

The Voice of Public Health

GROUNDED IN EVIDENCE, GUIDED BY EQUITY

2024 ANNUAL REPORT

www.cpha.ca

FRAMEWORK FOR A PUBLIC HEALTH APPROACH TO SUBSTANCE USE

In 2024, CPHA released a landmark policy framework to guide Canada's response to the use of psychoactive substances. From caffeine and nicotine to alcohol, cannabis, and opioids, these substances are deeply embedded in society—used for everything from social connection to spiritual ritual. Yet the harms associated with substance use are compounded not just by their effects, but also by the punitive policies and stigma that often surround them.



CPHA's Framework for a Public Health Approach to Substance Use, built around ten core principles, offers a comprehensive blueprint for how governments, health systems, and communities can reduce harms while upholding public health values. These principles emphasize health equity, the reduction of stigma, meaningful inclusion of people with lived and living experience, and the need to shift from criminal justice to healthbased responses. The framework encourages policymakers to consider the full spectrum of substance use—from beneficial and nonproblematic to harmful and disordered—when designing interventions.

The document also confronts the ways in which structural inequities and social determinants—

such as poverty, housing insecurity, and racism intersect with substance use, shaping who experiences harm and who receives support. It urges policymakers and practitioners to embed trauma-informed practices and culturally safe approaches throughout the continuum of care.

Importantly, the framework is not prescriptive; instead, it is adaptable to various substances, populations, and settings. Its purpose is to support the development of public health interventions that are flexible, context-sensitive, and rooted in the lived experiences of people who use substances. CPHA envisions this framework as a tool to move beyond outdated, punitive models toward a future in which health, dignity, and evidence guide all substance use policy and practice.



A Public Health Lens on Sex Work

In 2024, CPHA updated its longstanding position on sex work to reflect growing evidence about how legal frameworks and systemic marginalization drive health inequities for sex workers in Canada. Since CPHA first adopted a position on this issue in the early 1990s, evidence has continued to mount that criminalization exacerbates health risks and reinforces stigma.

Sex workers face significantly higher rates of unmet health needs, violence, mental health challenges, and barriers to healthcare access than the general population. Four main drivers of this inequity were identified: the criminalization of sex work under Canadian federal law, pervasive social stigma, intersecting forms of structural disadvantage (such as racism, poverty, and immigration status), and major research gaps in sex workers' lived realities.

<u>A Public Health Approach to Sex Work</u> outlines how these structural barriers translate into tangible harms, including reluctance to seek care, lack of provider training, and policing practices that put sex workers at risk. The Association calls for the repeal of the *Protection of Communities and Exploited Persons Act* (PCEPA) and the full decriminalization of sex work—not as an end point, but as a foundation for broader change.



To move forward, CPHA emphasizes the need for ongoing investment in research, culturally safe and trauma-informed services, and capacity-building for health and social service providers. Most importantly, sex workers must be centered in all aspects of decision-making that affect their health and well-being.

What's at stake in supporting sex workers' right to health

CPHA's director of policy penned an insightful opinion piece in <u>Policy Options</u> on the dangerous impact the *Protection of Communities and Exploited Persons Act* (PCEPA) has on the lives of sex workers and how police, health and social-service bodies can do more now for workers' minority rights. A <u>podcast</u> and <u>webinar</u> further explore the themes of CPHA's position statement, offering broader perspectives on how health, social service, and legal systems can better support the rights and well-being of sex workers.

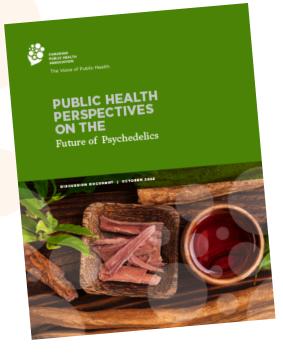
Public Health Perspectives on the Future of Psychedelics

With growing interest in psychedelics as tools for mental health and wellness, CPHA published a discussion paper to explore the implications of rapidly evolving policy, research, and commercial landscapes. While early evidence suggests that substances like psilocybin and MDMA may offer therapeutic benefits, particularly for those with treatment-resistant conditions, the discussion paper urges caution.

