

Annual Highlights 2013-2014

Population and Public Health Program

Provincial Health Services Authority

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 with the goal to prevent chronic disease. 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 healthy weights and health equity, as well as to address key focus areas such as population health surveillance, food security, the healthy built environment, and to support chronic disease management.

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Executive message

I am pleased to provide these highlights on the activities our PPH team has led, collaborated on, and supported over the past year.

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 B.C. During 2013-14, over 6,000 users visited our website www.phsa.ca/populationhealth and downloaded thousands of copies of PPH reports and resources.

The population health issues addressed by our team are often complex, system-wide problems that require long-term efforts and collective action to see an impact. For example, one of our 2013 discussion papers sparked action on healthy weights across PHSA (see page 2) and PPH surveillance data and our *BC Community Health Atlas* supported and informed a prominent report by one of our non-governmental organization partners.

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 collective action for enhancing the health of British Columbians.



Lydia Drasic
Executive Director
BCCDC Operations and Chronic Disease Prevention



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.

Weight to well-being: next steps

In February 2013, PPH released the discussion paper [*From weight to well-being: Time for a shift in paradigms?*](#) about the interrelationships among obesity, overweight, weight bias and promoting mental health and well-being. The paper summarized evidence for considering a paradigm shift from weight-focused approaches to those that emphasize mental and physical well-being.

Given that recent evidence has generated interest in well-being focused approaches, PPH has initiated an exploration of the biological and physiological evidence related to obesity in the context of mental and physical well-being and using a complex systems approach.

Healthy weights forum



PPH and BC Mental Health and Substance Use Services (BCMHSUS) co-hosted the *Healthy weights forum* on June 21, which was attended by 152 professionals along with participants at ten telehealth sites. The knowledge exchange session facilitated discussion on the concepts

and ideas presented in the *Weight to well-being* paper about the interrelationships among obesity, overweight, weight bias and promoting mental health and well-being.

PHSA Agency projects in healthy weights

In 2013-14, PPH funding supported various PHSA agencies and programs to continue work related to the *Weight to well-being* discussion paper. BCMHSUS is developing an evidence-informed resource to address weight bias and stigma among health professionals in B.C. This year, the BC Injury and Research Prevention Unit developed knowledge translation strategies to translate two injury prevention evidence reviews into practice and policy action. These evidence reviews were initially prompted by concepts introduced in the *Weight to well-being* discussion paper (Table 1).

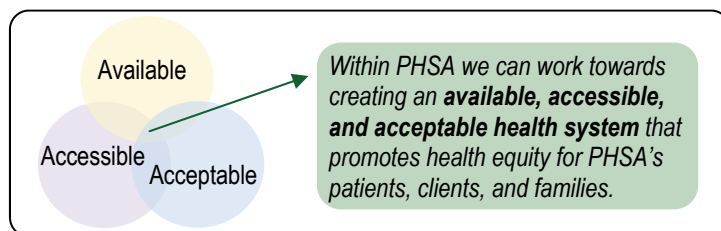
Promoting health equity

PPH seeks to promote health equity by improving the availability, accessibility, and appropriateness of health services. Improving health equity can benefit every British Columbian, but is particularly important for those who do not have the same opportunities to be as healthy as others.

PHSA Framework for promoting health equity

Informed by a multi-faceted consultative process, PPH has developed a proposed framework for promoting health equity within PHSA that was presented to PHSA Executive Leadership Council in June 2013. This framework seeks to integrate and guide existing and future PHSA equity-related initiatives, and identifies strategic opportunities for 2013-15 such as exploring opportunities to promote health equity through quality related mechanisms and enhancing professional competency through knowledge translation and capacity building.

Figure 1. Goal for promoting health equity at PHSA.



Equity indicator development

PPH is leading a project to develop a suite of health equity indicators that will ultimately inform health equity target-setting at the population level. These indicators will provide additional information on the health status of British Columbians across various segments of the population, and could inform the development of policies and programs or services as well as research activities among a variety of stakeholders.

