



Centre for Health Promotion

UNIVERSITY OF TORONTO

---

**EIGHTH  
ANNUAL  
REPORT  
1997/98**

---

The Centre for Health Promotion  
University of Toronto  
100 College Street, Suite 207  
Toronto, Ontario, M5G 1L5  
Phone: (416) 978-1809 Fax: (416) 971-1365  
Email: [centre.healthpromotion@utoronto.ca](mailto:centre.healthpromotion@utoronto.ca)  
Web: <http://www.utoronto.ca>

# Foreword

## What we're about...

The Centre for Health Promotion was established in 1989 within the Division of Community Health, Faculty of Medicine, in Partnership with the Canadian Public Health Association and with strong support from other health sciences at the University of Toronto. Seed funding was provided by the Bertha Rosenstadt Endowment Fund.

## The Mission

The Mission of the Centre for Health Promotion is to contribute to the health and well-being of Canadians through basic and applied health promotion research, education and service. The Centre builds on existing strengths in the University of Toronto, collaborating partners and community institutions. In a multi-disciplinary context it activates, develops, and evaluates new approaches to health promotion.

## The Role

The Role of the Centre for Health Promotion is to be a focal point and catalyst for Health Promotion activities at the University of Toronto, and in the wider community (local, regional, provincial, national and international).

## Principles

The Centre carries out its mission acknowledging that the main purpose is to enable individuals and communities to increase control over the determinants of their health and thereby to improve their health.

The Centre itself serves as a model for experimenting with partnerships and collaboration. The activities of the Centre are influenced by its community partners. Every collaboration/partnership brings new challenges, expectations and skills and requires unique approaches and working relationships.

The Centre adopts a broad perspective on health promotion research which incorporates the development and testing of basic theory, the design and evaluation of specific applications in practice and the formulation and analysis of public policy options.

The Centre fosters activities that are integrative and trans-sectoral; cutting across traditional academic disciplines and established community sectors,

## Goals

1. To develop a comprehensive program of basic and applied research in health promotion.
2. To increase the scope and quality of education and training in health promotion.
3. To develop ways of providing service which will improve health promotion activities.
4. To maintain an infrastructure that ensures the long-term viability of the Centre.

# Table of Contents

	<u>Page</u>
<b>Director's Report</b>	4
<b>Reports from our Internal Units</b>	
<b>The Evaluation &amp; Monitoring Unit</b>	5
The Ontario Tobacco Research Unit	8
The Quality of Life Research Unit	11
The Health Communication Unit	13
<b>Reports from the Interest Groups</b>	
Cancer Prevention Interest Group	14
Healthy University of Toronto Interest Group	14
Mental Health Interest Group	14
School Health Interest Group	15
<b>Education &amp; Information</b>	
Seminars & Panels	15
Schools	15
Information Fairs	15
<b>Appendices</b>	
A-Those Who Make it Happen	16
B-Founding Outline 1997/98	22
C-Organizational Chart	please contact the centre

## Director's Report

1998 has been a year of transition for the Centre. Given that our core funding provided by the Rosenstadt Endowment Fund was to end in June, the Advisory Board appointed a committee to look at the future of the Centre and make appropriate recommendations. The committee consisted of three people from inside the university [Beth Savan, Harvey Skinner, and Lillian Wells (Co-Chair)] and three from outside [Sonya Corkham (Co-Chair), Maria Herrera, and Russ Kisby]. Following interviews and discussions with key stakeholders, the committee recommended that the Centre negotiate with the Dean of the Faculty of Medicine and the Chair of the Department of Public Health Sciences (PHS) to become part of the latter Department. The negotiations were concluded in November and the Centre is now part of the Department of Public Health Sciences. As part of this arrangement some base funding will be provided by the Faculty of Medicine. In addition, one of the new tenure stream positions in PHS will be designated to strengthen the academic base of the Centre and the Department has agreed to recruit my successor when my term ends on June 30, 2001. I am looking forward to strengthening our relationship with Public Health Sciences and to playing a significant role in the Department, particularly in relation to outreach activities.

Another significant development, which took place in 1998, was the funding of the Centre by Health Canada and the Social Sciences and Humanities Research Council to become the Coordinating Centre for the Canadian Consortium for Health Promotion Research for the next three years. Suzanne Jackson was appointed Coordinator of the Consortium in November and has just successfully led her first Consortium meeting. I am looking forward to working closely with Suzanne in this role.

Our international role also expanded significantly in 1998. Among other things, we were invited by the Canadian Society for International Health to be one of the Canadian Partners in a CIDA-funded project on Youth Reform in Ukraine. Barbara Ronson will act as our coordinator for this project. We also just received funding from CIDA to undertake a project in Chile in collaboration with the Ministry of Health. Paulina Salamo will be our coordinator. In addition, we recently won a contract from the World Bank to evaluate the impact of their projects in Estonia. Rick Wilson will be our coordinator. These three projects add to the other five international projects that the Centre is involved in, creating a critical mass of international work for the Centre. As a result, at the Annual Meeting, I will be announcing the establishment of an International Unit in the Centre under the direction of Fran Perkins.

Our existing internal units continued to be active during 1998 and reports of their activities follow. Among the highlights were:

- a review of the Health Promotion Resource System in Ontario which confirmed a central role for the Health Communication Unit in the system;
- the completion and dissemination of the community quality of life study by our Quality of Life Research Unit;
- the completion of national consultations with AIDS and NGO organizations by our Evaluation and Monitoring Unit;
- and the release of the Annual Tobacco Monitoring Report at the Ontario Public Health Association Meeting by the Ontario Tobacco Research Unit.

