

Annual Highlights

2017-2018

Population & Public Health



BC Centre for Disease Control
An agency of the Provincial Health Services Authority

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Our Strategy

Mission

Influence policy & practice

Promote population health & health equity

Reduce the burden of chronic disease & preventable injury

Strategic goals

Be a trusted source of population health information & expertise

Produce actionable analysis & support its adoption

Catalyze & lead collaborative action

Vision

Healthy British Columbians.

Everyone has opportunities for health & well-being where we live, learn, work & play.



Expertise

Project and program management

Epidemiology & biostatistics

Knowledge translation

Priority Areas

Chronic disease & injury prevention

Population health surveillance

Food security

Healthy built environment

Healthy eating and healthy weights

Healthy communities & schools

Health equity

Our Team



Executive Leadership

- Dr. Mark Tyndall, Executive Medical Director, BC Centre for Disease Control
- Noorjean Hassam, Chief Operating Officer, BC Centre for Disease Control

Population & Public Health Team

- Alberto Almeida, Project Coord. & Admin. Support
- Cynthia Buckett, Provincial Manager, Healthy Eating Resource Coordination (maternity leave)
- Daniel Fong, Manager, Knowledge Translation & Communications
- Charito Gailling, Project Manager
- Maja Grgar, Coordinator, Administrative Operations
- Diana Kao, Epidemiologist
- Melanie Kurrein, Provincial Manager, Food Security
- Henry Lau, Coordinator, Healthy Eating & Food Security
- Crystal Li, Surveillance Biostatistician
- Ellen Lo, Project Manager
- Margaret Ng, Project Manager (maternity leave)
- Megan Oakey, Provincial Manager, Injury Prevention
- Dr. Drona Rasali, Director, Population Health Surveillance & Epidemiology
- Dr. Svetlana Ristovski-Slijepcevic, Project Manager
- Rola Zahr, Manager, Provincial Healthy Eating Programs
- Rita Zhang, Epidemiologist

Visit us online for more information on our team and our activities:

www.bccdc.ca/our-services/service-areas/population-public-health



Contact us

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Knowledge to Action

Our team uses a population health approach that focuses on the social determinants of health and collaborates with health and other partners to identify needs, implement solutions and evaluate impact. Doing so enables us to respond with credible evidence to inform and advocate for changes in policy and practice.

Highlights this year use strong partnerships with government and non-government organizations, expert consultation and research to investigate and address provincial chronic disease and injury prevention priorities.

We updated the Healthy Built Environment Linkages Toolkit, which is the first evidence- and expert-informed resource for local government decision-making that links community planning principles to health outcomes. Since its original release in 2014, the HBE Linkages Toolkit has been rapidly adopted by health professionals and others who collaborate with local governments for credible health research.

We evaluated the Informed Dining program to understand its influence on consumer food menu choices and awareness of nutrition information in BC. We coordinated the development of healthy eating and physical activity self-assessment resources for toddlers and older adults to promote and maintain lifestyles that prevent chronic disease.

We estimated the cost of chronic disease risk factors on current health care expenditures and indirect costs to help policymakers prioritize prevention efforts. We found that, in 2015, the estimated annual economic burden from excess weight, tobacco smoking, alcohol use, physical inactivity and low fruit and vegetable consumption in BC was \$7.8 billion.

We are updating the Community Health Data website database and evaluating the platform to ensure we link the most relevant data to decision-makers for health and community planning in the province.

We analyzed a suite of mortality and chronic disease indicators to identify geographic, demographic and socio-economic health inequities in the province for consideration in health programming and interventions that promote health equity.

We are finalizing a strategy for disseminating BC food costing data to calculate the affordability of a nutritionally adequate diet and to provide insight into food insecurity.

Healthy Built Environment

Promoting Healthy Community Planning and Design

PPH collaborates with multi-sectoral partners to promote healthier built environments that increase opportunities for physical, mental and social health and well-being.



Since its original release in 2014, the [Healthy Built Environment \(HBE\) Linkages Toolkit](#) has been rapidly adopted as a conceptual framework used across BC and other provinces to inform local planning initiatives and identify areas where new research is needed.

