

A HISTORY OF PUBLIC HEALTH IN ALBERTA, 1919-2019

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Public Health Leadership: Courage, Conflict, and Evolving Understanding of Power

Donald W.M. Juzwishin and Rogelio Velez Mendoza

Introduction

This chapter showcases twenty-two leaders in public health in Alberta; that is, people who have — over the course of our time period of interest (1919–2019) — been recognized as showing knowledge, courage, commitment, and passion in challenging the status quo and advancing public health science, practice, or policy in Alberta, at times at personal cost to themselves.

Our task in this chapter is somewhat fraught. On the one hand, there are many people who have done important work in public health throughout Alberta's history. From the point of view of the weakening of public health discussed in the introduction to this book, and our goal of contributing to a broad and coherent vision for the field, it is interesting and informative to learn about the accomplishments of key individuals from the past and present. To that end, we assembled the list from various sources, including crowdsourcing nominations from among our (admittedly, mostly professional) Alberta networks.

On the other hand, it would be a grave mistake to consider any historical list of leaders — including this one — uncritically. Who becomes a leader is not arbitrary, nor is it reducible to neoliberal notions of meritocracy. Paths to leadership are situated within social, economic, and political context, which manifest in differential opportunities along dimensions such as class, gender, and ethnicity as they intersect with discipline, sector, and profession. Collectively, these dynamics influence who appears — and who does not appear — in historical records, and why.

These dynamics of power are inherent to a broad vision of public health, and we encourage critical reflection by readers as they read this (inevitably incomplete) list of people who have contributed to public health in Alberta. We conclude our chapter commentary here.

Malcolm Ross Bow, MD (1887–1982)



Fig. 13.1: Malcolm Ross Bow. Published in the *Edmonton Journal* (5 October 1944), a Division of Postmedia Network Inc.

For twenty-five years, public health in Alberta was synonymous with Dr. Malcolm Ross Bow. Bow served as deputy minister of public health from 1927 to 1952, and there were few things related to health in the province that did not have his signature during this time (see also Chapters 3 and 4). His contributions shaped government efforts related to mental health, health units, health insurance, tuberculosis treatment, and maternity care, among others. He constantly stressed that investment in prevention, versus cure, was better for Albertans, and cost-beneficial for the province as well.¹

Born in Ontario in 1887, Bow travelled west after receiving his medical degree and spent fourteen years as chief medical officer of health in Saskatchewan. Under his leadership as deputy minister of public health for Alberta, initiatives included overseeing the expansion of health units in the province following a 1929 amendment to Alberta's

Public Health Act; increasing the number of district health nurses from twenty-five in 1939 to thirty-six in 1945; creating rural maternity and "Well Baby" programs around the province; and passing the Tuberculosis Act in 1936, which provided free diagnosis and care for pulmonary tuberculosis.² Also during his tenure as deputy minister, Bow oversaw the implementation of the Sexual Sterilization Act (1928), which he openly supported.³ Bow retained his deputy minister position through the significant change of government in 1935 with the election of the Social Credit party. Bow has been credited with being instrumental in efforts to lower mortality and morbidity from preventable diseases in Alberta.⁴

Bow was also an educator. From 1938 until 1954 he taught public health at the University of Alberta, and he published extensively on the topic, including several papers in the *Canadian Journal of Public Health*. He served as president of the Canadian Public Health Association in 1937. Bow died at the Royal Alexandra Hospital in 1982, at age ninety-four.

Ashbury Somerville, MD (1896–1967)



Fig. 13.2: Ashbury Somerville. Published in the *Edmonton Journal* (4 October 1952), a Division of Postmedia Network Inc.

Dr. Ashbury Somerville was born in Hartney, Manitoba and served overseas with the Canadian Army in World War I. Following the war, and after graduating from the University of Manitoba, he practised medicine for several years in Eckville, Alberta. Somerville subsequently obtained his diploma in public health from the University of Toronto in 1932 and served successively in three Alberta Institutions: the Red Deer Health Unit, the Baker Memorial Sanatorium in Calgary, and the Provincial Mental Hospital in Ponoka.

In 1936, Somerville became the medical officer of health of the Foothills Health Unit in High River, Alberta, and in 1942, he was appointed director of communicable disease control, director of health units, and inspector of hospitals for the provincial Department of Public Health.⁵ In 1952, Somerville became acting assistant deputy minister of health, succeeding Malcolm Bow upon his retirement, and

subsequently served as deputy minister of health until 1961.⁶

While serving on the Nursing Education Committee of the University of Alberta's General Faculty Council, Somerville chaired a committee to study and report on the nursing education facilities and programs of the schools of nursing in Alberta. He also contributed to the work of the Canadian Public Health Association, including serving for several years on the executive council and as president during 1954–1955. In 1965, the Canadian Public Health Association awarded him with an Honorary Life Membership.⁷

Although Somerville retired from active involvement in public health in 1961, he continued to contribute his time. In 1965, he was appointed chair of the newly formed Legislative and Lay Committee to study preventive health services in Alberta (see Chapter 12).⁸

Laura Margaret Attrux, LLD (1909–1987)



Fig. 13.3: Laura Margaret Attrux. “Laura Attrux, district nurse, Whitecourt, Alberta,” 1944, NA-3953-6, Courtesy of Glenbow Archives, Archives and Special Collections, University of Calgary.

Laura Attrux was born in Duck Lake, Saskatchewan, on 29 June 1909. For her contributions to nursing, she was recognized with an honorary doctor of laws degree from the University of Alberta in 1970.

Attrux enrolled at St. Paul’s Hospital School of Nursing in Saskatoon, graduating in 1930. Postgraduate training took her to the Vancouver General Hospital, where she trained in obstetrics followed by more intense training at the New York Maternity Centre and the Kentucky Frontier Centre. She received her certificate in advanced obstetrics for nurses from the University of Alberta and a diploma in public health nursing from the University of Toronto.⁹

Attrux started her career in obstetrics at the Holy Cross Hospital in Calgary in 1933. Her heart, however, was in public health,

and in 1939 she accepted a post in Valleyview, Alberta, a small rural community where she served for two years. Next, she moved to Whitecourt, Alberta, where she applied her public health skills in areas ranging from dentistry to veterinary work. In 1949, Attrux moved to Smith, Alberta and set up monthly clinics in surrounding communities. By that time, Slave Lake was large enough to have its own district nursing service, and Attrux accepted the position of district nurse in 1951. Ten years later, she took a position in Wabasca, north of Slave Lake, Alberta and convinced the Minister of Health, Donovan Ross, to provide a four-wheel drive vehicle for getting around the community.