The discussion document, <u>Public Health</u> <u>Perspectives on the Future of Psychedelics</u>

highlights several emerging concerns. Commercial investment in psychedelics is expanding rapidly, sometimes outpacing both science and regulation. Illegal storefronts and online vendors are already operating in Canadian cities. At the same time, there is concern about the misappropriation of Indigenous knowledge and the lack of cultural safety in clinical and research settings.

CPHA's analysis acknowledges the potential benefits of psychedelics—especially for structurally disadvantaged groups disproportionately affected by mental illness—but insists that equity must guide their integration into public health practice. The paper calls attention to the risk of replicating existing disparities if access to psychedelic therapies is limited by cost, geographic availability, or cultural exclusion.



The Association also notes the urgent need for governance mechanisms that reflect the complexity of the field, including the coexistence of biomedical, spiritual, and Indigenous paradigms. While CPHA has not issued formal recommendations, the paper is an invitation to the public health community to begin shaping this landscape with curiosity, humility, and vigilance.



ADVANCING PUBLIC HEALTH THROUGH ADVOCACY

In 2024, the Canadian Public Health Association (CPHA) strengthened its position as a leading voice for evidence-informed, equity-driven public health policy in Canada. Through timely advocacy and principled public commentary, CPHA worked to influence decision-makers and shift narratives on a number of pressing health issues affecting communities across the country.

Confronting Ontario's Alcohol Policy Rollback



CPHA publicly <u>condemned the Ontario government's plan to dramatically expand alcohol</u> <u>availability</u> through sales in convenience stores, grocery chains, and big-box retailers. Drawing on decades of public health research, CPHA warned that increased accessibility would inevitably result in greater alcohol-related harms—from impaired driving to violence and chronic illness. The Association urged policymakers to reject deregulation efforts that prioritize industry interests over public safety and community well-being.

Defending the Health and Rights of Trans and Gender-diverse Youth



CPHA released a powerful <u>statement in support of transgender and gender-diverse</u> <u>youth</u>, amidst mounting political attacks on gender-affirming care and education. The Association reaffirmed that access to gender-affirming healthcare, inclusive sexual health education, and the right to self-identify are essential to both individual and public health. CPHA called on governments to uphold the principles of equity, social justice, and human rights.

Standing Up for Harm Reduction Services



In response to the Ontario government's announcement that it may close up to ten supervised consumption sites, CPHA issued a stark warning: "<u>Dead people don't need</u> <u>recovery beds.</u>" The Association stressed that supervised consumption services save lives and are a critical element of a comprehensive response to the toxic drug crisis. CPHA urged the government to reverse course and invest in evidence-based, lifesaving harm reduction strategies.

