

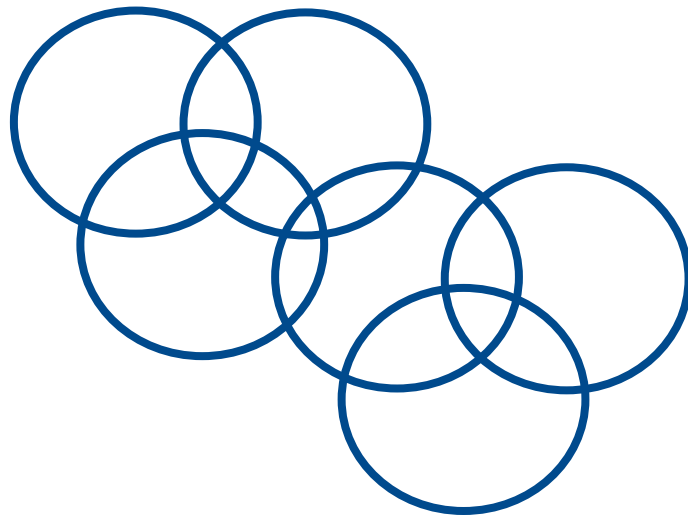


Public Health
Agency of Canada

Agence de santé
publique du Canada

Public Health Agency of Canada Sustainable Development Strategy 2007–2010

Toward Sustainable Development in Public Health



Canada

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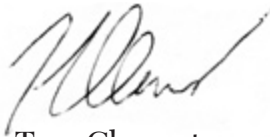


Message from the Minister

I am pleased to table the Public Health Agency of Canada's (PHAC) first sustainable development strategy. PHAC's mission "to promote and protect the health of Canadians through leadership, partnership, innovation and action in public health" gives it a key role in managing the economic, social and environmental determinants of public health and therefore contributing to Canada's sustainable development. In essence, contributing to sustainable development and integrating its principles into our work means thinking about all the implications of our actions, including the current implications and the possible long-term future implications on the health of Canadians.

Almost twenty years ago, the World Commission on Environment and Development (the "Brundtland Commission") defined sustainable development as "development that meets the needs of the present without compromising the ability of future generations to meet their own needs." Since then, the concept of sustainable development is increasingly influencing public policy and the behaviour of leading corporations worldwide.

With its mandate for leadership in public health, PHAC makes a substantial contribution to sustainable development by emphasizing the health of populations and the integrated impact of the economic, social and environmental factors that influence them.



Tony Clement
Minister of Health

I. Introduction

As a federal agency under Schedule I of the *Financial Administration Act*, the Public Health Agency of Canada PHAC or (“the Agency”) is required to prepare a Sustainable Development Strategy (SDS) within two years after its creation, to update it every three years, and to report to Parliament through its Departmental Performance Report on a yearly basis.

This year, PHAC will table two strategies:

- This one, setting the direction and introducing the goals and objectives we intend to pursue over the next three years; and
- A second one in December, with a detailed action and management plan.

PHAC will table this second strategy in December in order to coordinate the development of its action plan with that of thirty-three other departments and to work collaboratively on government-wide priorities.

As part of our preparations for this first strategy, Agency employees were interviewed in March and April 2006 to ascertain their understanding of sustainable development and the risks and opportunities that the Agency faces in relation to sustainable development. Agency staff showed they understand that environmental, social and economic conditions affect public health. Many also recognized that the Agency contributes to:

- economic sustainability, by promoting health and reducing health care costs;
- social sustainability, by building community capacity and empowering individuals; and
- environmental sustainability, through its environmentally conscious operations.

The PHAC interviews, as well as a separate Health Canada survey conducted in March 2006 that included PHAC employees, identified several opportunities, risks and challenges for the Agency in its first SDS. These are reflected in our choice of goals and objectives.

