Who we are

Started in 2005, the Population and Public Health Program (PPH) of Provincial Health Services Authority works in collaboration with various partners to prevent chronic disease and create healthier populations throughout British Columbia. Our team has expertise in epidemiology & biostatistics, knowledge translation, project management, and leadership as well as in various content areas related to population health.

Our vision

To catalyze joint solutions for British Columbians’ health and well-being.

What we do

PPH seeks to inform and advise policy and practice on emerging and priority population health issues. We focus on upstream prevention approaches that seek to enhance the health of British Columbians where they live, learn, work, and play. We exchange and mobilize credible knowledge for action with a variety of partners.

Our current priorities as outlined in these highlights are to promote health equity and healthy weights, as well as to address key focus areas such as population health surveillance, food security, the healthy built environment, bariatric surgery, and to support chronic disease management.

Knowledge translation impacts

Population health issues addressed by our team are often complex, system-wide problems that require long-term efforts to realize impact. During 2012-13, our website www.phsa.ca/populationhealth attracted over 9,000 visitors who downloaded over 35,000 copies of our reports and resources. Some of our work completed in previous years continued to spread beyond our network and was taken up by new audiences.

For example, PPH reports, models, & frameworks were used this year to:

Promote healthy weights

- From Weight to Well-being: Time for a Shift in Paradigms? discussion paper was featured at a Canadian Obesity Network summit panel in May 2013.
- Ministry of Health and regional health authority partners are integrating the report’s mental well-being concepts into healthy weights initiatives.

Promote health equity


Improve food security in Aboriginal communities

- Case study was included in University of Alaska Fairbanks course readings.
- Peer-reviewed article was published in Journal of Environmental and Public Health.
- Aboriginal elder and youth voice included in a traditional foods component for a proposed upcoming Aboriginal Peoples Television Network (APTN) television series.
Promoting healthy weights

PPH demonstrates provincial leadership in promoting healthy weights through collaborative action, with a secondary goal of creating an integrated healthy weights promotion strategy across all PHSA agencies and programs.

PHSA projects for healthy weights

PPH funded the BC Injury Research and Prevention Unit, the BC Women’s Hospital & Health Centre, and BC Mental Health & Addictions Services to initiate further work related to the Weight to Well-being report, including:

- Analysis from an injury prevention perspective.
- Analysis using an equity and gender lens.
- Development of a tool to reduce weight bias among health professionals (see table).

Weight to Well-being report

PHSA-PPH’s discussion paper “From Weight to Well-Being: Time for a Shift in Paradigms?” was released in February 2013. The paper explores the inter-relationships among obesity, overweight, weight bias, and mental well-being and summarizes evidence for considering a paradigm shift from weight-focused approaches to those that emphasize mental and physical well-being.

PPH-funded projects across PHSA

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| Identifying Linkages between Injury Prevention and Promoting Health Weights | Provides a review and recommendations based on the existing evidence regarding the inter-relationships among obesity, overweight, and injury. Two reports completed:  
- The Injury Consequences of Promoting Physical Activity: An Evidence Review  
- Bullying, Suicide, and Self-Harm Among Individuals Who Are Overweight: An Evidence Review | Small project funding | Six equity-related projects completed at three PHSA agencies and programs aimed to improve the accessibility, acceptability &/or applicability of health services, by addressing aspects such as health literacy & cultural competency.  
- Indigenous Youth Wellness Project (Cuystwi) | 
- Promoting Healthy Weights: A Gender Analysis of the Relationship among Obesity, Overweight, Weight Bias and Mental Well-being | Evidence review and summary of the formal and informal literature was completed regarding sex, gender, diversity, and equity and their relationship to obesity, overweight, stigma, and weight bias. | 
- Women’s Heart Health Primary Prevention Project | During Phase 2, two new demonstration projects were completed and a successful Women’s Heart Health Summit was conducted in February 2013. Tools were developed and disseminated for women-centred tobacco cessation strategies. | 
- Health Compass | Innovative, multi-phase project to enhance the capacity of PHSA health care providers to further promote the mental wellbeing of patients, clients, and families. During 2012-13, a Mental Health Promotion Resource and an E-Learning Tool were developed, along with a Client Engagement Report and Compass Evaluation. Pilot testing was completed for the four modules developed. |
| Ongoing projects | Weight Bias and Stigma Education for Health Professionals | BCWHC | 
- An evidence-informed resource to address weight bias and stigma among health professionals in BC is being developed and the first draft of the content has been completed. |

AH = Aboriginal Health; BCCA = BC Cancer Agency; BCIRPU = BC Injury Research & Prevention Unit; BCMHAS = BC Mental Health & Addictions Services; BCWH = BC Women’s Health; BCWHC = BC Women’s Hospital & Health Centre; PLS = Provincial Language Services
Promoting health equity

PPH seeks to address health equity to improve the availability, accessibility, and appropriateness of health services for BC’s vulnerable populations.

Equity indicator development

This project aims to develop a suite of priority health equity indicators that will inform equity target-setting intended to support stakeholders’ efforts in improving, monitoring, and measuring equity work across BC, and to provide consistency and comparability in that process.

