PUBLIC HEALTH 2018
SANTÉ PUBLIQUE
MAY 28-31 MAI | MONTREAL
FAIRMONT THE QUEEN ELIZABETH

INTRODUCTORY PROGRAM
PROGRAMME D'INTRODUCTION
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CPHA is pleased to host Public Health 2018 through a unique and effective collaboration with:

L’ACSP a le plaisir d’organiser Santé publique 2018 par l’entremise d’une collaboration unique et efficace avec :

CONTRIBUTING PARTNERS | PARTENAIRE COLLABORATEURS

COLLABORATORS | COLLABORATEURS
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, grounding in a high-caliber scientific program.

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- Julie Stratton, CPHA Board of Directors
- Yan Kestens, Scientific Chair, Université de Montréal
- Lucie Granger, Association pour la santé publique du Québec
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- Marisa Creatore, Canadian Institutes of Health Research, Institute of Population and Public Health
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- Pemma Muzumdar, National Collaborating Centres for Public Health
- Malcolm Steinberg, Network of Schools and Programs of Population and Public Health
- Fran Scott, Network of Schools and Programs of Population and Public Health
- Dianne Patz, Pan American Health Organization, World Health Organization
- Danielle Halloran, Public Health Agency of Canada
- Kerry Robinson, Public Health Agency of Canada
- Odette Laplante, Public Health Physicians of Canada
- Ielaf Khalil, CPHA Student Representative

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- Jennifer Morgan, Canadian Institutes of Health Research, Institute of Population and Public Health
- Julie Stratton, Canadian Public Health Association
- Margaret Hayworth-Brockman, National Collaborating Centres for Public Health
- Malcolm Steinberg, Network of Schools and Programs of Population and Public Health
- Luis Gabriel Cuervo, Pan American Health Organization, World Health Organization
- Jasmine Pawa, Public Health Physicians of Canada
CONFERENCE OBJECTIVES
Public Health 2018 will provide:

• A dynamic setting to profile action-oriented best practices, successful strategies and new research from both domestic and global settings;
• An occasion to explore evidence-informed interventions focused on addressing key public health challenges;
• A forum that supports reflection and critical dialogue;
• A supportive environment for sharing innovative ideas and approaches to public health practice, policy and research that encourage further collaborations across and within sectors;
• A multisectoral knowledge exchange forum and networking opportunity that provides the opportunity to discuss current public health issues from across Canada and around the world;
• A venue for public health professionals at all stages of their careers to collaborate, innovate and help shape the health and well-being of Canadians.

OBJECTIFS DE LA CONFÉRENCE
Santé publique 2018 sera :

• un lieu dynamique où présenter des pratiques exemplaires orientées sur l’action, des stratégies fructueuses et de nouvelles études provenant de milieux canadiens et étrangers;
• l’occasion d’explorer des interventions éclairées par les données probantes qui cherchent à aborder les grands défis de la santé publique;
• une tribune de réflexion et de dialogue critique;
• un milieu favorable au partage d’idées et d’approches novatrices dans la pratique, les politiques et la recherche en santé publique pour favoriser d’autres collaborations inter- et intra-sectorielles;
• une tribune multisectorielle d’échange de connaissances et une occasion de réseauter et de discuter des questions de santé publique de l’heure au Canada et ailleurs dans le monde;
• un lieu où les professionnels de la santé publique à tous les stades de leurs carrières pourront collaborer, innover et contribuer à façonner la santé et le bien-être de la population canadienne.

LEARNING OBJECTIVES
Public Health 2018 will provide delegates the opportunity to:

• Articulate the current status of public health evidence, research, policy and practice;
• Identify public health challenges and related solutions, trends, emerging issues and gaps;
• Utilize effective evidence-based public health programs, practices, structures and systems; and
• Identify strategies for knowledge translation and exchange.

OBJECTIFS D’APPRENTISSAGE
Santé publique 2018 offrira aux délégués l’occasion :

• d’exposer clairement l’état actuel des preuves, de la recherche, des politiques et des pratiques en santé publique;
• de cerner les problèmes et leurs solutions, les tendances, les nouveaux enjeux et les lacunes à combler en santé publique;
• d’utiliser des programmes, des pratiques, des structures et des systèmes de santé publique efficaces fondés sur les données probantes;
• de définir des stratégies d’application et d’échange des connaissances.
### Program Schedule | Horaire de Programme

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<td>Networking Breaks</td>
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PHPC SESSIONS | SÉANCES MSPC

SUNDAY, MAY 27 | DIMANCHE 27 MAI

8:30 – 10:00  ANNUAL GENERAL MEETING

Join us at the AGM to hear highlights of what PHPC accomplished in the past year and help set the direction in the years moving forward.

10:30 – 16:30  CPD SYMPOSIUM DAY 1

PHPC invites public health and preventive medicine specialists and other physicians working in public health to come together for a series of discussions and training related to scientific independence and advocacy work. Sessions include:

- Navigating the politics of resource extraction, industrial or infrastructure projects while maintaining scientific independence as a public health physician
- Advocacy Skill Training (presented by CMA)
- PHPC’s Advocacy and Current Issues Committee Policy Forum

Additional registration fee required: $100

MONDAY, MAY 28 | LUNDI 28 MAI

8:00 – 9:00  PUBLIC HEALTH IN THE ERA OF TRUMP

Changes being made in the U.S. political arena have the potential to directly and indirectly impact public health practice in both the United States and Canada. This breakfast session will bring experts from both sides of the border to review the changes that have occurred thus far during U.S. President Donald Trump’s term, and provide critical analysis and insight into what the changes mean for public health practitioners and partners and how the changes might differentially impact Canadian and U.S. agencies

9:00 – 17:00  IS THE GRASS REALLY GREENER IN THE OTHER PUBLIC HEALTH JURISDICTION?

This session will engage public health and preventive medicine (PHPM) specialists and other physicians working in public health and provide a forum to discuss specific public health practice scenarios and cases related to the jurisdictional health system the presenter operates in. The structure, organization and enabling legislation of public health differs dramatically between (and within) jurisdictions in Canada. How does this impact public health outcomes? How does this impact your role and your work? How might things have been different in another jurisdiction? How can we learn from each other to advocate for a more optimal structure? Is this even possible? The M&M Rounds format will provide a forum for public health physicians and residents to explore challenging cases and the public health systems they arise in.

Additional registration fee required:

- Resident: $100
- Physician: $200

19:00 – 22:00  PHPC ANNUAL SOCIETY DINNER

Join the networking dinner for public health and preventive medicine specialists and other physicians working in public health.

Additional registration fee required:

- Resident: $85
- Physician: $100
### PROGRAM OVERVIEW | RÉSUMÉ DU PROGRAMME

#### SUNDAY 27 MAY | DIMANCHE 27 MAI

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<td>9:00 - 16:00</td>
<td>Public Health Physicians of Canada CPD Symposium Day 1</td>
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#### MONDAY 28 MAY | LUNDI 28 MAI

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<th>Time</th>
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<tr>
<td>9:00 - 12:00</td>
<td>Innovations in public health education: Arts and multi-media methods to support engaged learning</td>
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<tr>
<td>13:00 - 16:00</td>
<td>Canada’s lower-risk cannabis use guidelines: Supporting implementation after legislation</td>
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<tr>
<td>13:00 - 16:30</td>
<td>Long-term public health responses for internally displaced persons due to disasters in Canada</td>
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<tr>
<td>14:00 - 16:00</td>
<td>Restricting marketing of unhealthy foods to children</td>
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<td>14:00 - 17:00</td>
<td>Navigating academia: Developing a roadmap for students and early career professionals</td>
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<tr>
<td>9:00 - 16:00</td>
<td>Public Health Physicians of Canada CPD Symposium Day 2</td>
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<td>Beyond trauma-informed care: State-of-the-art innovation in public health practice</td>
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<td>Engaging youth with lived experience in public health policy, programs and knowledge translation</td>
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<td>Filling information gaps with environmental and occupational health surveillance</td>
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<td>Testing innovation: Addressing gaps and inspiring innovation in STBBI testing in Canada</td>
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MONDAY, MAY 28 | LUNDI 28 MAI

MORNING PRE-CONFERENCE SESSION | SÉANCE PRÉPARATOIRE DU MATIN

INNOVATIONS IN PUBLIC HEALTH EDUCATION: ARTS AND MULTI-MEDIA METHODS TO SUPPORT ENGAGED LEARNING

Presented by: Lloy Wylie, Western University

9:00 – 12:00

Through an interactive session, this workshop will explore experiential learning pedagogy and its application to building competencies in public health. The session will demonstrate some of these educational innovations, involving gamification, role play, interactive online instruments, scenario challenges, and real-time problem solving. Using examples from public health curricula, the session will involve participants in experiential learning exercises, using case scenarios, interactive challenges, and exploration of hot topics in public health.

This workshop will demonstrate ways to use innovative arts-based and multi-media teaching tools for public health education, by involving participants as learners in specific teaching exercises. The workshop will provide participants with tools that are adaptable for teaching in various disciplines, interprofessional education, or workplace training.

