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# Effects of Mining on Women's Health in Labrador West

**Final Report**

November 7, 2004

A Project of:

The Labrador West Status of Women Council
Femmes Francophones de l'Ouest du Labrador

In collaboration with MiningWatch Canada
and the Steelworkers Humanity Fund,
with generous assistance from the Lupina Foundation

This report is available in both English and French

**The Labrador West Status of Women Council**

**Women's Centre**

Drake Avenue, Labrador City, NL, A2V 2K5
Telephone: (709) 944-6562 - Fax: (709) 944-4078
E-mail: lwswc@nf.aibn.com

**Femmes francophones de l'ouest du Labrador**

*505, croissant Bristol*
*Labrador City, NL A2V 1J2*
*Téléphone : (709) 944-7800*
*Télécopieur : (709) 944-7422*
*Courriel : ffol@nf.aibn.com*

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# Executive Summary

## Description

The Effects of Mining on Women's Health Project is an initiative of two women's organizations: The Labrador West Status of Women Council and the Femmes Francophones de l'Ouest du Labrador, in collaboration with MiningWatch Canada and the Steelworkers Humanity Fund, with generous assistance from the Lupina Foundation.

The project looked at health from the World Health Organization's definition, including physical, mental and social health. It operated on the premise that health challenges faced by women in our communities must first be identified and understood before improvements can be made.

The project had a number of parts: the gathering of information from previous studies, learning from and educating community members, especially women, through focus groups, community based research workshops and active participation in the collection of air, soil and water samples for analysis. Interviews were held with key health professionals and women from the community, with findings summarized and disseminated to community members. Approximately 80 women took part in this project.

The project took place between March and October 2004. From July to October, workers at both the Iron Ore Company of Canada (IOC) and Wabush Mines were on strike.

Preliminary air, water and soil samples taken during the shutdown, will provide comparisons for future sampling once the mines have been back in operation for a period of time.

## Survey Results

An interview questionnaire based on feedback from the focus groups and community based research workshop, was given to 29 women, randomly chosen from 10 locations throughout the area. Included in the interview, were 10 Francophones and 19 Anglophones (including 1 Inuit woman, 2 English-speaking women from other cultures and 1 woman in a wheelchair).

We expected to find a pattern in physical health problems, but discovered instead that social issues related to health dominated. People were more concerned about addictions and abuse, shift work and isolation leading to increasing marital breakdown and depression.

There were marked differences in the response provided by both Anglophone and Francophone groups.

Similarities

In both Anglophone and Francophone groups, the majority of women interviewed were between 40-60 years of age. Both groups had equal numbers of children in the same age range, spouses working full time, in mine related industries or unemployed. They agreed that the following services were inadequate: public transportation, child health care assessments and evaluations, legal services related to child support, language services for women of other cultures and support services for abused women. They agreed that women are more likely to have more than one job at the same time and that men are more likely to have benefits associated with their jobs.

Agreement between the two groups was evident on many issues. For instance: they agreed to sometimes feeling isolated, and that the following factors increased their sense of isolation: bad road conditions, high cost of travel, lack of social cultural, entertainment and recreational options and long cold winters. They agreed that the strike had little effect on their feelings of security about the future of the towns, or their jobs and that the mining companies had decreased their contributions to the community. They agreed that their lives were affected by the increase in the cost of electricity, poor maintenance of infrastructure and roads, and loss of French immersion. They were almost equally affected by depression, the dust in the air, and wanting to know what is in the dust. They were similarly smokers, had smoked in the past and had tried to quit more than 10 years ago.

They were unified in their lack of awareness of services for elderly women. They totally agreed that men were more likely to have a full time job, a job in the mines, a job with a pension, a job for life and a higher annual salary. They totally agreed that it is important to know what is in the smoke stack emissions and water supply, and had similar views on the federal government's responsibility for informing us.

Differences

The Anglophone women surveyed were more likely to have lived in Labrador West longer, be homemakers, unemployed or retired. The Anglophone male spouses were more likely to be working for the mining companies. The Anglophone women were more likely to suffer from a lack of employment opportunities, notice an increase in poverty, be affected by the downgrading of health care, elimination of subsidies to school boards and loss of travel subsidies. They are more likely to retire here and more likely to have had a physical problem for which treatment was unavailable locally.

The Anglophone women we surveyed were less likely to have been educated past high school, to have children in the area or to have parents still living. Of those whose parents were still alive, they were more likely to be living in Labrador West. They were the least likely to know about the availability of housing and services for women of any culture other than their own.

The Francophone women we surveyed were more likely to have completed university, be new to the area, work full time in non mine related occupations, have jobs that matched their education and training*, have children living in Labrador West, have parents still living, but outside the area. They are more likely to find housing and mental health inadequate (including the services of the visiting psychiatrist), and to want female doctors. They are more likely to feel the lack of extended family, friends leaving the area and the lack of training opportunities. They are more likely to have problems navigating the system and to be affected by the stigma of having to seek help. They are more likely to report having problems with low self-esteem, addictions, gambling, eating disorders, family breakdown, cycles of suicide, family violence and women abuse. Being a double minority (women and Francophone) means they have to work harder to be heard.