For this first strategy, PHAC recognizes the important contribution that it can make to sustainable development through its public health policies, programs and operations. The focus for its first set of targets is, however, on internal capacity – building the infrastructure to support further gains in the sustainability of operations and to support greater integration between public health and sustainable development.

2. Mandate

The Government of Canada established the Public Health Agency of Canada (PHAC) by Order in Council in September 2004. Bill C-5, the *Public Health Agency of Canada Act* is now before Parliament. The mandate, mission and vision of the Agency is as follows:

Mission:

- To promote and protect the health of Canadians through leadership, partnership, innovation and action in public health.

Mandate:

- In collaboration with its partners, to lead federal efforts and mobilize pan-Canadian action in preventing disease and injury, and promoting and protecting national and international public health through the following:
 - Anticipate, prepare for, respond to and recover from threats to public health;
 - Carry out surveillance, monitor, research, investigate and report on diseases, injuries, other preventable health risks and their determinants, and the general state of public health in Canada and internationally;
 - Use the best available evidence and tools to advise and support public health stakeholders nationally and internationally as they work to enhance the health of their communities;
 - Provide public health information, advice and leadership to Canadians and stakeholders; and
 - Build and sustain a public health network with stakeholders.

Vision:

- Healthy Canadians and communities in a healthier world.

For 2006–2007, the Agency will have a planned staff of 2,119 people across the country and an annual budget of about \$505.4 million. It manages four main program activities with a view to achieving its goal of healthier Canadians and a stronger public health capacity:

1. Health Promotion;
2. Disease Prevention and Control;
3. Emergency Preparedness and Response; and
4. Strengthening Public Health Capacity.



3. Sustainable Development and Public Health

The World Health Organization (WHO) has been a leader in exploring the interrelationship between public health and sustainable development (SD). WHO's definition of health, first published in 1948 and still used today, reads:

“health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.”

This definition implicitly recognizes the interrelationship between human health and social, economic and environmental conditions. The linkages between public health and sustainable development were further developed in preparation for the 2002 World Summit on Sustainable Development (WSSD) held in Johannesburg. WHO research showed that investment in human health is a powerful means to encourage economic growth, protect the environment and reduce poverty. Investments in clean water or immunization programs, for example, consistently yield economic benefits vastly greater than the costs associated with addressing and improving the most pressing health concerns.

Public health focuses on preventing diseases not just curing them. It pays attention to the economic inequalities, social problems and environmental issues that cause many diseases – and so addresses the root causes of disease. It does this by establishing policies, services and education programs that can prevent many diseases from occurring in the first place. This is not only good for the health of individuals and their communities (social sustainability), it also contributes to ecological and economic sustainability.

Source: UNESCO (1997), *Educating for a Sustainable Future: A Transdisciplinary Vision for Concerted Action*, paragraph 89.

WHO's holistic approach to public health has been influenced by and finds a parallel in Canadian efforts to create frameworks for understanding public health. The guiding concepts of *population health* and *determinants of health* share the same social, economic and environmental dimensions as sustainable development:

- *Physical factors* in the natural environment (e.g. the air we breathe, the water we drink, the food we eat) are key influences on health. Health Canada, for example, has identified eight significant health concerns related to climate change, including health effects from increased smog episodes, illnesses and deaths caused by heat and cold waves, water- and food-borne contamination, diseases transmitted by insects, health

effects of stratospheric ozone depletion, and extreme weather events.¹ Factors in the human-built environment such as housing, workplace safety, and community and road design are also important influences;

- *Social factors*, such as education and social support networks, that enable and support healthy choices and lifestyles, as well as people’s knowledge, intentions, behaviours and coping skills for dealing with life in healthy ways, are key influences on health;
- *Economic factors*, such as income levels and employment status, are important determinants of health. High-income groups have better access to quality health services. People who have more control over their work circumstances and fewer stress-related job demands are healthier and often live longer than those in more stressful or riskier work and activities.

By developing holistic concepts such as population health, by working with partners on strategies such as health goals, by addressing long-term and short-term public health issues such as epidemics and emergency preparedness, PHAC also serves sustainable development.

