



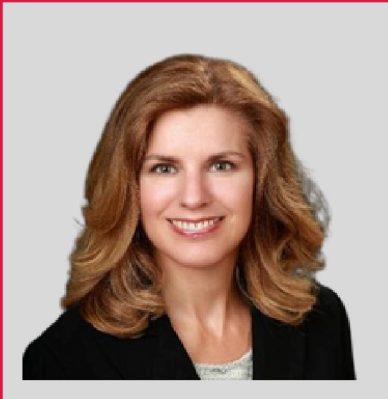
B R E A T H E

the lung association

IMPACT REPORT

2022-2023

A message from our leadership



Nora Lacey
Chair, Board of Directors



Terry Dean
President & CEO

This year, the Canadian Lung Association has grown, evolved and most importantly, made a meaningful difference in the lives of Canadians.

One of our most significant successes this year was our research funding program. We supported a record number of researchers and research projects, focusing on chronic lung diseases like asthma and COPD to emerging and timely topics like youth vaping and forest fires. This success wouldn't have been possible without the support of our generous donors and valued partners.

Knowing that many Canadians with lung disease could benefit greatly from pulmonary rehabilitation but are unable to access a program due to geography, transportation or program capacity, we were excited to launch our very own BREATHE Better, Stay STRONG virtual pulmonary rehab program. The free, eight-module, self-paced program can be done from the comfort of home and includes a monthly community hour facilitated by a respiratory therapist to connect with other participants and discuss timely topics related to lung health.

It is an unfortunate reality that lung disease disproportionately affects low-income individuals and families. With rising interest rates and inflation, more and more Canadians are facing economic challenges and having to make difficult choices when it comes to the cost of their health and well-being. We continued to offer grants to support deserving families facing the significant costs of pediatric CPAP machines and home radon mitigation.

We've also seen positive change at the policy level as the federal government announced new tobacco labelling requirements. Our calls demanding action to tackle the highest youth vaping rates in the world are now being echoed throughout healthcare and in the media, and we look forward to working together with policymakers on this critical issue. We also increased our action on air quality and climate change, including raising awareness of the importance of phasing out diesel-engine school buses and getting more electric school buses on Canadian roads as quickly as possible.

We continued to work together with clinicians and researchers to produce and disseminate easy-to-read, practical lung health information and tools to support Canadians living with lung disease and their loved ones. Behind the scenes, we have been guiding the evolution of our governance model. Although we are no longer a federation, we look forward to working as partners with our provincial counterparts and other national health organizations to maximize our impact on mutually relevant issues and to stretch our wings with the autonomy afforded by our new, future-focused model.

It has been a busy, productive year at the Canadian Lung Association. We are proud of all that our small but mighty team has been able to accomplish, and the seeds that we have planted for even more exciting and impactful projects, programs and partnerships in the years to come!



— “ —

“The Canadian Lung Association was a huge help in a situation that I otherwise wouldn't be able to take care of and I am super grateful.”

— ” —

Lena's son received a CPAP machine through a grant from the Canadian Lung Association.

Our programs

By reducing financial, geographic and other barriers, we help more Canadians living with lung disease access the programs, services, information and medical equipment they need to take an active role in managing their own health.

2022-23

Programs by the numbers

\$656,334

Research funding awarded

22

Researchers and research projects funded

42

Participants in our April 2023 RENASCENT virtual researcher training workshop

400+

Participants in our BREATHE Better virtual pulmonary rehabilitation program

570

Calls to our Lung Health Help Line





Pulmonary rehabilitation

BREATHE Better, Stay STRONG is a free, online, self-paced pulmonary rehabilitation program that anyone can participate in from the comfort of home.



CPAP machines for children

Pediatric CPAP machines can cost more than \$2,000. We offer grants to support families who otherwise couldn't afford the machines and equipment their child needs.

“

“Sleep apnea (in children) can cause daytime sleepiness, fatigue, poor growth, heart problems, delays in proper brain development, bed wetting and behavior problems both at home and at school.

The best way to treat sleep apnea is with CPAP, which can cost upwards of \$3,000. Some of our families are lucky enough to have insurance to help them cover this cost, but many do not. This can be a real hardship for families who are often desperate to help their children to sleep better.

The support of the Canadian Lung Association in helping our families who cannot afford this equipment on their own has been a game changer for us. Without (this funding), many children would simply have to go without this life-changing therapy.”