AFTERNOON PRE-CONFERENCE SESSIONS | SÉANCES PRÉPARATOIRES DE L’APRÈS-MIDI

CANADA’S LOWER-RISK CANNABIS USE GUIDELINES: SUPPORTING IMPLEMENTATION AFTER LEGISLATION

Presented by: Centre for Addiction and Mental Health and the Canadian Public Health Association

13:00 – 16:00

As Canada moves toward legalizing and regulating cannabis, credible and evidence-based information will be critical for public health professionals to effectively prevent and reduce cannabis-related risks and harms.

This workshop will support public health professionals to be ready for legalization of cannabis for non-medical purposes with an understanding of the best available evidence on the public health risks and potential harms. Participants will have the opportunity to shape the knowledge products they require to implement the recommendations across Canada, learn more about the risks and harms of cannabis and inform the future development of additional information products required for different community settings and priority populations.

LONG-TERM PUBLIC HEALTH RESPONSES FOR INTERNALLY DISPLACED PERSONS DUE TO DISASTERS IN CANADA

Presented by: The National Collaborating Centre for Infectious Diseases

13:00 – 16:30

Very little is known in Canada about long-term public health responses to natural and man-made disasters and the needs of internally displaced persons (IDPs) following immediate emergency responses. Furthermore, there are significant knowledge gaps regarding the systemic and structural inequities that put First Nations, Métis, Inuit, rural and remote individuals and communities at particular risk, as well as community-specific public health needs after disasters. The National Collaborating Centres for Public Health (NCCs) are initiating a two-year project to understand the information needs of public health practitioners for appropriate long-term planning and responses for IDPs, and to help meet those knowledge needs with timely and relevant tools and resources.

This session will bring together public health personnel, including emergency preparedness planners at all levels, medical officers of health, national Indigenous organizations, researchers, epidemiologists, and students to explore public health roles to support IDPs in Canada after typical emergency response interventions conclude.

Additional registration fee required: $20
RESTRICTING MARKETING OF UNHEALTHY FOODS TO CHILDREN

Presented by: Health Canada

14:00 – 16:00

This session will provide an update on Health Canada’s approach to restricting marketing of unhealthy foods to children, one of the initiatives under Health Canada’s Healthy Eating Strategy. The first part of the session will include a Health Canada status update, including a presentation of results from the 2017 public consultation, current policy thinking and next steps in the process. The second part will include a presentation of the proposed monitoring framework and research agenda developed in partnership with the Stop Marketing to Kids Coalition. The third part will provide participants with an opportunity to give input on the monitoring framework and research agenda, and discuss potential collaborations to enhance these efforts.

NAVIGATING ACADEMIA: DEVELOPING A ROADMAP FOR STUDENTS AND EARLY CAREER PROFESSIONALS

Presented by: Canadian Public Health Association

14:00 – 17:00

This skills-building session aims to provide students and early career professionals with knowledge and skills to successfully manoeuvre through a variety of academic paths. This highly interactive and participatory session will provide attendees with a welcome to CPHA and Public Health 2018, and the opportunity to learn about academic career options, the funding system and grant writing, manuscript preparation and developing an academic CV. Participants will leave this session with practical knowledge to get their academic career started.

BEYOND TRAUMA-INFORMED CARE: STATE-OF-THE-ART INNOVATION IN PUBLIC HEALTH PRACTICE

Presented by: Caroline C. Piotrowski PhD MPH

9:00 – 16:00

Additional registration fee required (lunch is not provided):
• Participant: $75
• Student: $50

Trauma-informed care (TIC) was originally conceptualized approximately 40 years ago with the goal of reducing the likelihood of further traumatization or re-traumatization of clients. More recently, trauma- and violence-informed care (TVIC) has taken this approach a step further by recognizing the interaction of trauma with violence. This perspective not only includes interpersonal violence, but also incorporates an intersectoral perspective informed by social categories, structures and conditions that impact health and well-being. An overview of the basic tenets of TIC will be provided, followed by a review of recent developments in TVIC that acknowledge health inequities in both past and present institutional policies and practices. Special attention will be paid to the legacy of the residential school system. Attendees will engage with interactive hands-on case studies concerning the implementation and evaluation of TVIC in public health practice.
ENGAGING YOUTH WITH LIVED EXPERIENCE IN PUBLIC HEALTH POLICY, PROGRAMS AND KNOWLEDGE TRANSLATION

Presented by: Wisdom2Action

9:00 – 16:00

Additional registration fee required and lunch will be provided:

- Participant: $60
- Student, youth or community service provider: $20

Wisdom2Action is committed to ensuring registration cost is not a barrier to participation. A limited number of subsidized spots are available. Please contact info@wisdom2action.org for more information.

Though national and international bodies articulate the need for the engagement of persons with lived experience of illness into the design of their own care, we do not yet know enough about how to do this. At the population level, young people have traditionally been excluded from shaping public health policy and/or programs in a significant way. Yet youth engagement is recognized in various disciplinary areas as an effective strategy for individual and community development and improved health outcomes.

This session will demonstrate the why and how of youth engagement in a way that is adaptable to diverse organizations or projects. We will draw upon lessons learned from different examples, including Wisdom2Action’s Youth Advisory Committee. Participants will hear about this essential topic directly from youth and from professionals with in-depth youth engagement experience.

L’ENGAGEMENT DE JEUNES AVEC EXPÉRIENCE VÉCUE DANS LA PLANIFICATION DE POLITIQUES ET PROGRAMMES DE SANTÉ PUBLIQUE ET LE TRANSFERT DES CONNAISSANCES

Une présentation de : La jeunesse au cœur de l’action

9 h – 16 h

Des frais d’inscription additionnels sont exigés et un lunch sera fourni :

- participants : 60 $
- étudiants, jeunes et fournisseurs de service communautaire : 20 $

La jeunesse au cœur de l’action veut s’assurer que les frais d’inscription ne soient pas un obstacle à la participation. Des places subventionnées sont offertes en nombre limité. Veuillez contacter info@wisdom2action.org pour en savoir plus.

Bien que les instances nationales et internationales soulignent la nécessité d’impliquer les personnes aux prises avec la maladie dans la planification de leurs soins, nous ne savons pas suffisamment comment nous y prendre. Dans la population en général, les jeunes sont habituellement tenus à l’écart de la planification des politiques et des programmes de santé publique. Pourtant, l’engagement des jeunes est reconnu dans divers champs disciplinaires comme stratégie efficace pour le développement individuel et collectif et l’amélioration de la santé.

Cette séance abordera les raisons et les manières de favoriser l’engagement des jeunes sous une forme adaptable à divers organismes et projets. Nous nous appuierons sur des enseignements tirés de différents exemples, notamment celui du comité consultatif des jeunes de La jeunesse au cœur de l’action. Les participants auront la chance d’entendre le point de vue de jeunes et de professionnels ayant une longue expérience en matière d’engagement des jeunes.
FILLING INFORMATION GAPS WITH ENVIRONMENTAL AND OCCUPATIONAL HEALTH SURVEILLANCE

Presented by: CARRFS (Canadian Alliance for Regional Risk Factor Surveillance)

9:00 – 16:00

Additional registration fee required and lunch will be provided:

- Participant: $60
- Student: $40
- Webcast: free of charge

The CARRFS Symposium is a venue to learn and to share current news, practices and trends in public health surveillance. You will meet CARRFS members, public health professionals and academics from across Canada and exchange news and views on emerging challenges and solutions in public health surveillance. This year’s theme is Filling information gaps with environmental and occupational health surveillance.

TESTING INNOVATION: ADDRESSING GAPS AND INSPIRING INNOVATION IN STBBI TESTING IN CANADA

Presented by: IUSTI Canada, NCCID, CATIE, PHAC, CPHA, INSPQ, and Faculty of Health, Dalhousie University

9:00 – 16:00

Additional registration fee required (lunch is not provided): $25

In Canada and worldwide, sexually transmitted and blood-borne infections (STBBIs) continue to be a significant individual health issue and public health burden. Despite the fact that STBBIs can largely be prevented, and in some cases cured, the burden of STBBIs remains a significant public health concern. Globally, the push to eliminate HIV, hepatitis C and other STIs as a public health threat by 2030 is an elusive goal. In Canada, in order to meet the commitment made to Canadians, there is an urgent need to reach the right people, at the right time, at the right place, with the most effective STBBI programs which include testing as a central component. Robust testing and linkages to services are gateways to prevention, treatment and care, and part of an effective, comprehensive strategy to address STBBIs in Canada.

This session will bring together a variety of STBBI stakeholders, including health researchers, health policy decision-makers, industry partners, public health officials, and community-based service providers. Building on a pre-conference session hosted at Public Health 2017, this session will provide an overview of the burden of STBBIs in Canada with an emphasis on identifying and addressing gaps in testing. During this CME accredited interactive workshop, participants will be engaged to inspire innovative responses and identify effective mechanisms to address STBBI testing gaps through a variety of approaches, including presentations, small group discussions and case study examples.