Similarly, our interest groups continued to evolve in 1998. In fact, we established two new groups - one on Seniors Health Promotion and another on School Health Promotion. Reports from other active groups follow.

The 1998 summer school in Toronto was a success thanks in part to the excellent coordination of Francine DeRoche and Anne Simard from our partner organization, the Ontario Prevention Clearinghouse. Next year it will be in Sudbury and will continue the tradition of development by adding a Aboriginal stream.

Thus, once again, the Centre has had a very successful year and has continued to evolve as an organization. To assist in this evolution, we will be expanding our Advisory Board to include a broader range of our stakeholders. We also anticipate playing a more active role in the Health Promotion Program and in developing a Collaborative Program in Health Promotion at the University of Toronto as well as continuing to develop our partnerships and activities at local, national and international levels. We hope that you will continue to work with us to these ends.

In concluding, I would like to thank everyone who has contributed to our success over the part year. At the risk of omitting someone who deserves special mention, I would like to especially acknowledge the contribution of the following individuals during 1998: Arnie Aberman, Andy Anderson, Ivan Brown, Sonya Corkham, Michael Goodstadt, Myrna Gough, Larry Hershfield, Maria Herrerra, Brian Hyndman, Suzanne Jackson, Barbara Kahan, Russ Kisby, Joanne Lacey, Heidi Liepold, Jody MacDonald, Barry MacDonald, Lorraine Marratt, Linda Norheim, Lavada Pinder, Heather Ramsey, Dennis Raphael, Barbara Rootman, Linda Sagar, Paulina Salamo, Beth Savan, Richard Schabas, Harvey Skinner, Reg Warren, Rick Wilson and Lillian Wells. I would also like to express my thanks to our Advisory Board, Community Advisory Committee, Affiliated Units, Members, Associates, Health Canada, Ontario Ministry of Health, The Social Sciences and Humanities Research Council and the Rosenstadt Endowment Fund.

Irving Rootman, Director

## Reports from our Internal Units

### The Evaluation & Monitoring Unit

#### **Evaluating and monitoring health promotion initiatives**

The Unit developed, and has begun to field-test, a framework to assist practitioners in evaluating health promotion initiatives.

The Unit also played a major role as a member of the *WHO European Working Group on Health Promotion Evaluation*. To date, the work of this group has resulted in the publication of *Health Promotion Evaluation: Recommendations to Policymakers*. In 1999, this group's work will be concluded with the publication of a book dealing with the many theoretical and practical issues associated with the evaluation of health promotion.

In collaboration with *Partners for Health* (East York and East Toronto), the Unit developed *A Handbook of Young Children's Mental Health Indicators and Resources*.

During 1997-98, the Unit undertook, or acted as a collaborator in, a number of evaluations of health promotion initiatives, including:

- *Family Enrichment Program, Regent Park (Toronto) Focus Community*
- *Community Action Program for Children (CAPC, Ontario Region)*
- *Nobody's Perfect Program (Ontario)*
- *Making a Difference*
- *Advisory Committee on Cancer Control (National Cancer Institute of Canada) Projects*
- *Better Beginnings (CAPC)*

## **Making the case for Health Promotion**

During 1997-98, the Unit made significant progress in (1) exploring the contributions (and challenges) in taking a best practices approach to health promotion, (2) consolidating the evidence concerning the effectiveness of health promotion, and (3) developing a framework for making the case for health promotion. This work has developed significantly, as demonstrated by the following accomplishments.

- **Best Practices in Health Promotion.** The Best Practices Work Group has defined best practice as "the set or sets of continually evolving actions and associated attitudes which are most likely to achieve health promotion goals in a given situation, and which are consistent with the values of health promotion". An underlying assumption is that because circumstances and conditions vary considerably from one situation to the next, there exist a number of "best practices" in health promotion, rather than a single "best practice". In addition, the Work Group's assessment is that adoption of a "best practices" approach to health promotion has the potential for both benefits and risks but that, if care is taken, benefits outweigh risks. The Work Group identified seven principles underlying best practices in health promotion. They are: health promotion values; health promotion processes; current and new knowledge; available resources; theoretical understanding of health and the determinants of health; sensitivity to power; and sensitivity to diversity.

During 1997/98, the Work Group produced several products, including: two background papers (dealing with Continuous Quality Improvement and with Best Practices in Health Promotion); a draft set of seven principles underlying best practices in health promotion; a series of workshop modules that introduce the concept of best practices and health promotion; and a detailed case study of the process the Work Group underwent in its early exploration of best practices and health promotion. A number of workshops dealing with best practices in health promotion have been presented at a variety of conferences, and a needs/capacity scan of the Ontario health promotion community, relating to best practices in health promotion, will soon be completed. The group also explored general operational challenges facing health promotion practice, and criteria for identifying best practices in health promotion.

Plans for future action include: identification and establishment of links and partnerships; dissemination of information and materials; dialogue concerning the different meanings attached to health promotion concepts and terminology; implementation of best practices in health promotion; and collection, development and distribution of resources and tools that will assist health promotion practitioners to understand, and implement, best practices.

- **Consolidating the Evidence on the Effectiveness of Health Promotion.** The Unit developed and has begun to test a framework specifically designed for consolidating the evidence on the effectiveness of health promotion initiatives. We also began to identify the many sources of information related to this evidence, including web-based databases and published syntheses of the literature. We are in the process of examining these compilations of evidence from the perspective of their contributions to health promotion as we understand it (e.g., according to the Ottawa Charter, and best practices in health promotion). We will then make these resources available for use by health promotion practitioners, researchers, etc.
- **Developing a Framework for Making the Case for Health Promotion.** As part of the Ontario Health Promotion Summer School, the Unit conducted a very successful 2-day workshop structured around a newly-developed framework for making the case for health promotion in general, and for taking a health promotion approach in addressing a variety of health and/or social issues/problems. It is anticipated that this framework will be further developed and tested.