Major 2012-13 accomplishments included:

- A multi-stakeholder forum with more than 50 participants who began the process of identifying priority indicators and key issues to address in the project.
- A Technical Working group was established to advise on which indicators to select and how to present the data. It guided the development of:
  - Criteria and process for prioritizing the indicators.
  - Two-page templates for describing each of the indicators.
  - A standardized model for analyzing and presenting the data.
- New partnerships among Vancouver Island Health Authority, Interior Health Authority, and Northern Health Authority to test selected indicators. The issues, challenges, and logistical requirements identified will inform future work related to the indicators.

Framework for promoting health equity at PHSA

In recent years the PPH team has been continually advancing the health equity agenda at PHSA through a series of discussion papers, stakeholder engagement processes, and reports.

To inform the development of a comprehensive framework for integrating and unifying health equity within PHSA, PPH engaged in consultation during 2012-13 that included:

- A scoping review of past and current discussions, activities, and key documents – internal and external to PHSA – related to health equity and its promotion.
- Interviews with key informants from 11 participating agencies, programs, and services across PHSA.
- A full-day workshop held March 18, 2013 in Vancouver, involving senior representatives from the 11 participating agencies, programs, and services to come to a shared understanding of health equity and how it can be promoted within PHSA.

PHSA agency projects in health equity

In 2012-13, PPH funded six equity-related projects at three PHSA agencies and programs (see table).

Some of the positive reported outcomes for project participants and patients:

“I really appreciate the valuable information for the role of interpreter that Provincial Language Services staff have provided, I have gained a better understanding of mental health from the psychiatrist, nurse, and psychologist.”

– Interpreter training participant

“The translation of these [medical] information sheets has been very helpful. By the way, I just handed out the first of these to a parent (Cantonese-speaking). They were very grateful for it.”

- Child and youth psychiatrist

Executive message

I am pleased to provide these highlights on the activities our team has led, collaborated on, and supported over the past year. This last year we have increased our capacity and content expertise, especially in the areas of surveillance and epidemiology, through a reorganization of our team.

Our mandate contains two components: the first is focused on upstream or primary prevention of chronic disease across the province, including the specific goal of increasing the emphasis of prevention within PHSA. The second component of our mandate is to contribute to helping people living with chronic conditions stay as healthy as possible.

In these areas, we continue to build on past successes and confirm our reputation as a credible knowledge resource for emerging population health issues in BC.

We could not have achieved our successes without the commitment and collaboration from our many partners and networks across the province. I would like to take this opportunity to personally thank them for all the time and effort they have contributed towards joint solutions for enhancing the health of British Columbians.

Lydia Drasic
Executive Director
Population Health Strategic Planning & Provincial Initiatives
Surveillance

The surveillance team engages in the collection, analysis, interpretation, and dissemination of chronic disease and risk factor data.

**BC Community Health Atlas & Community Health Profiles**

PPH is coordinating the development of online mapping and database tools that will help local governments and organizations understand the health issues in their communities and support local-level planning for community health initiatives.

- The BC Community Health Atlas is a web-based interactive mapping tool that displays indicators of population health by local health area or school district. PPH and its partners completed Phase I of database development and web functionality testing during 2012-13, prior to release.
- In 2012-13, PPH also developed an initial prototype for online Community Health Profiles which will contain priority indicators and provide a snapshot of community health for easy use by local government and community-based stakeholders.

Microsimulation modeling of chronic diseases

Microsimulation is an analytical technique that can be used to evaluate the potential effects of interventions before implementing them in the real world. PPH intends to use microsimulation to model various protective and risk factors on chronic diseases and the impacts of intervention on their prevalence.

In 2012-13, PPH has:

- Conducted statistical analyses and literature searches to identify data and relationships to build into the microsimulation framework so that it accurately represents the health and lifestyle of the population of BC.
- Pilot-tested different chronic disease-related modules for use in the microsimulation model. These demonstration modules are used to assess the validity of the model and may provide some information that could be useful to decision-makers in future.

Moving forward, PPH will be working with other partners to further refine and develop the model.

Healthy Families BC (HFBC)

The surveillance team leads, coordinates, and supports program coordination and evaluation for some of the Healthy Families BC initiatives in collaboration with the Ministry of Health and regional health authorities. This PPH work contributes to the BC Government’s health promotion and prevention agenda.

During 2012-13, PPH led the development of:

- Consensus regarding a consistent meaning of the term ‘healthy weights’ to be used when developing policy and strategies for promoting healthy weights in British Columbia.
- The Healthy Eating Strategy Population Survey. The survey, which is ready to launch, will assess trends in healthy eating knowledge and behaviours among BC’s general public, and inform future directions of the provincial Healthy Eating Strategy.
- Tools to support regional health authorities in creating Healthy Schools Asset Maps. Regional asset maps will assist with regional planning for the Healthy Schools initiative and will be compiled into a provincial asset map to support Ministry planning and priority setting at the provincial level.
- School District Profile templates and associated data tables that were disseminated to regional health authorities to support consultations with local school districts. Profile templates comprise school district level data on school connectedness, healthy living, childhood vulnerability, children and youth at risk, and student demographics.

