

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

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

MESSAGE FROM THE EXECUTIVE DIRECTOR

CSIH celebrated 40 years in 2017.



Besides being an excuse for balloons and cake, an anniversary can be a significant marker, especially if it's a milestone one. It is a time to remember our beginnings, and a celebration

of people and events that brought us to where we are. Looking back also serves as a springboard for looking forward.

When CSIH was founded in 1977 as the Canadian Institute for Tropical Diseases, nobody could have predicted the reach that we would have both nationally and internationally. Today we are known for our international projects, our mentoring program, our hepatitis C initiatives, and especially our annual Canadian Conference on Global Health. In 2017 we added a new Knowledge to Action project in HIV and HCV, as well as a community of practice in SDGs for health.

In many ways we are a different organization than we were in 1977. But over the years, during the periods of staying the course and the seasons of change, what makes CSIH special has always been the people – the staff, the board, the consultants, the volunteers, and the members.

That is why we celebrated our achievements in 2017 by celebrating the people who made them possible ... with a few balloons and cake!

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Eva Slawecki Executive Director, CSIH

MESSAGE FROM THE CO-CHAIRS

Over the past four decades of providing leadership to the global health community in Canada, CSIH and its partners have witnessed significant changes in the field of global health at home and abroad. In 2017, along with celebrating the past 40 years, CSIH also chose to focus on the future of the organization through a strategic planning process.

This process was only a success through the significant contribution of our members and partners. Your eagerness and dedication to be part of this work must be commended and acknowledged as we continue our global health journey together.

Through surveys, focus groups and interviews, we received feedback and insight into your hopes and aspirations for a global health community and the leading role of CSIH.

The exercise was both affirming of our role in the Canadian global health community and thought-provoking as to how we can continue to work collaboratively with new funding models, new partners and new global health challenges.

CSIH recognizes the increasing importance of students and young professionals (SYPs) as one of its key members and stakeholders in global health. We will be developing strategies for engaging and building capacity for and with SYPs as part of our future commitments.

The process confirmed that CSIH is ready to adapt, ready to act, and ready to contribute to the realization of the Sustainable Development Goals as we work toward "ensuring healthy lives and promoting well-being for all at all ages."

We look forward to working with you as CSIH continues to advance health equity in Canada and abroad.



Geneviève Dubois-Flynn, Co-chair, CSIH Board of Directors; and **Shawna O'Hearn**, Co-chair, CSIH Board of Directors



WHD Poster contest

As part of World Hepatitis
Day Canada, in collaboration
with Correctional Service
Canada (CSC), CSIH organized
a poster contest to encourage
inmates to test for hepatitis
as well as to learn more about
prevention. Hepatitis treatment is
available in federal correctional
institutions but many people
do not get the treatment they
need because they are unaware
they carry the infection.

This contest is open to inmates of Canadian prisons for both male and female detainees and has been held annually since 2013.

The 2017 edition was made possible with support from Merck and Co Inc. and Liver Care Canada.

Winning posters can be seen be seen online at www.csih.org.

WORLD HEPATITIS DAY CANADA 2017

Again in 2017, the Canadian Society for International Health coordinated the World Hepatitis Day (WHD) campaign in Canada. In order to encourage Canadians to get tested, and promote treatment and care for those affected by viral hepatitis, this year's theme was: "Know your status? Get tested – Learn your options."

Events across Canada included outreach activities, informational displays, public events, road shows, events on reserves, in-house educational sessions and more. The highlight of WHD Canada 2017 was the increase in activities that included testing for hepatitis C, including the event in Ottawa organized by CSIH. A number of WHD Canada events also had vaccination for hepatitis A and B, and featured testing for hepatitis B and HIV.

As in previous years, a number of iconic Canadian landmarks, such as Niagara Falls, were illuminated in light green on July 28th, 2017 to mark World Hepatitis Day.

The WHD campaign and the Ottawa event were sponsored by Bridgehead, the City of Ottawa, Enbridge, Gilead, Liver Care Canada and Merck Co. Ltd.



23rd Canadian Conference on Global Health

October 29-31, 2017, Ottawa, ON

In 2016, the United Nations' 17 Sustainable Development Goals (SDGs) came into effect to end extreme poverty while combatting health, social and economic injustices – with an overarching goal to leave no one behind. With this in mind, the theme for CCGH 2017 was "Leaving No One Behind? Reflection for action in a changing world."

The CCGH attracted practitioners, researchers, educators, students, policy makers and community mobilizers interested in global health to share knowledge and experience, and promote innovation and collaborative action.

CSIH gratefully recognizes the support of the International Development Research Centre, Leacross Foundation, He for She and the University of Waterloo. CCGH 2017 was host to the
Canadian launch of the
Lancet Commission report on
Pollution and Health. Maureen
McTeer, Commissioner and
Karti Sandila, Pure Earth,
presented the main points
from the report, including the
economic costs of pollution to
low-income and middle-income
countries. The Commission
reveals pollution's severe and
underreported contribution to
the Global Burden of Disease.