We have updated the Toolkit with new evidence related to food systems and natural environments and new considerations of practice including working with small and medium sized communities, findings on economic co-benefits of healthier built environments, and social well-being outcomes. To help bring the health evidence to life, we are developing an online tool as a supplementary resource which will allow users to interact with the research pathways described in the HBE Linkages Toolkit and more easily access source literature.

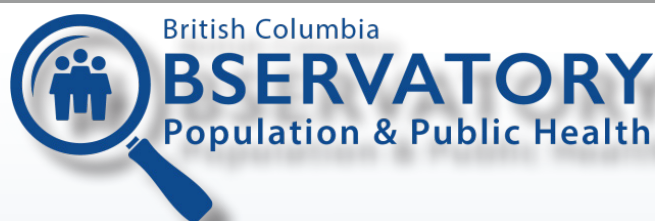


BC Healthy Built Environment Alliance Representatives, September 2017

Population Health Surveillance

Providing Accurate, Timely and Actionable Intelligence

PPH actively seeks to provide accurate, timely and actionable intelligence on the health of the population to help inform practice and policies for improving the overall quality of life for BC residents.



The [BC Observatory for Population & Public Health](#) provides collaborative leadership in the development of provincial and regional surveillance capacity with respect to non-communicable diseases, injuries, and risk and protective factors. PPH is a key member of the BC Observatory for Population & Public Health partnership, providing active support and guidance to key priority projects and strategic planning.

Chronic Disease Dashboard

BC Observatory for Population & Public Health launched a [new interactive tool](#) that provides summary statistics on a variety of non-communicable diseases and conditions in BC. It presents time trends (between 2000/01 and 2016/17) and geographical variations of overall and sex-specific prevalence and incidence measures for 32 chronic conditions and their sub-types. Incidence and prevalence were calculated according to algorithms validated by the Canadian Chronic Disease Surveillance System or other jurisdictions, using administrative databases of the BC Ministry of Health. The dashboard will be updated on an annual basis, with the next iteration to be released in early 2019. The Dashboard is a result of a close partnership between the Observatory, BCCDC, and Office of the Provincial Health Officer.

Registry Data Linkage

PPH has been working to improve chronic disease surveillance, patient care and health outcomes by linking patient information across various data sources.

We are developing a system for accessing linked administrative data from the Ministry of Health and the Provincial Health Services Authority's clinical, service, and disease registries. This would reduce the need for parallel requests for the same data and streamline access to enhanced patient information.

In 2017, PPH with the Provincial Renal Agency, Cardiac Services BC, and BC Cancer Agency established agreements for sharing the Ministry of Health's chronic disease registries data. This will allow PHSA agencies to obtain linked data for answering questions such as the impact of co-morbidities on patient outcomes as well as equitable access to care and long-term impacts to patient care.



Health Equity

PPH continues to examine indicators of health equity in BC to support health planning initiatives that benefit all British Columbians and those that do not have the same opportunities to be healthy.

This year's health equity analysis included mortality outcomes (premature mortality, infant mortality, suicide mortality, unintentional injury mortality and circulatory disease mortality) and chronic disease outcomes (diabetes incidence, heart disease prevalence, depression prevalence) among the 52 prioritized health equity indicators for BC. We linked geographic and demographic data with income, education and socio-economic deprivation to examine inequity in health outcomes across the province.

Preventable premature mortality rates, in BC, 2009-2013.

- Areas with those earning the lowest average incomes (<\$47,790) have **2.9 times higher** preventable premature mortality rates than those earning the highest average incomes (>\$91,684).
- Areas with those having less than high school education (17%) have **1.7 times higher** preventable premature mortality rates than those who completed post-secondary education (22% of the population)
- Areas with those having the lowest employment rates (<87%) have **1.4 times higher** preventable premature mortality rates than those with the highest employment rates (>98%).