”

Angie is a social worker with the Alberta Children's Hospital Pediatric Sleep Clinic.



Research funding

Our research funding competitions and training workshops help launch the careers of the next generation of respiratory researchers in Canada.

2022-23 funded researchers

Asthma

Cristina Longo
Université de Montréal

Zihang Lu
Queen's University

Maria Medeleanu
SickKids

Dheerendra Pandey
University of Manitoba

Chronic cough

Nermin Diab
McMaster University

Cystic fibrosis

Jordana McMurray
University of Toronto

Andrea Murru
CHU de Québec-Université Laval

Yuetong Song
University of Toronto

COPD

Fatemeh Aminazadeh
University of British Columbia

Meghan Koo
Toronto Metropolitan University

Mika Nonoyama
Ontario Tech University

Carli Peters
University of British Columbia

Dmitry Rozenberg
University Health Network

Immunology

Danuzia Marques
Laval University

Nicole Sarden
University of Calgary

Lung transplant

Anne Fu
University of Toronto

Pediatrics

Chelsea Morin
University of Alberta

Public health

Tina Afshar
University of British Columbia

Justin Turner
University of British Columbia

Pulmonary fibrosis

Olivia Ferguson
University of British Columbia

Sleep

Silvia Cardani
University of Alberta

Mohammadreza Hajipour
University of British Columbia



“

There has been very limited research into how best to provide support for those who want to quit vaping, especially youth. The outcomes of this project will hopefully be integrated into vaping cessation interventions for youth and young adults.

My ultimate career goal is to conduct scientific research, focused on airway health and disease, that will inform public policies, programs, and practices and improve the wellbeing of vulnerable populations in Canada and globally.

”

Tina Afshar is a PhD student at the University of British Columbia. She received funding from the Canadian Lung Association for her study “Lung Health Effects of E-Cigarette Cessation”.



Radon mitigation

Through the Lungs Matter program, we cover the cost of home radon mitigation for low-income Canadians with lung disease who are living with high radon levels.

Our voice

We speak out, using a variety of channels and platforms, to ensure Canada's national voice for lung health is heard across the country and around the world.



2022-23

Advocacy & outreach by the numbers

1,464,506

Lung.ca page views

873,799

Lung.ca users

103,403

Airings of our public service announcements encouraging
Canadians to get vaccinated

19

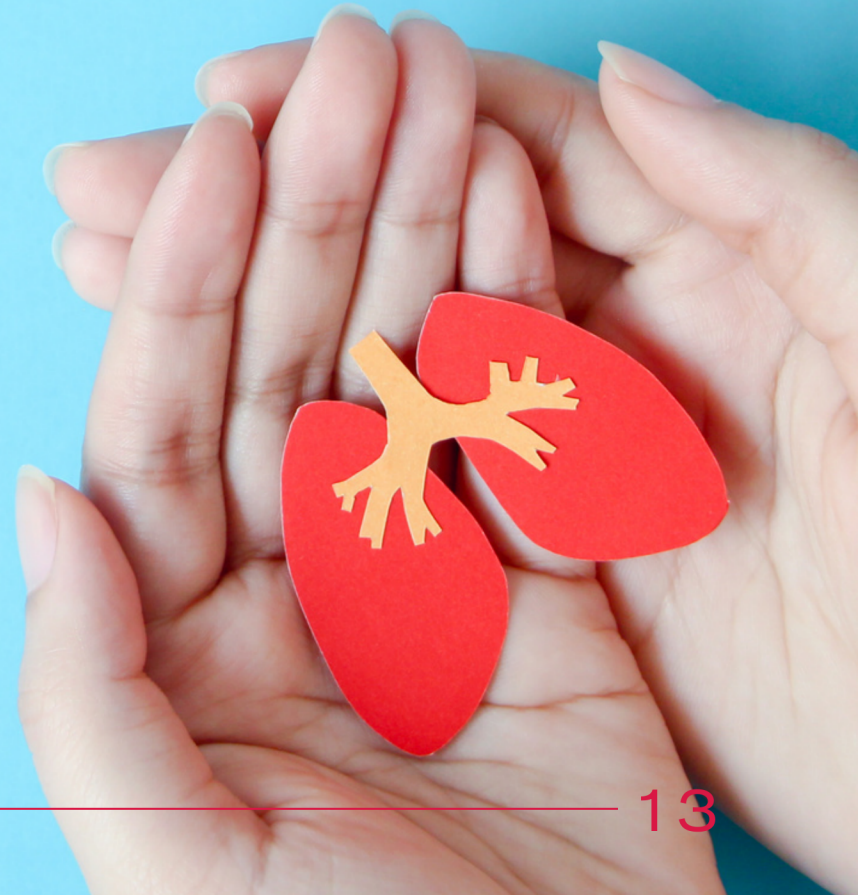
Meetings with MPs and senior staff resulting from our
Lung on the Hill event