Learning Objectives:

- Identify gaps in our collective efforts to reach people living with STBBIs
- Apply implementation science to innovative programming approaches to STBBI testing
- Describe patient-centered access to STBBI testing services
- Assess national and provincial policy and programming gaps
### PROGRAM OVERVIEW | RÉSUMÉ DU PROGRAMME

#### 8:30 - 10:00  
**PLENARY I: LIVING WELL WITHIN LIMITS**  
PLÉNIÈRE I : BIEN VIVRE DANS DES LIMITES RAISONNABLES  
Daniel O’Neill

#### 10:00 - 10:45  
**REFRESHMENT BREAK WITH EXHIBITORS**  
PAUSE-RAFRAÎCHISSEMENTS AVEC LES EXPOSANTS

#### CONCURRENT SESSIONS  
**PLENARY II: CONCURRENT SESSIONS**  
**SEANCES SIMULTANEES**

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<td>10:45 - 12:15</td>
<td>Addressing the ecological determinants of health in contemporary public health training and practice: Principles, methods, resources</td>
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<td>CIHR presents: Exploring the ethics of AI approaches in public health</td>
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<td>AFN presents: Our stories: Our health</td>
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| 12:15 - 14:00| **NETWORKING LUNCH | DÉJEUNER CONTACTS**  
CPHA ANNUAL GENERAL MEETING | ASSEMBLÉE GÉNÉRALE ANNUELLE DE L’ASCP |

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<td>14:00 - 15:30</td>
<td>Fostering public health ethics: Assessing needs and informing solutions that support today’s and tomorrow’s public health professionals</td>
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<td>Health professionals: On the front lines of action for a healthy climate</td>
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| 15:30 - 16:00| **REFRESHMENT BREAK | PAUSE-RAFRAÎCHISSEMENTS**  
CPHA ANNUAL GENERAL MEETING | ASSEMBLÉE GÉNÉRALE ANNUELLE DE L’ASCP |

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<td>Conversations save lives: British Columbia First Nations in the opioid overdose emergency and a system-wide framework for action</td>
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<td>Engaging youth with lived experience in public health policy, programs and knowledge translation</td>
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<td>NSPPPH presents: How do we assess learning in public health education: Mapping learning objectives to assessments of learning</td>
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<td>Rapid reviews 101</td>
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<td>Sugary drink levies: Do they have a place in healthy eating strategies in Canada?</td>
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<td>Supporting Canadian urban transformations and building healthier cities: Introducing the MUSE team and program of research and knowledge translation strategy</td>
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<td>Tackling alcohol-related harm by implementing effective policies</td>
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<td>ASPQ presents: Towards an economy of prevention for sustainable health</td>
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<td>CARRFS presents: What’s next? All you need to know about the future of public health surveillance</td>
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| 17:40 - 19:30| "Making Connections: National Collaborating Centres for Public Health "5 à 7"  
Créer des liens: le 5 à 7 des Centres de collaboration nationale en santé publique"  
CPHA ANNUAL GENERAL MEETING | ASSEMBLÉE GÉNÉRALE ANNUELLE DE L’ASCP |
LIVING WELL WITHIN LIMITS

There are very large health costs to our current way of life, and thus very large potential health benefits from a shift to a more sustainable society. What changes would be needed to achieve a sustainable economy within planetary boundaries in recognition of the relationships between resource use and human well-being? What role can public health play in achieving a steady-state economy where resource use and waste emissions are stabilized and kept within ecological limits? While economic growth is the dominant mantra in wealthy nations, there are a number of good reasons to question this perspective.

Environmentally, we are already exceeding four of nine ‘planetary boundaries’ related to key ecosystem processes (climate change, biodiversity loss, land-use change, and the nitrogen/phosphorus cycle). Socially, while per capita gross domestic product (GDP) has more than tripled in wealthy countries since 1950, people have not become any happier. Practically, economic growth is the exception in world history, not the norm. Dr. O’Neill will explore ways in which we can achieve a high quality of life for all people without economic growth.

Speaker | Orateur

• Daniel O’Neill, Lecturer in Ecological Economics, School of Earth and Environment, University of Leeds

BIEN VIVRE DANS DES LIMITES RAISONNABLES

Comme notre mode de vie actuel comporte des coûts très élevés, le passage à une société plus durable pourrait engendrer de très grands bienfaits pour la santé. Quels seraient les changements nécessaires pour atteindre la durabilité économique sur la planète, sachant que l’utilisation des ressources et le bien-être humain sont liés? Quel pourrait être le rôle de la santé publique pour parvenir à une « économie stable », où l’utilisation des ressources et les émissions de déchets seraient stabilisées et resteraient à l’intérieur de limites écologiques? Bien que la croissance économique soit toujours le mot d’ordre dans les pays riches, il existe de bonnes raisons de remettre cette perspective en question.

ADDRESSING THE ECOLOGICAL DETERMINANTS OF HEALTH IN CONTEMPORARY PUBLIC HEALTH TRAINING AND PRACTICE: PRINCIPLES, METHODS, RESOURCES

Growing recognition of the imperative of the ecological determinants of health (EDoH) has not been matched by commensurate changes in public health training, education and professional development. Building public health workforce that can engage with both ecological and social determinants of health requires targeted education and training efforts focused on public health implications and effective responses, strengthening capacity for intersectoral collaboration, and working with unusual allies. In particular, public health is challenged with how to foster new ways of seeing, relating and doing that recognize living systems as foundational to human health.

This interactive workshop, co-led by members of the pan-Canadian group, EDGE (Ecological Determinants Group on Education), will share insights from an analysis of challenges and opportunities for educational reform posed by the EDoH, and will profile and discuss a range of resource materials, relevant publications, competency considerations and sample course outlines that are relevant to addressing EDoH as an integral part of public health training and practice. Intended for teachers, students, and practitioners, the workshop will focus on what needs to be put in place to equip public health practitioners to respond to emerging challenges, as well as work that is already underway to address this.

EXPLORING THE ETHICS OF AI APPROACHES IN PUBLIC HEALTH

Presented by: Canadian Institutes of Health Research

With the explosion of ‘big data’, and the use of social media, ‘smart’ phones, wearable technologies and other innovations, there is an increasing interest in exploring how Artificial Intelligence approaches such as machine learning and natural language processing can be used to address public health challenges. Advances in technology are providing researchers with unprecedented access to massive amounts of data from diverse sources, along with computational and analytic capabilities that were previously unavailable. However, despite the exciting opportunities that new technologies and data present, we face a new set of challenges and the potential for unintended consequences. Public health faces the same broad challenges faced by other sectors; however, an issue that may be particularly relevant for public health is the question of how these approaches and technologies will impact health equity.

Join CIHR’s Institute of Population and Public Health in a discussion of the ethical challenges of incorporating AI into public health research and practice. Examining issues including access, bias, and representation, participants can expect to increase their understanding of the impact that AI and ‘big data’ may have on equity, and the role that stakeholders across various sectors should have promoting health equity in the age of AI.

OUR STORIES: OUR HEALTH

Presented by: Assembly of First Nations

Advancing the health and wellness of First Nations in Canada is a shared commitment among communities, partners in the jurisdictional continuum and politically mandated organizations. This session aims to demonstrate how policies and programs generated with First Nations’ meaningful participation can shape culturally responsive and competent public health systems that uphold the wholistic health needs of First Nations.

Public health surveillance and measures estimate that First Nations experience high rates in many disease profiles (diabetes, sexually transmitted infections, mental wellness and infectious diseases). Indigenous world views, practices and ways of knowing can counter health inequities through diverse strategies that encourage strengths based approaches to improve First Nations well-being.

ORAL ABSTRACT SESSIONS

PRÉSENTATIONS DE RÉSUMÉS ORAUX
TUESDAY, MAY 29 | MARDI 29 MAI

12:15 – 14:00  NETWORKING LUNCH  
12 h 15 à 14 h  DÉJEUNER CONTACTS

12:15 – 14:00  CPHA ANNUAL GENERAL MEETING  
12 h 15 à 14 h  ASSEMBLÉE GÉNÉRALE ANNUELLE DE L’ACSP

CPHA’s Annual General Meeting (AGM) is open to all delegates at the conference; however only CPHA members may vote. Prior to the start of the session, members are asked to check in at the AGM desk to obtain their voting cards. CPHA members whose membership has lapsed but who wish to attend the AGM and be eligible to vote may renew their membership just before the AGM. Anyone wishing to take out a new CPHA membership can do so by May 28, 2018 at the registration desk. Lunch will be provided.

L’assemblée générale annuelle (AGA) de l’ACSP est ouverte à tous les délégués de la conférence, mais seuls les membres de l’ACSP peuvent y voter. Avant le début de la séance, les membres sont priés de se présenter au bureau de l’AGA pour obtenir leur carte de vote. Les membres dont l’adhésion est caduque, mais qui souhaitent assister à l’AGA et pouvoir y voter peuvent renouveler leur adhésion juste avant l’AGA. Toute personne qui n’a jamais été membre de l’ACSP peut le devenir avant le 28 mai 2018 en se présentant au kiosque des inscriptions. Le déjeuner sera servi.

14:00 – 15:30  CONCURRENT SESSIONS  
14 h à 15 h 30  SÉANCES SIMULTANÉES

FOSTERING PUBLIC HEALTH ETHICS: ASSESSING NEEDS AND INFORMING SOLUTIONS THAT SUPPORT TODAY’S AND TOMORROW’S PUBLIC HEALTH PROFESSIONALS

This symposium will explore the current state of public health ethics education in Canadian institutions and abroad. Participants will be engaged to discuss the impact of ethical decision-making, promising strategies to enhance capacity development and recommend ways to integrate public health ethics into practice. Panelists will discuss empirical results from two 2017 pan-Canadian surveys and present promising solutions to support ethical decision-making in public health. This session will identify resources that are successfully utilized by today’s practitioners and evaluate what resources or training is needed to support the next generation of professions.

