



# Alberta Public Health Association Annual Report 2015-16



## About the APHA

The Alberta Public Health Association (APHA) is a provincial not-for-profit association representing public health in Alberta. The APHA was established in 1943 and was incorporated as a registered charitable organization in 1955. The APHA is a provincial affiliate of the Canadian Public Health Association and works with the other provincial and territorial public health associations across Canada. The APHA is the only independent voice for public health in Alberta.

APHA has a voluntary membership that includes practitioners, academics, students, representatives of government departments, non-government organizations, community members, and others. Interests and professional foci of members include but are not limited to:

- Health protection;
- Disease and injury prevention;
- Health promotion;
- Social determinants of health;
- Population health
- Health equity
- Health-related policy

A voluntary board is elected by the membership and governs the Association. The membership gives direction to the board to act on specific health issues through resolutions passed annually at the Annual General Meeting and through ongoing interaction.

Membership is open to anyone with an interest in public health. We welcome memberships from those working in health, as well as those working outside of the health system but whose work influences well-being, such as planners, transportation engineers, individuals working in social policy or any aspect of the social determinants of health, social workers, recreation and parks professionals, and others.

We are always interested in hearing from enthusiastic, reliable, and hard-working members who would like to take on formal roles within the Association, including but not limited to serving on the Board of Directors. Please contact us for more information ([info@apha.ab.ca](mailto:info@apha.ab.ca)).

**APHA Vision:** Health for all Albertans

**APHA Mission:** The APHA is a leading voice for public health and works to strengthen the impact of those who promote and protect the highest standard of public health.

## APHA Mandate

- Providing leadership on issues affecting the public's health
- Advocating on issues that affect health
- Providing educational and networking opportunities
- Providing mechanisms to seek and discuss issues and views of members and partners
- Providing expertise and consultation in public and community health



## APHA 2015/2016 Board of Directors

### **Lindsay McLaren** **President**

Lindsay McLaren is Associate Professor in the Department of Community Health Sciences and the O'Brien Institute for Public Health at the University of Calgary. She holds an Applied Public Health Chair funded by the Canadian Institutes of Health Research, the Public Health Agency of Canada, and Alberta Innovates – Health Solutions. Her research focuses on population health and health inequities in various thematic areas including community water fluoridation and dental public health, dietary sodium reduction policy, and body weight related issues. She is a Senior Editor for the Canadian Journal of Public Health.

### **President-Elect** (vacant during 2015/16)

### **Angeline Webb** **Treasurer**

Angeline Webb is a Senior Public Policy Advisor with the Canadian Cancer Society, Alberta/NWT Division, where she has been engaged in health policy advocacy for the last 10 years. She develops, implements, and administers all policy development programming for the Canadian Cancer Society in Alberta, the Northwest Territories and at the federal level. Angeline's focus is healthy public policy with most of her attention devoted to tobacco reduction policy.

### **Kenda Swanson** **Acting Secretary**

Kenda Swanson is currently a Masters student in the Population/Public Health stream in the University of Calgary's Department of Community Health Sciences. She has a Bachelor of Health Sciences degree from the University of Calgary, but has also studied German culture and language, economics and chemistry. Her primary research interest is a better understanding of the social/environmental correlates of physical activity and sedentary behaviours among children and youth. She has been a Board Member of the APHA since 2013, and is currently co-chair of the Student Committee and a member of the Governance committee, in addition to serving as acting Secretary during 2015/16.



**Amy Beck**  
**Director-at-Large**

Amy Beck is a PhD student in the Faculty of Nursing at the University of Calgary. She has a Master of Nursing degree, as well as certification in Community Health Nursing from the Canadian Nurses Association. Amy has over ten years of clinical nursing experience, primarily focused on adolescent and school health. In her Master's program, Amy explored student engagement in school-based health promotion. Her doctoral research aims to investigate adolescent mind-brain wellness. Amy has served on a variety of interdisciplinary committees, notably as a clinical expert on the CPHA expert working group that developed and published recommendations to reduce the harmful effects of alcohol in Canada. On the APHA board, she holds the elected Membership Chair position and is a member of the Communications & Membership Committee and the Public Issues Committee.

**Benjamin Kung**  
**Director-at-Large**

Ben Kung is the Program Manager of Infection Prevention & Control with the College of Physicians & Surgeons of Alberta. He holds professional registration with the Alberta College of Paramedics, Canadian Institute of Public Health Inspectors, and Certification Board of Infection Control & Epidemiology. Having worked at both the provincial and national levels, Ben has diverse experience in public health systems, including past employment with the Canadian Food Inspection Agency, Vancouver Island Health Authority, Alberta Health Services and Canadian Standards Association. Ben serves as the Lead for the APHA's Governance Committee.