Key 2013-14 accomplishments included:

- Facilitation of a comprehensive consultation process on health equity indicator development involving representatives from the Ministry of Health (MOH), all regional health authorities, the First Nations Healthy Authority and PHSA agencies and programs.
- Finalization of a suite of 52 prioritized health equity indicators for use in B.C.

Next steps for PPH are to document the indicator development and prioritization process and to provide population-level analytical results of the indicators for which data is currently available.

Surveillance

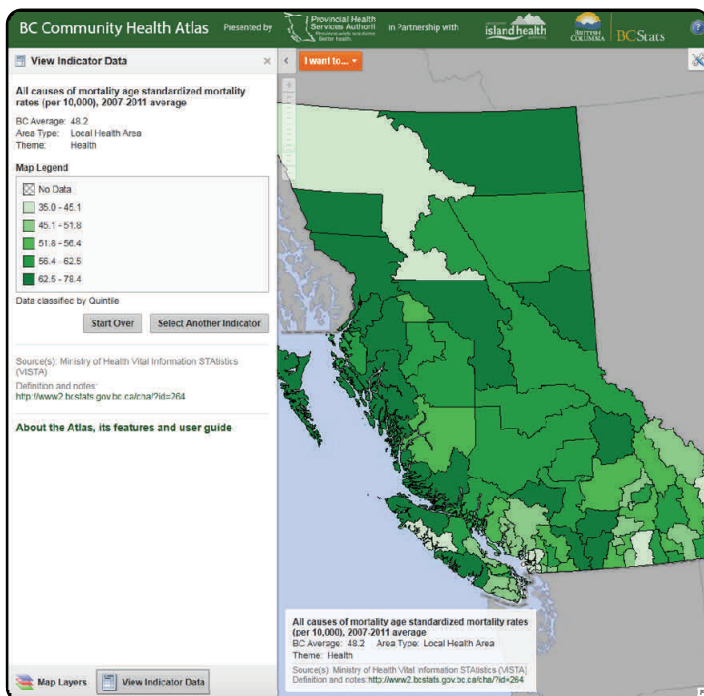
The PPH surveillance team engages in the collection, analysis, interpretation, and dissemination of data about health status, chronic diseases, as well as protective and risk factors among British Columbians. The team works closely with the MOH Population and Public Health Surveillance team via a joint workplan that aims to enhance provincial surveillance capacity through structural collaboration. Through a range of projects, PPH surveillance activities support all PPH initiatives such as promoting health equity, food security, and Healthy Families BC.

BC Community Health Atlas

PPH released the online *BC Community Health Atlas* in June 2013 in partnership with the BC Ministry of Health, Vancouver Island Health Authority, BC Stats, and DataBC (Figure 2). The Atlas is a web-based interactive mapping tool that displays indicators of population health of British Columbians by geographic area, using data compiled from multiple publically-available sources and supports local-level decision-making and planning for community health initiatives.

Since its launch, the online tool has been used by a wide variety of stakeholders, and Atlas maps were featured in a prominent 2013 report by the BC Healthy Living Alliance. PPH supports ongoing maintenance of the application and regularly updates the data to ensure long-term sustainability.

Figure 2. Demonstration of [BC Community Health Atlas](#) online mapping tool, using example indicator.



Healthy Families BC (HFBC)

PPH leads, coordinates, and supports various components of the HFBC initiatives in collaboration with the Ministry of Health and the regional health authorities. This PPH work contributes to the BC Government's health promotion and chronic disease prevention agenda.