HEALTH PROFESSIONALS: ON THE FRONT LINES OF ACTION FOR A HEALTHY CLIMATE

In late 2017, the Canadian Public Health Association partnered with the Lancet Countdown on Health and Climate Change (which is publishing yearly international data-driven reports between now and 2030 on a range of climate-health indicators) to produce the Lancet Countdown Policy Brief: Canada in 2017, which outlines 7 clear recommendations for action for a healthy climate in the Canadian context. Action led by health professionals is underway to see these recommendations realized.

This workshop will go over the report’s recommendations, then outline successful initiatives by health professionals around coal phase-out, the expansion of Montreal’s cycling network, and work to study and minimize the health impacts of hydraulic fracturing in British Columbia. Key evidence, strategies, and partnerships in these efforts will be described. Participants will then have the opportunity to choose two of the four topic areas to discuss in small groups and consider how to apply lessons learned in their home contexts.

ORAL ABSTRACT SESSIONS  
PRÉSENTATIONS DE RÉSUMÉS ORAUX

15:30 – 16:00  REFRESHMENT BREAK WITH EXHIBITORS  
15 h 30 à 16 h  PAUSE-RAFRAÎCHISSEMENTS AVEC LES EXPOSANTS
CONVERSATIONS SAVE LIVES: BRITISH COLUMBIA FIRST NATIONS IN THE OPIOID OVERDOSE EMERGENCY AND A SYSTEM-WIDE FRAMEWORK FOR ACTION

In April 2016, the opioid emergency was declared a public health emergency by the British Columbia (BC) Provincial Health Officer under the Public Health Act due to the unprecedented increase in overdoses and deaths in the province. Since then, organizations across the province have been working toward providing emergency response and improved services to prevent overdose and death due to opioid use. This symposium will focus on the impact the opioid crisis has had on First Nations in BC and provide an overview of a partnered system-wide response to address it.

This session will share how First Nations health organizations are exercising self-determination and responding with community-driven, nation-based programming that speaks to their unique community needs and is reflective of their own culturally relevant tools. Participants can expect to learn about the First Nations Health Authority’s system-wide framework for action, which includes 4 key action areas: 1) Prevent people who overdose from dying; 2) Keep people safe when using substances; 3) Create an accessible range of treatment options; and 4) Support people on their healing journey.

ENGAGING YOUTH WITH LIVED EXPERIENCE IN PUBLIC HEALTH POLICY, PROGRAMS AND KNOWLEDGE TRANSLATION

Though national and international bodies articulate the need for the engagement of persons with lived experience of illness into the design of their own care, young people have traditionally been excluded from shaping public health policy and/or programs in a significant way. Yet youth engagement is recognized in various disciplinary areas as an effective strategy for individual and community development and improved health outcomes.

This session will demonstrate the why and how of youth engagement in a way that is adaptable to diverse organizations or projects. We will draw upon lessons learned from different examples, including the Wisdom2Action’s Youth Advisory Committee. Participants will hear about this essential topic directly from youth and from professionals with in-depth youth engagement experience.

HOW DO WE ASSESS LEARNING IN PUBLIC HEALTH EDUCATION: MAPPING LEARNING OBJECTIVES TO ASSESSMENTS OF LEARNING

Presented by: Network of Schools and Programs of Population and Public Health

Curriculum mapping demonstrates links between different parts of the curriculum, including learning outcomes and/or objectives, opportunities for learning, curriculum content, and the assessment of learning. Public health education attempts to support learners attaining public health competencies. Learning objectives usually map out for learners how this will be achieved in relation to one or more competencies. Less frequently are learners able to identify how this learning is mapped onto assessments of learning.

During this workshop, participants will be exposed to curriculum mapping frameworks and approaches with the opportunity to apply them to selected areas of public health education. This workshop will be of interest to public health educators and public health learners seeking to appreciate the coherence of a learning opportunity, including enhancing assessment options to support self-directed learning.
RAPID REVIEWS 101

As public health organizations across Canada adopt and implement evidence-informed approaches to public health decision-making, there is a need for up-to-date evidence that can be applied to local contexts. While the most rigorous approach is to find or do a systematic review, timelines and resources often dictate a rapid review of the literature. Rapid reviews are tailored for a shorter timeline, but still use rigorous and transparent methodology to ensure that the best available research evidence is used in decision making. Join us for an overview and hands-on practice of the rapid review process.

Participants will learn about and practice several steps of a rapid review. Resources required to support the rapid review process will be outlined so that participants can apply new knowledge and skills in their work settings.

SUGARY DRINK LEVIES: DO THEY HAVE A PLACE IN HEALTHY EATING STRATEGIES IN CANADA?

As Canada and provinces/territories designs new healthy eating strategies, questions have been raised around the role of a sugary drink levy. This interactive session will explore the value, challenges, support and opposition to a sugary drink levy in Canada. A brief overview of the current context of sugary drink taxes will be followed by assessment of consumption trends, the evidence base, discussion of implications, feasibility of taxation, and benefits – and challenges – to nutrition, health systems sustainability, health equity and food security.

This session will allow participants to gain a better understanding of the issues around a sugary drink levy, to assess the merits and drawbacks of this measure from different viewpoints, and to consider what gaps in knowledge need to be closed in order to enable a better understanding of the issue. Participants will debate what lessons can be applied from other public health issues. The session can support researchers, policy makers, practitioners and advocates as they consider how to adopt, implement and support strategies, programs and policies to improve public health nutrition among Canadians.

SUPPORTING CANADIAN URBAN TRANSFORMATIONS AND BUILDING HEALTHIER CITIES: INTRODUCING THE MUSE TEAM AND PROGRAM OF RESEARCH AND KNOWLEDGE TRANSLATION STRATEGY

Cities today are key engines of economic activity, action towards environmental sustainability, cultural revival and vitality, and indeed human progress itself. Their centrality in Canadian life combined with accelerated change has led to a renewed interest in making cities healthier by recommitting to building physical and human infrastructure that promotes health in a way that is equitable and sustainable for future generations.

Partnering with Chief Medical Health Officers in four Canadian cities (Montreal, Toronto, Saskatoon, and Vancouver), this symposium will introduce a program of research and knowledge translation strategy that is premised on building healthier cities through knowledge developed by understanding intersectoral partnerships aimed at transforming built environments and, in turn, comprehending citizens’ responses to built environment changes. Multisectoral Urban Systems for Health and Equity in Canadian Cities/Multisectorielles et urbaines : approches pour la santé et l’équité dans les villes canadiennes (or MUSE) aims to understand how urban built environment interventions are developed and implemented, and how they are received by citizens in Canadian cities.
TACKLING ALCOHOL-RELATED HARM BY IMPLEMENTING EFFECTIVE POLICIES

Alcohol is a leading cause of disease, trauma and social problems, involving harm to the drinker and others. However, effective controls are being eroded. The public is not aware of the range of harms. Resources for effective action are often limited. This symposium involves presentations and time for discussion: emerging Canadian data on alcohol-related harm, international evidence on alcohol policies, association between marketing and youth drinking, and a framework for assessing the provinces with regard to effective responses. A CIHI-based presentation will provide new data on alcohol issues with provincial/territorial analysis. International evidence on alcohol pricing, physical availability, control system, marketing controls and impaired driving laws will be highlighted. Results will be presented on the influence of alcohol marketing on subsequent drinking behaviours among youth. An assessment of the 10 provinces on 10 alcohol policy dimensions will be summarized, and a second phase outlined with broader foci and updated dimensions.

TOWARDS AN ECONOMY OF PREVENTION FOR SUSTAINABLE HEALTH

Presented by: Association pour la santé publique du Québec

ASPQ invites you to a session regarding the benefits linked to an economy in prevention of sustainable health for all. Sustainable health is a collective right, a social and economic asset. Like prevention, it implies responsibilities both individual ones and collective ones. As a result, it is the engagement of governments, businesses, communities and citizens to jointly and unitedly take responsibility in order to maintain and improve health for all, especially those of future generations, throughout the entire life cycle. Building sustainable health is the result of teamwork which requires the mobilization of society as a whole around key issues such as: environmental, political, social, economic and cultural.

WHAT’S NEXT? ALL YOU NEED TO KNOW ABOUT THE FUTURE OF PUBLIC HEALTH SURVEILLANCE

Presented by: Canadian Alliance for Regional Risk Factor Surveillance

This session will present a story about the past and present practice in public health surveillance, and will engage participants to join in the discussion about its future. In small groups, participants will explore topics of broad and current interest led by experts in the CARRFS network, such as the challenges in conducting surveillance in Quebec and in French-speaking populations across Canada; new and innovative data sources; emerging issues in surveillance; environmental health; multiple source data linkage; future data analysis methods; and knowledge translation.
**WEDNESDAY, MAY 30 | MERCREDI 30 MAI**

Sessions will be presented in the language as indicated by their respective titles.
Les séances seront présentées dans la langue de leur titre.