**Cynthia Watson**  
**Director-at-Large**

Cynthia has "reverse engineered" her life's dedication to wellness by starting with palliative care and seniors, to working with adults and young developing athletes to now focusing on families, youth and the health of future generations. She started her career in music therapy working with seniors with cognitive disorders and became part of the senior Management Team that designed and implemented a new model for long term care at The Lodge at Broadmead in Victoria, which led to the role of Programs and Services Manager with the Calgary Health Region. After her 15 year progressive career in healthcare, she made the decision to pursue work from a proactive and preventative health perspective at Talisman Centre for Sport and Wellness. Currently, she is CEO of Vivo for Healthier Generations, a charitable not-for-profit enterprise pioneering local solutions to Canada's challenge of sedentary behavior and physical inactivity. Cynthia serves as the Lead for the APHA's Funding and Partnerships Committee.



**Lisa McLaughlin**  
**Director-at-Large**

Lisa McLaughlin holds BA in Psychology, with Distinction, from the University of Alberta and is currently a student in the University of Alberta's Master of Public Health - Health Promotion program and the University of Calgary's Master of Planning program. She is also Program Manager of the Alberta Recreation and Parks Association's Communities ChooseWell initiative. Lisa has worked in public health in Alberta since 2006, including roles with Alberta Health and the Alberta Project Promoting active Living and healthy Eating in Schools (APPLE Schools), and she chaired a community health council in the former Capital Health Region. Lisa is passionate about working with communities using an asset-focused approach to create environments that support health. Lisa serves as Lead for the APHA's Communication and Membership Committee.

**Maria McInerney**  
**Director-at-Large**

Maria recently completed her Master of Science in Epidemiology at the Department of Community Health Sciences at the University of Calgary, and previously completed a BSc in Applied Human Nutrition Honor's degree at Mount Saint Vincent University in Halifax, NS. For her research, she looked at health equity and the importance of diet in chronic disease prevention by investigating the relationships between neighbourhood environments and diet quality. Maria has extensive experience in health research and organized population health programs with Alberta Health Services Screening Programs, where she is currently a Scientific and Technical Writer for Screening Programs. Maria is a dedicated and active member in her academic, professional, and personal communities supported through her memberships with: The Canadian Obesity Network, O'Brien Institute for Public Health, University of Calgary Community Health Sciences Student Executive, and the Oathill Lake Conservation Society (Dartmouth, NS). Maria serves as Co-Lead of the APHA's Student Committee.

**Antoinette Davis**  
**Director-at-Large**

Antoinette Davis [BA, MA, MPH] has worked globally for research councils, universities, government departments and UN agencies. She is currently based in Edmonton where she works for the provincial government. Within the APHA she is part of the Public Health Issues Committee and the Membership & Communications Committee.

**Qendresa Beka, Intern**

Qendresa is currently completing an MSc in Epidemiology with the School of Public Health, University of Alberta. She also works as a Research Analyst with the Government of Alberta Ministry of Health. Having lived in Alberta for the majority of her life, she is passionate about working to improve the health and quality of life of Albertans.

## President's Report

I am pleased and proud to report on the Alberta Public Health Association's 2015-16 activities and status. We have had a productive year of activities that I believe will position us well to contribute to population and public health in Alberta moving forward.

I have structured this report using the areas of short-term (2-3 years) focus that our Board ratified following our strategic planning session in December 2015: Connecting better with members; defining our scope of public health; identifying a process for managing and filtering which public issues we will focus on; education to members; and internal actions.

**Connecting better with members:** Connecting better with members requires first of all knowing who our members are! A significant activity during 2015/16 was an overhaul of our membership management system, to automate membership processing and ease communication with members. This activity has facilitated a revival of our e-newsletter, for which we are getting into a routine of a quarterly schedule (please see membership and communication reports below). We have and will continue to use the website and e-newsletter to communicate with members about our activities and opportunities for our members to become more involved.

**Defining our scope of public health:** We have continued to be active in important public health issues such as tobacco reduction, skin cancer prevention, and chronic disease prevention policy; and through collaboration with our excellent partners (e.g., Campaign for a Smoke-Free Alberta, the Alberta Policy Coalition for Chronic Disease Prevention, Wellness Alberta) have seen some policy impact in these areas (please see Public Issues committee report below). During 2015/16 we also participated in efforts related to environmental health; namely the phase-out of coal-fired electricity generation, led by the Canadian Association of Physicians for the Environment. Moving forward, we are actively working to strengthen our capacity and involvement in the social determinants of health. We have recently made contact with groups working in the social sector (e.g., the Social Policy Collaborative in Calgary), and look forward to pursuing opportunities to collaborate or join forces with those communities on important issues such as housing, income, and child care.

**Identifying a process for managing and filtering which public issues we will focus on:** This activity is still in progress, and will be an important priority as we continue to refine our "niche" as a hub for public health advocacy across the breadth of population and public health, including behavioral, environmental, and social determinants of health.