## **Health Transfer Handbook - Medical Services Branch (MSB)**

Medical Services Branch is in the process of devolving Health Services to First Nation and Inuit communities south of the 60th parallel to assist them in assuming greater control over resources for designing and delivering health care programs and services to their members. The Branch has prepared handbooks, memoranda, guides and other resource materials over the years to support this process. A need to consolidate and update these resources has been identified by Health Canada head-quarters and regional staff as well as First Nations and Inuit community representatives. The role of the Centre has been to prepare community guides in developing transfer of health services agreements between First Nations and MSB.

### **NVO Relationship with Health Canada**

The Joint Working Group on the Voluntary Sector has requested the development of a policy framework for the relationship between the voluntary sector and Health Canada. Health Canada and the Joint Working Group on the Voluntary sector wish to ensure that all interested parties and groups have an opportunity to provide feedback and recommendations for the draft framework. This project describes a process to obtain this feedback. It involved the design, implementation, and analysis, of a key informant survey among voluntary organizations and the submission of a summary report.

### **AIDS Annual Reporting Framework- Feasibility Study**

In announcing the new Canadian Strategy on HIV/AIDS, the Minister of Health committed to reporting on the progress of the Canadian Strategy each December 1st, World AIDS day. This project identifies a reporting framework and process to meet this new annual requirement in the form of an annual monitoring/progress report. The report will serve to integrate and consolidate core information for strategy participants in an annual reporting process.

### **Health of Canadians Report**

The public version of the second Report on the Health of Canadians is intended to inform Canadians about the state of their health and the major factors that influence health. It is also intended to serve as a tool to raise awareness among government and non-government policy makers in a range of sectors of the population health approach and to identify actions that can be taken to make continued improvements. The report is aimed primarily at health professionals, policy makers, program planners and the educated public.

The Public Report will synthesize and highlight key findings from the statistical analyses in the technical compendium with respect to the health of Canadians and will identify implications of these findings for policy and program development in the many sectors that impact on the health of Canadians. The Report will also identify gaps, including gaps in data/data systems, key population health issues/challenges to the health of Canadians, and, where appropriate, identify emerging trends and future projections (e.g., using the data to suggest what future patterns of illness may be, projections about health status, etc.).

### **Community Mapping Project - (OPC partnership)**

The project will lead to the development of a plan, prototype/model and set of procedures for community utilization and participation in the power of the Internet and the World Wide Web. It will also establish a focal point at the Ontario Prevention Clearinghouse for the integration and linkage of communities. Our vision is to make the Community Health Information Network home page (OPC) a normal starting point in the planning of Community Health Promotion initiatives. The network will also "Link" all community health promotion programs.

The project will provide an important resource and structure for community participation and utilization of the Internet. It will document the types of information that as a minimum should be included in a community Web page, recommend a procedure to ensure linkage to the community network, offer an approach to negotiations with Internet providers, and identify information maintenance responsibilities for continuing a community Web page.

### **Ontario Sun Survey Report**

In collaboration with Cancer Care Ontario and the Ontario Sun Safety Committee, the Centre prepared a report on Sun Safety in Ontario based on an analysis of the National Sun Safety Survey. It was released during Sun Safety Week.

## **The Ontario Tobacco Research Unit**

### **Advisory Board**

The OTRU Advisory Board met three times in 1997-98. These meetings provided advice and direction for the Unit with respect to priorities for research and development and the work plan of the Unit. During 1997-98, Dr. Robin Room relinquished the Chair of the Advisory Board in order to pursue research interests in Scandinavia. He remains active within the unit as an affiliate. Josie d'Avernas, long-time Advisory Board member and Co-investigator agreed to chair the Board for a two-year term.

Other changes on the Advisory Board include the arrival of Ms. Darlene Mecredy (KFL&A Health Unit), Prof. Robert Norman (University of Waterloo), Dr. Ronald Sax (Waterloo Region Community Health Department), and Dr. Richard Schabas (Cancer Care Ontario), and the departure of Dr. Larry Brawley

(University of Waterloo), Dr. Kevin Glasgow (Brant County Health Unit), and Ms. Dianne Meisner (KFL&A Health Unit).

### **Working Group Activities**

The Unit organizes research activities around four working groups: Monitoring and Evaluation; Program and Policy Research and Development; Information Analysis and Dissemination; and Communication and Networking.

### **Monitoring and Evaluation Working Group**

The Monitoring and Evaluation group provides monitoring and evaluation support for the Ontario Tobacco Strategy (OTS). During 1997-98, the working group redefined the monitoring process, conducted a key informants assessment of the monitoring process, produced an Annual Monitoring Report and a supplementary monitoring report: Youth and Tobacco in Ontario 1997.

### **Program and Policy Research and Development Working Group**

The Program and Policy Research and Development working group develops effective and efficient OTS program and policy initiatives. During 1997-98 the working group published the Directory of Public Use Data on Tobacco Use in Canada; developed a searchable database on questionnaire items from surveys of tobacco use in Canada; began work on a smoking and pregnancy workshop; and collaborated on the Tobacco Resources Dissemination Service

### **Information Analysis and Dissemination (IAD) Working Group**

The Information Analysis and Dissemination working group is mandated to conduct regular literature reviews and analyses of ongoing research in priority areas. During 1997-98, the group published 11 issues of Current Abstracts on Tobacco plus 1 index issue, 2 Literature Reviews, 3 Special Reports, and 11 Working Papers

### **Library services**

During 1997-98, the OTRU Information Co-ordinator established a resource centre containing more than 2,400 electronically catalogued documents, conducted thirteen major literature searches for investigators, and updated the OTRU archive of over 200 literature searches

### **Communications and Networking Working Group**

This working group is mandated to develop a network of provincial, national and international tobacco researchers, to act as a focal point for provincial tobacco research, and to build communications links with partner organizations and community health systems. OTRU research membership (investigators, consultants and affiliates) increased by 4.

