

2020/21 Annual Report June 22 2021

This past year has been a year like no other. With the global COVID-19 pandemic, we have seen the importance of lung health come to the fore front as one of the main healthcare issues to be addressed in our province and country. The Manitoba Lung Association continues to be recognized as the leader in promotion and advancement of lung health for all Manitobans.

Working through a pandemic has had its challenges but we have had a successful year despite issues presented by the pandemic. The Board and committees immediately moved to meeting virtually. We are pleased to report the year ended in a strong fiscal position thanks to expense control, some significant bequests, and the generosity of our donors.

In July 2020, the province of Manitoba granted the corporate continuance, moving the organization from the Sanatorium Board of Manitoba Act (the SBM Act) to be under the Manitoba Corporations Act. Our name officially became The Lung Association of Manitoba, Inc. While most of the corporate structure moved over, there was a new bylaw adopted. As an Association, membership is now made up of the directors in place at the time of the move. In the future, the members may consider adding other classes of membership. The Association original incorporation date remains May 17,1929 and the business number and charity registration number are unchanged. The SBM Act has not been repealed at this time due to other government priorities. Therefore, some aspects of the legislation are still in force such as stipulations as to who is to be invited to the AGM. The board is monitoring the legislation agenda and is advocating for the timely repeal of the SBM Act.

The organization continues to work on our mission and our key priorities of education, advocacy, and research. Working with our stakeholders and partners, we continue to deliver a strong tobacco education program which includes smoking and vaping. Advocating for good air quality including radon mitigation has been a priority for our organization. We are very happy to see the expansion this year of the LUNGtivity lifestyle program to improve the health of individuals with COPD. The board and our Health Initiatives and Research Committee continue to seek out lung health professionals who wish to do research in our province.

Our board activities also focused on improving internal board operations and processes. A board self-evaluation was undertaken with overall positive feedback. There were some recommendations from the board members which the board is in the process of implementing. These include board development presentations at meetings and the beginning of a Current State Assessment (CSA) of the organization. The CSA is expected to be completed in the upcoming fiscal year.

Our reconciliation efforts continue through continued participation as a signatory to the Winnipeg Indigenous Accord. This year we have begun the Treaty Land Acknowledgement at the beginning of each Board meeting. We wish to maintain and increase our Indigenous representation on the Board. We continue to support the Manitoba Indigenous TB Photo Recognition Project.

We are happy to note that member and longtime Director, Juliette Cooper, received the CLA Heather Crowe Award. The award is reserved for an individual who has devoted themselves to the affairs of the Lung Association and to the cause of respiratory health and who shows exemplary commitment towards lung health. We are very fortunate to have Juliette as a member of our board and we congratulate her for her long-standing dedication to our organization and to positive lung health.

We also offer congratulations to board member Deborah Harri who we nominated for and was selected as one of 150 recipients of Manitoba 150's Honour 150 Program. The program was created to recognize our province's 150th anniversary. The one-time program recognizes 150 people from across the province who give back to the community. The honour includes a medal for each selectee and a donation of \$500 from Canada Life to the nominating organization.

Looking forward to next year, we intend to continue to be the recognized leader and primary resource for lung health within our province. We will continue to work on our key mission priorities with our partners and stakeholders, including the Canadian Lung Association. We also look forward to additional partners to help strengthen our mission.

We are happy to report that operations were able to move to work-from-home with little interruption due to the flexibility of our IT and communication systems that were put in place prior to the pandemic.

A new person joined the staff in early April, Hailey Coleman, whose role is to support program delivery and administration.

We continued our mission work in the areas of healthy breathing education, advocacy, and research through several programs.

Our major indoor air quality program continued to be radon awareness. We participated in the Tackle Radon challenge. We received a Health Canada, three-year contract to promote radon awareness, testing and mitigation. One major component is looking for support for mitigation for low income homeowners. To do this Hailey Coleman lead the development of the Lungs Matter program with the support of University of Brandon School of Nursing and nursing practicum students Luba Sharapova, Gurjot Kaur Makkar, and Marley Cobb under the supervision of Nancy McPherson. Lungs Matter is a grant program for low income home owners to support mitigation of high radon levels.