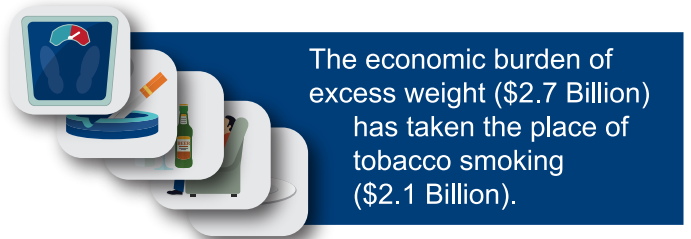
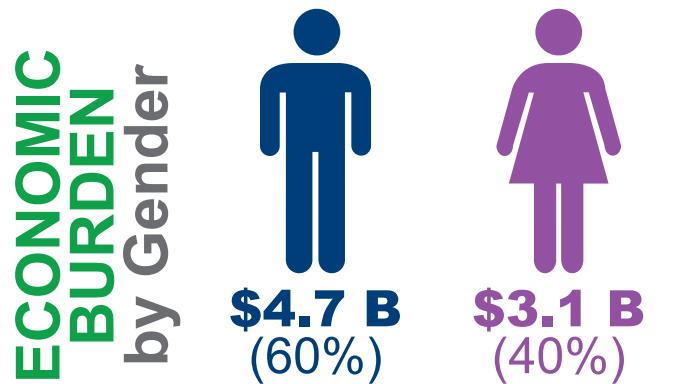
Healthy Schools & Communities

In 2017, PPH led the evaluation of the pilot year (2016-17) of a school-based sexual orientation and gender identity (SOGI) initiative. Nine school districts in BC participated in the pilot and the initiative has since expanded to over 50 school districts in the province. The evaluation found that those involved in the initial implementation year were positive and hopeful about the impact SOGI education can have for all students. They felt that the need and benefit of incorporating SOGI education in schools was becoming recognized by school boards across the province, but lack of resources for implementation (time and money) was a major concern.



Enabling Informed Chronic Disease Planning

PPH commissioned a study that estimates the direct health-care costs and indirect productivity losses associated with five chronic disease risk factors: excess weight (obesity and overweight), physical inactivity, tobacco smoking, alcohol use and low fruit and vegetable consumption. All estimates are based on 2015 data, an update from our previous report on three risk factors.



Community Health Profiles

To maintain the quality of information being provided, PPH is updating and evaluating the [BC Community Health Data website](#).

The website includes 142 community health profiles, a searchable health database, and a visual health atlas that provides local governments access to local-level, user-friendly health data. We work collaboratively with the Ministry of Health and BC health authorities to develop these tools.



Injury Prevention

Developing recommendations for provincial priorities

PPH provides ongoing leadership and support for Injury Prevention in BC, including chairing the BC Injury Prevention Alliance and BC Falls and Injury Prevention Coalition.