**Education to members:** 2015/16 saw the revival of the APHA student committee, which led the development and execution of an APHA webinar for trainees across Alberta (please see student committee report below). This was a successful and very positive experience, and we are exploring the feasibility of turning this into an annual event.

**Internal actions:** A significant amount of "behind-the-scenes" work was undertaken by the Governance committee (see report below) during 2015/16, including a revision of our Association bylaws (on which the membership will vote at our 2016 AGM), a re-write of our (very outdated) Policies and Procedures document (in progress), and the development of an orientation package for new board members. The Funding and Partnerships committee (see report below) also engaged in significant foundational work towards identifying and strengthening existing and potential partnerships (to increase capacity) and



exploring some potential funding opportunities. This excellent work is ongoing. We have and will continue to explore other ways to build capacity, including possibly re-applying to host an intern through the Alberta government's SCIP program (based on our very positive experience this year, see communications report below) and applying to host an MPH practicum student from the University of Alberta.

I am extremely proud of our hard-working Board and am honoured to be part of this important Association. I feel that we are gaining some significant momentum and that our future is very bright.

Lindsay McLaren  
APHA president, 2014-16



## **Governance Committee Report**

Following the 2015 AGM, two activities were identified as immediate priorities for the APHA Governance Committee:

1. Improvement of Board orientation process
2. Update of governance documents (e.g. association bylaws, policies & procedures)

The following is a summary of the work completed in the past year.

1. Improvement of Board orientation process
  - A standardized board orientation package has been developed
  - Governance Committee was delegated the responsibility (via Committee Terms of Reference) of onboarding newly elected board members
2. Update of governance documents
  - Revisions to APHA bylaws (presented on May 24, 2016)
  - Revisions to APHA policies & procedures, including development of APHA Committee Terms of Reference
3. Development of processes for Board and Committee member recruitment and nomination

In 2016-17, the Governance Committee has prioritized the following activities:

1. Leading orientation of newly elected board member(s)
2. Applying to register revised bylaws with Corporate Registry, Service Alberta
3. Completing revisions to APHA policies & procedures, including development of Code of Conduct
4. Developing a model for board succession planning

Respectfully submitted,

Benjamin Kung  
On behalf of the 2015/16 APHA Governance Committee





## Treasurer's Report

I am pleased to present the Alberta Public Health Association (APHA) Treasurer's Report for the 2015-2016 fiscal year.

The Alberta Public Health Association (APHA) continues operations as a voluntary organization without government funding. However, we continue to provide services to our members, support the public health community and maintain general operations.

In the 2016-2016 fiscal year the APHA:

- Continued to manage flow-through grants for the John Waters Memorial Fund (John Waters Memorial Award and John Waters Memorial Scholarship);
- Completed year-end filing to Alberta Registries for ongoing Societies Act registration;
- Completed year-end filing of Registered Charity Information Return to the Canada Revenue Agency;
- Maintained membership subscription and renewal;
- Supported public health advocacy and other initiatives.

For ease of accounting and reporting accounts held by APHA are in four separate accounts:

- #24 Operating
- #26 John Waters Memorial Fund
- #31 T-Bill Savings Account
- Term/GIC Investments

At the beginning of 2015-2016 fiscal year APHA held an operating budget of \$11,828.34. The APHA fiscal reserve is within a long-term renewable GIC investment (\$15,000) and retained within the T-Bill savings account (\$923.97). Our total reserve at the end of 2014-2015 fiscal year is \$15,923.97. The APHA also manages finances for the John Waters Memorial Fund. This account has a year-end balance of \$37,700.77.

At year end, the APHA continues to be cognizant of financial constraints, with a year end operating balance of \$12,714.50. However, I am pleased to report that the APHA did not register a deficiency of revenue over expenses for the fiscal year. In the 2015-2016 fiscal year APHA will be continue to rely on membership contributions as a funding source. However, there will be a renewed focus on funding diversification in the upcoming fiscal year.

As an organization managed solely by volunteers, the APHA continues to face capacity and resource issues. However, in the face of these challenges, the APHA continues to focus on progress and developing a strategy to search for diverse sources of funding. The Board is enthusiastic and hopeful in building sustainable revenue to continue supporting Alberta's public health community.

Respectfully submitted,

A handwritten signature in cursive script that reads "Angelina Webb".

