn advocated for public health solutions: the hospital became smoke-free; the work of the mortality committee led to a helicopter transport system for the reduction of unnecessary perinatal deaths in the Maritimes; and provincial funding (a first in Canada) for Hib vaccine was secured. Lynn championed the determinants of health and influenced hundreds of health practitioners and students to consider issues of food insecurity, gender inequality and ethnicity. She has published widely in peer-reviewed journals and was recently inducted into the Canadian Academy of Health Sciences for her career achievements. A generous volunteer and active member of provincial and national public health associations, Lynn was a founding and executive member of Public Health Physicians of Canada and a member of the Medical Officer of Health competencies project. She provided outstanding guidance as President of the Public Health Association of Nova Scotia and as Board Member and Chair of CPHA. She substantially supported CPHA's objectives and under her strategic leadership, CPHA was revitalized and continues to be the independent voice for public health in Canada.



HONORARY LIFE MEMBERSHIP AWARD LYDIA DRASIC

Ms. Lydia Drasic retired from the position of Executive Director, British Columbia Centre for Disease Control (BCCDC) Operations and Chronic Disease Prevention, Provincial Health Services Authority in February 2016. Lydia's legacy is her achievements as a highly successful public health leader and practitioner in BC's public health system. She led the agenda for making health equity and healthy weights a priority among BC residents resulting in visible impacts including enhancing the public health system's capacity to address these priorities. She played a key role in broadening the mandate of the BCCDC from communicable disease control to include chronic disease prevention. Embracing the importance of evidence-based strategies to support the health promotion and upstream prevention programs, she was instrumental in a mission to establish a provincial public health observatory, which became a reality just before her retirement. Many of her professional contributions have far-reaching implications beyond the province. Lydia has been a very personable leader, dynamic role model, and source of guidance. She ensured diversity was maintained among public health teams at the program or organizational level. She always considered collaboration and partnerships as her "mantra" for the numerous successes she achieved over the course of her career.



RON DRAPER HEALTH PROMOTION AWARD GRAND CHIEF DOUG KELLY

Doug Kelly is a Stó:lō Grand Chief, visionary leader, and fierce advocate for First Nations children, families and communities. Doug draws on his ancestral teachings to forge new relationships with provincial and federal governments on behalf of First Nations. As Chair of the First Nations Health Council, Doug has spearheaded an unprecedented transformation of First Nations health in BC. His leadership brought together BC First Nations and provincial and federal government partners to sign the BC Tripartite Framework Agreement on First Nations Health Governance, which set the stage for creating a first-of-its-kind First Nations Health Authority (FNHA). Doug played an integral role in the completion of the historic transfer on October 1, 2013, that saw the FNHA assume responsibility of programs and services previously administered by Health Canada's First Nations and Inuit Health Branch. Doug led a consensus-building process that brought together 203 distinct and diverse First Nations communities from across the province to enable the highest level of consensus among First Nations leadership in BC toward a shared vision of a healthier future. This made-in-BC approach supports BC First Nations to work together to lead transformation of health care for First Nations, by First Nations. As Canadians embark on a journey of reconciliation, Doug's work has set BC ten years ahead of the rest of the country. He has blazed a trail into the future, showing Canada and the world what is possible when First Nations work in true partnership with provincial and federal partners.

2016 HONORARY AWARDS PROGRAM



R. STIRLING FERGUSON AWARD – IDAPT CENTRE FOR REHABILITATION RESEARCH, TORONTO REHABILITATION INSTITUTE

At Toronto Rehabilitation Institute (TRI), the iDAPT (Intelligent Design for Adaptation, Participation and Technology) Centre for Rehabilitation Research has state-of-the-art research facilities, distinguished scientists, scientific networking, and close collaboration with clinicians. TRI researchers have contributed essential, high-quality evidence that was and will continue to be crucial to improvement of built environment standards and codes over several decades and to safety and usability of our built environments even longer. Attention to standards and codes complements a focus on policy and translation of ideas to useful, marketable products so people can benefit as soon as possible. Their pioneering studies of handrail design in the early 1980s became the basis of US safety standards and building codes. Such work continues today with closer contact with model code and CSA standards development in Canada. TRI researchers use scientific rigour to build evidence in support of practical solutions to real problems; reducing injury, impacting change, and supporting the health and well-being of Canadians.



JOHN HASTINGS STUDENT AWARD

The Dr. John Hastings Student Award is renamed in honour and memory of Dr. John Hastings and his commitment to and belief in students as the future of public health in our country. This award is given at the time of CPHA's annual conference for the best-judged student poster presentation. The Award recipient will be named in advance of Plenary II on Tuesday, June 14 at 08:30 and presented with a prize of \$1,000.



National Collaborating Centres
for Public Health
Centres de collaboration nationale
en santé publique

NCCPH KNOWLEDGE TRANSLATION GRADUATE STUDENT AWARDS



Kristin Brown
*Doctoral student in the School
of Public Health and Health
Systems, University of Waterloo*



Elizabeth Cooper
*Doctoral student, Community
of Health Sciences,
Faculty of Health Sciences,
University of Manitoba*



Manpreet Saini
*Master's student in Population
Health, University of Guelph*

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10
YEARS

Relevant Research | Effective Education | Engaged Communities