Attrux served the Indigenous Peoples of the Wabasca region where her focus included tuberculosis control. In the fall of 1962, Attrux went to Swan Hills to establish the municipal nursing service and once complete she moved to High Level to set up the municipal nursing service in 1964, which was Alberta’s most northerly post and from where she served many surrounding communities, including Paddle Prairie, Keg River Cabins, Keg River Post, Rainbow Lake, and Carcajou. Serving such a large area and in the context of the oil boom in Alberta, Attrux enrolled in the local flying school and purchased a Cessna 150. When Rainbow Lake needed nursing service, she served the area by flying in. Attrux

loved serving her communities and was proud of having delivered 1,031 babies and having helped to set up nursing stations across the province. Attrux retired in 1974, after thirty-five years of public health service.¹⁰

Attrux died in 1987 and is buried near her childhood home in Hafford, Saskatchewan.

Helen Griffith Wylie Watson, BSc, MA (1911–1974)



Fig. 13.4: Helen Griffith Wylie Watson (née McArthur). Published in the *Vancouver Sun* (12 December 1946), a Division of Postmedia Network Inc.

Helen Watson made substantial contributions to public health at local, provincial, national, and international levels through her leadership as a district nurse, university educator, and director of public health nursing in Alberta.¹¹ Born in Stettler, Alberta, Watson graduated from the University of Alberta with a BSc degree in nursing in 1934, and she subsequently earned a major in public health nursing from the University of British Columbia.

Watson began working as a nurse in 1931 with the Okotoks/High River Rural Health Unit, one of Alberta's first experiments to establish health units to serve a rural population. In 1937 she joined the provincial Division of Public Health Nursing and served as a district nurse carrying out midwifery and emergency medical

services in Alberta communities that had neither a hospital nor a physician, including Stanmore, Peers, Valleyview, Kinuso, and Bow Island.

Recognizing the need for midwifery services in rural Alberta, Watson attended Columbia University, graduating in 1940. For her MA thesis, she developed a midwifery course for Alberta's district nurses. On her return to Alberta, Watson assumed the post of acting director of the School of Nursing at the University of Alberta, where she implemented the course. She continued to expand the provincial nursing service in her capacity as director of the Public Health Nursing Division in the provincial Department of Public Health, a position that she held from 1944 to 1946. During her time as director, seven "One-Nurse" health units were established in rural Alberta. Watson served as president of the Alberta Public Health Association in 1944–1945.

In 1946, Watson was appointed the first national director of Red Cross Nursing Services, a position she held for twenty-four years. She served on the International Council of Nurses where she chaired a nursing advisory committee, and she was president of the Canadian Nurses Association from 1950 to 1954. In 1957, the Red Cross awarded Watson the Florence Nightingale Award for her years of service, and in 1964 the University of Alberta bestowed an honorary doctor of laws degree. Watson was named an Officer of the Order of Canada just before her death in 1974.¹²

Edward Stuart Orford Smith, MSc, MB, DPH, FRCPC (1911–1983)



Fig. 13.5: E.S.O. Smith. Photo courtesy of family of Dr. Smith.

Edward Stuart Orford Smith was born in London, England on 10 July 1919. He grew up in London and attended Marlborough College, Cambridge University, and the University of London in England, followed by the School of Hygiene at the University of Toronto, earning a total of eleven academic degrees and fellowships.

In July 1940, Smith entered medical school at the London Hospital Medical College just as the World War II bombing of London began. The experience exposed him to more trauma victims than would have been the case during peacetime. He joined the army in 1943 as an officer for the First Battalion of the Manchester Regiment and landed in Normandy on 27 June 1944,

twenty-one days after D-Day.¹³ Interested in public health, Smith enrolled in 1946 at the London School of Hygiene and Tropical Medicine. After graduation he worked in England and in the French zone of Germany with the International Refugee Organization until 1951.

Smith's public health service in Alberta began in 1953 as medical officer of health in the Sturgeon Health Unit. He also served as director of local health services (1956–1966) and as director of epidemiology for the departments of Health (1967–1971), Health and Social Development (1971–1975), and Social Services and Community Health (1975–1979).¹⁴ Smith developed and taught a course in epidemiology at the University of Alberta. He was president of the Canadian Public Health Association in 1974–1975, where he served on numerous

committees including as chair of the Canadian Public Health Association's task force on fluoride. He was a member of the Alberta Public Health Association for more than twenty-five years, serving sixteen years in executive offices, including as president in 1965–1966.¹⁵

Smith wrote over thirty scientific publications on topics such as poliomyelitis, rabies, cancer, hypertension, smoking, alcohol, traffic accidents, venereal disease, heart disease, family planning, epidemiology, reporting and contact tracing methods, and occupational health. He served in Alberta as commanding officer of the #23 Medical Company in the militia and as provincial commissioner of the St. John Ambulance Brigade.¹⁶

A few of the honours awarded to Dr. Smith over his life include the Canadian Forces Decoration and Clasp; Knight of Grace, Order of St. Lazarus; Serving Brother and Officer Brother, Order of St. John; and Her Majesty the Queen's Silver Jubilee Medal. Smith died in 1983.

James Howell, MD, FRCPC, FPPHM (1934–2012)



Fig. 13.6: James Howell. “Dr. Howell, Edmonton Board of Health,” 1981, City of Edmonton Archives ET-28-262.

James Howell was born in Farnworth, Lancashire, England in 1934. He graduated with a degree in medicine from St. Mary's Hospital Medical School at the University of London in 1957. Howell was aware of and concerned about the social determinants of health, which led to his contributions to establishing programs to address health status inequities, child poverty, and community solidarity.

Howell immigrated with his family to Canada in 1967 to take the post of medical officer of health for the Sturgeon Health Unit in Alberta. Howell led the health unit in thinking about how it could best serve its community and address emerging public health challenges. In 1975, Howell became

the medical officer of health for the Edmonton Board of Health, which was succeeded by the Capital Health Region. Howell oversaw the food and lodging regulations when Edmonton hosted the Commonwealth Games in 1978 as well as the immunization programs during the swine flu scare of 1976–1977. In the latter situation, Howell had to make a difficult decision to abandon the vaccination effort when he heard of the possible harmful side effects of the vaccine.¹⁷

Howell devoted his career to promoting and protecting health. One of his most important initiatives was the creation of the inner-city Boyle McCauley Health Centre, Edmonton's only community health centre.¹⁸ As described by health units historian Adelaide Schartner, the centre served thousands of people living in significantly challenging circumstances, and "from the beginning, the goal of the health centre was to look at the whole person and include that person in decisions about their care."¹⁹

Howell was also a clinical professor in the Faculty of Medicine at the University of Alberta. In 1994, he was awarded the Canadian Public Health Association's R.D. Defries Award, their highest award, as well as Honorary Life Membership. Howell was an avid writer and historian of public health. He wrote a short history of the Edmonton Board of Health on the occasion of its 100th anniversary, which was published in the *Canadian Journal of Public Health*. Howell served the Capital Health Region for twenty-eight years. He died in 2012 after a brief illness.