### **OTRU-NET Listserv**

Membership increased from 85 to 105 during 1997-98. OTRU-NET is now a primary vehicle for communication among OTRU investigators, associates and other interested participants.

### **WWW**

The OTRU Home Page on the World Wide Web can be found at <http://www.arf.org/otru>. In 1997-1998, we refined our web site to provide information that is more relevant for tobacco researchers.

### **Tobacco Research News**

In 1997-98, more than 375 individuals and organizations received two issues of the OTRU newsletter.



### **Administrative Activities**

The Unit's administration spent 1997-98 maintaining and enhancing its role as the support mechanism for the four working groups and OTRU investigators, managing the infrastructure of the OTRU, and improving communication inside and outside of the Unit. OTRU participated in the Health Promotion System Resource Centre Realignment

- The Principal Investigator team met in person or by conference call nine times in 1997-98.
- The OTRU Advisory Board met three times in 1997-98
- In order to pursue other interests, Reg Warren, one of OTRU's founding investigators, scaled back his involvement from Principal Investigator to Co-investigator.
- Thomas Stephens joined the Principal Investigator team.
- As directed by the Health Services Restructuring Commission, the Addiction Research Foundation merged with the Clarke Institute of Psychiatry, Queen Street Mental Health Centre and the Donwood Institute to create the Centre for Addiction and Mental Health. The President of the Centre, Dr. Paul Garfinkle, has affirmed the Centre's commitment as a sponsor for OTRU (APPENDIX G).

### **Principal Investigator Activities\***

Besides their administrative duties in 1997-98, 6 of 7 principal investigators collectively engaged in the following tobacco-related activities:

- produced 56 peer-reviewed articles, reports and chapters in books,
- made 22 presentations,
- were involved in 32 research projects, 25 of which were new
- carried out 10 major consultations
- sat on 12 committees
- supervised 5 graduate students,
- taught 2 tobacco-related courses.

### **Co-Investigator Activities**

18 of 33 reporting OTRU co-investigators (5% time commitment) collectively engaged in the following tobacco-related activities

- produced 21 peer-reviewed articles and chapters in books
- made 12 presentations
- were involved in 4 new research projects
- carried out 3 major consultations
- sat on 6 committees
- supervised 2 graduate students.

### **Collaborating Investigator and Consultant Activities**

20 of 27 reporting collaborating investigators and consultants collectively engaged in the following tobacco-related activities:

- produced 43 peer-reviewed articles and chapters in books
- made 14 presentations
- were involved in 10 new research projects
- carried out 8 major consultations
- sat on 11 committees
- supervised 1 graduate student.

### **Affiliate activities**

12 of 30 reporting Affiliates collectively produced 33 peer-reviewed articles and chapters in books, made 8 presentations, were involved in 10 research projects, and supervised 1 graduate student.

## **The Quality of Life Research Unit**

### **Current Research Projects**

The Quality of Life Research Unit has many active projects. The main ones are:

### **The Quality of Life Project (developmental disabilities)**

This is an Ontario wide longitudinal study of the quality of life of 504 adults with developmental disabilities. More than 200 of these were assessed at three different times during the study to follow changes in their lives over time. It is the core project of the Quality of Life Research Unit. This project began in 1991 and will be completed in December 1998. Results of the project to 1997 are available in a report published by the Centre for Health Promotion: ***Quality of Life - Dream or Reality? The Quality of Life Of People With Developmental Disabilities In Ontario.***

### **Community Quality of Life**

This project, completed in 1998, studied the quality of life of two Toronto communities, Riverdale and Lawrence Heights. It used a qualitative research methodology — mostly focus groups and interviews — to collect data about people's views of their own communities. An analysis of this data led to the publication of a number of booklets and a highly sought-after (>600 copies distributed) manual ***How To Carry Out A Community Quality Of Life Project: A Manual.*** Information about the project and FREE copies of all of our reports can be found at our www site within "Projects" and "Community Quality of Life."

### **Family Quality of Life**

This project arose from the developmental disability study, where participating family members often asked, "What about *our* quality of life?" A funded project involved in-depth interviews with 35 families from various parts of Ontario. A summary of the report on the findings is available on our website. A larger follow-up study that is currently being developed for funding involves a comparative look at family quality of life of families that have a member with a disability in Australia, Canada, and Israel.

### **Institutions to Communities Projects**

A group of projects that has arisen from the developmental disabilities study involves assessment of quality of life of people who are moving from institutions to communities across Ontario. At the present time, three such funded projects are occurring in Simcoe County, York Region, and Toronto.

### **Physical and Sensory Disabilities**

This project included the development of the long and short versions of the Quality of Life Profile for people with physical and sensory disabilities. The longer instrument was validated in the context of a study with adults between the ages of 18 and 64 who live in the Toronto area. A complementary study (a Master's thesis) was carried out with people living in urban and rural areas of Saskatchewan. A third study is now underway in England. Both versions of the instrument are based on a conceptual framework of quality of life developed for people with and without disabilities. But they also include items that reflect issues of special concern to adults who have physical and sensory disabilities, as identified by people with disabilities themselves. The long and the short versions can be used for interviews or self-administered and both scales are psychometrically sound. Publications about the development of these instruments and their psychometric properties are being prepared now.

