



Canadian Public Health Association
2015 Annual General Meeting
Wednesday, May 27, 2015 • 07:15-08:45
Hyatt Regency Hotel • Regency E & F
655 Burrard Street, Vancouver, British Columbia

Minutes

Chair: Ardene Robinson Vollman, Chair, CPHA Board of Directors

1.0 Opening Remarks

The meeting was called to order at 07:15.

Ardene Robinson Vollman, Chair, welcomed delegates to the 2015 Annual General Meeting (AGM) of the Canadian Public Health Association (CPHA) and introduced the CPHA Board Members present.

2.0 Adoption of the Minutes of the Annual General Meeting held May 27, 2014 in Toronto, Ontario

Motion: *Louise Potvin/James Chauvin*
That the minutes of the May 27, 2014 Annual General Meeting held in Toronto, Ontario be accepted as circulated.

/1 ABSTENTION
.../CARRIED

3.0 Adoption of the 2014 Audited Financial Statements

As the membership is aware, the past few years have been challenging for CPHA and for many other non-governmental organizations in this country. While CPHA has experienced improved financial success for the past couple of years, the future remains uncertain as the economy falters in its recovery and opportunities for new revenue lines for the Association remain somewhat limited.

Ardene Robinson Vollman called on Ian Culbert, Executive Director, CPHA to present the 2014 Audited Financial Statements, included in the AGM package, on behalf of Robert Schwartz, Chair of the Finance Committee.

Financial Statements

The Association received a clean audit report again in 2014 and ended the year with a surplus of \$145,000, which is significantly more than the originally budgeted surplus of \$10,000. While this is good news, the Board has approved a deficit budget for 2015 that will erode our unrestricted reserve. The longer-term financial stability of the Association remains completely reliant on:

- maintaining and increasing our membership base;
- continuing to manage existing and develop new corporate partnerships;
- the good management of our existing business lines; and
- developing new sources of revenue that will financially support our core activities.

The Board of Directors and the Finance Committee continue to monitor the Association's well-being very closely and are cautiously optimistic for the future.

Questions and discussion

Paul Hasselback commended the Board and the organization on the work over the past decade to reduce dependence on government funding from over 90%. He encouraged continued transparency about what goes into the projects and conferences budget lines including details for each one: what they are; the income; and the administrative dependence on those projects.

Irv Rootman asked about plans to increase membership as a source of revenue and suggested there may be a potential connection with the environmental movement that can boost membership. A. Vollman replied that the Board has struck a membership working group to explore ways to increase membership. It is particularly important, not just for the fees it will bring in, but to build capacity and to provide services so that members can build their own capacity in a mutually beneficial relationship. Members are encouraged to bring ideas forward.

Sharon Yanicki asked about recruitment of students as members. They are a source of like-minded people who can be future members. The Chair expressed appreciation for the number of students participating at the Conference. In order to attract students, the professors, academics and graduate supervisors need to convey CPHA's message and bring attention to the benefits of membership. CPHA has been trying to get more academics to become members and those present are encouraged to speak with the Executive Director and the Student Director.

Joel Kettner suggested that more thought be given to CPHA's special niche and less about how to make money and that by doing the first, the second will follow. The Chair agreed, which is why the Board decided at their recent meeting to undertake a communications and branding strategy that will clarify CPHA's niche and communicate it more strategically to different audiences. In a follow up comment, J. Kettner suggested that CPHA's niche is about a safe space for conversation and an opportunity for advocacy for our membership and others in public health who are not able to do so in their own domain.

Pemma Muzumdar commented that other provincial/territorial public health associations are grappling with the membership issue and some have made significant strides in responding to it. She asked if there is a way to learn from each other. The Chair replied that CPHA's Executive Director co-chairs the Canadian Network of Public Health Associations

(CNPHA) that meets regularly via teleconference and face-to-face at the time of this annual conference. Emerging issues in the provinces and territories are discussed and the group shares how each is addressing those issues. Associations are encouraged to consider having conjoint as well as direct membership options to jointly increase membership and to collaborate on membership drives. CPHA is committed to working collaboratively with the provinces and territories.

Jake Pauls referred to a very active injury prevention group in Canada that seems to draw an audience to their conference comparable to CPHA's numbers. He suggested that CPHA try to be visible there and promote our policy work in which others don't engage.

Motion: **Brent Fraser/Sheilah Sommer**
That the 2014 Audited Financial Statements of the Canadian Public Health Association be accepted as circulated.

.../CARRIED

Ian Culbert recognized Sheilah Sommers' ongoing contributions to the Association and expressed gratitude for her years of service. Sheilah stepped down this year after being a member of the Finance Committee since its inception.