John Waters, MD (1943–2001)

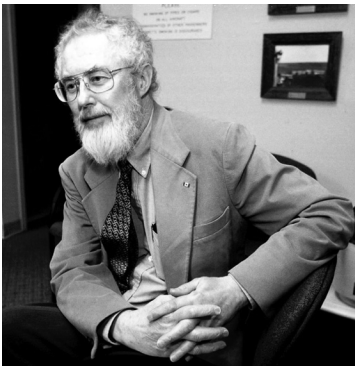


Fig. 13.7: John Waters. *Edmonton Journal*, 6 February 2001. Reproduced with the permission of the *Edmonton Journal*, a Division of Postmedia Network Inc.

Born in Edmonton in 1943, John Waters grew up in Winnipeg where he graduated from medical school in 1966. After some work in northern Manitoba, he was named Manitoba's chief medical officer. This experience brought him back to Alberta, where in 1980, he was named chief provincial health officer, a role he fulfilled for twenty-one years. Described by the *Globe and Mail* newspaper as "Alberta's low-profile lifesaver,"²⁰ Waters is credited as the driving force behind numerous provincial immunization programs that contributed to a decrease in the incidence of communicable diseases. Waters was passionate about child health, communicable disease control, and preventive medicine.

Waters established the Alberta Advisory Committee on Communicable Disease Control. He initiated the first provincial program for routine prenatal hepatitis B screening and introduced universal immunization programs including vaccines for measles, mumps, and rubella; haemophilus influenza type B; and hepatitis B, and he introduced a new whooping cough vaccine. He was regarded

as one of Canada's top experts in communicable disease. Waters held clinical posts in departments of pediatrics, medicine, and community health sciences, at the University of Calgary and the University of Alberta.

Waters established a Council of Medical Officers of Health. He also served on various committees dedicated to immunization and infectious disease control, including the National Advisory Committee on Immunization, the Canadian Pediatric Society's Infectious Disease and Immunization Committee, the Canadian Working Group on Polio Eradication, and the Canadian Working Group on Measles Elimination.²¹

Waters was awarded the Canadian Public Health Association's R.D. Defries Award in 2002 and a scholarship in his name is administered by the Alberta Public Health Association. Waters died in 2001 at the age of fifty-eight.

Shirley M. Stinson, MNA, EdD, LLD (1929–2020)



Fig. 13.8: Shirley Stinson. Photo courtesy of Shirley Stinson.

Shirley Stinson is recognized as a visionary leader, teacher, administrator, and researcher whose contributions are described as having changed the face of nursing in Canada.²² Born in Arlee, Saskatchewan, in 1929, Stinson's nursing career began when she graduated from the University of Alberta with a BSc degree in nursing. Stinson earned her master's degree from the University of Minnesota and a doctor of education degree from Teacher's College, Columbia University, NY, making her the first Alberta nurse to complete a doctoral program.

Stinson spent her early career as a public health staff nurse before becoming a University of Alberta faculty member in 1969, where she held joint professor positions in the Faculty of Nursing and the Department of Public Health Sciences in the Faculty of Medicine. Her vision and belief that graduate nursing students require knowledge of advanced clinical nursing practice, theory, research, and history were the basis for Stinson's work in the establishment of western Canada's first master's in nursing program in 1975 at the University of Alberta. Stinson also designed the first funded Canadian PhD in nursing program. She played key roles in convincing the Alberta government to support nursing research, and the 1982 establishment of the Alberta

Foundation for Nursing Research — with Stinson as founding chair — made Alberta the first jurisdiction in the western world to earmark funds for nursing research.²³

Stinson published extensively in scientific and professional literatures; lectured and advised professional organizations and institutions worldwide; served on advisory and development committees for international nursing conferences; and served as a consultant to organizations such as the Pan American Health Organization, the World Health Organization, and the Colombian Nurses Association in Bogotá.

Stinson received many awards, including the Senior National Health Scientist Research Award, which she was the first nurse and woman to receive. She also received Canada's two highest nursing awards: the Ross Award in Nursing Leadership and the Canadian Nurses Association's Jeanne Mance Award. Stinson was honoured by several lifetime memberships and four honorary doctorates. In 1999, she was awarded the Alberta Order of Excellence and in 2001, she was awarded Officer of the Order of Canada and invested in 2002.²⁴ Stinson died in 2020 at the age of ninety.

Karen Mills, DipNu, BScN, MHSA (b. 1932)



Fig. 13.9: Karen Mills. Photo by 2003 Wells Photographic Design for University of Alberta. Courtesy of Karen Mills.

Karen Mills was born and raised in Edmonton. Mills chose the public health nursing path because of an understanding that prevention, early intervention, and health promotion were essential ingredients in a healthy public.²⁵ Mills received her diploma in nursing from the University of Alberta Hospital in 1956, and subsequently completed her bachelor of science in nursing and master's in health services administration degrees at the University of Alberta.

Her career in public health spanned diverse roles, including public health staff nurse, associate director then director of nursing for the Edmonton Board of Health, and associate professor in the Faculty of Nursing at the University of Alberta. Mills served on a multitude of boards and organizations that focused on advancing the role of public health. Among her many honours are several lifetime memberships, including to the Alberta Public Health

Association and the Canadian Public Health Association. In 1989, Mills received the R.D. Defries Award from the Canadian Public Health Association. In 1993, she co-chaired the world's first International Conference on Community Health Nursing Research, which was held in Edmonton.²⁶

In her nursing director capacity, Mills' management philosophy included encouraging further education and continuous learning and fostering supportive environments that enhanced staff skills, abilities, and approaches. Initiatives under her leadership, aside from vital basic public health nursing programs, were many and varied. In 1979, for example, nurses were called on to collaborate with other agencies to develop an effective response to the impact of refugees arriving from Indochina. Mills led a collaborative, immediate, and supportive response to survivors of the 1987 Edmonton tornado. Finally, a pilot Short Stay Maternity Program launched with the Royal Alexandra Hospital in 1989 led to the establishment of the Alberta Health Services Health Link program.

In her own words, Mills said of her work: "what is positive today is the heightened interest and attention to the need for prevention and promotion strategies. There seems a greater recognition and understanding of the complex interplay of factors that create and challenge health and well-being. Public health nurses practise in this environment, entering people's lives through a range of vital programs that serve the broad spectrum of community life. Working in public health has been a privilege."²⁷

Doug Wilson, MD FRCPC (b. 1935)

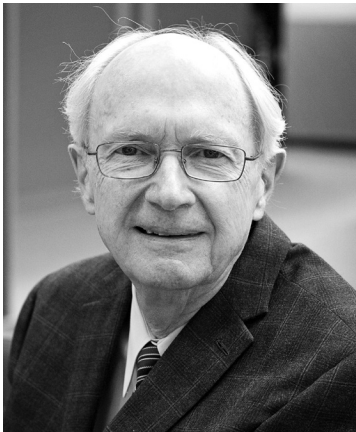


Fig. 13.10: Doug Wilson. Photo courtesy of the School of Public Health, University of Alberta.