Angelina Webb – APHA Treasurer



## Budget

	2016/17 Budget	2015/16 Actuals
Opening Balance April 1, 2015		<b>\$11,828.34</b>
Closing Balance March 31, 2016	<b>\$12,714.50</b>	
<b>Revenues</b>		
Provincial Grant	\$0	\$0
Other Grants	\$0	\$0
AGM/Summer School Projects	\$0	\$0
Membership Fees	\$5,000.00	\$4,899.48
Donations	\$400.00	\$0
Other	\$0	\$0
Interest Income	\$100.00	\$177.80
<b>Total Revenues</b>	<b>\$5,500.00</b>	<b>\$5,077.28</b>
<b>Expenses</b>		
Other Personnel	\$0.00	\$0.00
Board Expenses Travel	\$1,500.00	\$2,044.57
AGM	\$300.00	\$200.00
Board Teleconference	\$100.00	\$0.00
Website Support/Design	\$1,000.00	\$909.27
Bookkeeping/Audit	\$1,000.00	\$655.70
Insurance	\$936.00	\$0.00
Archiving	\$500.00	\$355.37
Administrative Costs	\$100.00	\$26.18
Professional/Consultant Fees	\$0.00	\$0.00
Project Expenses	\$0.00	\$0.00
<b>Total Expenses</b>	<b>\$5,436.00</b>	<b>\$4,191.09</b>
<b>Projected Balance at 2016-2017 Year End</b>	<b>\$12,778.50</b>	

## **Public Issues Committee Report**

The Alberta Public Health Association was involved in a number of public issues-related activities during the 2015-2016 fiscal year in an effort to support individuals and organizations working to improve public health in Alberta and Canada.

### **Tobacco Reduction**

APHA participated in numerous tobacco reduction policy development events, including government engagement, media advocacy and mobilization initiatives, over the fiscal year through our partnership with a Campaign for a Smoke-Free Alberta (CSFA). CSFA is a coalition of prominent health organizations who are working to reduce tobacco use in Alberta.

- **Flavoured Tobacco**

APHA supported the policy development initiatives related to Alberta's ban on all flavoured tobacco products which came into full force September 30, 2015. In May of 2015 the menthol exemption was repealed from Alberta's Tobacco and Smoking Reduction Act's regulations and CSFA members participated in a media conference with the Health Minister announcing the repeal. However, sections of the act remain un-proclaimed and exemptions still exist. As a result, APHA continues to participate in various government engagement events along with stakeholders promoting the full implementation and proclamation of the Tobacco and Smoking Reduction Act.

- **Tobacco Tax Increase**

APHA supported a CSFA submission to the Alberta government regarding the importance of a comprehensive tobacco taxation framework, with a particular focus on the need to increase tobacco taxes to prevent youth tobacco use. Also included in the submission was a recommendation to apply a portion of any tax increase towards tobacco use prevention and cessation programming. In October 2015, the Alberta government raised tobacco taxes by \$5.00 per carton.

### **Skin Cancer Prevention**

In March 2015 the Alberta government passed Bill 22 – the Skin Cancer Prevention Act which includes a full ban for persons under the age of 18, a ban on advertizing targeted at youth and regulatory authority on health warnings and signage and a ban all unsupervised tanning equipment. Proclamation is still under review. APHA will monitor regulation development through the involvement of members on the Alberta Health - Regulatory Advisory Committee (RAC) for Artificial Tanning Regulation.

### **Chronic Disease Prevention Policy**

#### **Alberta Policy Coalition for Chronic Disease Prevention and Wellness Alberta**

The APHA is a member organization of the Alberta Policy Coalition for Chronic Disease Prevention (APCCP). Cathy Gladwin is the APHA APCCP representative. The APCCP is composed of fourteen member organizations who work together in advocating for healthy policy changes for a healthier Alberta. The following priority areas work occurred in 2015-2016:

- **Advocate for a levy on sugary drinks in Alberta**

With Budget 2016, raised awareness about the negative impacts of sugary drink consumption and continues to compile evidence regarding SSB tax in Alberta. The APCCP is participating in the national sugary drink reduction-working group led by the CDPAC and the Childhood Obesity Foundation.

- **Advocate for mandated, resourced, and monitored implementation of the Alberta Nutrition Guidelines in recreational facilities.**  
The APCCP has received funding through the Heart and Stroke Foundation to promote healthy food environments through policy in City of Edmonton recreational facilities (Fall 2015 – Fall 2016). The APCCP is currently developing policy tools and resources related to this project, as well as exploring opportunities to engage with the City of Edmonton on the issue of healthy food environments in recreational facilities.
- **Advocate for healthy school food and the development of a Universal School Food Strategy for Alberta.**  
In the 2015 provincial budget, the Alberta government announced funding (20 million 2016-2017, 40 million 2017- 2018) for a school nutrition program to support families and give kids a healthy start. The APCCP continues to meet with relevant stakeholders regarding our call for a Universal School Food Strategy, as well as support the efforts of members, such as Alberta Food Matters, in this area. The coalition engaged the Alberta School Council Association Board on and as a result the board passed the following motion: That the ASCA Board of Directors, support, in principle, the APCCP's efforts to support the development of a Universal School Food Strategy. The coalition will continue to advocate for the development of a universal school food strategy.
- **Advocate to eliminate unhealthy food environments and beverage marketing to children and youth**  
In the new Federal health minister's mandate letter, the Federal government has committed to bringing in new restrictions on the commercial marketing of unhealthy food and beverages to children, similar to those in place in Quebec. The APCCP continues to be involved in the National Stop Marketing to Kids Campaign, led by the Heart and Stroke Foundation and the Childhood Obesity Foundation.