### **Ongoing Quality of Life Work**

A considerable amount of work in quality of life continues from projects that are not currently active, but that still generate interest and activity.

### **Seniors Quality of Life**

A project was completed in 1996 and 1997 involving the quality of life of healthy seniors who lived in their own homes. The ***Seniors Quality of Life Profile***, is a questionnaire that is available in full, short, and brief forms. Out of the work with seniors, a focus on frail seniors was developed and led to an instrument Older Persons Health Status and Activities Profile. This instrument is currently being pilot tested.

### **Adolescent Quality of Life**

A project was completed in 1996 that involved identifying and assessing the key issues in adolescents' quality of life. The ***Adolescent Quality of Life Profile*** was developed and has now been validated. It has been used in numerous studies across North America including a large-scale study of gay and bisexual youth in Ontario.

### **Adult Quality of Life**

A measure for adults-in-general, the ***Adult Quality of Life Profile*** has been developed and undergone initial validation. It has been applied in numerous studies, including a study of community workers in North York and low income women attending a recreation camp in Ontario.

### **Other Quality of Life Projects**

Several other quality of projects are now being carried out by investigators from the Quality of Life Research Unit with partners from the university, other organizations, and the community. A project on quality of life for children with physical and developmental disabilities is being done in collaboration with parents of children with disabilities and investigators from several departments at the University of Toronto. Research to develop a quality of life instrument for people who use mental health services is being done in partnership with investigators from the Centre for Addiction and Mental Health (Clarke and Queen Street Divisions) and the Department of Occupational Therapy at the University of Toronto.

A number of other projects using quality of life instruments developed at the Quality of Life Research Unit are underway at the present time. Typically, these use some of the many quality of life materials developed at the Quality of Life Research Unit to assist with individual support planning, program planning, or program evaluation. By way of some examples, one project in Alberta is using the Adult Quality of Life Questionnaire to help develop personal support plans for people moving from mental health facilities to rural communities across the province. Another project in Manitoba is using the methodology developed here for adults with developmental disabilities to assess quality of life of adults who have become brain injured. In Texas, a university-based project is using the Adult Questionnaire to follow quality of life of a large group of alumni who graduated up to 40 years earlier.

### **Ontario and International Presentations**

Members of the Quality of Life Research Unit have made numerous conference presentations and have given numerous talks on their work. Many of these have occurred here in Ontario, but others were in Cyprus, New Zealand, Australia, the United States, and Israel. Keynote conference speeches were delivered at the Australian Society for Studies in Intellectual Disability in Adelaide, Australia, and at the Bloorview Macmillan's Research Day on Quality of Life in Toronto.

### **Ontario and International Involvement**

Members of the Quality of Life Research Unit are involved in a wide variety of community activities, and have several leadership roles. In addition, members of the Quality of Life Research Unit have assumed leading roles in an international initiative to develop an International Consensus Document on Quality of Life by July 2000.

### **Publications and Reports**

The Quality of Life Research Unit has been busy putting out a number of materials and publications in 1998. These include:

- 18 books, book chapters or peer-reviewed articles
- 10 reports
- 3 manuals or booklets. These include *Improve YOUR Quality of Life; How to Develop an Individual Funding Plan* ; and *How to Carry out a Community Quality of Life Project*.

### **The Health Communication Unit**

In our last fiscal year, THCU received an expanded mandate. In addition to training and consultation in health communication, we now support health promotion professionals in the areas of program planning, policy change and evaluation. So, what did we actually do? Quite a lot - read on.

We held 10 Provincial and 15 Regional workshops - our largest number ever. In addition, a special collaboration with the Sexual Health Week Planning Committee saw an additional eight workshops in developing communication campaigns across Ontario. Our tireless staff appeared at additional special events, often sponsored by partner agencies, and reached another 500 people.

Our consultation service helped over 350 people, and sharing and dissemination of our workbooks and other print resources reached untold millions...okay, maybe not millions, but close.

We continue to expand our presence on the Internet and plans for world domination, sorry, world health, through our website at [www.utoronto.ca/chp/hcu](http://www.utoronto.ca/chp/hcu) and in our collaboration with the Ontario Prevention Clearinghouse on the Ontario *Health Promotion Email Bulletin* (now serving over 550!).

Overall, the diversity and quantity of THCU clients and support services both increased, dramatically. A lot of new people are benefiting from and spreading the word about our services, and there are tons of new resources and supports in brand new service areas. All areas of our services were in high demand (with little need for promotion) and client evaluations of our services showed high satisfaction ratings.

## **Reports from the Interest Groups**

### **Cancer Prevention Interest Group**

During 1998, the Cancer Prevention interest group continued to meet regularly and to share information and support a variety of activities carried out by its members. Among the latter were: Training the Trainer Workshops using the film "**Exposure**"; the organization of a Forum to establish a Cancer Prevention Council in Toronto; and a St. Lawrence Forum Panel on Cancer Prevention. The group recently undertook a strategic planning exercise in which it concluded that it would like to continue to act as a mechanism for sharing information and providing support for its members as well as a vehicle for developing joint projects. It expressed interest in exploring the possibility of developing a participatory research project on cancer prevention.

### **Healthy University of Toronto Interest Group**

The Healthy UofT Interest Group continued to hold regular meetings during 1997/98. In April the group invited faculty, staff and students from across the campus to participate in a Healthy University Day at Joker's Hill, the purpose of which was to develop a strategy to make UofT an international model of a healthy community. Since that retreat, the group has prepared a tentative work-plan and has hired three work-study students to investigate current health promotion practices and initiatives on campus, with a mind to creating linkages between departments and faculties. In addition, focus groups are being conducted to evaluate faculty, staff and student concerns regarding broader health issues on campus.

