

Alberta Nutrition Report Card
Webinar 2: Economic, Social, and Political Environments

November 27, 2018



RMA
RURAL MUNICIPALITIES
of ALBERTA



Alberta Nutrition Report Card Webinar Series – Part 2

What Role Do Municipalities Play in Supporting Healthy Food Choices



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Background

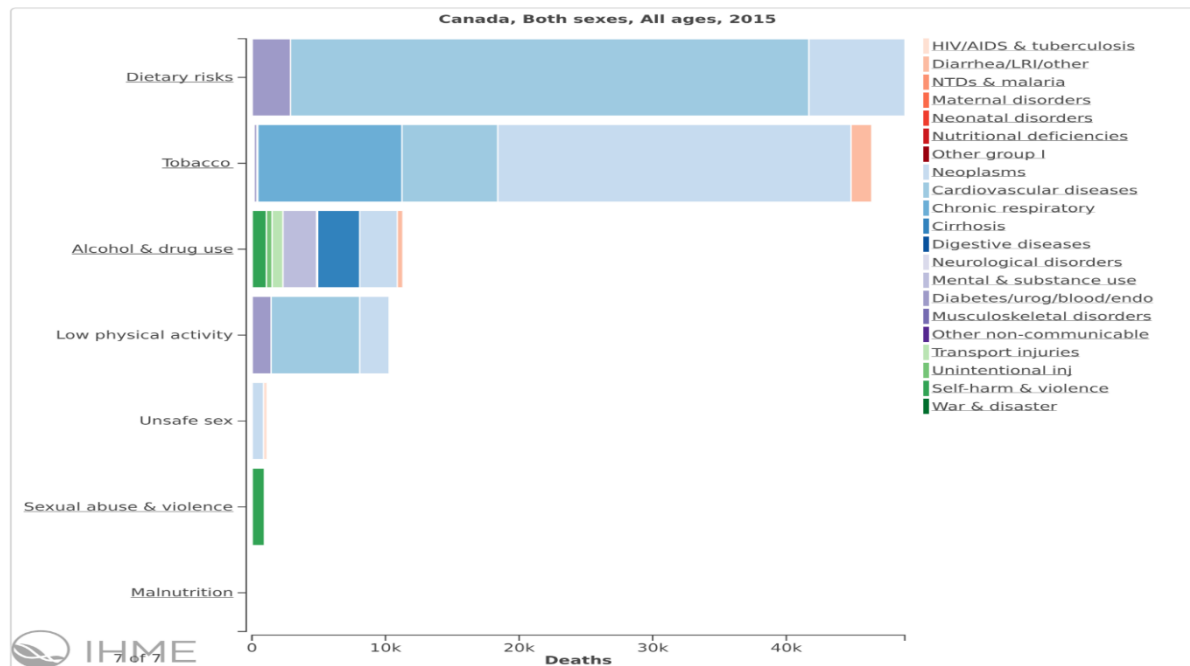
- 26% of Alberta's youth are obese or overweight
- Obesity is associated with chronic diseases
- Health care costs are continually high
- Prevention needs more emphasis
- Current policy may act as a barrier/facilitator toward healthy eating

Healthy Eating

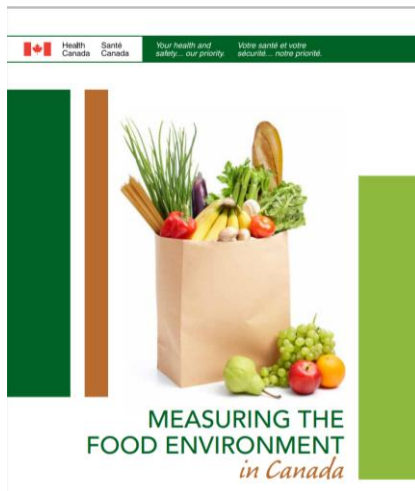
- Healthy eating prevents chronic disease
- Eating trends in youth transition to adulthood
- More than an individual choice
- Influenced by our environments



Global Burden of Disease Study 2015: Canada, behavioural risks, deaths



Food Environments in Canada



www.hc-sc.gc.ca/fn-an/nutrition/pol/index-eng.php

- Food environments shape the availability, affordability, and social acceptability of food and nutrition “choices”
 - association between food environments and diet-related outcomes

What is the Nutrition Report Card?

- Based on *benchmarks* for food environments
- Five environments: *physical, communication, economic, social & political*
- Three settings: *schools, childcare & community settings*



Assesses Alberta's current food environment & nutrition policies

Aim is to increase **awareness**, focus on health promotion & obesity prevention

Serves as a **tool** to identify areas that require action

MICRO-ENVIRONMENTS



Physical

The physical environment refers to what is available in a variety of food outlets¹³ including restaurants, supermarkets,¹⁹ schools,²⁰ worksites,²¹ as well as community, sports and arts venues.^{22,23}



Communication

The communication environment refers to food-related messages that may influence children's eating behaviours. This environment includes food marketing,^{24,25} as well as the availability of point-of-purchase information in food retail settings, such as nutrition labels and nutrition education.



Economic

The economic environment refers to financial influences, such as manufacturing, distribution and retailing, which primarily relates to cost of food¹³ Costs are often determined by market forces, however public health interventions such as monetary incentives and disincentives in the form of taxes, pricing policies and subsidies,²⁶ financial support for health promotion programs,²⁵ and healthy food purchasing policies and practices through sponsorship²⁷ can affect food choices.¹³



Social

The social environment refers to the attitudes, beliefs and values of a community or society.¹³ It also refers to the culture, ethos, or climate of a setting. This environment includes the health promoting behaviours of role models,¹³ values placed on nutrition in an organization or by individuals, and the relationships between members of a shared setting (e.g. equal treatment, social responsibility).

MACRO-ENVIRONMENTS



Political

The political environment refers to a broader context, which can provide supportive infrastructure for policies and actions within micro-environments.^{1,25}

Conceptual framework, adapted from Brennan and colleagues (2011).



Nutrition Report Card Structure

Environments

Four types of micro-environments (physical, communication, economic, social) and the political macro-environment.

Example: Physical Environment

Categories

Indicators are grouped into broader descriptive categories within each type of environment.

Example: Food Availability Within Settings

Indicators

Specific domains within each category in which actions and policies will be assessed.

Example: High availability of healthy food

Benchmarks

Benchmarks of strong policies and actions are provided for each indicator.