### PROGRAM OVERVIEW | RÉSUMÉ DU PROGRAMME

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<th>Time</th>
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<td>PAHO presents: Achieving equity beyond rhetoric: Leaving no one behind in the region of the Americas</td>
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<td>Building on best practices: Education for frontline workers in the overdose emergency</td>
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<td>The Canadian Urban Environmental Health Research Consortium – Setting the stage for a new era of environmental health research</td>
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<td>Conducting quality peer reviews of quantitative manuscripts</td>
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<td>CPHA presents: Disruptive technologies and public health – What’s the problem?</td>
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<td>Epidemiology and Indigenous health: What’s measured matters</td>
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<td>Training the next generation of public health professionals: The role of law in public health pedagogy</td>
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<td>Understanding and interpreting indicators for chronic diseases</td>
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<td>NCCPH presents: Working together on a shared agenda: The NCCs and their partners discuss the roles of public health in population mental health promotion</td>
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<td>10:30 - 11:15</td>
<td>REFRESHMENT BREAK</td>
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<td>11:15 - 12:30</td>
<td>PLENARY II: MÉTIS NATION APPROACHES TO ADDRESSING HEALTH AND WELLNESS</td>
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<td>Clément Chartier &amp; Clara Morin Dal Col</td>
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<td>12:30 - 13:30</td>
<td>NETWORKING LUNCH</td>
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<td>Les avancées de la santé publique sur les jeux de hasard et d’argent : Nommer les préjudices, mesurer les impacts, prévenir et agir sur les environnements</td>
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<td>CIHI presents: In pursuit of health equity: Measurement as a tool to drive improvements in population health</td>
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<td>CPHA Policy forum</td>
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<td>13:30 - 15:15</td>
<td>Oral Presentations</td>
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<td>15:30 - 17:00</td>
<td>MNC presents: Aphitaw miyo machihon in British Columbia (Métis Health in BC)</td>
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<td>Can bigger and better data make healthier cities?</td>
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<td>A critical discussion of the future of health promotion in Canada</td>
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<td>Education for reconciliation: An experiential learning exercise and transforming empathy to social action</td>
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<td>The International Food Policy Study: Evidence on population-level food behaviours to evaluate policy in Canada, USA, UK, Mexico and Australia</td>
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<td>Legalized cannabis: Challenges and opportunities for environmental health</td>
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<td>Learning that sticks: Team simulation training for public health professionals</td>
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<td>Reducing stigma through trauma- and violence-informed care: Practical applications in family violence, sexual health and harm reduction</td>
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<td>The value of collaboration: Development of a heat warning information system for Ontario</td>
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<td>17:15 - 19:30</td>
<td>DR. JOHN HASTINGS STUDENT AWARDS SESSION</td>
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<td>SÉANCE DE REMISE DU PRIX DES ÉTUDIANTS JOHN-HASTINGS</td>
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<td>17:30 - 20:30</td>
<td>RURAL, REMOTE AND NORTHERN PUBLIC HEALTH NETWORKING RECEPTION</td>
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ACHIEVING EQUITY BEYOND RHETORIC: LEAVING NO ONE BEHIND IN THE REGION OF THE AMERICAS

Presented by: Pan American Health Organization

In this session, the Pan American Health Organization will discuss approaches to reduce inequalities to improve the health and wellbeing of the people in Latin America and the Caribbean. The 2030 Sustainable Development Agenda of Leaving no One Behind and the centrality of equity and health inequality monitoring capacity at country and sub-country levels to ensure accountability to this commitment will be examined.

Presenters will discuss the connection of the sustainable development goal indicators with health inequality reduction; how this impacts efforts to promote social inclusion, as well as social and health equity; and, the information requirements.

BUILDING ON BEST PRACTICES: EDUCATION FOR FRONTLINE WORKERS IN THE OVERDOSE EMERGENCY

Participants in this workshop will be offered the opportunity to learn and discuss key education topics needed for preparing staff working in the overdose crisis. A brief overview of a large education project undertaken in Interior Health BC will be provided. Following this, two key activities will be facilitated with the group – Integrating Harm Reduction Principles into Health Settings and How Theories of Substance Use Influence our Treatment Directions.

Upon completion of the workshop, participants will be able to facilitate the two guided activities in their workplace. Participants will receive a take-away summary and complete facilitator manual for the Building on Best Practices program to apply in their day-to-day practice.

THE CANADIAN URBAN ENVIRONMENTAL HEALTH RESEARCH CONSORTIUM – SETTING THE STAGE FOR A NEW ERA OF ENVIRONMENTAL HEALTH RESEARCH

The Canadian Urban Environmental Health Research Consortium (CANUE) is a new initiative funded by the Canadian Institutes of Health Research (2016 - 2021). CANUE is gathering and developing measures of urban environmental factors such as air pollution, noise, greenness/blueness, walkability, and weather for every neighbourhood in Canada, and making these data freely available for research purposes. Understanding the complex interactions among these factors and how they impact health is key to producing effective, evidence-based strategies for planning healthy cities and towns, today and in the future.

This symposium will highlight key features of CANUE and provide three concrete case studies showing how CANUE data can be used to inform public health policy. Participants will identify opportunities and barriers for incorporating CANUE data and associated study results into local public and population policy through a facilitated group session following the presentation of selected case studies.

CONDUCTING QUALITY PEER REVIEWS OF QUANTITATIVE MANUSCRIPTS

Reviewers play a critical role in ensuring published manuscripts are of high quality. In this workshop, organized and led by the Editor-in-Chief and a senior editor of the Canadian Journal of Public Health, participants will develop skills to conduct a quality peer review of a quantitative-type manuscript.

Participants will engage in a facilitated exercise to conduct a review of a manuscript and will learn the do’s and don’ts of reviewing a manuscript.
DISRUPTIVE TECHNOLOGIES AND PUBLIC HEALTH – WHAT’S THE PROBLEM?

Artificial intelligence, robotics, big data, genomics, nanotechnology … Scientific and technological developments over the past 20 years have affected how people work, communicate and interact. Whether it’s the application of information technology to surveillance of disease or the influence of robotics on people’s work and livelihood, these advances will dramatically impact health and the work of public health. The purpose of this session is to review the emerging disruptive technologies and their implications for public health. A World Café will provide those in attendance an opportunity to express their views on the influence of disruptive technologies on public health. The result of these discussions will influence the development of a CPHA discussion paper on this subject.

EPIDEMIOLOGY AND INDIGENOUS HEALTH: WHAT’S MEASURED MATTERS

Truth and Reconciliation Commission Call to Action #19 calls for the creation of goals with indicators and regular reporting to close the gap in health outcomes between Indigenous and non-Indigenous people. Working with Indigenous health data offers unique opportunities and challenges. This symposium explores how to respectfully work with Indigenous health data. Different perspectives on the subject will be presented, including those of a First Nations Community Wellness Director, a regional health authority, an epidemiologist, and a provincial data custodian.

These panelists have different perspectives on Indigenous health data through their own individual experiences and their shared experience in Mamow Ahyamowen. Mamow Ahyamowen (meaning Everyone’s Voices) is an epidemiology partnership of nine First Nations health service organizations serving 74 First Nations from across Northern Ontario. Participants will learn about a model they can apply in their own work to respectfully support the data needs of Indigenous leaders who are striving to achieve health equity.

TRAINING THE NEXT GENERATION OF PUBLIC HEALTH PROFESSIONALS: THE ROLE OF LAW IN PUBLIC HEALTH PEDAGOGY

Law plays a critical role in public health, and yet many public health programs do not include legal training as part of the core curriculum. This symposium reflects on the importance of incorporating law as part of the training public health practitioners receive. It will identify the reasons for including legal training in public health education, reflect on the challenges of teaching law to public health students, and identify the benefits that public health practitioners can realize from legal education.

This discussion will draw on the experiences of Western University’s Master of Public Health Program, which includes law as part of the core curriculum, with reflections from the program’s director, law instructor, and a graduate of the program. Participants will gain an appreciation for the importance of legal training, and will be given guidance for how to incorporate legal training into their own programs and/or practices.
UNDERSTANDING AND INTERPRETING INDICATORS FOR CHRONIC DISEASES

Participants will review basic concepts about chronic disease indicators and work with real data to illustrate strategies for interpreting indicators. We will begin with a presentation on current and emerging methods for calculating indicators, along with strategies for interpreting indicators. Then, participants will use the Population Health Record to complete two exercises, with a moderated group discussion following each exercise.

The first exercise will focus on analyzing indicators within a region and understanding how different types of indicators (e.g., prevalence, incidence, mortality) can be used to set priorities. The second exercise will focus on analyzing indicators across regions and understanding the use of benchmarks and standardization in comparisons between regions. We will close with a brief review highlighting the learning objectives addressed. The skills and knowledge learned in this workshop will help participants to interpret chronic disease indicators appropriately and use them effectively for surveillance and planning within and across regions.

WORKING TOGETHER ON A SHARED AGENDA: THE NCCS AND THEIR PARTNERS DISCUSS THE ROLES OF PUBLIC HEALTH IN POPULATION MENTAL HEALTH PROMOTION

Presented by: National Collaborating Centres for Public Health

Promoting mental health and wellbeing for all, preventing mental illness and addictions and intervening early is critical to achieving significant population-level impact for Canadians. The Canadian public health workforce’s role in promoting mental health at a population level is fundamental but insufficiently supported or clarified. Recently, a national forum was hosted by the National Collaborating Centres for Public Health in collaboration with four partners, the Public Health Agency of Canada, the Mental Health Commission of Canada, the Centre for Addictions and Mental Health, and the Canadian Mental Health Association.