Doug Wilson was born in Toronto in 1935. He graduated from the Faculty of Medicine at the University of Toronto in 1959 and trained in internal medicine and nephrology in Vancouver, Toronto, Boston, and London, England. In 1967, Wilson joined the staff of the Toronto General Hospital where he launched the kidney transplant program; he also practised, taught, and conducted research, and became professor of medicine and director of the Division of Nephrology. In 1984, he joined the University of Alberta as dean of the Faculty of Medicine, a position he held for ten years.²⁸

After his deanship of the University of Alberta's Faculty of Medicine, Wilson's

interest shifted toward public and population health and health promotion. He was instrumental in establishing the interdisciplinary Centre for Health Promotion Studies in 1996, which focused on the social and behavioural determinants of population health. He contributed substantially to the establishment of Canada's first stand-alone faculty dedicated to public health, at the University of Alberta, in the context of the post-Severe Acute Respiratory Syndrome crisis of the early 2000s (see Chapter 6).

Wilson is a Fellow of the Royal College of Physicians and Surgeons of Canada and of the American College of Physicians. He has received many awards for his contributions to public health including the Canadian Public Health Association Honorary Life Membership Award (2002) and Certificate of Merit (2006), and the Alberta Centennial Medal (2005). Wilson is a long-time supporter of the Alberta Public Health Association and is described by colleagues as a wise and respected leader. For him, public health's interdisciplinary focus and its strong connection to the community are critical elements to its success.²⁹

Muriel Stanley Venne CM, BA (b. 1937)



Fig. 13.11: Muriel Stanley Venne.
Photo courtesy of the Alberta Order of Excellence.

Muriel Stanley Venne, a member of the Métis Nation, was born in Lamont, Alberta in 1937. Through her advocacy she has advanced fairness and justice in the treatment of Indigenous Peoples in Alberta, Canada, and internationally, for which she was inducted into the Alberta Order of Excellence in 2019. Having suffered and survived tuberculosis in her adolescence, Venne empathized with the suffering of others. A strong advocate against the abuse of Indigenous women, she started the Native Outreach program at the Métis Association of Alberta. In 1973, Premier Peter Lougheed appointed her to the Alberta Human Rights Commission where she advocated for Indigenous human rights issues. In 1984, Venne established the

Institute for the Advancement of Aboriginal Women which serves to build community and educate people on the accomplishments of Indigenous women across Alberta. Instrumental in the publication of *The Rights Path – Alberta*, Venne raised awareness and understanding of Indigenous Peoples' human rights.³⁰

Venne is strongly committed to bringing attention to and changing how the Canadian law and criminal justice systems respond to systemic violence against Indigenous women. Her work resulted in 231 Calls for Justice from the National Inquiry into Missing and Murdered Indigenous Women and Girls in Canada.

Venne understands the importance of recognizing and celebrating successes.³¹ In 1995, she introduced the Esquao Awards, which honour the strength, resilience, and beauty of Indigenous women. Over 480 adult women from over ninety towns and cities across Alberta have received an Esquao Award.

Venne was honoured with the Alberta Human Rights Award in 1998, and she was the first Métis person to receive the Order of Canada in 2005.

Anne Fanning Binder, CM, MD, FRCPC (b. 1939)



Fig. 13.12: Anne Fanning. Photo courtesy of University of Alberta Hospital photography department.

Anne Fanning was born in London, Ontario, in 1939 and studied medicine at the University of Western Ontario, graduating in 1963. Although she developed an early interest in public health, shaped by her mother's work as a school physician, Fanning chose to study internal medicine and infectious disease under the tutelage of George Goldsand, who saw the importance of bringing together the practices of medicine and public health.

Fanning's early work with tuberculosis patients revealed to her the threat that a manageable disease posed for populations living in oppressive conditions. To facilitate her effectiveness in treatment of tuberculosis at the Aberhart Hospital, she employed three Indigenous health workers to increase communication between patients and staff and to alleviate the devastating effect of long-term hospitalization. In 1987, Fanning was appointed director of Tuberculosis Services for Alberta, a position she held until 1995 when she was, in her words, "downsized." In her teaching role in the Division of Infectious Diseases at the University of Alberta, Fanning emphasized the unique health issues of Canada's Indigenous Peoples. She helped to create the Indigenous Health Care careers program to encourage Indigenous students to study medicine.³²

Fanning's work at the University of Alberta drew her into the small but vigorous national and international community of experts involved in the prevention

and treatment of tuberculosis. She has been an active member of the International Union Against Tuberculosis and Lung Disease since 1987, where she served ten years as a board member, including one term as president. She was the founder of the Union's North American Region, and she continues to be involved in the Global Indigenous STOP TB initiative and the working group on Ethics and Social Justice in Lung Health. Although she retired in 2007, Fanning remains strongly committed to issues of social justice, giving occasional lectures on tuberculosis and global health, and working with the Alberta Council for Global Cooperation to advance the United Nations Sustainable Development Goals. She received the Order of Canada in 2006 and the Alberta Order of Excellence in 2017.³³

Wilton Littlechild CM, AOE, MSC, QC, IPC (b. 1944)



Fig. 13.13: Wilton Littlechild. Photo courtesy of the Alberta Order of Excellence.

Chief Wilton Littlechild was born on 1 April 1944 on the Ermineskin Reserve in Maskwacis, Alberta. He was taken from his family at age six and spent fourteen years at three different residential schools. Having experienced and borne witness to many sad and tragic abuses, Littlechild chose to focus on his positive experiences.³⁴ He gained resilience and confidence from sports, which he applied to education. While attending the University of Alberta, Littlechild played on the Golden Bears hockey and swimming teams and managed the basketball and football teams. He graduated with a bachelor's degree in 1967 and a master's degree in 1975, both in physical education.

Littlechild started the first all-Indigenous junior hockey team and many other sports programs in Alberta. He encouraged athletes to pursue their education by making that a prerequisite to play on teams he coached. A serious sports injury, coupled with a paucity of Indigenous lawyers, prompted Littlechild to pursue global Indigenous law as a career. In 1976, the Cree Nation honoured him as an Honorary Chief for being the first person with Indian Status from Alberta to graduate with a law degree.

His grandparents were strong influences on his life — they expected him to fulfill his responsibility to make his community better and stronger. After establishing his law practice on the reserve, he initiated — on his Elders' requests — a global Indigenous rights movement at the United Nations and several

other international forums that advocate for sports and for the United Nations Declaration on the Rights of Indigenous Peoples.

As the first member of Parliament with Status and a member of the Truth and Reconciliation Commission of Canada, Littlechild has been active in promoting health and well-being for youth in the physical, spiritual, and mental domains. For his achievements, he has received several honours, including five honorary doctorate degrees, induction as a Member of the Order of Canada, and eight honours in sports including induction into Canada's Sports Hall of Fame.

Bretta Maloff, RD, MEd (b. 1945)



Fig. 13.14: Bretta Maloff. Photo by Moreley Maloff; courtesy of Bretta Maloff.