Example: Approximately $\frac{3}{4}$ of foods available in schools are healthy



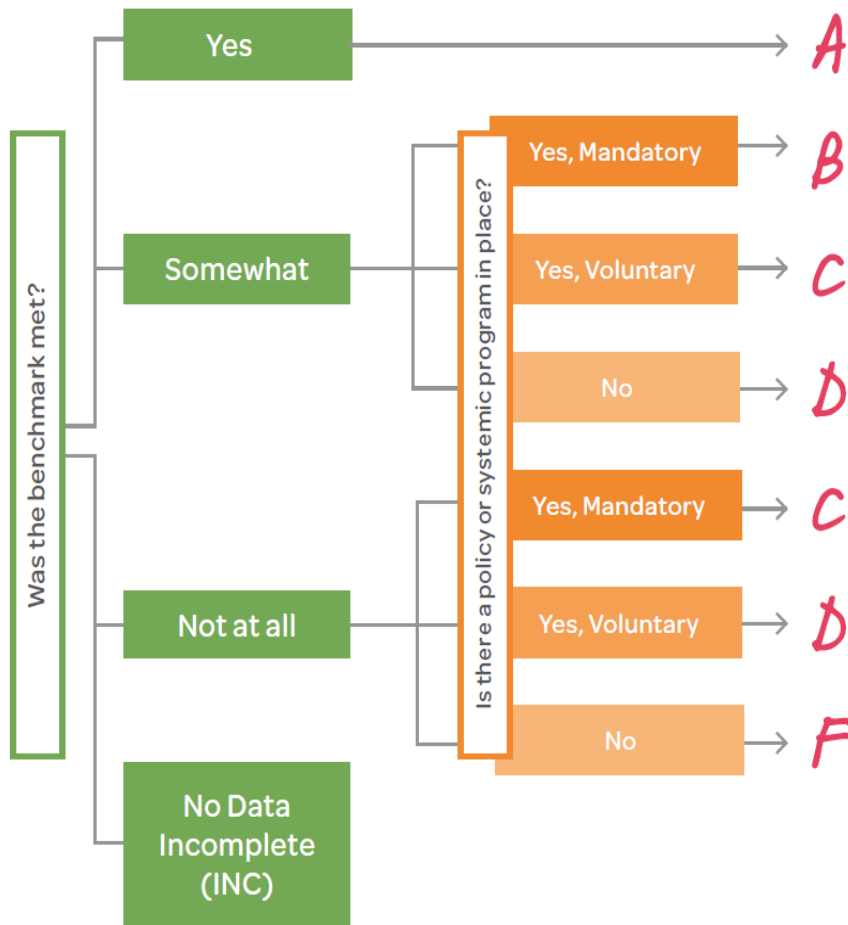


UNIVERSITY OF ALBERTA SCHOOL OF PUBLIC HEALTH

| Indicators | Benchmark |
|--|--|
| 1 High availability of healthy food in school settings | Approximately ¾ of foods available in schools are healthy. |
| 2 High availability of healthy food in childcare settings | Approximately ¾ of foods available in childcare settings are healthy. |
| 3 High availability of healthy food in community settings: Recreation Facilities | Approximately ¾ of foods available in recreation facilities are healthy. |
| 4 High availability of food stores and restaurants selling primarily healthy foods | The modified retail food environment index across all census areas is ≥ 10 . |
| 5 Limited availability of food stores and restaurants selling primarily unhealthy foods | Traditional convenience stores (i.e. not including healthy corner stores) and fast food outlets not present within 500 m of schools. |
| 6 Foods contain healthful ingredients | $\geq 75\%$ of children's cereals available for sale are 100% whole grain and contain $< 13\text{g}$ of sugar per 50g serving. |
| 7 Menu labelling is present | A simple and consistent system of menu labelling is mandated in restaurants with ≥ 20 locations. |
| 8 Shelf labelling is present | Grocery chains with ≥ 20 locations provide logos/symbols on store shelves to identify healthy foods. |
| 9 Product labelling is present | A simple, evidence-based, government-sanctioned Front-of-Package food labelling system is mandated for all packaged foods. |
| 10 Product labelling is regulated | Strict government regulation of industry-devised logos/branding denoting 'healthy' foods. |
| 11 Government-sanctioned public health campaigns encourage children to consume healthy foods | Child-directed social marketing campaigns for healthy foods. |
| 12 Restrictions on marketing unhealthy foods to children | All forms of marketing unhealthy foods to children are prohibited. |
| 13 Nutrition education provided to children in schools | Nutrition is a required component of the curriculum at all school grade levels. |
| 14 Food skills education provided to children in schools | Food skills are a required component of the curriculum at the junior high level. |
| 15 Nutrition education and training provided to teachers | Nutrition education and training is a requirement for teachers. |
| 16 Nutrition education and training provided to childcare workers | Nutrition education and training is a requirement for childcare workers. |

| Indicators | Benchmark |
|--|--|
| 17 Lower prices for healthy foods | Basic groceries are exempt from point-of-sale taxes. |
| 18 Higher prices for unhealthy foods | A minimum excise tax of \$0.05/100 mL is applied to sugar-sweetened beverages sold in any form. |
| 19 Affordable prices for healthy foods in rural, remote, and northern areas | Subsidies to improve access to healthy food in rural, remote, or northern communities to enhance affordability for local consumers. |
| 20 Incentives exist for industry production and sales of healthy foods | The proportion of corporate revenues earned via sales is taxed relative to its health profile (e.g. healthy food is taxed at a lower rate and unhealthy food is taxed at a higher rate). |
| 21 Reduce household food insecurity | Reduce the proportion of children living in food insecure households by 15% over three years. |
| 22 Reduce households with children who rely on charity for food | Reduce the proportion of households with children that access food banks by 15% over three years. |
| 23 Nutritious Food Basket is affordable | Social assistance rate and minimum wage provide sufficient funds to purchase the contents of a Nutritious Food Basket. |
| 24 Subsidized fruit and vegetable subscription program in schools | Children in elementary school receive a free or subsidized fruit or vegetable each day. |
| 25 Weight bias is avoided | Weight bias is explicitly addressed in schools and childcare. |
| 26 Corporations have strong nutrition-related commitments and actions | Most corporations in the Access to Nutrition Index with Canadian operations achieve a score of ≥ 5.0 out of 10.0. |
| 27 Breastfeeding is supported in public buildings | All public buildings are required to permit and promote breastfeeding. |
| 28 Breastfeeding is supported in hospitals | All hospitals with labour and delivery units, pediatric hospitals, and public health centres have achieved WHO Baby-Friendly designation or equivalent standards. |
| 29 Healthy living and obesity prevention strategy/action plan exists and includes eating behaviours and body weight targets. | A comprehensive, evidence-based childhood healthy living and obesity prevention/action plan and population targets for eating behaviours and body weights exist and are endorsed by government. |
| 30 Health-in-All policies | Health Impact Assessments are conducted in all government departments on policies with potential to impact child health. |
| 31 Childhood health promotion activities adequately funded | At least 1% of the Alberta provincial health budget is dedicated to implementation of the government's healthy living and obesity prevention strategy/action plan, with a significant portion focused on children. |
| 32 Compliance monitoring of policies and actions to improve children's eating behaviours and body weights | Mechanisms are in place to monitor adherence to mandated nutrition policies. |
| 33 Children's eating behaviours and body weights are regularly assessed. | Ongoing population-level surveillance of children's eating behaviours and body weights exists. |
| 34 Resources are available | A website and other resources exist to support programs and initiatives of the childhood healthy living and obesity prevention strategy/action plan. |
| 35 Food rating system and dietary guidelines for foods served to children exists | There is an evidence-based food rating system and dietary guidelines for foods served to children, and tools to support their application. |
| 36 Support to assist the public and private sectors to comply with nutrition policies | Support (delivered by qualified personnel) is available free of charge to assist the public and private sectors to comply with nutrition policies. |