### **Wellness Alberta**

The APHA is actively involved in the operations and activities of the APCCP. Through the APCCP the APHA advocates for healthy policy changes in Alberta including the creation of a Wellness Foundation in collaboration with Wellness Alberta (a campaign that brings together thousands of individuals including business, health and recreational leaders and non-governmental organizations who support a meaningful investment in the prevention of disease and injuries). Through Wellness Alberta, the APCCP will continue to advocate for a sustainable investment in an Alberta Wellness Foundation to ensure current and future generations of Albertans benefit from improved health outcomes, reduced demands on health care and an enriched quality of life. Wellness Alberta and APCCP has had numerous key discussions with members of Cabinet and key health department staff about developing an effective plan to implement a Wellness Foundation in Alberta. The APHA also participated in MLA engagement events with Wellness Alberta as well as mobilization and communications events.

### **Improvements in Mental Health**



In November, 2015 the APHA provided a submission to the Alberta Mental Health Review. APHA focused on prevention with the need to invest in the social determinants of health and creating public policy in multiple sectors that supports wellness as well as improved integration of community supports.

### **Phase out of coal-fired electricity generation**

In November 2015, APHA supported Canadian Association for Physicians for the Environment's (CAPE) campaign regarding phase out of coal-fired electricity generation. APHA added our support to a letter sent to the Alberta government to calling for accelerated phase out of coal-fired electricity generation in Alberta. In June 2016, APHA participated in a submission, also led by CAPE, to the Federal/Provincial/Territorial Climate Working Group on Specific Mitigating Opportunities regarding the closure of Canadian coal-fired power plants. Coal causes more pollution than any other source of electricity, including greenhouse gas pollution as well as air contaminants such as sulphur dioxide and mercury that pose health risks. Research shows the burning of coal contributes to over 100 deaths and more than 4,000 asthma episodes in the province each year.

### **APHA Representation on the Responsible Gambling Advisory Committee (RGAC)**

Cathy Gladwin has represented the APHA on the Responsible Gambling Advisory Committee since January 2015. During the last year she attended 2 meetings and the Responsible Gambling Stakeholders Symposium. The RGAC is co-chaired by the Alberta Gaming and Liquor Commission, Alberta Health and Alberta Health Services. The RGAC also includes membership from various gaming organizations, not-for-profits, and the Alberta Gambling Research Institute.

Work during the last year has been on the Action Plan to accompany the Both Sides of the Coin document which was written in 2014 and is Alberta's responsible gaming strategy: the road map for social responsibility and responsible gambling. After drafting the areas for which action is required in 2015, the most recent meeting of the committee focused on populating the action plan with commitments for actions from the organizations in attendance at the meeting. The Action Plan should be completed over the summer of 2016 with implementation to follow.

Cathy's experience with the committee has been both positive and negative. A core group of members are very committed to the promotion of responsible gaming and the reduction of problem gambling. Collectively the group has a great deal of knowledge about gambling problems and treatment of individual problem gamblers. There is a strong commitment to the rights of individuals to make their own choices and to educating gamblers about responsible limits for healthy and enjoyable gambling. On the other hand, the committee has not taken a population health approach to dealing with problem gambling. There is no source of surveillance data being gathered by any agency to measure the gambling problem in Alberta making the task of defining and targeting interventions difficult. There has been no discussion of the best practices for the prevention of problem gambling that should be implemented.

Cathy feels that the APHA has a very important role to play on the RGAC. There is a need to have the voice of those most vulnerable to problem gambling represented. Gaming is a large and powerful industry in Alberta and APHA's voice is needed to balance this for the betterment of all Albertans. Cathy recommends that the APHA continue to take an active role on the RGAC.



### **Capacity Building**

- In November 2015, the APHA encouraged our members to participate in the Alberta government mental health review public consultation. A newsletter with key messages and links to the public consultation survey was sent to members.
- In November 2015, APHA supported a call for a national meeting (Walk21) in Calgary to advance walking and walkability. The APHA provided support for this initiative to further develop healthy sustainable and efficient communities where people choose to walk. If the Calgary bid is successful, the APHA will promote the event.
- In December 2015, APHA provided a letter of support for an AIHS Cancer Prevention Research Opportunity (CPRO) research application for improving HPV vaccine uptake in school-based immunization. This is collaboration between AHS and U of T. The APHA supported this application as we recognize that this study may further our understanding of how to optimally deliver immunization programming in a school setting. This research will contribute to our national body of knowledge related to vaccine delivery and the results will be used to guide and inform immunization programming.