Bretta Maloff was born in Pine Falls, Manitoba, in 1945 and graduated from the University of Manitoba in 1966 with a bachelor of home economics degree, followed by a graduate diploma in public health from the University of Toronto and a master's degree in education from the University of Calgary in 1982. Maloff started her career in public health nutrition in 1966 in Saskatchewan, initially in a summer job in medical services, and then with the Prince Albert Health Region, providing nutrition services in rural and Indigenous communities.

Maloff's career in Alberta began as a public health nutritionist with the Edmonton and Calgary Boards of Health. In those roles, Maloff led the development of several important initiatives, including nutrition services and in-home care for high-risk prenatal groups, provincial guidelines for infant feeding, and day care nutrition; the Canadian Heart Health Initiative demonstration project, which was a precursor to the comprehensive school health model in Alberta, and the successful 1989 Calgary water fluoridation plebiscite campaign (see Chapter 9).³⁵

When the Calgary Regional Health Authority was established in 1994, Maloff's role expanded to include leadership in community development and responsibility for developing the Strengthening Community Action and Public Participation Frameworks for the region. These led to collaborations with the University of Calgary in two research initiatives, funded by the Alberta Heritage Foundation for Medical Research and the Canadian Health Services Research Foundation. In 2005, her role expanded again to include managing several

health promotion programs in areas of maternal health, child health, Indigenous health, oral health, tobacco, injury, policy, community development, and nutrition. When Alberta Health Services was established in 2009, Maloff became the provincial executive director for health promotion. During that time, she served as a member of Health Canada's National Sodium Working Group and initiated Alberta Health Services' childhood obesity strategy. Toward the later years of her career, Maloff transitioned her focus to system-wide clinical quality improvement in the areas of diabetes; nutrition; obesity; and maternal, infant, and child health.³⁶

Maloff served as president of the Alberta Public Health Association in 1977–1978. She has served on the boards of the Canadian Public Health Association, Dietitians of Canada, and the Heart and Stroke Foundation, and is currently an active volunteer with Alberta Health Services' Cancer Strategic Clinical Network Core Committee and the Canadian Cancer Society Board.

David Swann, MD, FRCPC(C); MLA (b. 1949)

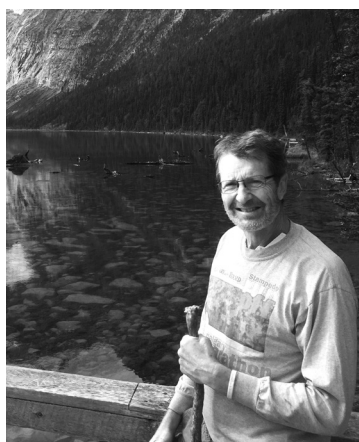


Fig. 13.15: David Swann. Photo by Dave Dunn; courtesy of David Swann.

David Swann was born in Taber, Alberta, in 1949. He describes his career as fruitful and filled with unexpected turns. After receiving his doctor of medicine degree from the University of Alberta in 1975, Swann worked for three years in mission hospitals in South Africa. He subsequently moved to Pincher Creek, Alberta, where he was discouraged by the absence of preventive health measures in practice. He returned to the University of Calgary in 1984 and completed his fellowship in community medicine. After graduation, Swann worked in a health development project in the Philippines for a year and a half, where he was demoralized by corrupt politics, poverty, and environmental destruction. After two years back in

Canada, he confronted medicine's impotence in challenging weak public policy, and assumed the role of consulting medical officer of health in southern Alberta, while also teaching part-time at the University of Calgary's medical school. In his medical officer of health role, he tackled contentious issues related to urban oil and gas activity, gun control, air and water pollution, game ranching, and feedlot operations.³⁷

Swann's career took a hard turn in 2002. As president of the Society of Alberta Medical Officers, he challenged the Alberta Conservative government to take action on climate warming after the society had formally supported the international Kyoto Protocol to reduce greenhouse gas emissions. He was abruptly terminated from his chief medical officer of health role with the Palliser Health Region. The public and medical communities were outraged at the dismissal, and Swann ran in the next provincial election in Calgary and became a Liberal MLA in 2004 (see Chapter 8).³⁸

An issue in public health today, Swann attests, is the reluctance of professionals to mobilize the political will for healthy public policy in areas such as the social determinants of health, gun control, and improving prevention and support for mental health and addictions. He attributes some of his success in politics and public health to “courageous individuals — regular citizens — who inspired me to think deeply about underlying causes [of ill health], organize, gather evidence, and courageously and persistently press elected officials to do their jobs — act in the long-term public interest.”³⁹

Jan Reimer, BA (b. 1952)



Fig. 13.16: Jan Reimer. Photo by Megan Kemshead Photography; courtesy of Megan Kemshead and Jan Reimer.

Jan Reimer was elected Edmonton's first female mayor at the age of thirty-seven. During her time as mayor (1989–1995) and since leaving office, she has worked to build stronger communities and support those experiencing abuse in their relationships.

Born in 1952, Reimer received her bachelor of arts degree from the University of Alberta. After a short period working in the welfare field in Australia and then community development in Edmonton, she served as an Edmonton alderman (now known as city councillors) for nine years. Her 1989 Edmonton mayoral campaign was unusual in that her platform emphasized environmental issues and social development and she was elected in spite of running a low-budget campaign. She also disclosed her biggest financial supporters; something that the other candidates did not do.⁴⁰ One of her biggest public health initiatives was a comprehensive waste management system for Edmonton, including curbside recycling that led to reduced use of the Edmonton landfill.

During her two terms in office, Reimer undertook several strategic initiatives, including the Mayor's Task Force on Safer Cities, a youth advisory committee, a diversity initiative, and an economic development strategy. After leaving office, she worked on the Senior Friendly initiative with the Alberta Council on Aging to create programs and guidelines to meet the needs of the growing population of seniors.

Since 2001, Reimer has worked as the executive director of the Alberta Council of Women's Shelters, a non-profit organization representing women's and seniors' shelters across the province. In that capacity, she has helped the organization to be an active voice on issues of family violence in Alberta through awareness and advocacy.

Reimer was recognized as Edmontonian of the Century in 2004, and she was a recipient of the Governor General's Award in Commemoration of the Persons Case in 2006 for her contributions to women's equality. Jan Reimer School in Edmonton, named in her honour, opened in 2017.⁴¹

Louis Hugo Francescutti, MD, PhD, MPH, FRCPC, CCFP(PC) (b. 1953)

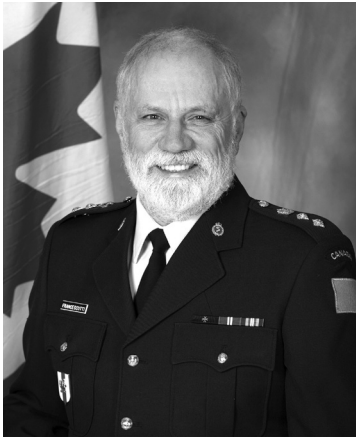


Fig. 13.17: Louis Francescutti. Photo courtesy of the Department of National Defence.