CCGH by the numbers....

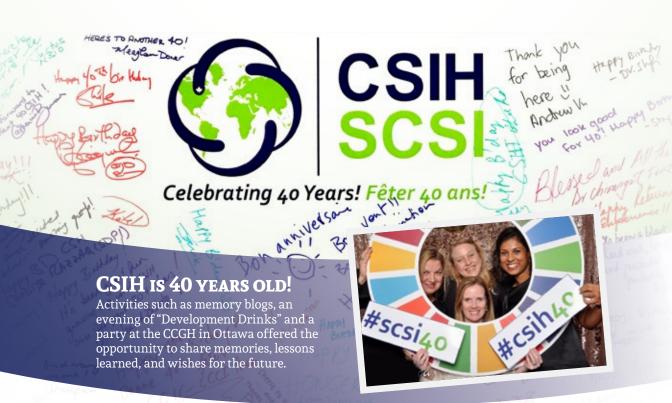
575 participants 25 countries

110 delegates from low and middle-income countries

LEAVING NO ONE BEHIND?

194 presentations





"My placement as a CSIH intern with the International Organization for Migration in Kenya changed the course of my life."

– Kelsi Kriitma, Senior Health Technical Advisor for IOM Somalia and South Sudan



"My experience as a CSIH intern in Ethiopia led me to pursue a degree in Global Health."

– Allison Soprovich 2006-2007 Intern

"I was introduced to CSIH in early 2001, when I reluctantly agreed to go to Croatia to advise on developing a population health survey. As it turns out, my fears were quite unfounded and this turned out to be one of the most fulfilling and rewarding experiences in my 35-year career with Statistics Canada. I am very proud to this day to have been part of such a meaningful endeavour."



- Lorna Bailie, consultant

"I was absolutely delighted that CSIH offered me a job that allowed me to get my foot in the door in international development. I am grateful to CSIH for the professional experience I acquired through my time there as well as the fond and warm memories I carry with me."

- Laura Madeleine Sie'



"Happy 40th Birthday CSIH. Over these 40 years, the Society and its members have touched many lives and helped elevate the voices of those seeking to be heard. We have grown in knowledge, accumulated some wisdom, and developed healthy insights. Here's to another 40 good years!"

 Kate Dickson, CSIH board member "I would frequently recall my experiences in CSIH as a reference point for many issues, such as the methodology of capacity building, the role of ministries of health and the World Health Organization, and the role of Canadian technical experts."

 Chris Rosene, former Director of International Development Programs, Canadian Red Cross, past Executive Director, CSIH





"CSIH, CSIH affiliated events, and CSIH mentors, have all played a significant role in my personal and professional growth in the field of global health... Thank you!"

- Yipeng Ge, Board of Directors Student Representative (2016 -)

- Carol Sutherland-Brown, CSIH board member, 2013-2015

"My background in health policy and international affairs, combined with previous board experience, drew me to serve on the Board of CSIH. Happy birthday, CSIH!"

- Carol Sutherland-Brown, CSIH board member, 2013-2015

INTERNATIONAL PROJECTS

Partnering to improve reproductive, maternal and newborn health in Tanzania

CSIH is contributing towards the reduction of maternal and newborn mortality in Tanzania by partnering on two projects to improve technical processes and build institutional capacity.

ENRICH: Enhancing Nutrition Services to Improve Maternal, Newborn and Child Health in Africa and Asia

2017 saw numerous changes in country protocols, along with devolution of health services in Tanzania.

CSIH carried out activities with regional and district health managers on planning and budgeting for health services, and on leadership and management for improved health governance. Notably, CSIH initiated a new approach to help health managers shift from instruction to coaching, using non-judgemental questions and ensuring an effective feedback loop. The approach (based on the GROW model) was received well, and CSIH plans to roll out training on this model to all health managers payt year.

ENRICH is a collaboration led by World Vision Canada, with Nutrition International, HarvestPlus, University of Toronto, and CSIH and is funded by Global Affairs Canada.

TAMANI: Tabora Maternal and Newborn Health Initiative

In January 2017, CSIH joined a new partnership led by CARE Canada, to improve the quality and access to reproductive, maternal and newborn health (RMNH) services in Tabora, Tanzania.

Over the next three and a half years, CSIH will be training the health system managers to effectively plan, manage, and deliver quality gendersensitive reproductive, maternal and newborn health services.

The TAMANI project, funded by Global Affairs Canada, includes the following partners: Society of Obstetricians and Gynaecologists of Canada, the Association of Gynaecologists and Obstetricians of Tanzania, and McGill Institute for Health and Social Policy.