**Public health is therefore both a pre-condition to,
and an outcome of, sustainable development.**

Figure 1: Relationship – Public Health and Sustainable Development²



1 http://www.hc-sc.gc.ca/ewh-semt/climat/health_table-tableau_sant_e.html

2 Adaptation of a diagram by the US Partnership UN Decade of Education for Sustainable Development (2005–2014) at <http://www.uspartnership.org/images/stories/docs/desd%20tutorial%205-05.ppt> to reflect current Environment Canada terminology and PHAC’s sphere of influence.



4. Key goals, objectives and targets

The Agency's first SDS is structured around three goals:

1. Incorporating SD considerations into the planning and implementation of Agency activities;

Given the Agency's influence on national and international partners, this will be the central element of the Strategy. The Agency's grants and contributions programs, for example, offer an important vehicle through which to promote community capacity building. In its first SDS, Health Canada modified the guidelines for one of its contribution programs, the Population Health Fund, to permit funding of projects related to sustainable development. This led to funding of a number of projects, especially in Quebec, that link environmental, social and economic objectives (e.g., green roofs to reduce the "heat island" effect in downtown Montréal and provide food gardens to low-income people; the twinning of daycare centres with organic food suppliers to provide chemical-free food to young children). The Population Health Fund is a continuing program within PHAC. Further Agency activities will build on the Government-wide priority of sustainable communities and on the Agency's mandate to promote and protect the health of Canadians.

2. Ensuring that the Agency conducts its operations in a sustainable manner

The Agency is already active in greening its operations. In this round of strategies, every federal department and agency is expected to play a role in respect of three Government-wide priorities. The priority of reducing air emissions from vehicles is not relevant to PHAC because it has only five vehicles. PHAC intends, therefore, to focus on green purchasing options, hazardous waste management and resource efficiencies in its building operations.

3. Building capacity to implement Goals 1 and 2

All departments and agencies have articulated goals around internal capacity in their early strategies. Building internal capacity is essential to making progress under the above two goals. This component of the SDS is therefore a foundation for all SD-related activities.

We have defined capacity building as having three components: knowledge, tools and management systems. Included in this third goal of building internal sustainable development capacity is promotion of the means of linking sustainable development with healthy public policy.

Table 1 presents PHAC's goals, objectives and targets under its strategy. This strategy sets out preliminary targets that may change with the tabling of the December 2006 strategy.

**Table 1:
PHAC’s Goals, Objectives and Targets**

Goal 1: Incorporating SD considerations into the planning and implementation of Agency activities	
Objective 1	Contribute to building healthy and sustainable communities by integrating SD considerations into PHAC programs, policies, and initiatives
Target 1	Priorities on environmental health supported in future calls for proposals as one of the determinants of health (physical environment), and projects to address issues of sustainable development encouraged in all funded Population Health Fund projects
Target 2	Create a committee to advise program and policy areas on the health implications of climate change by July 20, 2007.
Objective 2	Improve the health status of Canadians by fostering preventive and collaborative approaches to sustainable development among the Agency and its partners
Target	To be developed in SDS II