4.0 Appointment of the CPHA Auditor for 2015

For the past four years, CPHA has used BDO Canada as its auditor. The Finance Committee and staff are pleased with their service and their price remains competitive. The Finance Committee and Board of Directors have both recommended that BDO Canada be appointed as CPHA's Auditor for 2015.

Motion: **Lynn McIntyre/Gilles Paradis**
That the firm of BDO Canada LLP be appointed as CPHA Auditors for 2015.

.../CARRIED

5.0 CPHA Annual Report to the AGM

Ardene Robinson Vollman presented the 2014 Annual Report. The various papers and documents referenced in the report are available on CPHA's website.

- At Public Health 2104 in Toronto, CPHA launched a discussion paper about the public health approach to managing illegal psychoactive substances in Canada. In this document, it is argued that drug policies based on prohibition have failed and that an alternative to prohibition and criminalization exists – a public health approach that is based on the principles of social justice, attention to human rights and equity, evidence-informed policy and practice, and addressing the underlying determinants of health.
- CPHA submitted a brief to the Government of Canada regarding Bill C-2, the Respect for Communities Act. While CPHA unsuccessfully appealed to the Government and opposition members to be granted standing before the House of Commons Standing Committee on Public Safety and National Security to voice concerns, advocacy efforts have continued. CPHA's Executive Director participated in a

parliamentary round table on the benefits of a public health approach to managing illegal psychoactive substances.

- CPHA appeared as a witness before the House of Commons Standing Committee on Health on the topic of electronic cigarettes. Our presentation included a series of recommendations to the federal government including a call to ban the use of e cigarettes in all public places under its jurisdiction; restrictions on advertising, promotion and sponsorship similar to those in place for tobacco products; and additional investments in research.
- CPHA called on the federal government to conduct an evaluation of the actions taken as a result of previous inquiries, reports and investigations into missing and murdered Aboriginal women and to implement an integrated action plan for violence prevention that addresses its root causes. This call was an extension of a 1990 CPHA resolution approved by the membership that recognized violence as a pervasive and destructive force in society and pledged to advocate strongly for its elimination.
- CPHA released a position statement on sex work in Canada that addresses the issue from a public health perspective. The position statement includes a number of practical and specific recommendations to government in Canada that acknowledge the real-life situations involved in sex work and are formed to help ameliorate the inherent dangers for both sex worker and client.
- The *Canadian Journal of Public Health* welcomed Louise Potvin as the new Editor-in-Chief, effective January 1, 2014. Under Louise Potvin's direction, the Editorial Board has been given an expanded mandate to improve the Journal's impact in the field of public health practice and research and to improve the quality and relevance of the articles published while maintaining the bilingual character of the publication.
- CPHA's annual conference continues to be the place where public health meets in Canada. The 2014 conference was a great success and this year's conference is going very well. We were pleased to have the First Nations Health Authority and the Pan American Health Organization as collaborators on the Steering Committee. Next year, we will gather again from June 13-16 in Toronto.
- CPHA provided event management services for the 2014 Canadian Immunization Conference. CPHA will once again be providing event management services for CIC in 2016.
- CPHA's 2013 Membership Policy and Advocacy Survey confirmed support for CPHA's initiatives on the environment and the social determinants of health. It also identified population mental health promotion as an area of interest of members and CPHA's policy team has been working on a new initiative.
- In March 2014, CPHA, Immunize Canada, and the Ottawa Hospital Research Institute launched ImmunizeCA, a free, bilingual mobile app created to help Canadians and their families keep track of their immunizations. In early May 2015, Immunize Canada, a coalition managed by CPHA, received a gift of \$100,000 from the Government of Canada in recognition of the birth of Princess Charlotte of Cambridge.

- With funding from the Public Health Agency of Canada, CPHA is undertaking a three-year project to pilot test a national certification program for public health professionals. Staff has conducted key informant interviews and a search and analysis of existing certification programs in Canada in fields other than public health, existing public health certification programs available outside of Canada, and material pertaining to assessing need and considerations for the successful development and implementation of certification programs. These scoping activities will inform next steps in the current project and provide recommendations for the Certified Public Health Professional designation and certification strategy.
- In April 2014, CPHA launched a new project with the goal of enhancing STBBI prevention and reduce STBBI-related stigma and discrimination which undermine prevention efforts by hampering individuals' access to and use of available health and social services. This goal will be accomplished through the development and dissemination of learning products targeted at health care, social service and public health professionals, and their organizations.
- Much of the work of the Association is done in partnership with other organizations. The Canadian Network of Public Health Associations and the Canadian Coalition for Public Health in the 21st Century are two key networks through which CPHA develops and communicates its policy and advocacy messages. To see the breadth and scope of these relationships, a list of CPHA's current partnerships is on page 6 of the Annual Report.
- The Board of Directors is continuing its work on a new strategic plan for the period of 2016 to 2020. The Board met this past week, and spent a great deal of time refining strategic goals and key performance measures that will help guide CPHA in the coming years.