During 2013-14, PPH led the following activities:

- The management of the Healthy Schools BC evaluation, in collaboration with the Ministries of Health and Education, and DASH BC (Directorate of Agencies for School Health). Evaluation data was collected from health authority staff, school district representatives, and school staff through key informant interviews, online surveys, and workshop feedback forms.
- A *Healthy Eating Strategy Evaluation Showcase and Planning Day* in October 2013, in partnership with the MOH. Bringing together the Healthy Eating Strategy Leadership group with representatives from across the province, PPH facilitated activities and discussion to identify key assets and approaches to healthy eating across B.C. The outcomes of this event were used to inform MOH planning for HFBC evaluation of the provincial Healthy Eating Strategy.
- The development, administration, and analysis of the *BC Healthy Eating Population Health Survey*, in cooperation with BC Stats, the MOH, and health authority partners. This telephone survey investigated self-reported knowledge, attitudes, and behaviours among British Columbians with respect to food and nutrition, over a population sample of 2,653 respondents. Survey results will be used by the MOH, regional health authorities and others to determine future actions and to inform future directions of the provincial Healthy Eating Strategy.

Healthy Families BC (cont.)

During 2013-14, PPH led: (cont.)

- The provision of HFBC healthy eating resources and tools to practitioners across PHSA. PPH has also developed a communications strategy to support this dissemination.



- The development of template *BC Community Health Profiles* in collaboration with health authorities, the MOH, the Union of BC Municipalities and BC Healthy Communities Society. The profiles will include indicators on community demographics, determinants of health, health status, and chronic disease and will provide standardized community health data to local governments and regional health authorities.
- The management of the HFBC Communities evaluation, in collaboration with the MOH, BC Healthy Communities Society, and the Union of BC Municipalities. The first year of the three-year evaluation focused on the activities and progress of the HFBC Communities initiative from its launch in 2011 to the end of the 2013-14 fiscal year.

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

Developed by PPH in partnership with the HBE Alliance, the [Healthy Built Environment Linkages Toolkit](#) is a ground-breaking evidence-based and expert-informed resource that supports community decision-making for healthier neighbourhood design, transportation networks, natural environments, food systems, and housing (Figure 3). The toolkit links planning principles to health outcomes and identifies the behavioural impacts (e.g., walking and transit use) and environmental impacts (e.g., noise and traffic safety) that contribute to those health outcomes. To be launched in April 2014, the toolkit was developed to support conversations and planning among public health professionals, local governments and planners to improve community health.

HBE Alliance

PPH provides secretariat and project management support to the BC Healthy Built Environment Alliance, a voluntary intersectoral network that provides leadership and action for healthier, more livable communities. PPH adds value by facilitating dialogue and by developing tools to encourage and support collaboration between and within sectors to shape healthier built environments in B.C. Key PPH activities for the HBE Alliance in 2013-14 included a four-part HBE webinar series as well as the finalization of the *HBE Linkages Toolkit*.

Figure 3. Five physical features of a healthy built environment, as described in the [HBE Linkages Toolkit](#).

 <p>Healthy neighbourhood design</p>	<p><i>Neighbourhoods where people can easily connect with each other and with a variety of day-to-day services.</i></p>
 <p>Healthy transportation networks</p>	<p><i>Safe and accessible transportation systems that incorporate a diversity of transportation modes and place priority on active transport (e.g., cycling, walking, and transit) over the use of private vehicles.</i></p>
 <p>Healthy natural environments</p>	<p><i>A built environment where natural environments are protected and natural elements are incorporated, and are experienced by and accessible to all.</i></p>
 <p>Healthy food systems</p>	<p><i>A built environment that can support access to and availability of healthy foods for all.</i></p>
 <p>Healthy housing</p>	<p><i>Affordable, accessible, and good quality housing for all that is free of hazards and enables people to engage in activities of daily living while optimizing their health.</i></p>

Food security

PPH works with the MOH to lead and facilitate collaboration across government, health authority, and non-government sectors to increase food security in B.C. 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.

Provincial food security planning

In collaboration with the Ministry of Health, PPH hosted a *Provincial Food Security Day* in March 2014. This event brought together 35 representatives from all health authorities, seven non-governmental organizations and six government ministries (Ministry of Health, Agriculture, Children and Family Development, Social Development and Social Innovation, Environment and Natural Gas Development [BC Housing]).