PPH also increased data availability for chronic disease surveillance and HFBC planning in 2012-13:

- BC Stats’ Socio-Economic Indices and Profiles were made available at the school district level to support local planning in the Healthy Schools BC initiative.
- School level data from the Ministry of Education’s School Satisfaction Survey were transferred to BC Stats to supplement the BC Community Health Atlas with information on fruit and vegetable intake, healthy food choices, physical activity, and tobacco use among children and youth.
**Food security**

PPH leads and facilitates collaboration across government and non-government sectors to increase food security in BC and to contribute to the evidence on food security. The goals of food security are to increase access to nutritious, safe, personally acceptable food with a focus on those most vulnerable to food insecurity and to increase availability of healthy food produced in a sustainable manner.

**Food costing**

PPH, in collaboration with the regional health authorities, has coordinated the data collection of the cost of a nutritious food basket in BC for the 2013 cycle. Calculating the cost of a nutritious food basket as a proportion of family income is one of six provincial food security indicators. This indicator assesses food security at the family level by focusing on a family’s ability to afford healthy food.

**Therapeutic food gardens at BC Children’s and Women’s Hospital**

PPH has partnered with BC Mental Health & Addictions Services at BC Children’s and Women’s Hospital to establish on-site food growing gardens. This program increases access to and knowledge of healthy food and gardening, provides therapeutic benefits to individuals with mental illness, and aligns with the hospital redevelopment plan. Throughout 2012-13:

- Staff and patients designed, built, and planted the garden.
- Staff attended gardening capacity-building sessions and integrated gardening into existing programs.
- A month-by-month growing guide and accompanying activities were developed.

**Pocket Markets at BC Children’s and Women’s Hospital**

PPH has partnered with PHSA Workplace Health to offer a weekly pocket market. Pocket markets are small farmers’ markets intended to increase access to local, healthy, sustainable food for staff of BC Children’s and Women’s Hospital.

Highlights from the Pocket Markets:

- Pocket markets ran one day per week from June to October 2012 in the Shaughnessy Auditorium.
- A feasibility study and satisfaction survey were conducted to inform future improvements – the satisfaction survey showed 90% of customers were satisfied or very satisfied with the market.
- A veggie box program was introduced which enabled staff to pre-order a box of fresh produce and pick it up at the pocket market.

**Indigenous food security – Traditional Foods**

PPH collaborated with PHSA Aboriginal Health to gather input on increasing awareness of traditional foods. The information obtained will inform a proposal for a health series on the Aboriginal Public Television Network.

- Two focus groups were held (Prince George, Vancouver) with Aboriginal youth and elders. Focus groups provided insight into topics of interest around traditional foods and popular mediums for disseminating information.

**Healthy built environment (HBE)**

PPH works to promote healthier built environments that increase opportunities for physical, mental, and social health and well-being.

**HBE Linkages Toolkit**

In collaboration with and in partnership with the HBE Alliance, PPH is coordinating the development of a toolkit intended to facilitate discussions between public health practitioners, planners, and others involved in community design. It describes the link between the five physical features of the built environment, planning principles, impacts, and health outcomes.

The toolkit is also a navigational tool that will guide people toward existing HBE resources and evidence. Positive feedback on early drafts of the toolkit has already been received from HBE Alliance members, the Health Officers Council of BC, and the Ministry of Health as well as other Ministries working on climate change.
BC Bariatric Strategy

Over the last few years, PPH has coordinated initiatives regarding the evidence that bariatric surgery is the only treatment for some people who are struggling with obesity and morbid obesity. The evidence also shows that chronic diseases such as diabetes, hypertension can be resolved or mitigated following bariatric surgery. In 2012/13, PPH Program:

- Collaborated with Vancouver Coastal Health (VCH) and Vancouver Island Health Authority (VIHA) as well as their surgeons and physicians to describe the recommended clinical pathway and guidelines for pre and post bariatric surgery services.
- Provided oversight of additional bariatric surgeries funded for VCH and VIHA, and
- Coordinated the articulation of the strategies for the continuum of obesity – from prevention through to treatment.

Shared Care Committee redesign initiatives

Chronic disease management at the specialty or tertiary/quaternary level falls under the mandate of most PHSA agencies and programs. PPH provides liaison and coordination for chronic disease management through representation on various committees related to primary care, shared care and integrated care and project management oversight as needed.

The BC Medical Association Shared Care Committee provided funds to all health authorities for physician participation in their priorities. These funds were used to support PHSA priorities as well as the Integrated Primary Community Care objectives. PPH coordinates the allocation, project oversight and reporting of these funds.

During 2012-13, the Shared Care Committee redesign funds supported:

- Seven health systems redesign projects at BC Women’s Health, BC Trauma, Stroke Services BC, and BC Cancer Agency.
- Several ImPROVE Rapid Improvement Integrated workshops & integrated facility design projects.
- Physician involvement in redevelopment of Children’s & Women’s Hospital.

PPH Staff

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