Participants in this session will learn about the forum, which brought together key stakeholders, including pan-Canadian public health practitioners, and will have the opportunity to discuss, support and clarify the role of public health in population mental health promotion, reflecting on their own practice and mechanisms to support involvement in population mental health. Participants will also hear the knowledge and expertise that was shared at the forum as highlights are presented from different partners’ perspectives.
MÉTIS NATION APPROACHES TO ADDRESSING HEALTH AND WELLNESS

The Métis Nation is actively addressing the health and wellness of Métis people and communities through evidence- and culture-based approaches. The Métis Nation is committed to improving health and wellness outcomes in collaboration with federal and provincial governments and other partners. The Canada-Métis Nation Accord provides a distinctions-based, nation-to-nation mechanism to effectively advance health and wellness through Métis governments.

In this plenary, delegates will hear why Métis are a distinct culture and explore their holistic approach rooted in culture and history to promote health and wellness and reduce the burden of illness. Panelists will explore a Métis-specific health model, and how health and wellness is perceived in Métis communities. Delegates will come away with culturally-informed strategies and actions that can help to promote Métis health and wellness and reduce health disparities in Canadian society.

Moderator | Animateur
- Dale Drown, Chief Executive Officer, Métis Nation British Columbia

Speakers | Orateur et oratrice
- Clément Chartier, President of the Métis National Council
- Clara Morin Dal Col, Métis National Minister of Health and President of Métis Nation British Columbia

LES STRATÉGIES DE SANTÉ ET DE MIEUX-ÊTRE DE LA NATION MÉTISSE

La Nation métisse s’affaire activement à la santé et au mieux-être individuel et collectif des Métis au moyen de stratégies fondées sur les données probantes et la culture. Elle s’emploie à améliorer les résultats de santé et de mieux-être en collaboration avec le gouvernement fédéral, les gouvernements provinciaux et d’autres partenaires. L’Accord Canada–Nation métisse prévoit un mécanisme de nation à nation fondé sur les distinctions pour faire progresser efficacement la santé et le mieux-être par l’entremise des gouvernements métis.

Durant cette plénière, les délégués entendront pourquoi les Métis constituent une culture distincte et exploreront leur approche holistique, ancrée dans la culture et l’histoire, pour favoriser la santé et le mieux-être et réduire le fardeau des maladies. Les panélistes discuteront d’un modèle de santé spécifiquement métis et des perceptions de la santé et du mieux-être dans la communauté métisse. Les délégués y pueront des stratégies et des interventions culturellement pertinentes pouvant favoriser la santé et le mieux-être des Métis et réduire les disparités de l’état de santé dans la société canadienne.
IN PURSUIT OF HEALTH EQUITY: MEASUREMENT AS A TOOL TO DRIVE IMPROVEMENTS IN POPULATION HEALTH

Presented by: Canadian Institute for Health Information

Come and talk to your colleagues about equity and its practical application to your work:

The session will highlight the importance of data and measurement in identifying and responding to health and health care inequalities. Measurement can help to illuminate the health systems progress towards achieving health equity. This session will highlight CIHI’s work on health equity stratifiers (age, sex, gender, income, education, and geographic location) and a measurement toolkit to identify health inequalities across population sub-groups. We will also feature measurement initiatives from a variety of perspectives within the health system.

The proposed perspectives include:

- National – Pan-Canadian Health Inequalities Reporting
- Provincial Health System perspective
- Regional/Local: Major urban cities (Urban Public Health Network initiative); care setting (e.g., primary care)

CPHA POLICY FORUM

The Policy Forum in an opportunity for participants to have direct influence on CPHA’s policy initiatives. During this session, participants will be asked to provide comments on proposals that are currently under development. The results of the discussions will be used to adjust the proposals to better reflect participants’ concerns before review and approval by CPHA’s Board. Those who attend will receive written summaries of these subjects prior to Public Health 2018. The session will wrap up with a Rapid-Fire Policy Round, where participants will be given 30 seconds each to present one issue of particular interest to them.

ORAL ABSTRACT SESSIONS

PRÉSENTATIONS DE RÉSUMÉS ORAUX
 Aphitaw Miyo Machihon in British Columbia (Métis Health in BC)

Presented by: Métis National Council

Métis people make up 1/3 of the Aboriginal population in British Columbia. Recognized by the Métis National Council (MNC), the Provincial Government of British Columbia and the Federal Government of Canada, the Métis Nation British Columbia (MNBC) is the official governing body of the Métis in BC. MNBC is one of the five Governing Members of MNC and represents nearly 90,000 self-identified Métis people in British Columbia, of that, nearly 17,000 are provincially registered Métis Citizens with MNBC.

As assumptions are made that Métis people receive programming and services from the First Nations Health Authority, the session will explore the need to move away from subsuming Métis under First Nations/Aboriginal programming and policies. Health information on Métis will be shared as well as why there is a need for Métis-specific policy, programs and services in cultural safety training in British Columbia.

Can Bigger and Better Data Make Healthier Cities?

This interactive symposium will stimulate dialogue and new thinking on how bigger and better data can be harnessed to guide decision-making, citizen engagement, and action on healthy, equitable cities. We will use a rapid, engaging presentation format known as Ignite (20 slides x 15 seconds) to engage researchers and knowledge users who bridge public health, geography, computer science, and urban planning. These thought leaders will offer diverse evidence and perspectives on the challenges and opportunities for using more precise and timely data to advance understanding and action on smart, sustainable, and healthy cities for all.

Through interactive discussion, participants will explore the tension between whether bigger data means better data and the potential for improved public health intelligence to inform and transform action on major urban health challenges.

A Critical Discussion of the Future of Health Promotion in Canada

This interactive symposium on the future of health promotion will highlight the relevance of health promotion in Canada in 2018 and beyond, the opportunities and challenges that may arise, and promising concrete future directions for health promotion in Canada.

This symposium will be particularly useful to those working in health promotion research and practice, as well as in policy and public health more broadly. Discussions will be inspired by the 4th edition of Health Promotion in Canada, released in November 2017.

#PHSP2018
EDUCATION FOR RECONCILIATION: AN EXPERIENTIAL LEARNING EXERCISE AND TRANSFORMING EMPATHY TO SOCIAL ACTION

This workshop will draw upon decolonizing, Indigenous and engaged pedagogies to walk participants through an experiential learning exercise aimed at enhancing intercultural capacity, understanding, empathy and respect for the immediate and inter-/trans-generational impacts on Indigenous peoples’ health. The experiential exercise is a 30-minute simulated walk-through of a series of colonial historical events that have impacted Indigenous peoples in Canada. The exercise engages participants in reflecting on their own experience in order to build empathy, understanding, and mutual respect, and encourages participants towards transformation and social action.

The experiential exercise is followed by 60 minutes of reflection, deconstruction and discussion of the exercise.

Discussion topics include:

1. Identity: deconstructing racism, stereotypes and their impacts on health and well-being.
2. Grief and Loss: Inter-/trans-generational impacts of trauma.
4. Indigeneity: resistance; reclaim, restore, revive and thrive; empowerment.
5. Reconciliation: moving forward together to improve the health and well-being of all.

Applicability of the exercise:

• Builds personal intercultural understanding that can be applied when working with Indigenous populations in Canada.
• Transforms misconceptions/misunderstanding towards empathy and mutual respect, which can be applied to Culturally Safe Care.
• A lesson plan will be provided to all participants for those interested in conducting this exercise in their classrooms or institutions.

THE INTERNATIONAL FOOD POLICY STUDY: EVIDENCE ON POPULATION-LEVEL FOOD BEHAVIOURS TO EVALUATE POLICY IN CANADA, USA, UK, MEXICO AND AUSTRALIA

The symposium will present findings from the first annual wave of the IFP study. Findings will be presented on several policy-relevant domains, including patterns of dietary intake, food labelling, food environment and activity spaces, exposure to food marketing and sources of nutrition information, sugary drink consumption and perceptions, food security, and public support for food environment policy.

In each of these domains, evidence will be presented from Canada and comparisons will be made with other countries, with an emphasis on differences between countries with and without specific policy measures, such as sugary drink taxes or differences in food labelling. The symposium will discuss implications for Canadian food policies under development, as well as implications for evaluating population-level policies using online cohort studies and smartphone technology.
LEGALIZED CANNABIS: CHALLENGES AND OPPORTUNITIES FOR ENVIRONMENTAL HEALTH

Policy for cannabis legalization has been complicated by historical prohibition of this substance, which has hindered our ability to collect data and subsequently limited our understanding of its effects and consequences. In particular, environmental health perspectives are often lacking, as much of the available research focuses on clinical effects. Accordingly, new policy has relied heavily on “lessons learned” from other jurisdictions, parallels with tobacco and alcohol, and the precautionary principle. Above all, there is a recognized need for “agile” policy development as new data become available through legalization itself.