Grading



For grades A to F, consider whether the policies, programs, or actions address high risk groups such as Aboriginal, minority, and low socioeconomic status groups.

If yes, add: "+"

A "-" can be assigned based upon judgment by the Expert Working Group in cases, for example, when supports and/or monitoring systems existed, but were discontinued in recent years.



Alberta's 2018 Nutrition Report Card Highlights



What overall grade did Alberta receive on the 2018 Nutrition Report Card?

C

Following this year's rigorous grading process, Alberta received an overall score of 'C'.

2017 - C

2016 - D

2015 - C



Municipalities Protect and Promote Children and Youth's Health By Supporting Healthy Food Environments

SCHOOLS

Support local school boards/districts to:

- R** Implement the Alberta Nutrition Guidelines for Children + Youth for all foods/beverages served in school.
- R** Make Food Prep skills mandatory for junior high students
- R** Monitor healthy eating policy adherence

Healthy foods = Foods that support health, emphasized in Canada's Food Guide, such as fruits & vegetables, whole grains, quality protein foods, and foods low in salt, sugar and saturated fats.

CONVENIENCE STORE

R Establish "healthy zones" around schools by limiting the number of unhealthy food vendors in close proximity.

RECREATION CENTRES

- R** Mandate changes to improve healthfulness of available food using the Alberta Nutrition Guidelines for Children + Youth to inform food policy (e.g. vending contracts)
- R** Allow use of facilities to prep food for school nutrition programs when school infrastructure is lacking.

TRANSPORTATION

R Subsidize transport of healthy foods to rural/remote/Northern Communities

TAX UNHEALTHY FOOD

- R** Ask the Federal government to implement a sugar-sweetened beverage tax.

GROCERY

R Use municipal zoning to improve proportion of healthy (e.g. grocery stores) to unhealthy (e.g. fast food restaurants) food vendors.

PUBLIC BUILDINGS

R Use the Assessment Checklist* to see how supportive your building is towards breastfeeding
*see Indicator 27 in the full NRC report for the checklist

HOSPITALS

R Continue to foster a supportive environment for breastfeeding using WHO's 10 Steps to Successful Breastfeeding*
*see Breastfeeding Support in the full NRC report

R Recommended opportunities for action

Based on Alberta's 2016 Nutrition Report Card on Food Environments for Children and Youth (NRC). The full and summary report are available online at alberta.ca/nrc





ECONOMIC ENVIRONMENT

The economic environment refers to financial influences, such as manufacturing, distribution, and retailing, which primarily relate to cost of food. Costs are often determined by market forces; however public health interventions such as monetary incentives and disincentives in the form of taxes, pricing policies and subsidies, and healthy food purchasing policies and practices through sponsorship can affect food choice.

OVERALL
GRADE

D

| CATEGORY | GRADE |
|------------------------------------|-------|
| Financial incentives for consumers | C |
| Government assistance programs | C |