Louis Hugo Francescutti was born in Montréal in 1953. He was of the firm belief, and would not be satisfied, until the general public and political leaders finally understand that injury is a disease that can be prevented.

Francescutti completed his MD and PhD in immunology at the University of Alberta. While training as a resident in general surgery, he became interested in injury prevention. He understood that treating trauma was always a losing battle and that an emphasis on prevention should be the first step in trying to prevent trauma in the first place. Convinced of the value of prevention, Francescutti went on to complete his master's of public health and preventive

medicine residency at Johns Hopkins University in Baltimore.⁴²

One of Francescutti's contributions to public health include starting the Alberta Centre for Injury Control and Research and securing ongoing funding for that centre from the Alberta government. Prior to that, he created the

Injury Awareness and Prevention Centre at the University of Alberta. In 2005, Francescutti founded the Alberta Coalition for Cellphone-Free Driving. His sights were always set on health policy that would reduce injuries in Alberta.⁴³

As president of the Royal College of Physicians and Surgeons of Canada (2010–2013), and then president of the Canadian Medical Association (2012–2014), Francescutti advocated for and became a voice for injury control. He advocated for helmets for cyclists, mandatory seatbelts and child restraints, prohibitions on riding in the back of pickup trucks, and banning the use of cellphones while driving. To see success in public health, Francescutti believes it is crucial to be persistent and motivated, to set a target, and to persevere until that target is reached, all while not being afraid of being controversial.⁴⁴

In 2017, the governor general of Canada awarded Francescutti with a prestigious military meritorious service medal for “heightening the medical community’s support of the [Canadian Armed Forces] and their representation in activities under his purview.”⁴⁵ In 2010, he was acknowledged as one of the most influential Albertans by *Venture Magazine*, and in 2012 he was awarded the Queen Elizabeth II Diamond Jubilee Medal. Francescutti was named one of the hundred physicians of the century by the Alberta Medical Association / College of Physicians and Surgeons of Alberta in 2005.

At the time of writing, Francescutti is a professor in the School of Public Health at the University of Alberta, and an emergency physician at the Royal Alexandra Hospital, Edmonton.

Jim Talbot, MD, PhD (b. 1953)



Fig. 13.18: James Talbot. Photo courtesy of James Talbot.

Jim Talbot was born in Ottawa, Ontario, in 1953. Talbot believes that public health always wins, perhaps not in the time frame one expects, and not in the way one might hope, but public health is always victorious. Talbot thinks of public health as the best job in the world because the mission of those in practice is to help people they have never met. He calls it the ultimate humanitarian vocation.⁴⁶

Talbot received his BSc degree (1975) and his PhD (1980) in biochemistry from the University of Alberta prior to entering medical school at the University of Toronto, from where he graduated in 1985.⁴⁷ His

experience in public health includes his work as the director of the Provincial Laboratory of Public Health for Northern Alberta, a position that he held for ten years. Talbot served as a medical officer of health for Alberta Health Services in Edmonton, chief medical officer of health for Nunavut and Alberta, and is a founding member of two health surveillance networks: the Sistema Regional de Vacunas surveillance network in Latin America, and the Alberta Real-Time Syndromic Surveillance Network.⁴⁸

In June 2013, Talbot was responsible for the province's public health response following the southern Alberta floods, for which he received the Premier's Letter of Commendation. He also put together a provincial plan to address the fentanyl and opioid crises by adding treatment spaces in Alberta and distributing thousands of doses of the antidote naloxone.

Talbot's public health interests include surveillance and epidemiology to gather the evidence needed to guide action to prevent or mitigate disease and injury. He is also interested in the history of public health, public health leadership, advocacy, Indigenous and women's health and wellness, and emergency preparedness and management. He has written on the current state of public health, including serving as the sole Alberta coauthor on a 2017 commentary published in the *Canadian Journal Public Health* titled "The Weakening of Public Health: A Threat to Population Health and Health Care System Sustainability."⁴⁹

Karen M. Grimsrud, BMedSc, MD, MHS (b. 1954)



Fig. 13.19: Karen Grimsrud. Photo courtesy of Karen Grimsrud.

Karen Grimsrud was born in Edmonton, Alberta, in 1954. Grimsrud is a graduate of the University of Alberta; she completed her public health training at the University of Toronto. Grimsrud served in Alberta's public health system, holding the position of deputy medical officer of health with the Edmonton Board of Health from 1986 to 1995. Grimsrud then served with the Government of Alberta, first as deputy provincial health officer and then acting provincial health officer from 1996 to 2008, returning as chief medical officer of health from 2016 to 2019. From 2009 to 2016, Grimsrud worked with the Public Health Agency of Canada, where she led efforts in evidence-based public health methodology

and guideline development for the Canadian Task Force on Preventive Health Care.

Grimsrud's work has focused on immunization, communicable disease control, public health emergency preparedness, environmental health, chronic disease prevention, and public health guideline development. She oversaw the introduction of new vaccines in the Alberta Childhood Immunization Schedule, and she managed several major disease events including invasive meningococcal disease, measles, hantavirus, Severe Acute Respiratory Syndrome, and West Nile Virus. During her time as provincial health officer of Alberta, she provided provincial leadership in the risk assessment and response to several significant infection control circumstances, including an incident in a Vegreville hospital in 2007 when an outbreak revealed that hospital equipment had not been properly sterilized.⁵⁰ Grimsrud also led the development of provincial emergency preparedness plans, most notably the pandemic influenza response, and she co-chaired the Federal/Provincial/Territorial Pandemic Influenza Committee. Soon after re-joining the Government of Alberta in April 2016, Grimsrud led the public health response to the Fort McMurray wildfires (see Chapter 11). More recently she has brought attention to and implemented harm reduction strategies to address the opioid crisis. Grimsrud was the co-chair of the provincial minister's Opioid Emergency Response Commission, which was instrumental in advancing health policy and programs.

Petra Schulz, MEd (b. 1958)



Fig. 13.20: Petra Shultz. Photo by Richard Shultz; courtesy of Petra Schultz.

Petra Schulz was born in Germany in 1958 and studied special education at the Philipps Universität in Marburg, Germany. Since 2000, Schulz has taught in the Faculty of Health and Community Studies at MacEwan University, where she has advocated for equal citizen rights for children and adults with diverse learning needs.