As such, public health professionals have an imperative to identify and exploit old and new sources of information to improve nascent cannabis policy. This session will focus on some of the practice challenges faced by environmental health professionals due to data gaps and the types of comprehensive, collaborative information-gathering necessary to fill these gaps and continually improve cannabis policy in Canada.

LEARNING THAT STICKS: TEAM SIMULATION TRAINING FOR PUBLIC HEALTH PROFESSIONALS

Public health often involves working with multi-disciplinary teams and across different sector who frequently have limited experience working together. Cross-sectoral differences are compounded by the need to work by correspondence, in crisis and in fast-paced volatile situations to protect or promote global public health.

Experiential learning through simulations provides a safe environment where team members can work together to identify and overcome issues, apply new skills and knowledge, and ultimately perform more effectively in real-world situations. The session will illustrate how simulations, or sims, present an innovative way to improve team functioning. During the workshop, participants will be split into small groups to develop and run a mini-sim exercise. Groups will receive a brief background on simulative learning; they will be tasked with developing roles, a timeline, and objectives for their mini-simulation, and will then present to the larger group. The workshop will conclude with a facilitated group discussion on how sims could be applied to different areas of public health and the organizations that participants represent.

REDUCING STIGMA THROUGH TRAUMA- AND VIOLENCE-INFORMED CARE: PRACTICAL APPLICATIONS IN FAMILY VIOLENCE, SEXUAL HEALTH AND HARM REDUCTION

Stigma negatively impacts health and well-being and is a significant barrier to the uptake of sexually transmitted and blood-borne infection (STBBI), sexual health and harm reduction services. Trauma- and violence-informed care (TVIC), which can be used to reduce stigma, has emerged from conceptual and empirical work in the area of health equity and trauma-informed practice in substance use and mental health settings, and draws attention to the impacts of both trauma (especially interpersonal violence) and structural violence.

During this interactive workshop for health and social services providers and leaders, participants will explore the relationship between trauma and stigma, and discuss the principles of TVIC in relation to individual provider and organizational practices. The Public Health Agency of Canada-funded VEGA Project, which integrated TVIC principles into its evidence-based guidance in family violence, will serve as a case example to promote participant reflection and dialogue on TVIC integration. Participants will engage in facilitated activities and discussions and leave with practical tools to build the skills needed for integration of TVIC in the areas of sexual health, harm reduction and STBBIs.
THE VALUE OF COLLABORATION: DEVELOPMENT OF A HEAT WARNING INFORMATION SYSTEM FOR ONTARIO

All levels of government collaborated to create the Ontario-wide Heat Warning and Information System (HWIS) through a three-year facilitated process, replacing a patchwork of different heat warning systems that previously existed across the province and building capacity for Ontario’s 36 public health units to respond to extreme heat events. The HWIS has been operational since 2016 and has been successfully incorporated into public health practice, as demonstrated through multiple surveys of local public health agencies.

This symposium details a process through which federal, provincial/territorial and local public health agencies and a non-governmental organization worked collaboratively to achieve a mutual objective of health protection. Participants will hear about the value of cross-sectoral collaboration and learn about a framework that could be replicated for other issues and across challenging areas.

Dr. John Hastings Student Awards Session

The Dr. John Hastings Student Award is named in honour and memory of Dr. Hastings and his commitment to and belief in students as the future of public health in our country. CPHA will identify the 10 top-rated student abstract submissions to be presented at this special session, where they will be judged by a panel of reviewers and conference delegates. The award is valued at $1,000. The winner will also receive a free CPHA membership.

Join us after the session at a networking reception and engage with public health leaders from across the country. Students and trainees will have the opportunity to build a professional network and gain insight from the experts working in the field of public health. Food will be provided to fuel the conversation between current and future public health leaders.

Rural, Remote and Northern Public Health Networking Reception

The Rural, Remote, and Northern Public Health Network is an evolving interest-based group that seeks:

1. to SHARE experiences, best practices, and innovative solutions;
2. to CONNECT with research initiatives and partners, and liaise with jurisdictions;
3. to VOICE rural, remote and northern issues; and
4. to EDUCATE the new generation of public health physicians about rural, remote, and northern issues.

All health professionals interested in rural, remote, and northern settings are welcome.

Additional registration fee required: $25
### PROGRAM OVERVIEW | RÉSUMÉ DU PROGRAMME

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<td>PLENARY IV: WAYS TO HEALTHY CITIES: BUILDING COMMUNITIES,</td>
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<td></td>
<td>FOSTERING INNOVATION, AND SUSTAINING A VISION</td>
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- **PLENARY III: HEALTH FOR ALL AND THE FUTURE OF PUBLIC HEALTH**
  - 9 h à 10 h 30
  - PLÉNIÈRE III : LA SANTÉ POUR TOUS ET L’AVENIR DE LA SANTÉ PUBLIQUE

- **PLENARY IV: WAYS TO HEALTHY CITIES: BUILDING COMMUNITIES,**
  - CONSTRUIRE DES COMMUNAUTÉS,
  - FAVORISER L’INNOVATION ET MAINTENIR UNE VISION

- **POSTER PRESENTATIONS | PRÉSENTATIONS D’AFFICHES**
  - 10 h 30 à 12 h 15

- **NETWORKING LUNCH | DÉJEUNER CONTACTS**
  - 12 h 15 à 13 h

- **CONCURRENT SESSIONS | SÉANCES SIMULTANÉES**
  - 13 h à 14 h 30

- **PLENARY III: HEALTH FOR ALL AND THE FUTURE OF PUBLIC HEALTH**
  - Adopting the federal government’s sex- and gender-based analysis framework in public health policy: Examples from the field
  - CPHA Presents: Children’s unstructured play: From policy to practice
  - Curing the Zombie City: Planning for healthy communities in the sprawling edges of Canadian cities
  - PHPC presents: Shaping the future of public health services
  - Sharing mite achimowin (Heart Talk): First Nations women’s expressions on cardiovascular health
  - PHAC presents: Upstream Prevention of Problematic Substance Use, DBJ Symposium on Public Health
  - Using experiential knowledge to improve mental health policies and interventions among vulnerable populations

- **PLENARY IV: WAYS TO HEALTHY CITIES: BUILDING COMMUNITIES,**
  - FOSTERING INNOVATION, AND SUSTAINING A VISION
  - VERS LES VILLES SANTÉ : CONSTRUIRE DES COMMUNAUTÉS,
  - FAVORISER L’INNOVATION ET MAINTENIR UNE VISION
HEALTH FOR ALL AND THE FUTURE OF PUBLIC HEALTH

Public health service delivery has evolved over time from its original focus on the prevention of infectious disease. In the 1970s and 80s, the concepts embodied in the Ottawa Charter for Health Promotion sparked a renaissance in the organization and delivery of these services along with an increased emphasis on health equity as embodied in the clarion call of “Health for All.”

During the 20th century, Canadians gained an average of 30 years of life; 25 of those years were attributable to advances in public health. These advances were generally the result of the intersectoral, multidisciplinary, collaborative approach core to a public health approach. Since it is unlikely that we will gain another 30 years of life over the next century, the question becomes, “How must public health services be structured to reduce persistent health inequities and improve population health outcomes, including quality of life, for all Canadians?”

The panelists will identify some specific principles, actions and themes that led to success over the past 25 years and will propose some principles for the future structure of public health services that will result in improved population health outcomes and health equity.

LA SANTÉ POUR TOUS ET L’AVENIR DE LA SANTÉ PUBLIQUE

Les services de santé publique ont évolué depuis leur accent original sur la prévention des maladies infectieuses. Dans les années 1970 et 1980, les concepts enchâssés dans la Charte d’Ottawa pour la promotion de la santé ont donné lieu à une renaissance de l’organisation et de la prestation de ces services et à un intérêt accru pour l’équité en santé, proclamée dans l’appel en faveur de la « Santé pour tous ».

Au 20e siècle, les Canadiens et les Canadiennes ont gagné en moyenne 30 années de vie, dont 25 sont imputables aux progrès en santé publique. Ces progrès ont résulté pour la plupart de l’approche intersectorielle, pluridisciplinaire et concertée qui est au cœur de la démarche de santé publique. Comme il est peu probable que nous gagnerons 30 années de vie supplémentaires au cours du prochain siècle, une nouvelle question se pose : « Comment structurer les services de santé publique pour réduire les inégalités de santé persistantes et améliorer les résultats de santé, y compris la qualité de vie, de toute la population canadienne? »

Les panélistes décriront des principes, des interventions et des thèmes particuliers qui ont porté fruit au cours des 25 dernières années et poseront les principes de la structure future des services de santé publique susceptibles d’améliorer les résultats de santé des populations et l’équité en santé.

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. Less structured than an oral presentation and with more presentation time, the poster presentation session will allow delegates to network and exchange innovative ideas while facilitating productive discussion and feedback.

La séance spéciale d’affiches et de réseautage permettra aux présentateurs d’engager la conversation avec les délégués et de présenter des innovations dans la recherche, les programmes, les pratiques exemplaires ou les politiques dans un lieu plus dynamique. Moins structurée qu’un exposé oral et avec plus de temps de présentation, la séance d’affiches permettra aux délégués de créer des liens et d’échanger des idées novatrices tout en facilitant des discussions et des commentaires productifs.
ADOPTING THE FEDERAL GOVERNMENT’S SEX- AND GENDER-BASED ANALYSIS FRAMEWORK IN PUBLIC HEALTH POLICY: EXAMPLES FROM THE FIELD

Although the Government of Canada has had a long-standing commitment to sex- and gender-based analysis (SGBA) dating back to 1995, the application of SGBA+ in the development and evaluation of public health policies is quite variable. Applying SGBA+ to policy development is important because women, men and gender-diverse people can experience the same health issue differently, or a health condition may have varying impacts on diverse populations.