Nominating Committee Report

Suzanne Jackson, Chair-Elect and Chair of the Nominating Committee provided the report. Members of the Nominating Committee include:

- Claire Betker (Manitoba)
- Annie Duchesne (CPHA Student Director)
- Ardene Robinson Vollman (Chair, CPHA Board of Directors), *ex officio*
- Ian Culbert (Executive Director, CPHA) *ex officio*

Suzanne Jackson also thanked Irv Rootman and Louise Potvin, both of whom recently stepped down from the Committee, for their dedication and service.

Since the last AGM, the board composition has changed. Effective January 1, 2015, the following people began their two-year term on CPHA's Board of Directors:

- Jacquie Gahagan (Nova Scotia)
- Jim Mintz (Ontario)
- Eric Young (British Columbia)

In 2014, 12 members ran in the election to fill three positions. The Nominating Committee is looking for the same kind of

interest for the 2015 elections and encourages members to consider putting their name forward.

In November 2014, Suzanne Jackson was appointed by the Board as Chair-Elect. This created a vacancy that the Board filled by appointing the candidate from the election who received the fourth-highest number of votes. Cheryl Armistead from Quebec was appointed for a one-year term effective January 1, 2015.

The dedication and contributions of those Board members who left the Board at the end of 2014 was recognized with appreciation:

- Paul Gully
- Joel Kettner
- Isaac Sobol
- Lynn McIntyre, out-going Chair.

The formal Call for Nominations for the 2015 election will be circulated to all members in late July with a closing date of September 10. Elections will take place in October and November for five Director positions, one of which is the Student Director.

6.0 Question and Discussion Period

Ardene Robinson Vollman invited questions from attendees about the business of the Association.

Paul Hasselback asked for clarification of the deficit for 2015 that has been alluded to without context and why it seems to be a challenge to make projections. Ian Culbert addressed the question on behalf of the Finance Committee by explaining that when a budget is being drafted, CPHA is conservative with respect to revenue and includes no speculative funding. Against these revenues, we have the baseline expenses required to maintain the Association's operations. While CPHA has a range of sources of revenue, none of them are particularly stable; government funding, corporate sponsorships and charitable donations can fluctuate widely from year to year and we are limited in our ability to forecast conditions beyond 6 to 12 months. Our current focus is on increasing top-line revenue and this will include special efforts to increase the number of members who belong to CPHA.

The Chair noted that belt-tightening has been done as far as it can go, including significant downsizing in staff and office space. What is needed now are ideas for revenue generation. Following the recent Board meeting, it is clear that CPHA has to move towards a more entrepreneurial business model. The membership is asked to support this change and bring forward ideas for business opportunities by contacting any Board member, or the Executive Director.

Norman Geisbright commented that the Conference program was very good with a diversity of topics. He works in the area of alcohol which was represented in the program, but given the global burden of disease he believes more attention is needed. He would like there to be more abstracts and

participants from that community. Also, there could be more abstracts on injury and violence, including war and the impact of conflict. These areas could expand membership. The Chair replied that the Conference is limited to presenting topics on which abstracts are received. The Chair encouraged him and his colleagues to submit abstracts, panel presentations, or workshops to future conferences. These are ways to contribute to building membership capacity.

Wanda Martin noted that the Canadian Nurses Association is not on the list of partners on page six of the Annual Report and asked if there is a reason why and if CPHA will pursue a relationship. Ian Culbert replied that CPHA interacts with CNA as a member of the Canadian Coalition for Public Health in the 21st Century (CCPH21) and Health Action Lobby (HeAL). There is an active relationship, but not a bilateral relationship.

Drona Rasali commented on the business model that CPHA is adopting. It seems to be operating more at an executive level and not tapping into attracting a vast resource pool of entry level public health professionals. More can be done to reach out to grass roots level people. The Chair noted that the idea of engaging more front-line and early career professionals in CPHA has been discussed at the Board and has been delegated to the new Membership Working Group. Attendance at the Conference is not indicative of membership – 75% of conference attendees are non-members. Non-member attendees have been given a six month free membership to experience what it means to be a CPHA member and to appreciate the benefits. In this era of restraint, it is often the front-line workers who are not funded to attend conferences. While the revenue from members is important, they are needed more for their expertise, enthusiasm, passion and moral support in what they can volunteer to make this a more viable and energetic organization that can give a voice to important public health issues where other public health people cannot safely do so within their workplaces.

Fiaza Siddiqi asked if CPHA has explored 'Angel Investors'. The Chair acknowledged this as a good suggestion and that applications to various philanthropic organizations have had limited success. Fiaza Siddiqi also commented on the importance of attracting the younger generation to CPHA; students need more of an understanding of all that public health is about. The Chair replied that branding, vision and communications are key elements in telling the public health story. Doing so is top of mind for the Board.