Schulz is a highly visible and effective advocate who is committed to the introduction and implementation of harm reduction strategies and practices to reduce the death toll from drug overdoses. Schulz co-founded the volunteer parent and family advocacy group Moms Stop the Harm following the 2014 death of her son Danny, a talented chef,

to an accidental fentanyl overdose. Moms Stop the Harm advocates locally, nationally, and internationally for implementing evidence-based, public health and human rights responses to drug use and the opioid crisis, including support for harm reduction as a key component of a comprehensive response and support for the decriminalization of possession of drugs for personal use as essential to a public health approach.⁵¹

Schulz presents to researchers, clinicians, and community stakeholders and decision makers at provincial and national levels, advocating for the introduction of, and reducing access barriers to, naloxone kits; wider acceptance of supervised consumption sites; greater availability of evidence-based treatment for substance use disorders; reducing the social stigma of people who use substances; and the need for more research to understand the full social, political, and economic dimensions of drug overdoses, stressing that a multi-faceted societal approach is necessary.

Schulz points to the war on drugs as an utter political, policy, economic, program, and moral failure. In respect to the future of public health, she points to lessons learned from the opioid and fentanyl crises and failure of the public health response to them. She implores governments and public health officials to garner valuable insights into how society might address future social issues. She wants policy-makers to answer key questions: What went wrong in the response to the crises? How can we raise awareness of harmful drug use in society? How could we have prevented the crises? How do we remove the stigma associated with addressing drug use?⁵²

Kim D. Raine, BSc, RD, MA, PhD, FCHAS (b. 1961)



Fig. 13.21: Kim Raine. Photo by Virginia Quist, Visual Communications Associates, School of Public Health, University of Alberta. Courtesy of Kim Raine.

Kim Raine was born in Halifax in 1961. A dietitian, Raine says that she did not choose public health; it chose her. She studied nutrition and practised as a dietitian but recognized that the factors that influence people's nutrition were far greater than what many people understood and talked about. During her PhD studies in education at Dalhousie University in Halifax, Nova Scotia, she started studying the social determinants of health before they were called that, including talking with women living in low-income circumstances about feeding their children and trying to understand the relationship between health and income.

When she moved to Alberta in 1997, Raine became the principal investigator of the Alberta Heart Health Project, the objective of which was to build capacity for health promotion in health systems. She was the first faculty member hired in the University of Alberta Centre for Health Promotion Studies, which was created in 1996. The centre was interdisciplinary and focused on promoting health through addressing social determinants (see Chapter 6). She was the director of the centre from 2002 to 2008, during which time she led the Healthy Alberta Communities initiative, a community-based health promotion intervention. Then, she became an applied public health chair funded by the Canadian Institutes of Health Research and the Heart and Stroke Foundation. The focus of that work was community and policy interventions to prevent obesity and chronic diseases. In 2009, Raine co-led the creation of the Alberta Policy Coalition for Chronic Disease Prevention, which was, at the time of writing, in its tenth year of advocating for healthy public policy. In 2018, she was appointed associate dean of research in the School of Public Health at the University of Alberta. Raine believes that although public health as a system is weakening, public health principles are slowly being integrated within health and social systems. Initiatives that create health-promoting environments in schools and policies that promote a guaranteed basic income, for example, may not be part of the health system but are helping to reduce inequities and improve public health.⁵³

Raine considers herself an optimist, which she believes to be an essential ingredient for success in the field of public health. Her proudest achievement is advocating for healthy public policy, which she attributes to following her passion for addressing the social determinants of health.⁵⁴

Les Hagen, MSM (b. 1963)



Fig. 13.22: Les Hagen. Photo courtesy of Les Hagen.

Les Hagen was born in Lethbridge, Alberta, in 1963. Hagen is an example of how commitment to one cause and persistent advocacy can lead to change. Over his thirty-year career, he has contributed substantially to tobacco reduction efforts in Alberta, which have contributed to a marked decrease in tobacco consumption in the province (see Chapter 9). Hagen has been part of important changes in public health and tobacco control in Alberta. As he describes it, in the 1970s, Canadian health charities focused on education and were not actively engaged in

meaningful public policy measures. The mid-1980s saw organizations become more political, including hiring lobbyists to engage lawmakers and advance public policy measures to address chronic diseases, including via tobacco reduction.⁵⁵

Hagen joined the Group Against Smokers Pollution in Edmonton as a volunteer in 1987. Shortly thereafter, the group was renamed Action on Smoking & Health, and Hagen was hired as its executive director in 1989. Hagen led Action on Smoking & Health toward becoming more politically engaged; moving beyond addressing smoking in public places and realigning itself to confronting the tobacco industry and taking a broader mandate in tobacco control, including restrictions on advertising and promotion.

One of the biggest challenges for Action on Smoking & Health has been to overcome barriers resulting from Alberta's historical "cowboy" culture of limited regulation, low taxes, and a work hard/play hard lifestyle. A succession of governments in Alberta were not necessarily sympathetic to bringing forward comprehensive policy measures to address public health issues like smoking. However, thanks in large part to Action on Smoking & Health, Alberta is now leading the country on several important tobacco policy initiatives, including becoming the first jurisdiction in North America to pass legislation to ban flavoured tobacco.⁵⁶

Action on Smoking & Health and its partners have engaged actively with provincial and local policy-makers, and they have focused on creating publicity and shaping public opinion around tobacco control. Hagen attributes the group's successes to three factors: strategic efforts to keep the issue on the public agenda in a deliberate and systematic way; ongoing interaction with key policy-makers to advance the policy agenda; and working with other prominent health organizations that lend credibility and respect to the anti-tobacco cause while mobilizing thousands of members and supporters when required.

NOTES

- 1 "Regina's First Medical Health Officer Dies in Edmonton at 94," *Leader-Post*, 29 July 1982, A20.
- 2 *Act respecting the Prevention and Treatment of Tuberculosis*, Statutes of the Province of Alberta, 1936, c. 50.
- 3 Alberta Department of Public Health, *Annual Report 1931* (Edmonton: Printed by W.D. McLean, King's Printer, 1932), 20–21; Alberta Department of Public Health, *Annual Report 1932* (Edmonton: Printed by W.D. McLean, King's Printer, 1933), 19.
- 4 Robert Lampard, *Alberta's Medical History: Young and Lusty, and Full of Life* (Red Deer: Robert Lampard, 2008), 297.
- 5 "Report of the Committee on Honorary Life Membership. The Canadian Public Health Association 1964-1965, Annual Report – Part I," *Canadian Journal of Public Health* 56, no. 6 (June 1965), 261.
- 6 Provincial Archives of Alberta (PAA), *An Administrative History of the Government of Alberta, 1905–2005* (Edmonton: PAA, 2006), 292.
- 7 CPHA Resources, "Alberta Deputy Minister of Health and Supporter of CPHA."
- 8 "News Notes: Alberta," *Canadian Journal of Public Health* 56, no. 5 (1965): 225.