Respectfully submitted by,

APHA Public Issues Committee

## Membership Report

I am pleased to present the Membership Report for 2015-2016 to the members of the Alberta Public Health Association. As of June 12, 2016, we had 132 members in good standing. This is an increase of 26 members since the 2015 AGM. Notably, we have seen a significant increase in the number of student members. Currently, we have 51 student members, this is up from 20 the previous year. Students now make up approximately 40% of our membership.

The following chart outlines the specifics of current membership:

**Membership Categories**

	Regular	Student	Retired	Honorary	Total
Direct	12	20	2	5	39
Conjoint	60	31	2	0	93
<b>Total</b>	<b>72</b>	<b>51</b>	<b>4</b>	<b>5</b>	<b>132</b>

It has been an exciting and busy year from the point of view of membership, having converted our membership database to the Wild Apricot (WA) Membership Management System. In July 2015, the membership committee started exploring options for member management software. This process involved assessing our membership management needs, as well as evaluating the capacities of available software. In October 2015, the membership committee received board approval to move forward with subscribing to Wild Apricot.

Over the next several months, the membership committee was involved in cleaning the data from our previous system, this needed to occur prior to importing membership records into the new WA system. In February, the WA software went live along with the new APHA website. Since March, 70% of our direct members have used the system to renew or purchase their membership, the remaining members are either honorary [12%] or not up for renewal [18%].

Throughout this process, we became aware of two concerns with membership renewal, which upon investigation were related to third party software issues (i.e. PayPal). We have resolved these concerns, however we decided it would be a good idea to have a dedicated email for members to contact the committee with membership related issues: [apha.membership@gmail.com](mailto:apha.membership@gmail.com)

In regards to membership recruitment, we had the opportunity for two membership drives in the past year. In April, we 'piggy-backed' onto a CPHA initiative to offer University of Alberta public health students a discounted membership. We also offered discounts on new memberships to attendees of the "A Day in the Life of a Public Health Professional" webinar (see Student Committee report below). These two membership drives resulted in 12 new memberships.

In 2016-2017, we will continue to monitor the member management system. In the fall, we will be increasing our payment plan with Wild Apricot to accommodate an increase in membership, we are very close to exceeding our allowed members limit. In the upcoming year, we are also planning to look



at the Membership Only section of the software, and looking at membership information and tracking. Both of these activities will support membership diversification and engagement.

Respectfully submitted,  
Amy Beck and Cathy Gladwin



## Communications Report

In 2015-16, the Membership and Communications Committee made several significant strides towards improving our membership management processes and communications activities. For an update on membership management activities, please see the membership report above. This report focuses on communications activities.

In May 2015, APHA hired an intern through Volunteer Alberta's Serving Communities Internship Program (SCIP) to assist us with our membership and communications efforts. The SCIP program is a valuable resource for not-for-profit organizations, as there is no cost to host an intern, and the intern receives a \$1000 bursary from Volunteer Alberta upon completion of the internship. Our intern, Qendresa Beka, an MSc Epidemiology student at the University of Alberta, was instrumental in developing our new website and membership management system, as well as developing several newsletters and supporting other organizational activities throughout the past year. We are thrilled that she will continue to assist APHA with our website, membership system and communications activities in the coming year on a volunteer basis.

A significant development over the past year has been the creation of a new website for APHA, providing greater functionality, user friendliness and a more modern public face for the organization. The new website enables members to log into their profile and manage their personal information, and also includes automatic membership renewal notifications. We thank our members for their patience as we have implemented this system and worked through some minor kinks.

During the past year, we have also increased our membership communications activities by distributing three newsletters in October, February and May as well as an Opportunities and Announcements e-blast in March. The average open rate for these was 58.4%. We also engaged members to provide input into the development of an action and advocacy agenda for APHA through a public health issues member survey in February, to which 35 individuals responded.

Throughout 2015-16, APHA also worked to communicate with members and the public via social media. We are pleased to report that the number of connections to APHA has increased over the past year as follows:

- 51 Facebook followers (up from 28 in 2014-15)
- 169 Twitter followers (up from 68 in 2014-15)
- 21 LinkedIn followers (up from 9 in 2014-15)

Regarding outreach activities, in October 2015, one APHA board member attended the Alberta Recreation and Parks Association Conference and Energize Workshop upon receiving a complimentary registration from ARPA as a result of our partnership. The conference theme, *Revitalizing Recreation*, reflected the pillars of the *Framework for Recreation in Canada 2015: Pathways to Wellbeing*, which has a strong focus on wellness and positions the recreation sector as a partner in addressing public health issues. The conference provided an excellent opportunity to network, promote APHA, and learn about how recreation and parks contribute to health and well-being. Details about the conference and APHA's participation were shared with members in the February 2016 newsletter.

