



CSIH CANADIAN SOCIETY FOR
INTERNATIONAL HEALTH
SCSI LA SOCIÉTÉ CANADIENNE
DE SANTÉ INTERNATIONALE



ANNUAL REPORT 2016

CSIH (Canadian Society for International Health) brings the Canadian global health community together to better achieve a shared goal of improving health worldwide.

To accomplish this, CSIH focuses on three areas: providing spaces for its members and the broader Canadian global health community to share knowledge and build partnerships, improving health systems through international projects, and preparing young people as future global health leaders.

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CSIH gratefully acknowledges the contribution of technical advisors, consultants, volunteers, committee members and members who make its work possible.

CSIH and the Global Health Scene

Good health is both a means and an end in achieving the Sustainable Development Goals and in fact, any lasting development. However, despite technological advancements and economic growth, health issues continue to affect people, and to affect them unequally, as health gaps increase, even in high-income countries. CSIH is playing a key role in addressing these challenges through collaborations with national and international partners.

CSIH collaborated with Health Systems Global for the HSR2016 Symposium in Vancouver, a world-class event that drew the international community together to reflect on global health issues. The agenda, focusing on resilient and responsive health systems, was supported by a theme of equity and social justice based on people-centered care and empowerment processes. A special pan-Canadian event organized by CSIH featured a

diverse panel of experts to focus on Canada's role in realizing the SDGs.

CSIH's expertise in health-systems strengthening in low and middle-income countries contributed to improving child and maternal nutrition in Tanzania through a joint project with World Vision, and improving blood safety and infection control in Mongolia, as well as bringing a systems focus to policy discussions in Canada. In its contribution to the Global Affairs Canada International Assistance Review, CSIH emphasized the importance of including health systems strengthening in international development programming and aligning with the principles of "No one left behind."

In 2016, World Hepatitis Day once again increased its reach and impact across the country, and CSIH's efforts were recognized globally by the World Hepatitis Alliance. For the first time, the Canadian campaign was launched by the Health Minister,

the Honourable Jane Philpott, at a Parliamentary Breakfast event.

Initiatives that target Students and Young Professionals interested in a career in global health continue to build the next generation of Canadian researchers and practitioners. Along with the CSIH MentorNet program, other SYP programs in 2016 included internships with CSIH in Ottawa and a strong Emerging Voices program in connection with the HSG Symposium. The recipient of the Lifetime Achievement Award also serves as a model for aspiring world-changers.

All of this work lays a strong foundation for an upcoming year that will continue to bring the global health community together to help improve health and achieve the Sustainable Development Goals.

Jacques Girard and
Shawna O'Hearn

CSIH Co-chairs

Global Health – Setting the Stage

There were many challenges to population health around the world in 2016, as well as major achievements and successes.

Global Health under pressure:

- **Refugees** entering Europe had limited access to health care, which is dangerous considering that diseases spread easily in refugee camps due to a lack of sanitation facilities and close living quarters.
- The **Zika** virus that spread across South and Central America was found to cause glaucoma, hearing and vision loss, and growth impairments in infants exposed to the virus in utero.
- **Antimicrobial resistance** was declared a Public Health Emergency of International Concern by the WHO.
- There was a blatant disregard for the protection of **health services in several conflict zones**.
- Major political shifts created gaps in **sexual and reproductive health services**
- Health Canada identified the potential effects of **climate change** on health and well-being, including temperature-related morbidity and mortality, weather-related natural hazards including increased risk to vulnerable populations, and water and food-borne contamination.

- The number of overdose deaths from the use of **opioids** continued to rise in Canada and the U.S., calling widespread attention to the crisis.

Highlights in Global Health:

- **Technical innovation** has thrived in the delivery of health care in conflict. Drones delivered essential medicine and health supplies to patients and doctors.
- Outbreaks of **Yellow Fever** in Africa were successfully contained.
- The WHO declared that the **Ebola** outbreak in western-Africa was over.
- The Americas became free of **measles**.
- Europe became **malaria-free**.
- South East Asia beat **maternal and neonatal tetanus**.
- The issue of right to health and **Universal Health Care** (UHC) continued to gain traction
- Implementation of the **Sustainable Development Goals** began, including SDG #3: Ensure healthy lives and promote well-being for all at all ages.

It is in this ever-evolving context that CSIH, its partners and members played their role in pursuing the goal of improved health for all.



Bringing the Global Health Community to Canada

CSIH partnered with Health Systems Global (HSG) to successfully organize and host the 4th Global Symposium on Health Systems Research in Vancouver, 14th-16th November 2016.