INDICATOR

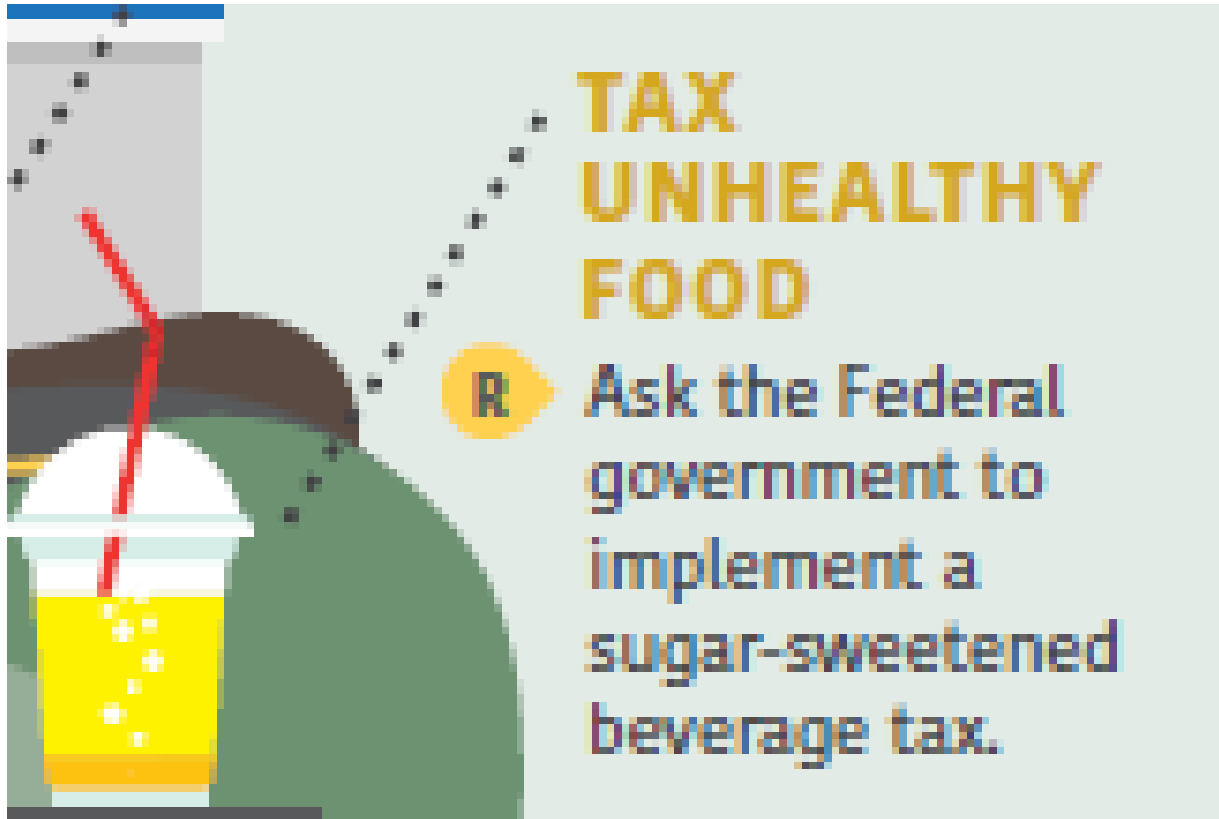
18

HIGHER PRICES FOR UNHEALTHY FOODS

Benchmark: A minimum excise tax of \$0.05/100mL is applied to sugar-sweetened beverages sold in any form.

| Was the benchmark met? | Is there a policy or program in place? | Is it mandatory, voluntary, or neither? | Final grade |
|------------------------|--|---|-------------|
| Not at all | No | --- | F |





**TAX
UNHEALTHY
FOOD**

R Ask the Federal government to implement a sugar-sweetened beverage tax.

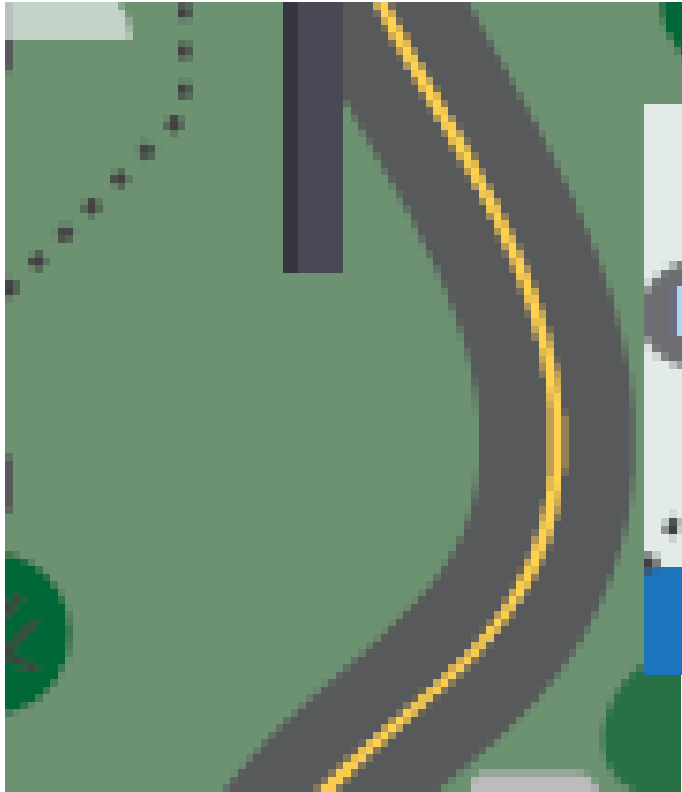


INDICATOR**19****AFFORDABLE PRICES FOR HEALTHY FOODS IN RURAL, REMOTE, OR NORTHERN AREAS**

Benchmark: Subsidies to improve access to healthy food in rural, remote, or northern communities to enhance affordability for local consumers.

| Was the benchmark met? | Is there a policy or program in place? | Is it mandatory, voluntary, or neither? | Final grade |
|------------------------|--|---|-------------|
| Somewhat | No | --- | D+ |





TRANSPORTATION

R

Subsidize transport of
healthy foods to
rural/remote/
Northern Communities



INDICATOR

24

SUBSIDIZED FRUIT AND VEGETABLE SUBSCRIPTION PROGRAM IN SCHOOLS

Benchmark: Children in elementary school receive a free or subsidized fruit or vegetable each day.

| Was the benchmark met? | Is there a policy or program in place? | Is it mandatory, voluntary, or neither? | Final grade |
|------------------------|--|--|-------------|
| Somewhat | Yes | Mandatory (only for schools in the Alberta School Nutrition Program) | C+ |





SOCIAL ENVIRONMENT

The social environment refers to the attitudes, beliefs, and values of a community or society. It also refers to the culture, ethos, or climate of a setting. This environment includes the health-promoting behaviours of role models, values placed on nutrition in an organization or by individuals, and the relationships between members of a shared setting.

OVERALL
GRADE

C

| CATEGORY | GRADE |
|-----------------------|-------|
| Breastfeeding Support | B |



INDICATOR

27

BREASTFEEDING IS SUPPORTED IN PUBLIC BUILDINGS

Benchmark: All public buildings are required to permit and facilitate breastfeeding

| Was the benchmark met? | Is there a policy or program in place? | Is it mandatory, voluntary, or neither? | Final grade |
|------------------------|--|---|-------------|
| Somewhat | Yes | Mandatory | B |





PUBLIC BUILDINGS

R Use the Assessment Checklist* to see how supportive your building is towards breastfeeding

*see Indicator 27 in the full NRC report for the checklist

Assessment Checklist for Undertaking Environmental Scan (Breastfeeding Support)

Physical facilities

- Private space/breastfeeding room in campus
 - Breastfeeding room has comfortable chair, desk, sink to wash supplies
 - Breastfeeding room is safe and secure
 - Breastfeeding room is free from distraction
 - Breastfeeding room has adequate lighting and ventilation
 - Breastfeeding room is accessible to every female faculty member, staff and students
 - Permission is required to avail the facility
- Breast milk storage facilities
- Breast milk pumping device
- Childcare facilities (radius)

Policies

- Maternity leave (duration for faculty member, staff, and students, any conditions)
- Parental leave (duration for faculty member, staff, and students, any conditions)
- Written breastfeeding policy
- Flexible work schedule for breastfeeding mothers (faculty member, staff, and students)