Joel Kettner commented that there is a challenge to distinguish what is (formal) Public Health and 'small p-h' public health as a domain for many people in many fields, sectors and professions that want to be part of public health, but don't see themselves in CPHA. It would be mutually beneficial to have more people who think of public health much more broadly and show that what happens here is quite special that transcends other organizations. There are many organizations representing other fields that CPHA can connect with through membership and for a modest extra cost they could have membership in CPHA in addition to their primary

organization. The Chair expressed thanks for some great ideas; the Membership Working Group will consider them and by this time next year, we hope to have some concrete strategies in place.

Lloy Wylie pointed out that there is a need to advocate for the unique skills MPH students have to bring to employers. Health units tend to hire clinicians, nurses and people in health promotion only. There is not a professional association for public health to advocate for them as professionals in the same way as doctors and nurses. CPHA is well-positioned to be that voice. Advocating for the unique perspective that public health professionals can bring could be a way to draw students as members. They are nervous about their prospects and feeling a bit lost because people do not really know what they do. The Chair thanked L. Wylie for the excellent comments.

Isabelle Mogck suggested a way to get membership is perhaps with nurses, who are 'joiners', and the latest data in Ontario is that half the staff in public health units are nurses. As an example, RNAO membership also gives a reduced rate for CNA, as well as with the Community Health Nurses of Canada. If CPHA were added to the list, it could increase membership. The Chair commented that in addition to nurses there are other disciplines that CPHA would like to see represented in the membership in greater numbers and on the Board. CPHA also plans to engage in conversations with the public health disciplines about how we can expand mutually beneficial relationships.

Pemma Muzumdar commented on the lack of representation of people of colour in the conference plenaries and on the panels. She suggested that CPHA needs to do a better job of highlighting more visibly the amazing work that is done by diverse peoples within our membership. The Chair encouraged Pemma Muzumdar and members from diverse backgrounds to put forward their ideas and submit abstracts and presentations for conferences. Both Pemma Muzumdar and Ardene Robinson Vollman were on the Conference Steering Committee and know there was a concerted effort by the Committee to increase the diversity in the this year's conference. CPHA has a Diversity Working Group that is advisory to the Executive Director; recently a call for volunteers went out and no volunteers came forward. The Chair asks anyone truly interested in diversity at CPHA to volunteer to help to address these issues in CPHA and in public health. Pemma Muzumdar volunteered herself and colleague Sume Ndumbe-Eyoh.

Building on the idea of citizen participation in CPHA, Sharon Yanicki commented that she would like to see more thought given to the opportunities for the entrepreneurial aspect of investment in CPHA.

Nathan Nickel, Manitoba Centre for Health Policy, is very involved in the American Public Health Association (APHA) and is on their conference planning committee. He reflected that as a member of APHA, he knows about the numerous

benefits that APHA offers its members. Even though he has been in Canada for four years, he is not aware of the benefits of membership in CPHA. As part of CPHA's outreach, benefits of membership need to be better communicated. He also expressed concern that CPHA does not have a voice at Parliament. The Chair replied that APHA is also experiencing challenges at present. The Chair of CPHA is a member of their governing board and Ian Culbert is in regular contact with APHA's Executive Director. We hope to learn from them, but they are also learning from us – it is a very good mutual relationship. Again, the marketing and branding efforts will help more clearly communicate what can be gained from CPHA as well as the ways in which members can contribute that could advance their own careers.

7.0 Closing Remarks and Date of Next Meeting

In closing, Ardene Robinson Vollman thanked those in attendance for their thoughtful comments. She expressed appreciation to hard-working and dedicated Board colleagues who monitor the performance of the Association on behalf of the membership. She is looking forward to working with Suzanne Jackson as Chair-elect over the next couple of years. The Chair also acknowledged the many volunteers who dedicate their time and expertise to CPHA's committees and working groups, and in many other ways that help CPHA achieve its goals. To CPHA's collaborators, partners and sponsors, your loyal support is greatly appreciated – we could not do what we do without you. The Chair expressed the Board's sincere appreciation to Ian Culbert and the staff at CPHA; they do a tremendous job to keep CPHA active and on track and to keep CPHA's doors open.

“The greatest thanks are to our members. Your commitment to CPHA is why we exist, why we work hard to give voice to the issues that are important to you, and why we are committed to sustaining this association as far into the future as possible.”

The next Annual General Meeting will take place during Public Health 2016, on Wednesday, June 15, 2016 in Toronto, Ontario.

Motion: **Joel Kettner/Jacqueline Gahagan**
That the CPHA Annual General Meeting of May 27, 2015 be adjourned (8:45 a.m.)

.../CARRIED