Other events at which the APHA had presence/representation during 2015/16 were:



- 2016 Annual Provincial Forum, Campus Alberta, Health Outcomes and Public Health “Research and advocacy, research versus advocacy, and walking the fine line” (May 2, 2016, Calgary)
- Congress 2016, of the Humanities and Social Sciences, two presentations from the APHA history project (Canadian Society for the History of Medicine section), May 29, 2016, Calgary
- O’Brien Institute for Public Health, 2016 Spring Forum, “Energizing the discussion on social determinants of health: perspectives on inequities in Alberta” (June 9, 2016, Calgary)
- Public Health 2016, annual conference of the Canadian Public Health Association, several APHA members present; poster presentation from the APHA history project.

In 2016-17, APHA will continue to offer timely and relevant communications with members on a quarterly basis. We will also focus on increasing and diversifying our membership and engaging existing members more actively in the Association. We welcome input from current and prospective members at any time! A new email address has been developed for the communications committee and members are invited to submit suggestions or information to share via the newsletter or social media. The email address is: [apha.comm@gmail.com](mailto:apha.comm@gmail.com). Watch our website for information regarding newsletter content submission deadlines.

Respectfully submitted,

Lisa McLaughlin  
Communications Lead  
Membership and Communications Committee



## **Funding & Partnerships Committee Report**

This is a new (or newly revived) committee. As such, 2015/16 was devoted to activities designed to establish the committee's structure and function.

### **The purpose of this committee is:**

- 1) To assist APHA in achieving its fundraising goals and objectives through strategic initiatives and partnerships that are aligned with our overall vision.
- 2) To represent APHA positively in the community.
- 3) To establish positive relations and build awareness with stakeholders.
- 4) To collaborate and coordinate efforts with other committee events/ initiatives to ensure consistency amongst stakeholders and donors.

### **2015-16 Activities**

As a new member to the organization and the Board, this year was spent understanding the context of where APHA has come from, where it is currently and what it aspires to be in the future. As a result, a number of future initiatives have been identified to advance the work of the organization.

#### **1) Manage and evaluate strategic partnerships with past and current donors.**

Future work:

- The History of APHA Project will provide more information on past and current donors.
- Files of the previous Executive Director will also hold information on past donors.

#### **2) Build a communication plan to ensure past stakeholders and donors who have contributed are involved with the developments of the association**

Future work:

- In 2016 the Membership & Communications Committee implemented the Wild Apricot System to help manage contact information and send regular updates to members. The Wild Apricot System will be a useful tool to populate with donor and stakeholder contact information to ensure they receive regular updates for APHA.

#### **3) Research, establish and maintain strategic relationships with potential future internal and external stakeholders.**

One of the activities undertaken was a compilation of current organizational and personal connections. Connections identified to date include, but may not be limited to, the following:

#### **Organizational connections (APHA)**

- Alberta Policy Coalition for Chronic Disease Prevention (APCCP)
- Alberta Recreation and Parks Association
- Campaign for Smoke-Free Alberta
- Canadian Public Health Association (CPHA)

- Indoor Tanning is Out
- National Collaborating Centre for Determinants of Health (NCCDH)
- University of Alberta School of Public Health
- University of Calgary O'Brien Institute for Public Health
- Wellness Alberta

**Personal connections (Board members)**

- Alberta Cancer Prevention Legacy Fund (ACPLF) (Angeline)
- Alberta Community and Cooperative Association (ACCA) (Lisa-ARPA)
- Alberta Health (Antoinette, Qendresa)
- Alberta Health Services – Screening (Maria)
- Alberta Innovates Health Solutions (AIHS) (Angeline)
- Alberta Medical Association (Angeline)
- Alberta Pharmacists Association (Angeline)
- Alberta Urban Municipalities Association (Lisa)
- Canadian Association of Public Health Dentistry (Lindsay)
- Canadian Cancer Society (Angeline)
- Canadian Journal of Public Health (Lindsay)
- CDPAC (Angeline)
- City of Calgary – Neighbourhood Partnerships Coordinators (Lisa-ARPA)
- City of Edmonton – Community Recreation Coordinators (Lisa-ARPA)
- College and Association of Registered Nurses of Alberta (CARNA) (Angeline)
- College of Physicians and Surgeons of Alberta (Ben)
- College of Registered Dental Hygienists of Alberta (CRDHA) (Lindsay)
- Dr. David Swann (Angeline)
- Edmonton Federation of Community Leagues (Lisa-ARPA)
- Federation of Calgary Communities (Lisa-ARPA)
- First Nations and Metis communities (Lisa-ARPA)
- Injury Prevention Centre (Cathy)
- Propel Centre for Population Health Impact (University of Waterloo) (Angeline)
- Public Health Agency of Canada (Lindsay)
- SHINE – Students for Health Innovation and Education – U of C (Maria)
- University of Calgary – Faculty of Environmental Design, Urban Lab (Maria/Lisa)
- University of Calgary – Faculty of Nursing (Amy)
- University of Lethbridge (past board member)
- Vivo (Cynthia)
- YMCA (Maria)

Board Members and particularly the Chair explored various potential collaborations related to the behavioural and social determinants of health.