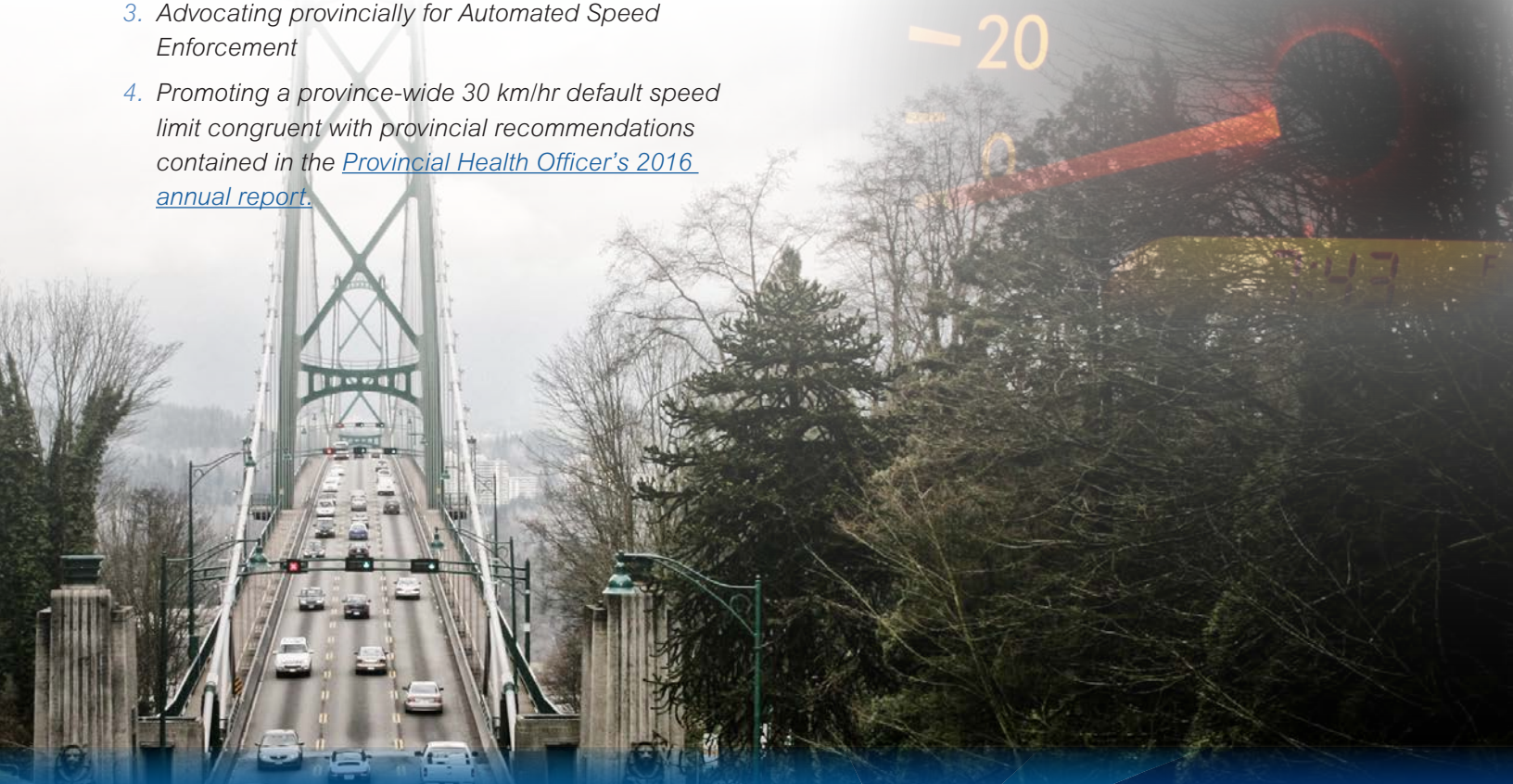
PPH partners closely with the [BC Injury Research and Prevention Unit](#), all health authorities and the Ministry of Health to achieve the provincial priorities set in 2016: Seniors Falls; Road Safety and Youth Suicide and Self-Harm.

Road Safety

PPH, in partnership with all members of the BC Injury Prevention Committee, led and supported the development of the provincial road safety recommendations for action and three-year work plan to address the provincial road safety priority.

The recommendations for action are:

1. *Supporting Vision Zero and Road Safety with municipal partners*
2. *Supporting the safety of Vulnerable Road Users*
3. *Advocating provincially for Automated Speed Enforcement*
4. *Promoting a province-wide 30 km/hr default speed limit congruent with provincial recommendations contained in the [Provincial Health Officer's 2016 annual report](#).*





Food Security

PPH leads provincial food security initiatives and collaborates with the Ministry of Health, health authorities and non-government sectors.

Developing Province-wide Priorities

In March 2018, PPH hosted a food security planning day with the Health Authority Food Security Committee – some of the priorities for the next three years include increasing collaboration with Indigenous partners & knowledge holders, focus more attention on household food insecurity (the inadequate or insecure access to food due to financial constraints) and develop a new set of food security indicators.

Shaping Public Health Policy

Our resources have been used by health authorities to provide evidence-informed responses to the consultations on the Agriculture Land Reserve and the BC Poverty Reduction Strategy. Data from food costing in BC has also been used by non-government sectors to calculate living wages and affordability in BC. This year, we are focused on a more coordinated approach to disseminating the 2017 Food Costing in BC findings.