The Francophone women we surveyed were less likely to have spouses working for the mining companies, less likely to be married or living common-law, less dependent on their partner's income, less plagued by the lack of independence or the traditional role of women in the family. They were less likely to be affected by shift work, less likely to know about the increase in poverty levels in the community, about the decrease in contributions by the provincial and municipal governments to the community or to be aware of the dust study done in 1982. They were less likely to retire in Labrador West and to have physical problems for which help was unavailable locally.

Physical Health:

Many of the Anglophone women identified that they had conditions that required treatment outside of Labrador West. Cancer, depression, hysterectomies, breathing problems, addictions, thyroid, headaches, arthritis and malpractice were identified as problems. A wide variety of other ailments were identified, but more investigation is needed before conclusions can be drawn. Both groups agreed that living in Labrador West could possibly cause the medical conditions. We believe that there are some immediate solutions to these problems, such as the use of water filters, eating more green, yellow and dark coloured fruits and vegetable and taking vitamins.

* Possibly due to being better educated, and bilingual

Social Health:

The following services were rated as inadequate by women in our survey: accessibility for people with disabilities, public transportation, specialized health care (including gynecological services and visiting psychiatrist), child health assessments and evaluations, well paid economic opportunities for women, occupational training that matches available jobs, housing, legal services relating to child support, divorce and custody, services to women of other cultures (including Francophone and Aboriginal), mental health, services for elderly women, equal opportunities for women and contributions to living by the mining companies and governments. Social problems identified include addictions and depression, possibly caused by isolation and shift work.

Mental Health:

Among both Anglophone and Francophone women, lack of specialist mental health workers, depression and dust were identified as mental health issues. Among the Francophone women, who have less support and fewer services, low self-esteem, addictions, gambling, eating disorders, family breakdown, cycles of suicide, stigma around seeking help and navigating the system were identified as major issues.

Air, Water and Soil Sample Results:

Water analysis of the drinking water sources shows elevated levels of molybdenum, nickel and barium that exceed the World Health Organization drinking water standards. Analysis of a tap water filter indicates that these minerals can be effectively removed in the home.

Water analysis of the recreational and fishing areas shows very high aluminum, nickel and iron in Wabush Lake and elevated aluminum in most of the Labrador West area lakes.

Soil samples taken from two recreational areas showed chromium levels which minimally exceeded soil guidelines. Aluminum, iron, manganese and titanium were elevated and might be of greater concern for chronic exposures but there are no guidelines in place for these.

Potatoes taken from the Community Garden and blueberries sampled from Smokey Mountain had elevated levels of minerals, but would not present a health risk for daily consumption. The potato had a higher content of zinc, copper, manganese and nickel. The blueberries had slightly elevated copper and high concentrations of iron, sodium, calcium and manganese. Blueberries should be washed before consumption.

NPRI data from 2002 indicate that IOC and Wabush Mines rank among the largest emitters of total particulate matter and respirable* particulate matter in Canada. Dust analysis for total and respirable particulates show results with some cause for concern, particularly since scattered rain throughout the sampling week had substantially reduced blowing dust.

Recommendations:

The Labrador West Status of Women Council and the Femmes Francophones de l'Ouest du Labrador should ensure that the following recommendations are passed along to the respective organizations.

The Labrador West Status of Women Council and the Femmes Francophones de l'Ouest du Labrador should:

1. locate funding to conduct a follow up sampling regime for air, soil and water samples in the summer of 2005 to compare results taken during the strikes with results taken while the mines are operating. Further testing needs to include LC50 for rainbow trout and daphnia to determine the impact on aquatic life. Samples should be taken around the incinerator, especially the soil where asbestos is buried. work with the Ministerial Association and other stakeholders to create an independent position to identify and coordinate interdisciplinary solutions to community problems, including food banks and furniture donations.

2. work with the Labrador-Grenfell Health Authority, Community Mental Health, Addictions Services, Child Youth and Family Services, First Steps Family Resource Centre and Hope Haven Crisis Shelter, to provide increased health education and information sessions for community members.

3. work with the Women's Policy Office and the Provincial Advisiory Council on the Status of Women to become more involved in education, promotion and acceptance of women in non-traditional employment.

4. work with the Public Library and the library at the College of the North Atlantic to catalogue materials of interest to women, and provide better publicity about what is available.

5. work with the Women's Policy Office, the Provincial Advisory Council on the Status of Women, the ministerial association, unions, mining companies and other community stakeholders to provide gender sensitivity training.