**Future work:**

- Explore potential align with the CPHA conference next time it is held in Alberta.
- There is opportunity to have a closer tie with the ARPA Conference
- More can be done to broaden the reach of disciplines related to public health:
 

Biostatisticians	Environmental Health Disciplines	Urban Planning
Epidemiologists	Health Policy & Advocacy	Social Policy
Occupational Health & Safety	Disaster Management	Global Health



Infection Prevention & Control

Communicable Diseases

**4) Initiate and implement a fundraising strategy to ensure the association can reach its operational fundraising goals.**

Board Members actively reached out to counterparts in the Canadian Network of Public Health Associations like Ontario and BC to learn about different models of sustainability.

The Board identified that currently it is 100% volunteer driven and that a paid staff to assist with operations would greatly increase the capacity of the organization.

Future Work:

- Finding ways to diversify revenue streams via operation grants, sponsorships, partnerships for shared resources with other organizations.
- A Community Initiatives Program Operating Grant will be submitted in 2016 for administrative support.
- It was identified that with the current economic climate, the private sector may sometimes provide in-kind resources such as project managers and those with specific skillsets.

**5) Building an agile case for support that aligns with the APHA vision and overall plan for fundraising.**

The focus of this year was spent on refreshing the strategic priorities and philosophical underpinnings of APHA.

Future Work:

- Once clarity of purpose is achieved it will be easier to develop the strategic relationships and alliances necessary to advance the mission and the vision.

**6) Reviewing Committee Terms of Reference on an annual basis to ensure that it is up-to-date, useful, and accurately reflects the duties and responsibilities of this Committee, vis-à-vis the Board of Directors.**

The committee terms of reference were developed in October 2015.

Respectfully submitted,  
Cynthia Watson, Lead, Funding & Partnerships Committee

## Student Committee

The 2015-2016 year marked the re-introduction of the APHA Student Committee to the APHA Board. The goal of the APHA Student Committee for the 2015-2016 year was to increase the visibility of the APHA among the post-secondary student population in Alberta, and ultimately, to increase the capacity of the APHA to achieve its Mission and Vision through the acquisition of new and engaged APHA members.

The primary task of the APHA Student Committee for 2015-2016 was to organize and facilitate the APHA's first webinar, "*A Day in the Life of Public Health Professional*" which was marketed towards current students, recent graduates, and new professionals interested in public health. The webinar sought to engage this demographic as potential new potential APHA members through an interactive 90 minute session. The webinar event had multiple objectives including to provide participants with: a basic introduction to public health; an overview of the mission and vision of the APHA; an understanding of potential careers in public health across diverse sectors; opportunity to discuss the process of acquiring the relevant skill set to be successful in public health; and, opportunity for students to network with current public health professionals.

The webinar took place from 11:30-13:00 on March 30<sup>th</sup>, 2016. Current APHA President, Dr. Lindsay McLaren, provided a brief Public Health 101 introduction, followed by presentations from three guest speakers who represented government, academic, industry, and not-for-profit sectors within public health: Dr. Huiming Yang (Alberta Health Services, Population, Public and Aboriginal Health), Dr. Kim Raine (University of Alberta, School of Public Health), and Jackie Killick (Crooks) (iCARE, Ever Active Schools, Shell Canada). More than 70 participants registered and approximately 35 registrants were in attendance. The attendance was likely negatively impacted by a hack to the University of Calgary's IT infrastructure which caused an extended system-wide outage. Despite this untimely outage, the event continued as planned and ran mostly smoothly, including a 20 minute moderated question and discussion period amongst the guest speakers and webinar participants. In conjunction with the webinar event, the APHA offered a promotional discounted membership to all those registered (valid until June 20, 2016) as an additional effort to encourage participants to join the APHA. The Student Committee is currently awaiting the final feedback from an online survey that was electronically distributed to all who registered for the event. Once the survey responses are received the Student Committee will provide a brief evaluation report, including membership uptake post-event.

From this experience (and feedback received to date) we learned that Webinars are a useful, inexpensive way to engage a large audience, and may result in increased APHA membership and/or membership for working groups. Registrants requested more detailed instructions for accessing the webinar platform, which will be done for future events. Our plan is to continue to host APHA educational/interactive webinars on an annual basis. Surveys targeted at current APHA members may be a useful tool to see what subjects are of interest among APHA members and may inform future webinar topics.

The Student Committee considers the inaugural APHA webinar event a success and graciously acknowledges all of the APHA members and committees as well as the external partners who



contributed to the event, especially: The O'Brien Institute for Public Health, Lindsay McLaren, Qendresa Beka, Amy Beck, Cathy Gladwin, and Mariko Roe.

Respectfully submitted,  
Kenda Swanson and Maria McInerney  
APHA Student Committee 2015-2016