The Symposium brought together 2,062 delegates from 101 countries to explore the theme, 'Resilient and responsive health systems for a changing world' and provided a forum for collaboration and knowledge-sharing amongst delegates from diverse backgrounds. Participants included researchers, practitioners, community groups, policy makers, and donors and funders.

Over the three days, there were 53 organized sessions, 248 oral presentations, 74 satellite and skills-building sessions, 385 posters, and 155 e-posters. Some 21 keynote speakers from different professions made presentations in four plenary sessions.

A Pan-Canadian session on "Sustainable Development for Global Health, Health Systems and Governance" highlighted innovative, multi-sectoral approaches to health systems strengthening that can help attain SDG 3, SDG 16, and 17. The session brought together more than 100 participants including senior government officials, academic and civil society organizations and individuals to reflect on the country's vision and strategic directions to achieve our national and international commitments to the health related SDGs.

In addition to active social media engagement, a series of blog posts related to the conference themes appeared in the *Development Unplugged* section of the Huffington Post.

The concluding statement of the Symposium included the following reflection: "... the resilience discourse should be positioned within achieving the SDGs and mobilizing collaboration and leadership across

sectors... Symposium delegates repeatedly stressed the importance of people and relationships, flexibility and the capacity to mobilize new resources."

In 2017, CSIH will return to host its own Canadian Conference on Global Health in Ottawa, 29-31 October. The theme will be, 'Leaving no one behind? Reflection for action in a changing world'.



Indigenous surgeon Dr. Nadine Caron speaks at the HSR 2016 Symposium

World Hepatitis Day, July 28

The World Hepatitis Day campaign in Canada brought together decision makers, public health professionals, community based organizations, and the general public to commit to the elimination of viral hepatitis.

The campaign was launched at an inaugural Parliamentary Breakfast, co-hosted by the Honourable Jane Philpott, Minister of Health, where she stated, “We are committed to do the work to end hepatitis as a public health threat by 2030.”

Health fairs, travelling road shows and speeches from Members of Parliament were arranged by more

than 65 organizations nationally, as well as WHD Mayoral Proclamations, workshops, presentations, and other innovative and informative events.

As an important aspect of the day, many of the more than 120 events included testing for Hepatitis C and vaccinations, as well as one-on-one, confidential consultations with healthcare professionals. CSIH hosted the WHD event in Ottawa, which drew more than 550 people and offered free consultation as well as information about prevention and treatment options.

Six prominent Canadian landmarks were illuminated in bright green in support of the message, ‘Know Your Status? Get Tested – Learn Your Options’.

WHD media coverage reached a record 8.4 million Canadians through a range of French- and English-speaking print, radio, and TV news outlets. Engagement in social media played an important role in the coverage of the day and #WHDCanada2016 was trending on Twitter.



Hon. Jane Philpott, Minister of Health, launches the WHD campaign in Canada

Strengthening Health Systems in Tanzania

CSIH began a new five-year project in Tanzania. ENRICH aims to improve the health and nutrition status of mothers, newborns and children through the delivery of essential health services, increased production, consumption and utilization of nutritious foods and micronutrient supplements, and strengthened gender-responsive governance and policy. ENRICH is led by World Vision Canada and Nutrition International, in collaboration with multiple Canadian and international partners.

CSIH is working to develop tools and guidelines, and prepare and deliver training programs for local health authorities. This will result in improved knowledge and skills in areas including leadership, mentoring, planning, budgeting, and data analysis, which will cascade from regional to district health managers, and then onto health facility managers.

The first steps of the project have been to conduct a situational analysis and training needs assessment to inform project implementation plans. In 2017, CSIH will begin active implementation, with multiple workshops and on-the-job coaching activities planned.



Hep C Network

CSIH's Global Hepatitis C Network in Canada, best known for its leadership of the World Hepatitis Day campaign, undertook numerous other activities throughout the year, including providing training on social marketing campaigns and health.

A survey and international environmental scan of Hepatitis C-related strategic plans, policies, and programs conducted by CSIH revealed gaps in HIV/HCV co-infection activities and policies in Canada.

New peer-reviewed academic articles were posted to the Knowledge Bank in the following categories: 10 articles on Research and Surveillance, eight on Diagnostics and Treatment, two articles on Prevention and Awareness and four articles on Management and Coordination.

Strengthening Health Systems in Mongolia

The Blood Safety, Medical Waste Management, and Infection Prevention Control project run by CSIH in Mongolia entered year three of its four-year duration.