Environment

- Publicity of support policies or campus facilities
- University posts poster/flyer to promote the culture of breastfeeding in campus
- Mother-friendly status of the setting
- Uniformity in breastfeeding accommodation across the faculty/department
- Efforts for celebration of breastfeeding week
- Publicity of baby formula milk/baby food at university or in campus food bank
- Healthcare facilities/services address the lactation needs of mothers
 - Service charges
 - Coverage by insurance package
 - Health messages for lactating mothers and associated people
 - Maintenance of follow up with new mothers (faculty, staff or student)
 - Alerts for breastfeeding mothers who are smokers, use caffeine, drink alcohol or using any medication



INDICATOR

28

BREASTFEEDING IS SUPPORTED IN HOSPITALS

Benchmark: All hospitals with labour and delivery units, pediatric hospitals, and public health centres have achieved WHO Baby-Friendly designation or equivalent standards.

| Was the benchmark met? | Is there a policy or program in place? | Is it mandatory, voluntary, or neither? | Final grade |
|------------------------|--|---|-------------|
| Somewhat | Yes | Voluntary | C |





1. Have a written breastfeeding policy that is routinely communicated to all healthcare staff.
2. Train all healthcare staff in the skills necessary to implement this policy.
3. Inform all pregnant women about the benefits and management of breastfeeding.
4. Help mothers to initiate breastfeeding within a half-hour of birth.
5. Show mothers how to breastfeed and how to maintain lactation even if they should be separated from their infants.
6. Give newborn infants no food or drink other than breast milk, unless medically indicated.
7. Practice rooming in—allow mothers and infants to remain together—24 hours a day.
8. Encourage breastfeeding on demand.
9. Give no artificial teats or pacifiers (also called dummies or soothers) to breastfeeding infants.
10. Foster the establishment of breastfeeding support groups and refer mothers to them on discharge from the hospital or clinic.

HOSPITALS

- R** Continue to foster a supportive environment for breastfeeding using WHO's 10 Steps to Successful Breastfeeding*

*see Breastfeeding Support in the full NRC report.





POLITICAL ENVIRONMENT

The political environment refers to a broader context, which can provide supportive infrastructure for policies and actions within micro-environments.

OVERALL
GRADE

C

| CATEGORY | GRADE |
|---------------------------|-------|
| Leadership & Coordination | C |
| Monitoring & Evaluation | B |



INDICATOR

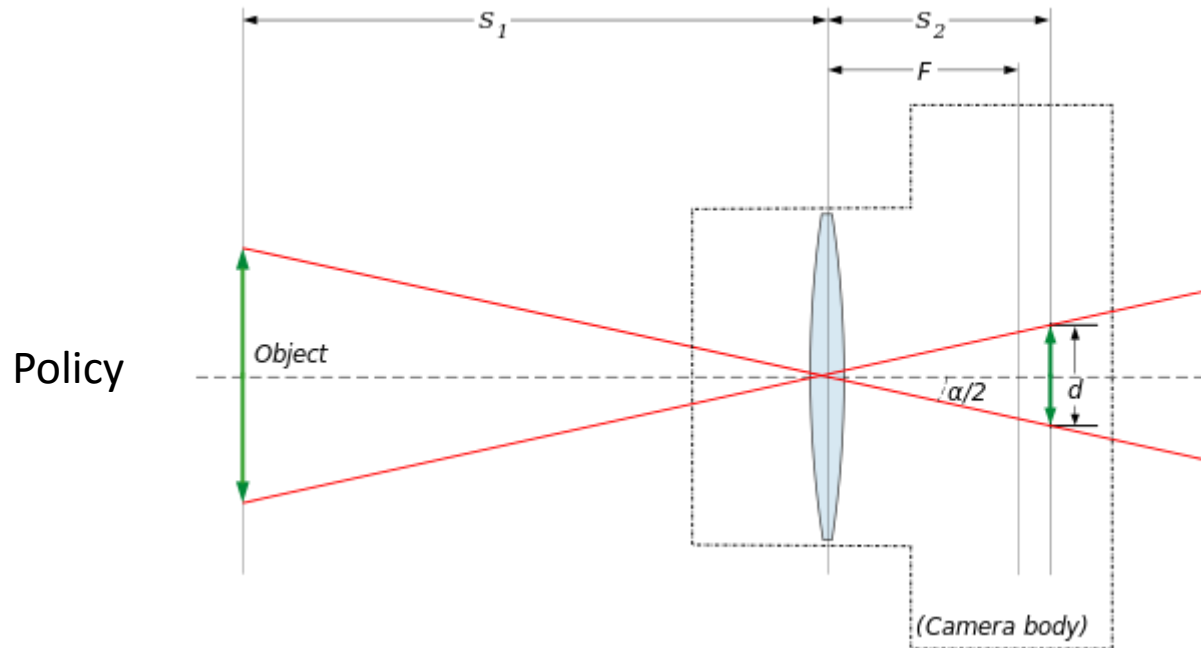
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HEALTH-IN-ALL POLICIES

Benchmark: Health Impact Assessments are conducted in all government departments on policies with potential to impact child health.

| Was the benchmark met? | Is there a policy or program in place? | Is it mandatory, voluntary, or neither? | Final grade |
|------------------------|--|---|-------------|
| Somewhat | Yes | Voluntary | C |





Policy

Determinants of Health Impacted – or +

Considering the Social Determinants of Health as Policy is Created

INDICATOR

32

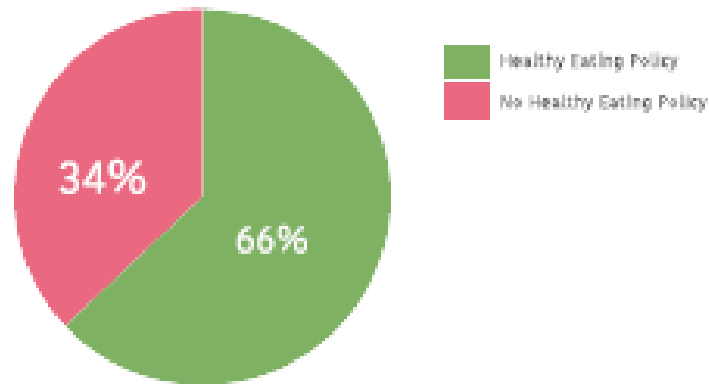
COMPLIANCE MONITORING OF POLICIES AND ACTIONS TO IMPROVE CHILDREN'S EATING BEHAVIOURS AND BODY WEIGHTS

Benchmark: Mechanisms are in place to monitor adherence to mandated nutrition policies.

| Was the benchmark met? | Is there a policy or program in place? | Is it mandatory, voluntary, or neither? | Final grade |
|------------------------|--|---|-------------|
| Somewhat | Yes | Voluntary (only schools in the Alberta School Nutrition Program report) | C |



FIGURE 12. Percent of School Boards in Alberta With/Without a Healthy Eating Policy



N = 61 PUBLIC, PRIVATE, AND FRANCOPHONE SCHOOL BOARDS IN ALBERTA, REPRESENTING THE MAJORITY OF SCHOOLS

The Alberta Healthy School Wellness Fund was the source of the data on adherence to the policy. In addition to the loss of funding, there was a delay until the Reporting and Refinement phase was possible this year.