The event increased participants' understanding of the current context of food security in British Columbia and identified key priorities for action. Information gathered via this event will help to inform PPH's food security strategic plan and the update to the Ministry of Health Healthy Eating Strategy, which will guide the work of PHSA and the regional health authorities.

Food costing

Sufficient, safe, and nutritious food is critical to the health and well-being of British Columbians. The National Nutritious Food Basket (NNFB) is a tool developed by Health Canada and is used by provinces and territories across Canada to monitor the cost and affordability of healthy eating. The cost of the NNFB is one of the indicators used to evaluate the 2011-2014 HFBC Healthy Eating Strategy.

PPH coordinated the 2013 data collection within the regional health authorities; analyzed the data; and developed a report. To be released later in 2014, the report will provide valuable information for population and public health planning across B.C.

Pocket markets

PPH 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. In 2013, the Pocket Markets ran one day per week from June to October at both BC Children's and Women's Hospital and at the BC Cancer Agency.

Therapeutic food gardens

In partnership with the Child and Youth Mental Health Programs at BC Children's Hospital, PPH works with the Environmental Youth Alliance (EYA) on a Therapeutic Food Garden. The interactive garden allows children receiving inpatient or outpatient services to learn about the wonders of growing fresh vegetables and the multiple health benefits of gardening. During 2013-14, EYA led capacity building sessions for the staff and child/youth-targeted programming for the patients. Produce from this year's garden was incorporated into meals and cooking programs. Based on the success of the program, PPH, Child and Youth Mental Health Programs, EYA and Fresh Choice Kitchens are collaborating to obtain funding to enhance, expand and sustain on-site gardening.

Figure 4. The Therapeutic Food Garden at BC Children's Hospital and some of its produce.



Exploring traditional foods

PPH and PHSA Aboriginal Health worked with Dr. E Entertainment to create two short educational videos that aim to increase knowledge and awareness of Indigenous foods and food culture. Informed by community consultations, a traditional foods expert advisory group, and an Aboriginal youth advisory group, these youth-targeted videos explore the history of bannock, healthy recipes, and traditional foods and cooking practices. Next steps include working with PHSA Aboriginal Health to disseminate videos to health and education partners.

Model core program paper on food security

PPH took a leadership role in the revision of the *Model Core Program Paper on Food Security*. PPH supported the Ministry of Health by convening and facilitating health authority working groups and by providing content expertise.

PPH-funded prevention projects across PHSA

PHSA Population health approach

Facilitated by PPH, key leaders in programs and agencies involved in population and public health across PHSA drafted a model this year to represent a collective PHSA response for chronic disease and injury prevention. The model identifies a role for all PHSA agencies to work towards healthier populations. To be approved in the fall of 2014, this model will guide the approach of the PHSA Population and Public Health Advisory Committee in future years, and features key guiding principles:

1. Focus on health promotion and disease and injury prevention
2. Emphasize wellness vs. illness
3. Strive for equity
4. Recognize populations with unique needs

Health promotion and chronic disease prevention initiatives

Guided by the PHSA Population and Public Health Advisory Committee, PPH funds prevention projects across various PHSA agencies and programs.

The aim of this funding is to enhance the capacity of PHSA agencies and programs for initiating and sustaining health promotion and chronic disease and injury prevention activities (Table 1).

Table 1. PPH-funded health promotion and chronic disease and injury prevention projects across PHSA, 2013-14.