- 9 Archives Society of Alberta, "Attrux, Laura Margaret," Alberta on Record, College & Association of Registered Nurses of Alberta Museum and Archives collection, accessed 24 November 2018, <https://albertaonrecord.ca/attrux-laura-margaret-1909-1987>.
- 10 Kay Sanderson and Elda Hauschildt, *Remarkable Alberta Women* (Calgary: Famous Five Foundation, 1999), 200.
- 11 Sharon Richardson, "Helen Griffith McArthur – 1911–1974," in *American Nursing: A Biographical Dictionary*, ed. Vern Bullough and Lilli Sentz (New York: Springer Publishing Company, 2000), 3:196–198.
- 12 "Unlock the Past with CARMN," Unlock the past with Central Alberta Regional Museum Network, accessed 02 April 2024, <https://centralmuseumsab.ca/view/153/helen-griffith-wylie-mcarthur>; Bullough and Sentz, *American Nursing*, 198.
- 13 Jeff Titterton, "From London to Yellowknife: 40 Years a Doctor," *The Yellowknifer*, 2 February 1983.
- 14 "Years of Service to Public Health in Alberta and CPHA," Profiles in Public Health: E.S.O. Smith, CPHA Resources, accessed 24 November 2018, <http://resources.cpha.ca/CPHA/ThisIsPublicHealth/profiles/item.php?l=E&i=1326>.
- 15 CPHA Resources, "Years of Service to Public Health in Alberta and CPHA."
- 16 CPHA Resources, "Years of Service to Public Health in Alberta and CPHA."
- 17 *Edmonton Journal*, "James Howell," obituaries, 4 July 2012, <http://edmontonjournal.remembering.ca/obituary/james-howell-1066049623>.
- 18 Christopher Ruttly and Sue C. Sullivan, *This is Public Health: a Canadian History* (Ottawa: CPHA, 2010), 8.18, https://cpha.ca/sites/default/files/assets/history/book/history-book-print_all_e.pdf.
- 19 Adelaide Schartner, *Health Units of Alberta* (Edmonton: Health Unit Association of Alberta, 1983), 42.
- 20 Jill Mahoney, "John Waters: Alberta's Low-profile Lifesaver," *The Globe and Mail*, 19 July 2001, R7.
- 21 Mahoney, "Alberta's Low-profile Lifesaver."
- 22 "Dr. Shirley M. Stinson," The Alberta Order of Excellence, 1999, accessed 7 April 2024, <https://www.alberta.ca/aoe-shirley-stinson>.
- 23 Shirley Stinson, interview by Don Juzwishin, 28 September 2018.
- 24 "Shirley Marie Stinson, O.C., A.O.E., Ed.D., LL.D., R.N." Honours: Order of Canada, The Governor General of Canada, accessed 7 April 2024, <https://www.gg.ca/en/honours/recipients/146-306>.
- 25 Karen Mills, interview by Don Juzwishin, 28 September 2018.
- 26 Margaret King et al., *Proceedings of the First International Conference on Community Health Nursing Research: Health Promotion, Illness & Injury Prevention, Edmonton, Alberta, September 26th–29th, 1993* (Edmonton: Edmonton Board of Health, 1993).
- 27 Karen Mills, interview.
- 28 "Douglas R. Wilson Lecture series," School of Public Health, University of Alberta, accessed 5 June 2019, <https://www.ualberta.ca/public-health/about/academic-events/douglas-r-wilson-lecture/>.
- 29 "Douglas R. Wilson Lecture series," School of Public Health.
- 30 "Muriel Stanley Venne, CM, BA (Hon)," Alberta Order of Excellence, 2019, accessed 7 April 2024, <https://www.alberta.ca/aoe-muriel-stanley-venne>; "Esquao Awards Programs," Institute for the Advancement of Aboriginal Women, accessed 28 July 2020, <http://iaaw.ca/programs-services/esqua-awards-programs/>; Institute for the Advancement of Aboriginal Women, *The Rights Path – Alberta, 3rd ed.* (2001), accessed 28 July 2020, https://12e01dc8-2416-76ba-c3b5d01ce01e03b3.filesusr.com/ugd/b2f015_c99b319fa17149cc804ae4617a0aebf.pdf.
- 31 Muriel Stanley Venne, personal communication with Don Juzwishin, 13 December 2019.
- 32 Anne Fanning, interview by Don Juzwishin and Rogelio Velez Mendoza, 30 August 2018.
- 33 Anne Fanning, interview.
- 34 Chief Wilton Littlechild, personal communication with Don Juzwishin, 12 December 2019.
- 35 Bretta Maloff, interview by Temitayo Famuyide, 11 November 2018.
- 36 Bretta Maloff, interview.
- 37 David Swann, interview by Rogelio Velez Mendoza, 20 September 2018.
- 38 Brad Mackay, "Firing Public Health MD over Pro-Kyoto Comments a No-No, Alberta Learns," *Canadian Medical Association Journal* 167, no. 10 (Nov 2002): 1156–1156-a.
- 39 David Swann, interview.
- 40 Jack Masson and Edward C. LeSage Jr., *Alberta's Local Governments: Politics and Democracy* (Edmonton: University of Alberta Press, 1994), 310.
- 41 Paula Simons, "Former Mayor Jan Reimer on Women, Politics and Misogyny," *Edmonton Journal*, updated 31 January 2018.

- 42 Louis Francescutti, interview by Rogelio Velez Mendoza, 24 September 2018.
- 43 Louis Francescutti, interview.
- 44 "Louis Francescutti CV," The World Medical Association, accessed 7 April 2014, <https://www.wma.net/wp-content/uploads/2018/09/Louis-Francescutti-CV-FINAL-50-page.pdf>.
- 45 "Honorary Colonel Louis Hugo Francescutti, M.S.M.," Meritorious Service Decorations – Military Division, The Governor General of Canada, accessed 5 June 2019, <https://www.gg.ca/en/honours/recipients/139-1136>.
- 46 James "Jim" Talbot, PhD, MD, FRCPC Profile, *Alberta Public Health Association Newsletter*, Alberta Public Health Association (APHA) History Archives (Currently in transition to the PAA).
- 47 "James Talbot," Faculty and Staff, University of Alberta, accessed 4 June 2019, <https://www.ualberta.ca/public-health/about/faculty-staff/adjunct-emeritus-faculty/talbot>.
- 48 "James Talbot," Faculty and Staff.
- 49 Ak'ingabe Guyon et al., "The Weakening of Public Health: A Threat to Population Health and Health Care System Sustainability," *Canadian Journal of Public Health* 108, no. 1 (2017).
- 50 "Alberta Hospital Closed after Superbug, Sterilization Problems," *CBC News*, 20 March 2007, <https://www.cbc.ca/news/canada/edmonton/alberta-hospital-closed-after-superbug-sterilization-problems-1.668781>.
- 51 Petra Shultz, interview by Don Juzwishin and Rogelio Velez Mendoza, 31 August 2018.
- 52 Petra Shultz, interview.
- 53 Kim Raine, interview by Rogelio Velez Mendoza, 31 August 2018.
- 54 Kim Raine, interview.
- 55 Les Hagen, interview by Rogelio Velez Mendoza, 30 November 2018.
- 56 Les Hagen, interview.