Municipal Resource Hub for Healthy Food Policies

Supporting Healthy Eating in Your Municipality

Promoting good food and nutrition is essential to the health and wellbeing of our youngest residents. Healthy eating promotes child growth and development, as well as the prevention of chronic disease.

Once upon a time, we thought healthy eating meant making "good" food choices. However, research has shown that it is not that simple. Our eating habits are also influenced by the settings where we live, play and grow.

Municipalities have the ability to foster environments that provide and encourage healthy food choices, thereby protecting and promoting child and youth health. AUMA, the Alberta Policy Coalition for Chronic Disease Prevention (APCCP) and the Benchmarking Food Environments Project at the University of Alberta School of Public Health have partnered to develop a healthy eating information hub for municipalities. The webpages in this hub provide information, tools, and resources to assist municipalities in supporting healthy eating in their communities.

Tools & Resources

Supplementary tools and resources to assist your municipality in promoting healthy eating

[Read More](#)

The Role of Municipalities in Healthy Eating

Information on how municipalities can foster healthy food environments

[Read More](#)

Alberta's Nutrition Report Card

Information on Alberta's 2018 Nutrition Report Card: Municipal Focus

[Read More](#)

<https://auma.ca/advocacy-services/programs-initiatives/municipal-resource-hub-healthy-food-policies>



Affordable Food in Remote Manitoba (AFFIRM)



<https://www.gov.mb.ca/health/healthyeating/community/affirm.html>

Breastfeeding Support in Municipal Buildings



Making your municipality more breastfeeding friendly

A tool to achieve it.



http://abpolicycoalitionforprevention.ca/wp-content/uploads/2016/10/resolution_making-your-municipality-more-breastfeeding-friendly.pdf



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Evaluate Breastfeeding Support



- Physical facilities
 - Private spaces/rooms
 - Breast milk storage
- Policies
 - Written breastfeeding policy
 - Flexible work schedule for breastfeeding mothers
- Environment
 - Publicize support
 - Signs/posters to promote culture of breastfeeding

https://cloudfront.ualberta.ca/https://cloudfront.ualberta.ca/-/media/sustainability/3-experiential/scholars-reports/2016/sustainability_scholars_2016_final_report_-_shela_hirani.pdf

Stories of Policy Change

HOME / EVIDENCE / STORIES OF POLICY CHANGE



Through the POWER UP! project, we are telling stories of healthy policy change happening in jurisdictions and organizations across Canada and the world. Check out our policy story topics below:

TAXING SUGAR-SWEETENED BEVERAGES

Stories highlighting efforts to implement a tax on sugar-sweetened beverages in various cities across the globe.

Mexico

Berkley

France

MUNICIPAL FOOD AND BEVERAGE POLICY

This policy story explores the adoption and implementation of the City of Hamilton's Corporate Food and Beverage Policy.

City of Hamilton

MUNICIPAL ZONING

This policy story explores the City of Toronto's development of the Residential Apartment Commercial Zone policy, its implications for health, and lessons learned in the policy change process.

City of Toronto

PHYSICAL ACTIVITY IN SCHOOLS

Stories exploring the promotion of physical activity among students and teachers.

Alberta's Daily Physical Activity (DPA) Policy

Monse Kerr School, Aklavik, NT

PROMOTING HEALTHY FOOD ENVIRONMENTS IN RECREATIONAL FACILITIES

Stories highlighting efforts to promote healthy food environments in recreational facilities across Canada.