### **Mental Health Interest Group**

The Mental Health Interest Group continued to hold regular meetings at the Centre. During 1997/98 they hosted two workshops.

- Spirituality and Health Promotion, with Professor John Raeburn of the University of Auckland, New Zealand. December 4, 1997 from 9 am to 12 noon. Croft Chapter House, University of Toronto.
- Presentation by Michael Murray of the Clifford Beers Foundation and the European Centre for Mental Health Promotion, Stafford, England. March 17, 1998 from 10 am to 12 noon. Croft Chapter House, University of Toronto.

## **School Health Interest Group**

This interest group was established in 1998 as a result of an interest expressed by Andy Anderson of OISE/UT for a forum in which to discuss the development of curricula in health for teachers and principals. Following a strategic planning exercise, the group agreed that it was indeed interested in doing so on a priority basis and a proposal was developed to permit work along these lines.

## **Education & Information**

### **Seminars & Panels**

- **A School-Based Participatory Approach to the Prevention of Eating Disorders.** February 12, 1998. Professor Niva Piran, OISE/UT.
- **Health and the Environment: What can we do to prevent cancer?** March 10, 1998. St. Lawrence Centre Forum. Rosalie Bertell, Nita Chaudhuri, Ruth Grier, & Irving Rootman.
- **Ethics: The Heart of Health Care & Health Promotion.** April 20, 1998. David Seedhouse, Research Unit for the Ethical & Legal Analysis of Health Care, University of Auckland.
- **A Multi-disciplinary Conceptual Framework for a Healthy Workplace Index.** September 17, 1998. Linda Robson, Institute for Work & Health.
- **Workplace Health & Safety Management Systems: A Canadian Community Development Approach & International Comparison.** October 16, 1998. Professor Joan Eakin, Department of Public Health Services.
- **Aristotle and Health Policy,** October 22, 1998. Dr. Sholom Glouberman, Baycrest Centre for Geriatric Care.
- **Lessons Learned in Delivering Workplace Health Programs.** November 19, 1998. Dr. Martin Shain, Centre for Health Promotion, Centre for Addiction & Mental Health.
- **The Economics of Breastfeeding.** November 26, 1998. Professor Sue Horton, Department of Economics, University of Toronto.

### **Schools**

- **Annual Health Promotion Summer School.** June 1 – 4, 1998, Toronto, ON.

### **Information Fairs**

- **UofT Day,** October 3, 1998.

# Appendices

## A - Those Who Make it Happen...

### Partners

Canadian Public Health Association  
Centre for Addiction & Mental Health  
Ontario Prevention Clearinghouse

### Affiliated Units (& Contact Person)

Centennial College, Wellness & Lifestyle Program (Coreen Flemming)  
Centre for Addiction & Mental Health, Workplace Program (Martin Shain)  
Green Eclipse Inc. (Bruce Small)  
Health Canada, Health Promotion Branch, Ontario Office (Pegeen Walsh)  
Homewood Behavioural Health Corp. (Robert Simpson)  
Hospital for Sick Children, Centre for Health Information & Promotion (Sheryl Mitchell)  
Innis College Environmental Studies Program (Beth Savan)  
Northern Telecom Canada Limited (Anda Bruinsma)  
Ontario Ministry of Health, Public Health Branch (Jerome Conway)  
Ontario Prevention Clearinghouse (Peggy Shcultz)  
ParticipACTION (Christa Costas-Broadstreet)  
Safe Kids Canada (Malak Sidky)  
Self-Help Resource Centre of Greater Toronto (Randi Fine)  
Smaller World Communications (Braz King)  
Technology & Health Foundation (Bruce Small)  
The Wellesley Hospital, Urban Health Initiative (Diana Moeser)  
The Toronto Hospital, Women's Health Program (Donna Stewart)  
Toronto District Health Council (Lori Wilson)  
Toronto Healthy City Office (Lisa Salsberg)  
Toronto Public Health Department (Bart Harvey, Bruna Corvesi, Maria Herrera)  
Women's College Hospital, Regional Women's Health Centre (Jan Silverman)  
YMCA of Greater Toronto (Laura Palmer-Korn)

### Staff

Ivan Brown	Senior Research Associate, Quality of Life Project
Betty Cobban	Research Assistant, Quality of Life Project
Doreen Cullen	Research Assistant, Quality of Life Project
Nancy Deming	Secretary, Ontario Tobacco Research Unit
Francine Deroche	Co-ordinator, Health Promotion Summer School (Francophone)
Nancy Dubois	Consultant, Health Communication Unit
Roberta Ferrence	Director, Ontario Tobacco Research Unit
Noelle Gadon	Office Co-ordinator, Health Communication Unit
Michael Goodstadt	Deputy Director; Manager, Monitoring & Evaluation Unit
Paola Greco	Secretary, Ontario Tobacco Research Unit*
Larry Hershfield	Manager, Health Communication Unit
Brian Hyndman	Consultant, Health Communication Unit
Suzanne Jackson	Co-ordinator, Canadian Consortium for Health Promotion Research
Barry MacDonald	Business Officer
Luba Magdenko	Consultant, Health Communication Unit*
Mel Martin	Program Manager, Ontario Tobacco Research Unit
Ted Meyerscough	Research Assistant, Quality of Life Project
Elizabeth Pawliw-Fry	Consultant, Health Communication Unit
Lauren Posner	Research Assistant, Evaluation & Monitoring Unit*
Barbara Ronson	Post Doctoral Fellow
Irving Rootman	Director
Linda Sagar	Secretary
Rachel Smith	Research Assistant, Evaluation & Monitoring Unit
Joanne Taylor Lacey	Information Officer
Lorraine Telford	Consultant, Health Communication Unit
Reg Warren	Consultant, Evaluation & Monitoring Unit