Supporting Communities

This year, a joint priority for PPH and the regional health authorities is to support food security organizations to work more strategically with local governments to address food security. PPH partnered the BC Food Systems Network to offer coaching, a community of practice and webinars. The benefits of these tools include:

- Improved learning and collaboration between communities and decreased duplication of work
- Increased knowledge and confidence in working with local governments



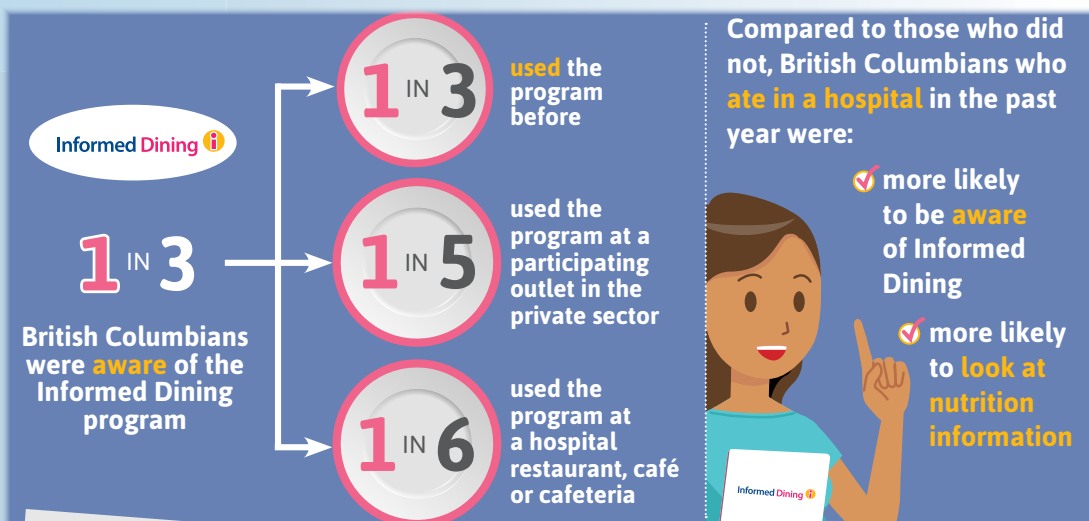
Healthy Eating and Healthy Weights

PPH provides operational management to provincially funded healthy eating programs such as BC School Fruit & Vegetable Nutritional Program, Farm to School BC, Farmers' Market Nutrition Coupon Program, Food Skills for Families, and Informed Dining. We collaborate with the BC Ministry of Health, HealthLink BC and the regional health authorities, to coordinate the development of provincial healthy eating resources for the general public and health professionals.

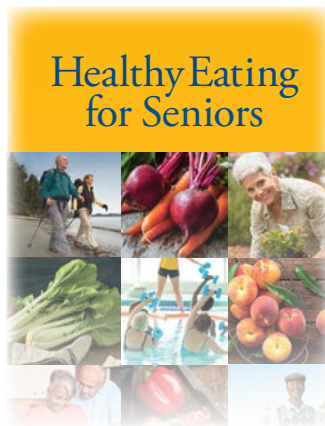
Informed Dining Program Evaluation

Informed Dining is a nutrition information program for restaurants that is voluntary for outlets in the private sector but mandated for retail food outlets in BC health care facilities. An evaluation of Informed Dining in Health Care was conducted in November 2017 to measure awareness, access, use and impact of the program on British Columbians and health care food retail customers.

Key findings - Program awareness



Nutri-eSCREEN®



Resource Development

In collaboration with the Ministry of Health and HealthLink BC, PPH led the adaptation and development of two online nutrition and physical activity self-assessment tools: [Nutri-eSTEP](#) for toddlers and preschoolers and [Nutri-eSCREEN®](#) for older adults. Benefits of the tools:

- Customized feedback and tips that support better health and well-being based on self-assessment results
- Local and provincial-level data that will inform policy and program development, and help assess the effectiveness of interventions aimed at improving nutritional status of these two populations.

PPH also led the update for the [Healthy Eating for Seniors Handbook](#). The handbook provides up-to-date evidence-based healthy eating and nutrition information to support seniors in maintaining or achieving a healthy lifestyle and preventing chronic disease.