British Columbia

New Westminster, British Columbia

Saanich, British Columbia

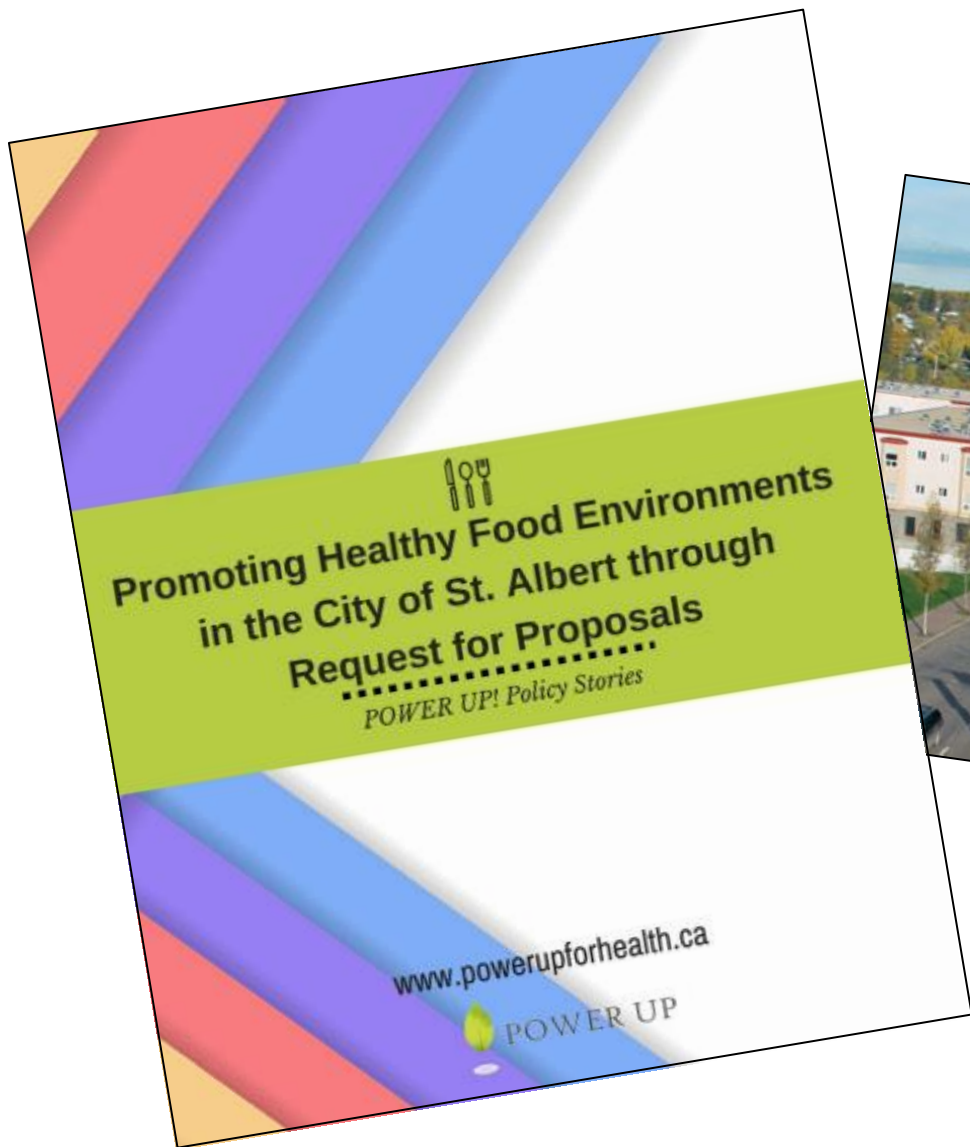
Edmonton, Alberta

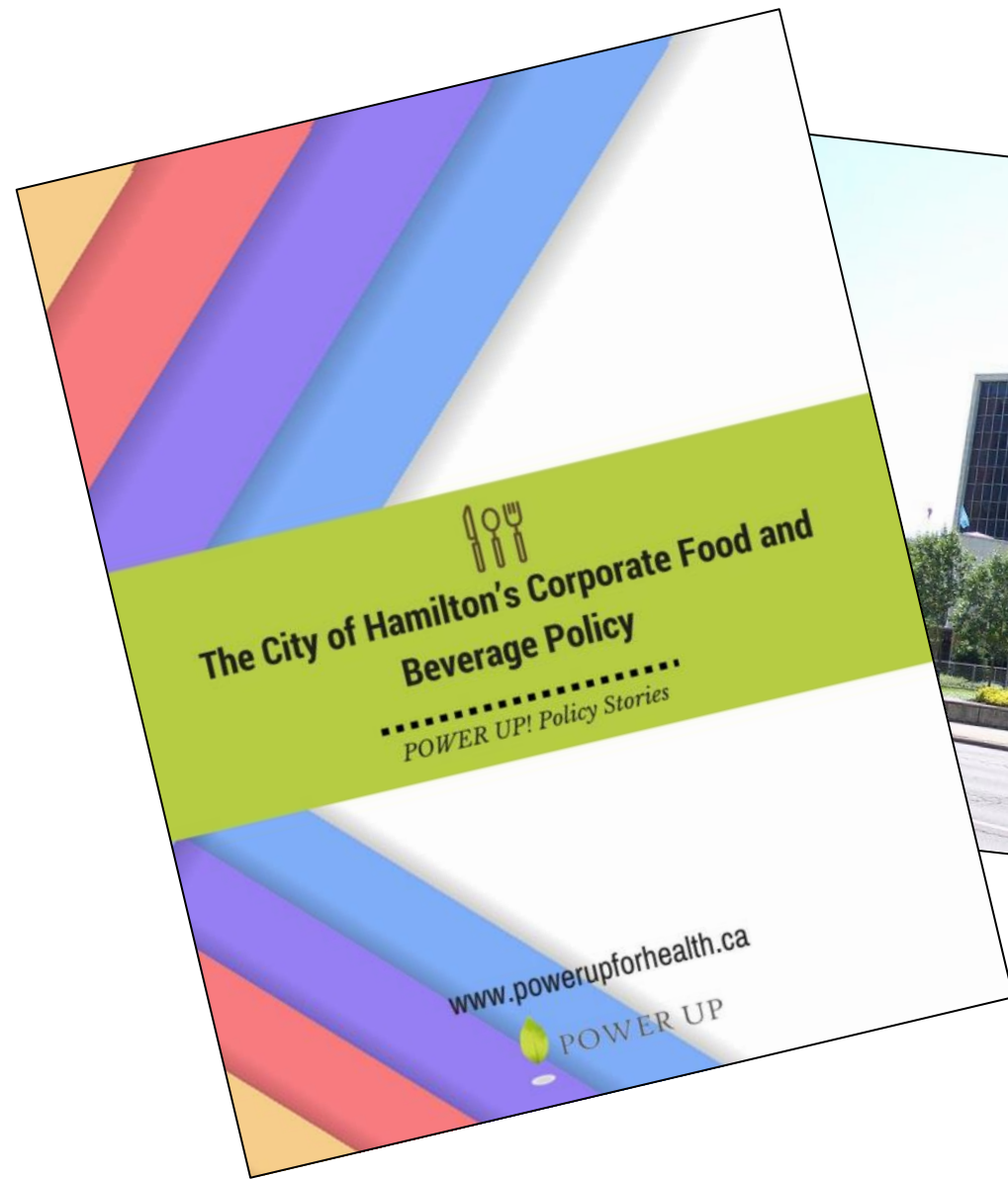
Moe's Healthy Food, Edmonton, AB

St. Albert, Alberta

<http://abpolicycoalitionforprevention.ca/evidence/stories-of-policy-change/>









Social Environment

Economic Environment

Physical Environment

Policy Environment

<https://albertahealthycommunities.healthiertogether.ca/take-action/focus-areas/healthy-eating/>

The Policy Readiness Tool

- The Policy Readiness Tool is an evidence-based tool to help foster healthy public policy.
- Intent is to make participating in policy change more accessible to non-experts and experts
- Developed by Dr. Candace Nykiforuk, School of Public Health, University of Alberta, in partnership with the APCCP.



