



PUBLIC HEALTH AGENCY *of* CANADA

Public Health Agency of Canada

Atlantic Region

A Snapshot in Time

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Introduction

On September 24, 2004, Health Canada's Population and Public Health Branch (PPHB) officially became the Public Health Agency of Canada (PHAC). This document is designed to help facilitate the transition by providing regional stakeholders and partners with the most current information about the Agency and its collaborative approach to addressing public health issues in Atlantic Canada.

In the Past: Population and Public Health Branch, Atlantic Region

Over the years, the PPHB Atlantic Regional Office has supported Health Canada's proactive approach to maintaining and improving the health of the people of Canada through programs and initiatives targeted toward early childhood development, health promotion, injury prevention, as well as disease prevention and control.

PPHB Atlantic has also engaged in a broad range of activities to help improve conditions for all people in Atlantic Canada, with a specific focus on population groups with poorer health outcomes. The goal of the Branch was to help maintain and improve the health of the people of Atlantic Canada by influencing healthy public policies and programs while addressing priority public health issues within a population health framework, guided by the values of social and economic inclusion. This goal remains unchanged.

Efforts have also been made by PPHB Atlantic to increase its reach to, and improve relationships with, official language minority communities in the Atlantic region. Staff engaged groups in a regional consultation process designed to assist in the development and implementation of an action plan to address the health issues of Acadians and francophones in Atlantic Canada. Such efforts to address official language minority concerns will be continued by the Public Health Agency of Canada's Atlantic Regional Office.



Current Context: Public Health Agency of Canada

In order to strengthen its ability to protect the health and safety of the people of Canada, the Government of Canada has delivered on its commitment to establish a new Public Health Agency of Canada. With pillars in Winnipeg and Ottawa and regional offices across the country, the Agency is well placed to collaborate with Canada's provinces and territories on matters of public health.

The Agency speaks to the need for stronger federal leadership in addressing public health risks and coordinating a national response to public health emergencies. It leads and manages federal efforts in the areas of public health emergencies, chronic and infectious disease prevention and control, as well as population health and overall health promotion, which also includes improving the health of communities.

The Agency is committed to the development of the new National Collaborating Centre on Social Determinants of Health, which will be located in the Atlantic region. This Centre will study the role played by social determinants of health in the lives of the people and communities of Atlantic Canada. Knowledge garnered from this research will be shared and utilized at all levels of the public health system across the country.

Under the direction of Dr. David Butler-Jones, Canada's first Chief Public Health Officer (CPHO), the Agency will continue to function as a federal department with the CPHO reporting directly to the Minister of Health. Regional points of contact will remain the same as Agency staff continue to carry out the work previously done by PPHB Atlantic.

Further information on the Public Health Agency of Canada, the National Collaborating Centres, and the Chief Public Health Officer can be found at www.phac-aspc.gc.ca.

As the Population and Public Health Branch transitions into the Public Health Agency of Canada, business in the Atlantic region will continue as usual, and the manner in which staff work with projects, clients, and colleagues will not fundamentally change. Throughout the transition, existing partnerships will continue to be strengthened, new partnerships and opportunities forged, and consultation with stakeholders expanded.

As the transition to the new Agency occurs, staff will maintain their commitment to excellence and to producing work that is both innovative and useful. As in the past, the team will continue to support collaboration and other initiatives that promote



understanding, acceptance, and implementation of a population health approach. The following sections provide an overview of these roles.

A Key Role: Community Capacity Building

In every stage of its planning, implementation, and evaluation, the Atlantic Regional Office of the Public Health Agency strives to help voluntary, non-profit, and non-governmental organizations increase their capacity to act on the determinants of health. Various funding programs administered by PHAC Atlantic are designed to help groups and organizations improve on their own ability to determine, appraise, examine, and act on the health concerns most relevant to their members.

Community capacity building encompasses several important guiding principles, including participation and involvement, supportive environments, community-based knowledge development, leadership, resource mobilization, and collaboration.

PHAC Atlantic currently manages seven national funding programs within the region. Each of these programs, in turn, sponsors local or province-wide community projects.

- 1. *Aboriginal Head Start (AHS)*** is an early intervention funding program for Aboriginal children and their families residing in urban and northern communities. The program helps meet the needs of off-reserve Aboriginal children and fosters their spiritual, emotional, intellectual, and physical growth.
- 2. *AIDS Community Action Program (ACAP)*** provides operational and regional project funding to community-based AIDS organizations in four program areas: 1) prevention, 2) creating supportive environments for those infected with and affected by HIV/AIDS, 3) strengthening community-based organizations, and 4) health promotion for people living with HIV/AIDS.
- 3. *Canada Prenatal Nutrition Program (CPNP)*** is a funding program designed to help community groups provide support for pregnant women. Priority participants include pregnant adolescents, women with low incomes, and those who are socially or geographically isolated. Groups provide referrals, education, social support, food supplementation, and nutrition and lifestyle counselling.