Tackling the Climate-Health Emergency

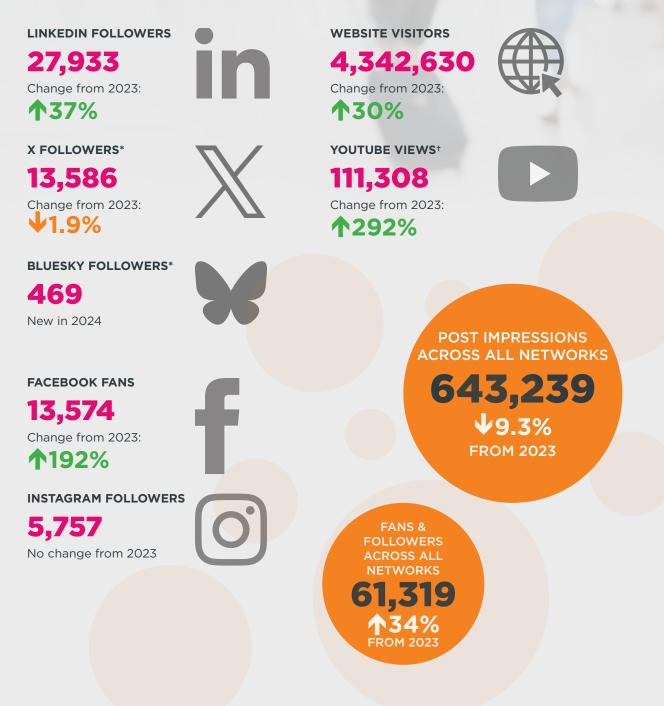


CPHA co-authored the <u>2024 Climate and Health Policy Priorities for Canada</u> alongside the Canadian Medical Association and Canadian Nurses Association. The report provided a roadmap for government action, urging bold investment in climate-resilient health systems, sustainable food policy, and empowered healthcare professionals as climate leaders. The call to action underscored climate change as the defining public health issue of our time.

Through these initiatives, CPHA reaffirmed its commitment to building a healthier, more just society by confronting inequities, challenging harmful policies, and advancing public health approaches rooted in evidence, compassion, and human rights.

AMPLIFYING THE VOICE OF PUBLIC HEALTH

As the independent national voice and trusted advocate for public health in Canada, CPHA continues to expand its reach, inform public dialogue, and engage a growing community across digital platforms. In 2024, we saw significant growth in key channels—including a 37% increase in LinkedIn followers and a 30% surge in website traffic—demonstrating that Canadians are turning to CPHA for credible, timely, and equity-focused public health information. From policy leaders to practitioners and concerned citizens, our digital community reflects the momentum behind a stronger, more connected public health movement.



- * CPHA stopped posting to X on 31 December 2024 and started posting on Bluesky on 18 November 2024.
- ⁺ One YouTube short video promoting the infectious fisease and climate change poster contest accounted for an additional 75,742 videos.

Outstanding contributions to Public Health in Canada

In 2024, the Canadian Public Health Association honoured these very deserving recipients for exceptional service to their community and profession.



Certificate of Merit Vera Etches, MD, CCFP, MHSc, FRCPC



Ron Draper Health Promotion Award Josephine B. Etowa , PhD, RN, RM, FWACN, FAAN, FCAN, FCAHS

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Financial results

For the fiscal year ending 31 December 2024. Audited financial statements are available at www.cpha.ca.

Statement of Financial Position			
CURRENT ASSETS	2024	2023	2022
Cash and cash equivalents	\$915,247	\$908,434	\$1,419,496
Accounts receivable	222,244	536,775	836,880
Inventory	19,391	24,400	28,447
Prepaid exp <mark>enses</mark>	146,683	46,692	48,057
	1,303,565	1,516,301	2,332,880
Long-term investments	-	—	_
	\$1,303,565	\$1,516,301	\$2,332,880
CURRENT LIABILITIES			
Accounts payable and accrued liabilities	\$205,337	\$230,155	\$548,772
Deferre <mark>d revenue</mark>	344,522	434,223	855,169
	549,859	664,378	1,403,941
NET ASSETS			
Internally restricted for contingencies and extraordinary services 250,000		425,000	425,000
Unrestricted	503,706	426,923	503,939
	753,706	851,923	928,939
	\$1,303,565	\$1,516,301	\$2,332,880
Statement of Operations			
REVENUE	2024	2023	2022
Projects and conferences	\$2,436,476	\$3,416,362	\$4,549,863

Excess (deficiency) of revenues over expenses	(\$98,217)	(\$77,016)	\$127,680
	\$3,413,423	\$4,204,146	\$5,095,023
Publication sales	19,750	21,251	30,452
Canadian Journal of Public Health	96,207	95,984	89,437
National Office	860,990	670,549	425,271
Projects and conferences	\$2,436,476	\$3,416,362	\$4,549,863
EXPENSES			
	\$3,315,206	\$4,127,130	\$5,222,703
Investment income	20,378	28,369	12,287
Publication sales	19,364	25,353	35,160
Canadian Journal of Public Health	95,324	94,779	116,828
National Office	743,664	562,267	508,565
Projects and conferences	\$2,436,476	\$3,416,362	\$4,549,863