<https://policyreadinesstool.com/en/>

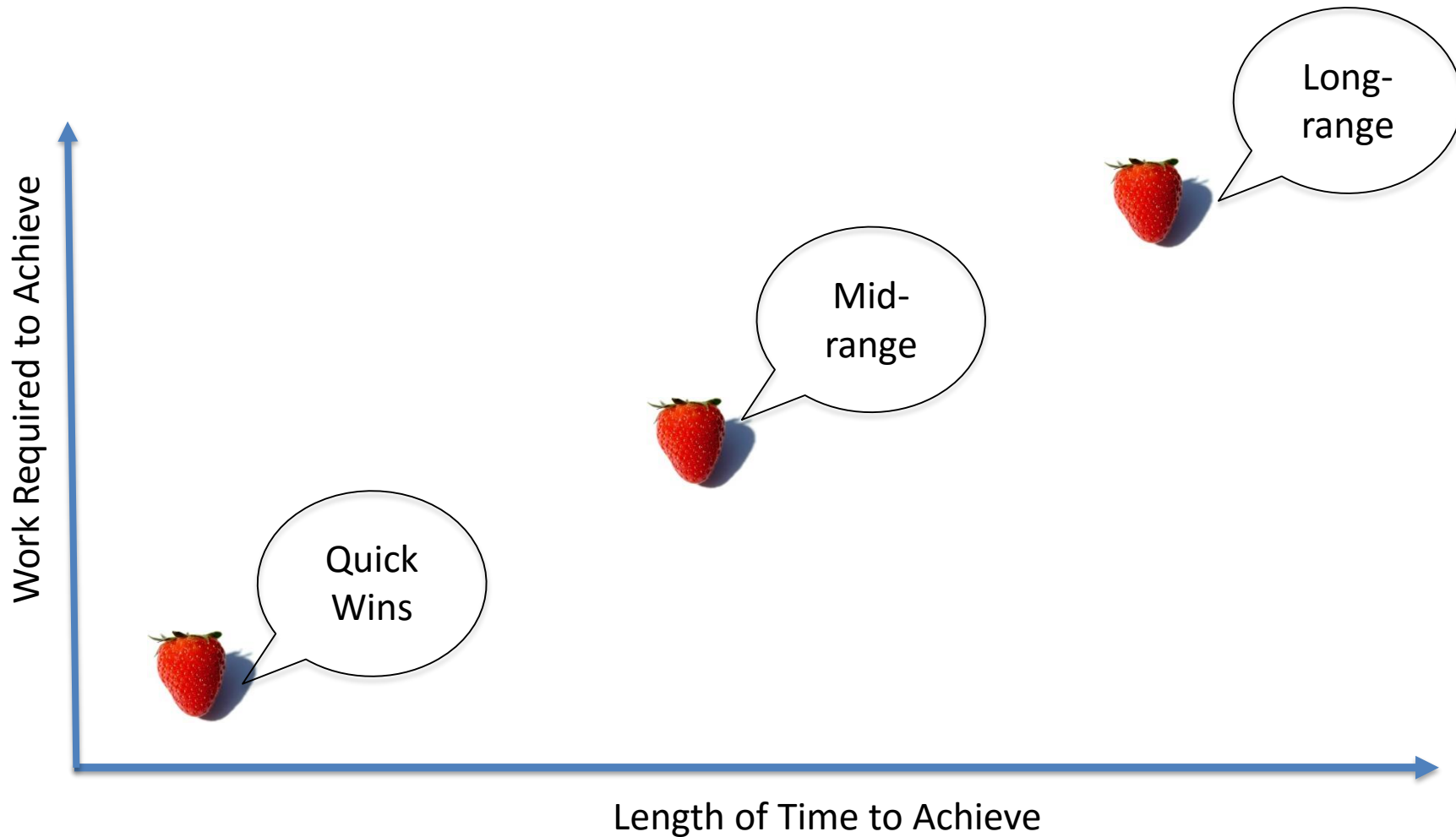
Questionnaire for Assessing Policy Readiness

| A | B | C | Response (A, B or C?) |
|--|--|--|--------------------------|
| The community or organization is comfortable being among the first to try new policies and initiatives | The community or organization usually goes along with other groups' recommendations about trying new policies and initiatives | The community or organization is uncomfortable trying new policies and initiatives | |
| The community or organization enjoys being the first in the province to try something new | The community or organization prefers to try new things after seeing other groups successfully use them | The community or organization prefers to use things it is currently using | |
| The community or organization likes to try things that are seen on TV or read about | The community or organization prefers to try things that are seen on TV or read about only after seeing other groups successfully use them | The community or organization prefers not to try things that are seen on TV or read about until they have been thoroughly tested | |
| The community or organization is always looking for something new to benefit its members | The community or organization sometimes looks for new things to try to benefit its members | The community or organization likes using more traditional things to benefit its members | |
| If the community or organization does not know what to do, it asks other groups for advice | If the community or organization does not know what to do, it sometimes asks other groups for advice | If the community or organization does not know what to do, it tries to figure it out itself | |

Innovators

The Majority

Late Adopters



Quick Wins



- Rec facilities providing schools access to their facilities for prep food courses or school nutrition programs
- Use of readily available nutrition education resources
- Partnering with local media to promote healthy eating
- Printing & posting international breastfeeding symbol
- Ask the federal government to implement a sugar-sweetened beverage tax

Mid-Range



- Engage local dietitians with local businesses to identify healthy choices on menus
- Working with school boards to suggest that Home Economics be made mandatory for junior high students
- Encourage local Farmers' Markets to provide weekly vouchers for free fruit and vegetables to students
- Encourage monitoring food policy adherence by looking at food available in relation to the ANGCY using the developed tools (e.g. Menu Checklist)

Long-Range



- Consider tax incentives for entrepreneurs with innovative ways of offering healthy foods
- Consider the healthfulness of products offered when providing licenses to food trucks
- Use authority to make changes in zoning policies to improve food environments
- Ensure no marketing of unhealthy foods and beverages exists in public buildings, close to schools, and in daycares

Questions?



Municipal Resource Hub for Healthy Food Policies:

<https://auma.ca/advocacy-services/programs-initiatives/municipal-resource-hub-healthy-food-policies>

Upcoming Events

| | | |
|-------------------------------|--|-----------------|
| November 28 to 29 | Decentralized Energy Forum | Banff |
| February 26 to March 1 | Municipal Executive Certificate Program | Jasper |
| March 27 to 28 | AUMA Spring Municipal Leaders' Caucus | Edmonton |
| May 6 to 9 | Annual Crime Prevention Conference | Canmore |
| May 8 to 9 | AUMA Public Risk Conference | Edmonton |

www.auma.ca/events

rmaalberta.com/events-programs