Our smoking and vaping prevention and cessation work again centered around two programs coordinated by Anjie Valgardson and supported by Hailey Coleman. The Manitoba Quits program which includes a year-round Facebook peer support group, two one-month challenges, as well as in person cessation counselling and access to nicotine replacement therapy for low income, hard core smokers. Our Lungs are for Life smoking and vaping prevention program expanded to 19 school divisions. The program includes resource materials and a teacher's guide which aligns with the provincial curriculum for middle years.

Our LUNGtivity exercise program for people living with chronic lung disease rolled out virtually, 2 instructor training courses were held.

We maintained and updated our web page resources.

We continued toll free phone access to provide person to person support for lung health concerns. We received about 120 calls for lung health information or related support and we mailed out about 15 patient guides for managing COPD and pulmonary fibrosis.

Our staff conducted numerous earned media events (the media called us) to speak to healthy breathing topics and to promote the work of the Association.

A new research funding program was developed for early career researchers in the field of COVID-19 rehabilitation, with support from a bequest from the estate of Alice Panchyshak and donations from the January direct mail appeal. Many thanks to board volunteers Juliette Cooper, Maryam Al-Azazi and ad hoc volunteer Andrew Halayko for their work on this.

We continued our reconciliation journey, mainly through continued support for the MB Indigenous TB Photo Recognition project under the leadership of Dr. Erin Millions, Ph D and Dr. Mary Jane Logan McCallum Ph D of the University of Winnipeg.

We strengthen our legacy giving program by joining Will Power. Will Power is the legacy giving program sponsored by the Canadian Association of Gift Planners. Will Power will be rolling out in the coming fall.

Our Lung Transplant support group continued to meet monthly via zoom, facilitated by Neil Johnston.

We advocated at both municipal and provincial government levels for increased regulation and taxation of smoking and vaping products, banning hookah smoking in public places, increased access to medications for pulmonary fibrosis, and for increased support for residential radon exposure reduction.

Our staff supported Canadian Lung Association (CLA) mission work at the national level including advocacy at the federal government level for further smoking and vaping regulation; production of patient education materials; and, national healthy breathing awareness campaigns.

Our staff also worked with the CLA to develop the national organization's fundraising capacity to be less reliant on partner assessments and to enhance revenue from national sources to further support all Lung Associations' activities.

Our program offerings were supported by the efforts of content expert volunteers Andrea Smith (LUNGtivity), Aleeta Allard (MB Quits), and Lynne Manikel (healthy breathing presentations), without whose held our program offerings would not be successful.

We are also grateful for the administrative support of contract staff: Monte Weber, Finance Officer; Nina Snyder, Direct Mail Coordinator; Katherine Popowich, Donor Services; Bridget Warner, Donor Data Analyst; and Buffy Davey, Communications Writer.

We would like to thank our program co-funders: The Winnipeg Foundation, The Government of Manitoba, and The Government of Canada. We are also appreciative of Boehringer- Ingelheim for their unrestricted healthcare profession education grant.

We also would like to acknowledge and thank our health program and operational support partners:

The Canadian Lung Association

The Lung Association, Saskatchewan

The Lung Association, Alberta

The University of Brandon

The University of Winnipeg

The University of Manitoba

Research Manitoba

Children's Hospital Research Institute of Manitoba

Manitoba Tobacco Reduction Alliance

Heart and Stroke Foundation

Canadian Cancer Society

ASH Canada- Action on Smoking & Health

The Manitoba Regional Health Authorities

Manitoba Keewatinowi Okimakanak

Canadian Association of Radon Scientists and Technicians

Manitoba School Divisions, Superintendents and Teaching staff

Wellness Institute

Manitoba Fitness Council

Active Aging in Manitoba

Red River Medical Center

Nine Circles Community Health Centre

Manitoba Metis Federation

Respectfully submitted,

Brenda Dyck

Chair

Neil Johnston
President and CEO