1,700,000+

Canadians represented by these MPs

1st

Canada's rank among countries who require health
warnings on individual cigarettes



Our **top 5** policy recommendations to support lung health in Canada

1. A comprehensive ban on flavoured vaping products
2. A continued increase in tobacco taxes
3. A cost-recovery fee for the tobacco industry
4. An accelerated electrification of school buses
5. A national long COVID strategy



Our partners

By working together with other national organizations and champions of lung health, we make more possible.



We work closely with

- Canadian Thoracic Society
- Canadian Institutes for Health Research (CIHR) Institute of Circulatory and Respiratory Health (ICRH)
- Asthma Canada
- Canadian Allergy, Asthma, and Immunology Foundation (CAAIF)
- Canadian Association of Physicians for the Environment (CAPE)
- Canadian Association of Radon Scientists and Technologists (CARST)
- Canadian Cancer Society (CCS)
- Canadian Electric School Bus Alliance (CESBA)
- Canadian Partnership for Children's Health and Environment (CPCHE)
- Canadian Respiratory Research Network (CRRN)
- Clean Energy Canada
- Heart & Stroke
- Immunize Canada
- Pollution Probe
- Physical and Health Educators of Canada (PHE Canada)

We are proud members of

- HealthPartners
- Air Quality Roundtable
- Alliance for a Tobacco-free Ontario
- Pan-Canadian COVID-19 Respiratory Roundtable
- Health Charities Coalition of Canada
- Global Lung Cancer Coalition

Our corporate partners

- AstraZeneca Canada
- Glaxo Smithkline Canada
- Merck Canada
- Pfizer Canada
- Sanofi Canada
- Trudell Medical International

Our leadership

Board of Directors

CHAIR

Nora Lacey
Saint John, NB

TREASURER

Deborah Harri
Winnipeg, MB

PAST CHAIR

Andrea Power
Calgary, AB

Dr. Bill Anderson
Fredericton, NB

Dr. Dennis Bowie
Halifax, NS

Dr. Larry Lands
Montreal, QC

Terry Dean
President & CEO

Canadian Lung Association Statement of Cash Flows

For the year ended March 31	2023	2022
Cash flows from operating activities		
Excess (deficiency) of revenue over expenses for the year	\$ (180,436)	\$ 163,234
Adjustments for		
Amortization of tangible capital assets	3,970	4,314
Gain on sale of investments	(811)	(13,216)
Unrealized loss (gain) on investments	64,323	(37,086)
	<u>(112,954)</u>	117,246
Changes in non-cash working capital items		
Accounts receivable	30,630	82,362
Government remittances receivable	(13,748)	(15,783)
Prepaid expenses	(637)	(5,930)
Accounts payable and accrued liabilities	(180,269)	(37,483)
Deferred revenue	(312,116)	(69,751)
	<u>(589,094)</u>	70,661
Cash flows from investing activities		
Net change in investments	(255,200)	(59,351)
Purchase of tangible capital assets	(1,076)	(1,440)
	<u>(256,276)</u>	(60,791)
Increase (decrease) in cash during the year	(845,370)	9,870
Cash and short-term investments, beginning of year	<u>2,630,193</u>	<u>2,620,323</u>
Cash and short-term investments, end of year	<u>\$ 1,784,823</u>	<u>\$ 2,630,193</u>
Represented by:		
Cash (Note 1)	\$ 1,527,251	\$ 2,161,628
Cash and short term component of investments (Note 2)	257,572	468,565
	<u>\$ 1,784,823</u>	<u>\$ 2,630,193</u>

A close-up, profile shot of a Black woman with her head tilted back, eyes closed, and a peaceful expression. She is wearing black-rimmed glasses and has her dark hair styled in small braids. She is dressed in a bright yellow turtleneck under a dark blazer. The background is a soft-focus green landscape with a strong, warm golden light source on the left, creating a bokeh effect and illuminating her face.

BREATHE
the lung association