Improving the quality of clinical services in Mongolia Blood Safety and IPC

CSIH continued operations in Mongolia in 2017 on the Fifth Health Sector Development Project (FiHSDP), focusing on developing and implementing new national processes to improve the quality of clinical services. A few highlights included:

- CSIH developed a manual to assist the National Centre for Transfusion Medicine in preparation for international accreditation in 2018.
- CSIH developed Standard Operating Procedures for microbiological testing, reporting, and quality control and distributed them to project hospitals
- CSIH presented a strategy for detecting hospital-acquired infections to the Ministry of Health with the goal that all project hospitals offering surgery will have an active infection surveillance system by the end of 2018.



CSIH MENTORNET

CSIH MentorNet connects Students and Young Professionals (SYPs) interested in global health with experts in the field for discussion and coaching over a period of eight months. In 2017,

applications received from students and young professionals (SYPs)

32 mentors from all over the world applied to participate

outstanding SYP-mentor pairs were selected

"The three SYPs I have mentored so far have been exceptional, and incredibly stimulating as friends and "emerging" professionals with a great future ahead of them."

Fernando Zacarías, MD, DrPH, Mentor

"My mentor was extremely approachable and great at explaining concepts and ideas that I hadn't previously thought of... He was a great resource to not only discuss the module materials but also important career decisions. He connected me with a lot of people he knew, which helped me expand my network within the global health field."



SDGs for Health: Community of Practice

In 2017, CIHR Health System Impact Fellow Sameera 1,44,8 Hussain joined the CSIH team and began establishing an SDGs for Health Community of IEALTH LL-BEING Practice (SDGs for Health CoP). designed to work with national and international networks towards the implementation of the 2030 Agenda for Sustainable **Development** with a focus on improving health outcomes globally.

K2A: HIV / HCV KNOWLEDGE TO ACTION

In 2017, CSIH launched a new program as a part of the Hep C Network in partnership with the Canadian Association for HIV Research (CAHR). The Canadian Alliance in HIV and HCV Knowledge to Action (K2A) consists of professional development workshops and events for researchers, professionals working in the non-profit sector, public health and healthcare professionals, and people living with HIV and/or hepatitis in Canada. In total, eight K2A events were hosted throughout 2017 including a session at the Canadian Conference for HIV/AIDS Research in Montreal in April and one at the Canadian Conference on Global Health in Ottawa in October.

The work of the K2A Alliance is funded by the Public Health Agency of Canada.

FINANCIAL REPORT

To download a copy of the 2017 audited financial statements, please visit **www.csih.org**.

STATEMENT OF OPERATIONS FOR THE YEAR ENDED DECEMBER 31, 2017			STATEMENT OF FINANCIAL POSITION DECEMBER 31, 2017		
	2017	2016	Assets	2017	2016
REVENUE			CURRENT ASSETS		
Projects -			Cash	\$ 333,165	\$ 549,948
Technical assistance	\$ 580,223	\$ 595,126	Accounts receivable	29,695	127,898
Global Health	200 =(2	(0(4/5	Work in progress	138,720	134,671
Conferences	309,762	696,145	Prepaid expenses	19,318	5,024
Public Health Agency of Canada	176,184	231,348		\$ 520,898	\$ 817,541
Memberships	16,730	7,310	Liabilities		
Other	17,956	10,030	CURRENT LIABILITIES		
Other _			Accounts payable and accrued liabilities	Ć OE 054	¢ 17F 701
	1,098,986	1,564,795	Deferred revenue	\$ 95,871	\$ 175,781
EXPENSES			Deferred revenue	150,695 246,566	231,815 407,596
Technical assistance	504,683	489,534	NET ASSETS	240,500	407,590
Global Health Conferences	309,430	651,577	Unrestricted	24,332	159,945
Facilitation and	505,450	051,5//	Internal restriction -	24,552	159,945
enablement	187,813	254,406	Contingency Reserve		
Program	207,023	251,100	Fund	250,000	250,000
development	37,025	45,245		274,332	407,945
Administrative				\$ 520,898	\$ 817,541
expenses					
Salaries and	00.001	4// 500			
benefits	89,084	144,589			
Fixed costs	49,622	32,959			
Variable costs	15,125	45,177			
Governance	18,080	10,759			
Loss on	40.454	22.020			
exchange rate	13,156	22,020			
Fellowship	9,356	-			
Other	1,225	2,508			
	1,234,599	1,698,774			
DEFICIENCY OF					
REVENUE OVER EXPENSES	\$ (135,613)	\$ (133,979)			

STATEMENT OF CHANGES IN NET ASSETS

FOR THE YEAR ENDED DECEMBER 31, 2017

	Unrestricted	Contingency Reserve Fund	2017 Total	2016 Total
BALANCE, BEGINNING OF YEAR	\$ 159,945	\$ 250,000	\$ 409,945	\$ 543,924
Deficiency of revenue over expenses	(135,613)	-	(135,613)	(133,979)
BALANCE, END OF YEAR	\$ 24,332	\$ 250,000	\$ 274,332	\$ 409,945



Canadian Society For International Health

1 Nicholas Street, Suite 726 Ottawa, ON K1N 7B7 Canada (613) 241-5785

www.csih.org