Nancy Weir  
Richard Wilson  
Diane Wiltshire

Project Coordinator, Evaluation & Monitoring Unit\*  
Consultant, Evaluation & Monitoring Unit  
Administrative Assistant, Ontario Tobacco Research Unit

\* No longer staff of the Centre

### **Students**

Victoria Barr  
Roni Beharry  
David Kim  
Anna Kusnomo  
Jason Maurier  
Safoura Moazami  
Jessica Polzer  
Rachel Smith

Evaluation & Monitoring Unit  
Evaluation & Monitoring Unit  
Healthy UofT Project  
Healthy UofT Project  
Healthy UofT Project  
Evaluation & Monitoring Unit  
Evaluation & Monitoring Unit  
Evaluation & Monitoring Unit

### **Outside Consultants**

Brian Leyland-Jones  
Elizabeth Rajkumar

Evaluation & Monitoring Unit  
Evaluation & Monitoring Unit

### **Advisory Board**

Arnie Aberman  
Michael Fullan  
John Hastings  
Bruce Kidd  
Donald Perrier  
Dorothy Pringle  
Wes Shera  
Eric Single  
Harvey Skinner  
Caroline Zackaruck

Dean, Faculty of Medicine  
Dean, OISE/UT  
President, Canadian Public Health Association  
Dean, Faculty of Physical Education & Health  
Dean, Faculty of Pharmacy  
Dean, Faculty of Nursing  
Dean, Faculty of Social Work  
Canadian Centre for Substance Abuse  
Chair, Department of Public Health Sciences  
Representative, Ontario Public Health Association

## **Community Advisory Committee**

Lynn Carriere  
Nita Chaudhuri  
Neville Chenoy  
Eva McPhail  
Joyce Scott

Myrna Slater  
Amy Thompson  
Sue Wong  
Hideko Yamashita

## **Members**

Tom Abernathy  
Mary Jane Ashley  
Steve Brown  
Jerome Conway  
Nancy Craig  
Coreen Flemming  
Bart Harvey  
Russ Kisby  
Dennis Raphael  
Rebecca Renwick  
Lisa Salsberg  
Peggy Schultz  
Martin Shain  
Malak Sidky  
Bruce Small  
Helen Suurvali

Health Planning Network  
Public Health Sciences, UofT  
Health Behaviour Research Group, University of Waterloo  
Ontario Ministry of Health  
Community  
Centennial College  
Toronto Public Health (formerly East York)  
ParticipACTION  
Public Health Sciences, UofT  
Rehabilitation Medicine, UofT  
Healthy City Office  
Ontario Prevention Clearinghouse  
Workplace Program, Centre for Addiction & Mental Health  
Safe Kids Canada  
Green-Eclipse Inc.  
Centre for Addiction & Mental Health

## **Associates**

Manuella Adrian  
Ken Allison  
Fred Ashbury  
Poonam Bala  
Lee Bartel  
Carmelina Barwick  
Sheela Basur  
Will Boyce  
Susan Bradley  
David Burman  
David Butler-Jones  
Roberta Castro  
Cecilia Chan  
Neville Chenoy  
Mary Chipman  
Bernard Choi  
Cordia Chu  
Robert Coombs  
Angela Colantonio  
Paul Corey  
Sue Corlett  
Doug Cowan  
Adele Csima  
Barbara Davis  
Evelyne de Leeuw  
Made Lourdes  
Karin Dornick  
Jenny Douglas  
Joey Edwardh  
Rick Edwards  
Marilyn Entwistle  
Gail Eyssen  
Hector Fernandez  
Lorraine Ferris  
John Frank  
Judith Friedland

International  
Public Health Sciences, UofT  
Picepa Consultants  
Community  
Faculty of Music, UofT  
Centre for Addiction & Mental Health  
Toronto Public Health  
Rehabilitation Therapy, Queen's University  
Hospital for Sick Children  
Faculty of Pharmacy, UofT  
Saskatchewan Health  
International  
Social Work & Social Administration, University of Hong Kong  
Community  
Public Health Sciences, UofT  
Health Canada  
Griffith University, Australia  
Community  
Occupational Therapy, UofT  
Public Health Sciences, UofT  
Community  
Health Systems Group  
Public Health Sciences, UofT  
Nutritional Sciences, UofT  
Rijksuniversiteit Limburg, The Netherlands  
Campero International  
Nutritional Sciences, UofT  
University of Birmingham, England  
Halton Social Planning Council  
Community  
Community  
Public Health Sciences, UofT  
Community  
Public Health Sciences, UofT  
School of Public Health, UC Berkeley  
Rehabilitation Medicine, UofT