Project	Description		Project	Description	
Promoting healthy weights			Promoting health equity		
5 A's of obesity management in pregnancy: Tools and training for health care providers	A set of clinical tools and training to support primary care providers to feel more comfortable, knowledgeable and capable when counseling women about healthy weight gain, healthy behaviours, and well-being during the perinatal period. During 2013-14, a national working group advised on developing the first draft of the content.	PSBC	Reducing health inequities	A review of systematic reviews of women-specific interventions targeting alcohol use, tobacco use, physical activity, and sedentary behaviours. (Full title: <i>Reducing health inequities: Establishing a platform for gender-responsive population and public health in British Columbia</i>)	BCWH
Knowledge translation strategy for healthy weight evidence reviews	A knowledge translation strategy to share knowledge and key policy/practice recommendations from two previously completed healthy weight reviews. Activities during 2013-14 supported dissemination of two evidence reviews: <ul style="list-style-type: none"> • <i>Bullying, suicide, and self-harm among individuals who are overweight</i> • <i>The injury consequences of promoting physical activity</i> 	BCIRPU	Ask Auntie	An interactive, knowledge-informed, and culturally grounded violence and suicide prevention project to engage girls. Includes both an online component and a supporting in-community component. 2013-14 accomplishments include the establishment of an expert advisory committee, development of course outlines and the completion of one of four modules, including video production.	AH
Weight bias and stigma education for health professionals	An evidence-informed resource to address weight bias and stigma among health professionals in B.C. During 2013-14, the resource was developed and its content translated into an interactive online tool which is ready for pilot-testing.	BCMHSUS	Indigenous Youth Wellness (<i>Cuystwi</i>)	An Aboriginal youth-oriented Indigenous Cultural Competency curriculum was transferred to a new online platform and piloted in schools, youth groups, and communities. A new online training quest curriculum was developed and videos from pilot communities were created.	AH
Other			Health Compass	An, 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 2013-14, the Health Compass communication plan was developed and implemented.	BCMHSUS
PHSA Workplace Health	A variety of health promotion programs to support the physical and mental health of PHSA employees, ranging from the Employee Assistance Program to fitness opportunities.	WH			

AH= Aboriginal Health; BCIRPU= BC Injury Research & Prevention Unit; BCMHSUS= BC Mental Health & Substance Use Services; C&W = Children's and Women's Health Centre of British Columbia; PSBC= Perinatal Services BC; WH = PHSA Workplace Health

Chronic disease management

Leveraging agency expertise, PPH collaborates with PHSA Agencies to be a partner in care for informing chronic disease primary care. PPH works with the Doctors of BC Shared Care, Specialist Services & General Practice Services Committees to engage physicians in redesigning chronic disease service delivery across PHSA.

BC Bariatric strategy

At the request of the Ministry of Health, PHSA completed an implementation plan for a Bariatric Strategy for B.C. The plan was developed in consultation with regional health authorities. The focus was on bariatric surgery, and included a "hub and spoke" type of service delivery model along with a clinical pathway, for phased expansion across B.C.

Health system redesign

The Doctors of BC Joint Clinical Committees provided funding for physician engagement in health authority redesign priorities. In 2013-14, PPH coordinated the distribution and oversight of funding for 17 projects throughout PHSA agencies and programs including BC Women's Health Centre, Perinatal Services BC, Stroke Services BC, BC Trauma, BC Cancer Agency, Children's and Women's Hospital redevelopment, as well as imPROVE and lean events at BCMHSUS and BC Women's Hospital. Additional redesign money funded two provincial projects: the development of a BC Bariatric Strategy Implementation Plan led by PPH, and the development of a provincial Cardiac Value Stream led by imPROVE & Cardiac Services BC.

PHSA Agency projects focused on:

- Improving existing processes or developing new and improved ones that supported PHSA's deliverables for Integrated Primary, Acute & Community Care to effectively meet the needs of British Columbians, especially frail seniors and patients with chronic and mental health and substance use conditions.
- Collaborating with regional health authorities by integrating PHSA services with service design and delivery.
- Supporting the Triple Aim goals to improve health outcomes for priority patient populations, improve patient experience of care, and reduce per capita costs of providing health care.
- Supporting physician engagement in LEAN Projects, under imPROVE, with the goal of developing better processes to reduce waste and improve patient safety, quality and outcomes.

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