SGBA+ enhances policy development in public health by guiding the gathering of information and analysis needed to inform the best public health decisions. As such, SGBA+ is an important consideration for public health, particularly in relation to the Canadian public health policy context in addressing complex public health issues.

The symposium will provide participants with concrete information on the utility of SGBA+ for public health policy development and evaluation. Drawing from specific examples in the field of public health, participants will learn how to apply SGBA+ to their day-to-day public health research, policy and practice settings.

CHILDREN’S UNSTRUCTURED PLAY: FROM POLICY TO PRACTICE

Play is an integral part of every child’s healthy development and is embedded in Article 31 in the Convention on the Rights of a Child. Children and youth need time, appropriate space and opportunity to engage quality unstructured, child-led play. Children, however, are moving less, sitting more, and have more limits placed on them in and outside of school. Meanwhile, the prevalence of poor mental health and the use of mental health services have increased among Canadian children and youth.

CPHA, with the generous support from the Lawson Foundation, has been investigating the decision-making barriers to accessing unstructured play in school and municipal settings. This session will provide an overview of these barriers in Canada, with a comparison to the progress other countries have made in providing access to quality play environments. An overview of CPHA’s work on developing a toolkit that supports play-related decision-making will be shared. Participants will be challenged to identify how the identified barriers can be addressed in order to make Canada more play-friendly.

CURING THE ZOMBIE CITY: PLANNING FOR HEALTHY COMMUNITIES IN THE SPRAWLING EDGES OF CANADIAN CITIES

“Zombie” cities – places with the same light industrial and office parks – are a necessary land use to support the consumption habits and workplace needs of large Canadian cities. This workshop is intended to provide a practical and interactive setting for public health practitioners to learn about the challenges of planning for healthy communities in these zombie cities. Participants will learn about how the transition from a primarily manufacturing-based economy to service and knowledge-based industries presents an opportunity to construct healthier workplace communities.

The workshop invites all participants to learn about the techniques, skills, and theories urban planners use to design complete communities. The facilitators will guide participants through a “charrette” activity to redesign an average suburban industrial and office park for better health outcomes within a set of realistic zoning and budgetary restrictions. This is a hands-on session open to those of all skill levels and backgrounds, using LEGO™ and other aids.
THURSDAY, MAY 31 | JEUDI 31 MAI

13:00 – 14:30  CONCURRENT SESSIONS
13 h à 14 h 30  SÉANCES SIMULTANÉES

SHAPING THE FUTURE OF PUBLIC HEALTH SERVICES

Presented by: Public Health Physicians of Canada

Building on the principles identified in the plenary discussion *Health for All and the future of public health*, this workshop will delve deeper into the question of “How must public health services be structured to reduce persistent health inequalities and improve population health outcomes, including quality of life, for all Canadians?”

Panelists will discuss what these principles could look like in action and identify potential steps forward. In group discussions, participants will identify additional principles and ways to begin implementation in the current climate of health system restructuring across Canada.

SHARING MITE ACHIMOWIN (HEART TALK): FIRST NATIONS WOMEN’S EXPRESSIONS ON CARDIOVASCULAR HEALTH

As Indigenous people around the world know, research is a messy and complicated space. In particular research done on (as opposed to with) Indigenous peoples informs the creation of additional colonizing structures through new policy or programs, particularly within health and social care fields. Once data is collected from Indigenous people, sense making and translation is often devoid of Indigenous perspectives or worldviews. When this happens, knowledge or evidence that emerges to inform healthcare practices and programs has been produced outside of, and without a relationship with, Indigenous peoples and knowledge. In this symposium, we reflect upon a community-based digital storytelling study that used oral history and arts-based research approaches to explore culturally-rooted knowledge of heart health among First Nations women.

Panelists will share a project of how Indigenous cultures and languages centred the research, resources, education and knowledge translation. Panelists will provide reflections of how public health knowledge production and translation done by First Nations communities, and is inclusive of Indigenous voices, knowledge and worldviews holds promise to transform public health policies and practices (i.e., culturally safe and trauma informed care).

UPSTREAM PREVENTION OF PROBLEMATIC SUBSTANCE USE, DBJ SYMPOSIUM ON PUBLIC HEALTH

Presented by: Public Health Agency of Canada

With the pending legalization of cannabis, the ongoing opioid crisis and the impacts of alcohol, it is becoming increasingly pressing to turn our attention to address upstream determinants to prevent problematic substance use.

This workshop will explore the latest evidence and thinking on the prevention of problematic substance use and consider opportunities to create positive upstream influences and protective factors such as resilience, social connections, and childhood attachment. Participants will hear from diverse perspectives of those who have undertaken primary prevention initiatives, to those that have seen the downstream connections between problematic substance use and social determinants of health. This session will both showcase solutions and explore new ideas on a range of fronts to prevent problematic substance use.
USING EXPERIENTIAL KNOWLEDGE TO IMPROVE MENTAL HEALTH POLICIES AND INTERVENTIONS AMONG VULNERABLE POPULATIONS

The World Health Organization defines health as a “state of complete physical, mental and social well-being”. However, in a recent systematic review of community engagement interventions to reduce health inequalities, only three out of the 319 interventions reviewed focused on mental health. Furthermore, the population approach to health prevention appears to create an “inequality paradox” exacerbating social health inequalities. Innovative strategies common to community psychology could be harnessed in public health to enhance equality in health.

In this session, an introduction will detail the concepts of mental health promotion, vulnerable populations and experiential (or lay) knowledge. Three presentations will then illustrate concrete examples by describing studies using peer research and mutual knowledge sharing, walk-along interviews, and the Photovoice method. A collective exercise inspired by group-level assessment will enable participants to reflect on how to integrate such innovative methods in their practice as public health professionals.
WAYS TO HEALTHY CITIES: BUILDING COMMUNITIES, FOSTERING INNOVATION, AND SUSTAINING A VISION

There is increasing recognition that cities have a key role to play to improve society’s health, equity, and sustainability. Important investments in infrastructure and built environments, at both local and regional levels, offer great opportunities for shaping local environments and designing urban systems that are conducive to citizen engagement and community building, sustainable environmental, economic and social conditions, and improved population health for all. Meanwhile, novel sensor networks, wearables, or social media generate increasing volumes of high-velocity ‘big data’ that document movements and interactions within cities and populations. Such data further pushes innovation – from new citizen science to artificial intelligence – possibly contributing to shaping tomorrow’s smart, resilient, sustainable and healthy cities.

This plenary session will explore current and future challenges and opportunities in our collective role to shape cities towards sustainability and health. We will hear from three panelists about how communities develop and grow, about how urban changes can serve as natural experiments to generate new evidence, and about how political decision-making can contribute to fostering intersectoral collaboration and innovation to tackle the future of cities and societies. If the current alignment in priorities suggests readiness for successful transformations, there is also an underlying sense of complexity – and emergency – that renders the creation of truly healthy and sustainable cities an important but exciting challenge that this plenary session will help us embrace!

VERS LES VILLES SANTÉ : CONSTRUIRE DES COMMUNAUTÉS, FAVORISER L’INNOVATION ET MAINTENIR UNE VISION

Il est de plus en plus admis que les villes ont un rôle essentiel à jouer dans l’amélioration de la santé, de l’équité et de la durabilité dans la société. Les grands investissements dans les infrastructures et les milieux bâtit, que ce soit à l’échelle locale ou régionale, sont d’excellentes occasions de façonner les environnements locaux et de concevoir des systèmes urbains propices à la mobilisation citoyenne et au développement communautaire, à la durabilité des conditions environnementales, économiques et sociales et à l’amélioration de la santé des populations pour tous. Entre-temps, les innovations dans les réseaux de capteurs, les dispositifs portables et les médias sociaux génèrent des volumes croissants de « mégadonnées » à grande vitesse qui décrivent les déplacements et les interactions à l’intérieur des villes et des populations. Ces données favorisent elles-mêmes les innovations – des nouvelles sciences citoyennes à l’intelligence artificielle –, et il n’est pas exclu qu’elles contribuent à façonner les villes intelligentes, résilientes, durables et saines de demain.

Cette plénière porte sur les défis et les possibilités actuels et futurs de notre rôle collectif dans l’avènement de villes durables et saines. Trois panélistes expliqueront que les communautés grandissent et se développent, que les changements du milieu urbain peuvent servir d’expériences dans les conditions naturelles pour générer de nouvelles données probantes, et que les décisions stratégiques peuvent favoriser la collaboration intersectorielle et l’innovation, lesquelles détermineront l’avenir des villes et des sociétés. Si l’alignement actuel des priorités indique que nous sommes prêts pour des transformations fructueuses, il existe aussi un sentiment sous-jacent de complexité – et d’urgence – qui fait de la création de villes vraiment saines et durables un défi majeur, mais très prometteur, que cette plénière nous aidera à relever!