Goal 2: Ensuring that the Agency conducts its operations in a sustainable manner	
Objective 1	Maximize the use of green procurement as a tool to protect the environment and support SD.
Target 1	75% of materiel managers and procurement personnel have received green procurement training by December 31, 2008, and green procurement training has been integrated into training related to acquisition cards
Target 2	Effective immediately, all new desktop computers, computer monitors and printers or multifunction devices (combined printer-scanner-fax) purchased are ENERGY STAR compliant
Target 3	Except for those that need graphics capacity, CRT monitors are replaced with LCD flat screen monitors that use less energy, emit less radiation and are lighter to carry by July 1, 2007
Target 4	By July 1, 2007, all group printers that are not capable of printing double-sided copy (duplex printing) are replaced by printers or multifunction devices (combined printer-scanner-fax) that are capable of printing on both sides of paper
Target 5	Effective immediately, the number of printers used is reduced, by authorizing individual printers only if the individual prints protected or secret documents on a regular basis or is physically disabled; and group printers or multifunction devices are placed in well-ventilated areas when possible
Objective 2	Minimize the generation of hazardous waste in Agency-occupied facilities
Target 1	By March 31, 2008, a database for monitoring the generation of hazardous waste and recycling opportunities, as a tool to assist with long-term planning, is developed and rolled out by the Head of the Laboratory Safety Division
Target 2	As of April 1, 2007, the Head of the Laboratory Safety Division provides assurance of ongoing monitoring of waste disposal for recycling opportunities and that all regulatory and safety requirements are met for laboratories in the National Capital Region
Target 3	As of April 1, 2007, monitoring of the usage of hazardous materials on an ongoing basis for possible alternatives and reduction, review of hazardous wastes volume on an annual basis, and use of alternative material to replace toxic and hazardous chemicals as they become available, where economically feasible, are carried out by the Head of the Laboratory Safety Division, in cooperation with the Associate Director of the Laboratory for Foodborne Zoonoses



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Goal 2: Ensuring that the Agency conducts its operations in a sustainable manner	
Target 4	By June 30, 2008, the implementation of a database for the monitoring of hazardous waste disposal, review of the nature and volume of hazardous waste on an annual basis, and use of alternative means of disposal, or alternative materials or processes as they become available, where economically feasible, are carried out by the Real Property Safety and Security Division (RPSSD) of the Infectious Diseases and Emergency Preparedness Branch's (IDEP) National Microbiology Laboratory (NML)
Objective 3	Increase resource efficiencies in operating PHAC buildings (energy and water)
Target 1	Energy efficiency is improved and water consumption is reduced in PHAC-owned laboratory buildings under normal operating conditions by 2% by FY 2009-2010, using FY 2005-2006 energy and utility management data as the baseline

Goal 3: Building capacity to implement goals 1 and 2	
Objective 1	Develop knowledge, commitment and action to implement sustainable development approaches to healthy public policy
Target 1	PHAC Strategic Environmental Assessments (SEA) of policy, plan and program proposals are tracked by March 30, 2008
Target 2	75% of PHAC employees have a good understanding of how SD applies to their work by March 31, 2009
Objective 2	Develop and use the tools to support the achievement of Goals 1 and 2
Target 1	A Sustainable Development Policy is developed and fully implemented by PHAC by March 31, 2010
Objective 3	Establish management systems to define and support the roles, responsibilities, authorities and accountabilities necessary to support implementation of the Sustainable Development Strategy
Target 1	PHAC management receives reports on progress toward sustainable development goals and objectives every four months and implements corrective action if needed, beginning July 31, 2007
Target 2	Sustainable Development Strategy commitments are effectively integrated into PHAC's key planning and reporting processes by March 31, 2010
Target 3	Sustainable development principles are considered in all budget review processes undertaken within PHAC by March 31, 2010

5. Moving forward

PHAC's first Sustainable Development Strategy, *Toward Sustainable Development in Public Health*, is a vision document that identifies the close links between public health and sustainable development. It outlines goals, objectives and some targets for sustainable development within the Agency. This document also signals the Agency's intention to table a more comprehensive and robust sustainable development strategy in December, when other federal departments will also do so.

This second version of the Sustainable Development Strategy will augment PHAC's initial strategy by:

- Taking into account guidelines provided by the Commissioner of the Environment and Sustainable Development and lessons learned from input into previous sustainable development strategies;
- Incorporating Environment Canada's Guidelines to be released later this summer for the fourth round of sustainable development strategies;
- Developing a full set of targets that reflect all three PHAC SD goals and further developing the strong program links between public health and sustainable development; and
- Designing a management framework, setting out roles and responsibilities, performance indicators and a monitoring strategy.

