

CANADIAN
PSYCHOLOGICAL
ASSOCIATION



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DE PSYCHOLOGIE

March 26, 2004

The Honourable Carolyn Bennett, P.C., M.P.
Minister of State - Public Health
House of Commons
Ottawa, ON
K1A 0A6

Dear Dr. Bennett:

I would like to thank you for providing the opportunity for the Canadian Psychological Association to consult with you and your officials regarding the development of a Canadian Centre for Disease Control and Prevention. I have included previous correspondence to Ministers McLellan and Pettigrew, as well as a letter from Dr. Dixie Snider, Assistant Surgeon General and Acting Deputy Director for Public Health Science at the Centers for Disease Control and Prevention in Atlanta, Georgia.

As we have stated previously in our correspondence with the department, we strongly support your efforts to develop a Canadian public health agency and applaud the decision announced in Minister Goodale's budget speech. This is an important step that will show dividends for years to come.

We urge you to make the public health agency as powerful and effective as possible by incorporating social and behavioural scientists and practitioners in a meaningful way. As you are all too well aware as a physician, public health issues have a significant behavioural component. These include, for example,

1. wellness maintenance and enhancement
2. injury and illness prevention
3. effective chronic disease, chronic pain, and long-term disability management
4. relapse reduction and prevention
5. epidemic prevention and containment and
6. worker and population behavioural or psychological issues during a public health situation such as SARS.

The behavioural and social sciences can be most helpful at a programmatic level as well. A good example is their incorporation into the core operations of the CDC. Some examples include the:

1. design of effective public health programmes
2. evaluation of programs as part of ongoing programme deployment
3. design and assistance in the implementation of educational programmes and materials
4. development of de jure behavioural responses and interventions to address issues such as epidemic spread and uptake and
5. development of ongoing and time specific research frameworks as well as supervising and conducting the research activities themselves.

In the recent past, CPA has worked closely with the Canadian Medical Association and the Canadian Psychiatric Association to create materials for practitioners and the public during the SARS situation (please see enclosed).

CPA has also worked closely with other associations and Health Canada during and after the September 11 crisis (see enclosed). Although different from a public health situation, there are parallels.

The governance and administrative structures that oversee and operate the new public health agency need a strong behavioural and social science presence to ensure a balanced and inclusive approach. The Canadian Institutes of Health Research model that has the social and behavioural sciences represented on the Council (Board of Directors) and in the position of one of the Vice Presidents (Dr. Louise Nadeau, Professor in Psychology, Université de Montréal) is worth emulating.

The best predictor of future behaviour is past behaviour. Without this type of governance and administrative presence, the agency will in all likelihood migrate towards a primarily bio-medical approach. This has been the fact in Canadian health and health care over the past several decades. We sincerely hope this new agency will not follow this Canadian pattern when we can learn from the experiences and successes in other countries such as the United States.

We urge you to take similarly bold steps in relation to the development of the Canadian public health agency as you did to advance the cause of the disabled in Canada in regards to the Disability Tax Credit (DTC) and other similar actions. In fact, Dr. Karen Cohen, the Associate Executive Director of CPA, is a member of the ministerial task force and chair of the mental functions subcommittee examining the DTC. The public health agency needs your strong leadership in order to develop a truly innovative and effective agency that will better protect the health of Canadians.

Once again, thank you for this consultation. We would appreciate an opportunity to discuss these issues further with you and your officials. To that end, Patricia Black of our office will be contacting your office in the near future to discuss that possibility. If you have any questions or concerns, please do not hesitate to contact us.

Yours sincerely,



John Service, Ph.D.
Executive Director

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