During this period, CSIH provided technical specifications to upgrade existing equipment and infrastructure in blood banks, project hospitals and laboratories, and upgraded standard operating procedures for microbiology laboratories.

The project also served to pilot an active surveillance system for confirming and reporting cases of Hospital Acquired Infections (HAI).

In the area of Infection Prevention and Control (IPC), CSIH worked to prepare the National Center for Transfusion Medicine for eventual international accreditation on IPC, and developed undergraduate and postgraduate curriculum on the topic.

A medical van stops in front of a yurt in Mongolia



CSIH MentorNet

CSIH MentorNet connects Students and Young Professionals (SYPs) interested in global health with experts in the field, using a module-based curriculum to facilitate learning and help build the mentoring relationship.

CSIH received close to 200 Student and Young Professional (SYP) and 36 mentor applications, and selected 36 SYP-mentor pairs for the 2016 cohort.

A number of new MentorNet initiatives were launched, including a peer-to-peer SYP exchange group, a mentor networking list, and an 'Ask a Mentor' Q&A session.

Members of the MentorNet steering committee participated in several conferences, including the 2016 CUGH conference in San Francisco, and the PEGASUS conference in Toronto.

Lifetime Achievement Award

Every year, CSIH presents a Lifetime Achievement Award to one of its exceptional members. The 2016 award was presented post-humously to Dr. Duncan Pedersen at the Annual General Meeting in October 2016. His two sons were present to accept the award.

A world renowned researcher, Dr. Pedersen was Associate Scientific Director of International Programs at the Douglas Institute of McGill University and held the rank of Associate Professor in the Department of Psychiatry and Division of Social and Transcultural Psychiatry.

As a researcher and physician trained in public health, social epidemiology and medical anthropology, Dr. Pedersen had extensive experience in Latin America, mostly amongst indigenous peoples and the urban poor. More recently, he had extended his global mental health research to Guatemala, Jamaica and Nepal.

Dr. Pedersen was known as a kind-hearted, caring man who was always in good spirits. He was a highly respected member of the global health community and long-time member of CSIH.

He passed away on January 27, 2016.



Dr. Duncan Pedersen



Peru 1999

Financial Statements

STATEMENT OF OPERATIONS

for the year ended December 31, 2016

	2016	2015
REVENUE		
Projects – Technical Assistance	\$ 595,126	\$ 2,311,754
Global Health Conferences	696,145	394,352
Public Health Agency of Canada	231,348	197,914
Gain on Exchange Rate	(22,020)	43,256
Memberships	10,030	7,170
Other	32,146	17,956
	<u>1,542,775</u>	<u>2,972,402</u>
EXPENSES		
Technical Assistance	\$ 489,534	1,690,914
Global Health Conferences	651,577	350,855
Facilitation and Enablement	254,406	212,249
Program Development	45,245	38,781
Administrative expenses		
Salaries and Benefits	144,589	67,502
Variable Costs	45,177	50,439
Fixed Costs	32,959	40,886
Governance	10,759	12,691
Other	2,508	1,672
	<u>1,676,754</u>	<u>2,465,989</u>
EXCESS OF REVENUE OVER EXPENSES	<u>\$ (133,979)</u>	<u>\$ 506,413</u>

STATEMENT OF CHANGES IN NET ASSETS

for the year ended December 31, 2016

	Unrestricted	Contingency Reserve Fund	2016 Total	2015 Total
BALANCE, BEGINNING OF YEAR	\$ 293,924	\$ 250,000	\$ 543,924	\$ 37,511
Excess of Revenue Over Expenses	(133,979)	-	(133,979)	506,413
BALANCE, END OF YEAR	<u>\$ 159,945</u>	<u>\$ 250,000</u>	<u>\$ 409,945</u>	<u>\$ 543,924</u>

STATEMENT OF FINANCIAL POSITION

December 31, 2016

	2016	2015
CURRENT ASSETS		
Cash	\$ 549,948	\$ 781,872
Accounts Receivable	127,898	149,788
Work in Progress	134,671	226,790
Prepaid Expenses	5,024	13,844
	<u>\$ 817,541</u>	<u>\$ 1,172,294</u>
CURRENT LIABILITIES		
Accounts Payable and Accrued Liabilities	\$ 175,781	\$ 261,636
Deferred Revenue	231,815	366,734
	<u>407,596</u>	<u>628,370</u>
NET ASSETS		
Unrestricted	159,945	293,924
Internal Restriction - Contingency Reserve Fund	250,000	250,000
	<u>409,945</u>	<u>543,924</u>
	<u>\$ 817,541</u>	<u>\$ 1,172,294</u>



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