Sharon Friefeld	Rehabilitation Medicine, UofT
Frances Gabriel	University of Luton, England
Margaret Galamb	Health Services, UofT
Judy Globerman	Faculty of Social Work, UofT
Vivek Goel	Public Health Sciences, UofT
Myrna Gough	Ontario Ministry of Health
Doris Grinspun	Registered Nurses Association of Ontario
Corinne Hart	Faculty of Nursing, UofT
John Hastings	Canadian Public Health Association
Linda Hebel	Thames Valley District Health Council
Maria Herrera	Toronto Public Health
Chantal Hilaire	Community
Linn Holness	Occupational & Environmental Health, UofT
Susan Horton	Economics, UofT
Liz Janzen	Toronto Public Health
Barbara Kahan	Community
Ilze Kalnins	Public Health Sciences, UofT
Eva Klein	Community
Linda Kremer	Community
Karmela Krleza-Jeric	Community
Hans Kunov	Biomedical Engineering, UofT
Ronald Labonte	Public Health Sciences, UofT
Jack Lee	Toronto Public Health
Maria Lee	Toronto Public Health
Rhonda Love	Public Health Sciences, UofT
Heather MacLean	Centre for Research & Women's Health, WCH
Luba Magdenko	Canadian Diabetes Association
Joanne Marshall	Information Studies, UofT
Victor Marshall	Human Development, Life Course & Aging, UofT
Elsa Marziali	Social Work, UofT
Robin Mason	Community
Ted Mavor	Grand River Hospital
Don McCreary	Psychology, Brock University
Keith McLeod	OISE/UT
Heather Munro-Blum	Research & International Relations, UofT
Linda Muzzin	OISE/UT
Ted Myers	Public Health Sciences, UofT
Mark Nagler	Community
Don Nutbeam	University of Sydney, Australia
Michel O'Neill	Ecole des Science infirmieres, Universite Laval
Patrick O'Sullivan	Heart Health
Karin Olson	Cross Cancer Institute
Laura Palmer Korn	YMCA of Greater Toronto
Linda Pederson	Morehouse School of Medicine, Atlanta, USA
Niva Piran	OISE/UT
Graham Pollett	Middlesex London Health Unit
Robert Prichard	University of Toronto
Dorothy Pringle	Faculty of Nursing, UofT
Jim Purdham	Occupational & Environmental Health Unit, UofT
John Raeburn	Public Health, University of Auckland, New Zealand
James Rankin	Royal Prince Alfred Hospital, Australia
Tracey Remkes	Community
Michael Roberts	Community
Barbara Ronson	Community
Robin Room	Centre for Addiction & Mental Health
Sara Rosenthal	Community
Lynn Sage	Community
Paulina Salamo	Access Alliance
Mark Sarner	Manifest Communications
Beth Savan	Innis College, UofT
Richard Schabas	Ontario Ministry of Health
Claire Scrivens	Community

Bob Shantz	Campus Chaplains' Association, UofT
Louise Signal	Ministry of Health, New Zealand
Gail Siler	Community
Jan Silverman	Women's College Hospital
Robert Simpson	Homewood Behavioural Health Corporation
Eric Single	Public Health Sciences, UofT
Kristine Sisson	Circle of Change
Harvey Skinner	Public Health Sciences
Trevor Smith	University of Waterloo
Jane Springett	Liverpool John Moores University, England
Donna Stewart	Toronto Hospital
Lydia Stewart Ferreira	Community
Bing Sun	Chinese Academy of Social Sciences, Beijing, China
Yves Talbot	Family & Community Medicine, UofT
Elizabeth Thorsen	Faculty of Physical Education & Health, UofT
Barb van Maris	Smaller World Communications
Evelyn Vingilis	Faculty of Medicine, University of Western Ontario
Elaine Walsh	Scarborough Grace Hospital
Pegeen Walsh	Health Canada
Barry Wellman	Centre for Urban & Community Studies, UofT
Lillian Wells	Faculty of Social Work, UofT
Elinor Wilson	Heart & Stroke Foundation
Linda Wilson-Pauwels	Biomedical Communications, UofT
Joanne Witt	Health Alliance
Christine Zaza	Community

## Funding Outline 1997/98

PROJECT TITLE	FUNDING SOURCE	GRANT PERIOD	CURRENT AMOUNT
ONTARIO TOBACCO RESEARCH UNIT (OTRU)	Ontario: MOH	07/98-06/99	\$400,000.00
Tobacco Act Enforcement (OTRU)	Ontario: MOH	04/98-12/98	\$ 6,500.00
HEALTH COMMUNICATION UNIT (HCU)	Ontario: MOH	04/98-03/99	\$300,000.00
Special Project (HCU)	Ontario: MOH	04/98-03/99	\$115,000.00
CHP Health Promotion in Estonia	Foundation for International Training	04/98-02/99	\$ 40,000.00
QUALITY OF LIFE RESEARCH UNIT (re: Developmentally Disabled)	Ontario: COMSOC	04/98-03/99	\$ 48,975.00
QUALITY OF LIFE RESEARCH UNIT (re: Facilities to Community)	Ontario: COMSOC	10/97-03/99	\$ 7,000.00
QUALITY OF LIFE RESEARCH UNIT (re: Data Collection)			\$ 80,351.00
CHP Mental Health & Workplace	Health Canada	04/98-03/99	\$ 45,002.00
CHP Effectiveness of Health Promotion	Health Canada	07/98-03/99	\$ 50,000.00
CHP Comprehensive Approach	Health Canada	07/98-03/99	\$ 22,000.00
CHP MSB Resource Pkg.	Health Canada	01/98-03/99	\$ 41,100.00
Ontario Tobacco Strategy (HCU)	Ottawa-Carleton Health Dept.	04/98-03/99	\$ 28,676.00
National Voluntary Organization	Health Canada	05/98-09/98	\$ 69,800.00
Health of Canadians	Health Canada	05/98-12/98	\$ 24,850.00
Summer School (HCU)	Ontario: MOH	04/98-03/99	\$ 70,600.00
Ukraine Canada Project Youth for Health	Canadian Society for International Health	07/98-02/02	\$ 44,000.00
Canadian Consortium for Health Promotion Research	S.S.H.R.C. Health Canada	09/98-03/01	\$ 150,000.00
Canadian Strategy HIV/AIDS	Health Canada	08/98-11/98	\$ 76,900.00
<b>TOTALS</b>			<b>\$1,620,754.00</b>