4. **Community Action Program for Children (CAPC)** provides long-term funding for community groups to deliver programs that address the health and social development of children from birth to age 6. Priority populations include the parents and caregivers of young children who face a number of challenges including teen parenting, low literacy or income levels, health issues, and social or geographic isolation.
5. **Diabetes Prevention and Promotion Contribution Program (PPCP)** provides funding to community organizations actively involved in work that contributes to preventing type 2 diabetes.
6. **Hepatitis C Disease Prevention, Community-based Support and Research Program** intends to increase awareness, promote prevention behaviours, expand research activity, and increase the government's capacity to respond to this health threat. On a regional level, the key priority is to support community capacity to provide prevention programming for those who are at high risk of becoming infected with hepatitis C and to support programs for persons infected with or affected by hepatitis C.
7. **Population Health Fund (PHF)** helps a range of organizations increase their capacity to address public policies that affect health. The Fund seeks to 1) develop, implement, evaluate, and disseminate models for applying the population health approach; 2) increase the knowledge base for future program and policy development; and 3) increase partnerships and develop inter-sectoral collaboration.

A Key Role: Knowledge Development

Knowledge development is another broad area of activity for PHAC Atlantic. The publication of research findings and discussion papers helps community partners and other stakeholders increase their understanding of key health issues and how best to address them. PHAC Atlantic publications are aimed at a broad audience, including community organizations, various levels of government, and academic institutions. PHAC Atlantic has published a variety of documents including environmental scans, synthesis reports, program evaluations, literature reviews, and discussion papers.



Social and economic exclusion and inclusion is a prime example of knowledge development in the Atlantic region. Research into this issue is providing stakeholders with new ways of analyzing and understanding the negative impact that poverty and marginalization have on the well-being of individuals and communities.

Some key documents produced by the Atlantic team over the last five years include:

- The Tides of Change: Addressing Inequity and Chronic Disease in Atlantic Canada
- Report on PPHB Atlantic's Action Plan for Addressing the Health Issues of Acadians and Francophones in Atlantic Canada
- Capacity Building: Linking Community Experience to Public Policy
- Profile of Injection Drug Use in Atlantic Canada: Final Report
- At the Heart of our Work
- Shifting Sands: The Changing Shape of Atlantic Canada
- An Inclusion Lens: Workbook for Looking at Social and Economic Exclusion and Inclusion
- What Works! Putting Community Issues on the Policy Agenda
- Policies for Aging Populations: An International Perspective
- FAS/FAE Information Tool Kit

A Key Role: Inter-sectoral Collaboration

PHAC Atlantic is committed to promoting inter-sectoral collaboration to address the determinants of health. Such collaboration occurs on many levels and requires a commitment to creating and supporting ongoing inter-sectoral working groups. Key partners include various levels of government, universities, research centres, and community organizations, as well as linguistic and cultural communities throughout the region.

PHAC Atlantic also works closely with the four provincial governments in Atlantic Canada to ensure that federally funded programs complement provincial priorities. Some collaborative initiatives include the Joint Management Committees for CAPC and CPNP, the Nova Scotia Sustainable Communities Initiative, and the pan-Atlantic network on healthy living.



Staff also represent the Agency on many external inter-sectoral groups, including those that are federal-to-federal and others which are federal-to-provincial. Periodically, the Agency funds and organizes workshops or conferences to bring together stakeholders from various sectors to examine a priority health issue. While each of these initiatives has a specific purpose, PHAC Atlantic's overall aim is to help increase capacity among **all** sectors to work collaboratively on issues relating to population health.

Conclusion

This document is an opportunity for PHAC Atlantic to outline the diverse and interesting work being undertaken in the region and to provide insight into the wide range of activities, programs, and projects that fall within the Agency's mandate.

These initiatives are guided by a commitment to provide appropriate health promotion programs in response to the needs of the people of Atlantic Canada. Although the region is rich in linguistic and cultural diversity in terms of official language populations, First Nations communities, and immigrant cultures, it also faces challenges. Many groups are marginalized by income, social status, isolation, and culture. The region has the most rapidly aging population in the country coupled with a declining birth rate. In the face of these realities, PHAC Atlantic will continue to work with stakeholders and partners to deliver programs in a constructive and collaborative way that respects the people of Atlantic Canada and the communities in which they live.

Successful collaboration, partnerships, and evaluation will continue to be cornerstones of PHAC Atlantic's work. Sharing results and best practices is critical to the pan-Atlantic and pan-Canadian approaches adopted by the federal government and the four provincial governments in Atlantic Canada. The creation of a new Emergency Preparedness and Response (EP&R) component is an example of the Agency's commitment to strengthening collaboration across various levels of government and federal government sectors. As the Agency evolves, the EP&R function will help provincial emergency preparedness authorities be better prepared to address planning and preparedness issues on a province-by-province basis while strengthening the region's overall capacity to manage public health emergencies.



PHAC Atlantic will also continue to support the development of upstream population health promotion programs in a manner which positively affects the broader determinants of health. Through continued inter-sectoral collaboration and increased knowledge development, PHAC Atlantic will strive to effectively represent the region's perspective at the national table when health policies are developed.

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