* Respirable: able to be breathed into the lungs

The Femmes Francophones de l'Ouest du Labrador and the Francophone Association should:

1. encourage more bilingual services, particularly in the banks, airlines, crisis shelter, hospital, municipal and provincial governments, stores etc.

2. conduct further research and provide programs to deal with the problems of low self-esteem, addictions, gambling, eating disorders, family breakdown, cycles of suicide, family violence and women abuse.

The mining companies should:

1. regularly report the dust and smoke stack emissions testing results to the community.

2. work in conjunction with the municipality and unions to implement programs to reduce the impact of noise pollution.

3. put resources in place for women from other cultures, who come to work or who come with husbands who work in the mines. These resources should be in place prior to their arrival in Labrador West.

4. work with suppliers to ensure that properly fitting work apparel is readily available for female workers (eg. work boots, coveralls, etc.)

The unions should:

1. work in conjunction with the mining companies to conduct a study on the specialized needs and working conditions of female miners.

The town councils of Labrador City and Wabush should:

1. facilitate a new dust study in partnership with the mining companies, unions and provincial and municipal governments, to test the health of mine workers, retirees living here and outside the area and community members not working in the mines. The study should include respirable particulate as well as total suspended particulate. Information on the smoke stack emissions, should include the actual stack emission data, rather than a plume dispersion model.

2. work with the Labrador West Status of Women Council and the Femmes Francophones de l'Ouest du Labrador to provide a gender analysis of the results.

3. work with the provincial and federal government to put pressure on the mining companies to increase the pace of planting grass on the tailings and various other biodiversity programs aimed at reducing dust.

4. work with the Department of Transportation to provide a public transportation system.

Labrador-Grenfell Health Authority should:

1. provide increased specialized health care (oncologist, rheumatologist, obstetrician, gynecologist, ophthalmologist, children's neurologist and assessment team) including services geared for the elderly (podiatrist/foot care clinic and laser surgery for cataracts)

2. promote the availability of female doctors.

3. Actively lobby government for extensive repairs or a new hospital.

4. work in conjunction with the municipalities, unions and community groups to encourage the Newfoundland and Labrador Lung Association to conduct a study on the respiratory health of the citizens of Labrador West.

5. lobby or put pressure on the provincial government to conduct in-depth epidemiological studies on community members and retirees living outside the area, focused on the relationship of barium, nickel, molybdenum, aluminum and chromium toxicity, to deep reflexes or muscle paralysis, gastroenteritis, blood pressure, stroke, heart and kidney disease, cancer and ailments of the central nervous system.

6. recruit a psychologist to provide specialized counseling.

7. mandate visiting psychiatrists to provide ongoing counseling in addition to medications review.

8. work with the Department of Health and Community Services to establish an addictions treatment centre as one of the outcomes of the proposed Mental Health Strategy.

9. work with the Department of Health and Community Services to provide bilingual specialized mental health workers.

The College of the North Atlantic should:

1. work in conjunction with the Department of Education, Human Resources, Skills Development Canada (HRSDC) to conduct a needs assessment of employers in the area in order to determine where training is needed and to provide more community based training related to jobs that are available.

Hyron Regional Economic Development Corporation should:

1. work with the Chamber of Commerce and HRSDC to identify and promote better paying jobs for women.

2. work with the Newfoundland and Labrador Organization of Women Entrepreneurs and HRSDC to provide entrepreneurial training for community members.

3. work with the Labrador West Chamber of Commerce and the mining companies to establish a day care centre, paying particular attention to the needs of shift workers.

4. provide better marketing of distance education courses available to both internet and non-internet users.

The grocery stores should:

1. ensure that the produce being sold is of good fresh quality.

The banks and financial institutions should:

1. work in conjunction with the chamber of commerce to provide education programs in budgeting and financial management.

The local news media in partnership with the unions, municipalities and government officials working on health and occupation issues should:

1. provide education and awareness of dust levels to community members.

The Department of Education in partnership with the local school authorities should:

1. provide air quality monitoring inside the schools, during the winter months.

2. include entrepreneurial training, budgeting and financial management in the curriculum for high school students.

Newfoundland and Labrador Housing should:

1. cap the rent in their low income housing units to encourage occupancy by working families.

# Description and Purpose of Project

The Status of Women Council joined forces with les Femmes Francophones de l'Ouest du Labrador to learn more about the effects of mining extraction on women's health in Labrador West. The project was done in collaboration with MiningWatch Canada, a coalition of labour, Aboriginal, environmental, social justice and development organizations from across Canada, whose mandate is to respond to threats to public health, water and air quality, fish and wildlife habitat and community interests posed by mineral policies and practices.

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Studies concerning women's health are very rare, so this project is seen as crucial to the women of our community. The objective is to start a dialogue with women in the community about how they perceive their health in relation to the mines. It is an opportunity for women to discuss these issues among one another.

For this project, the women's groups used the World Health Organization's definition of health. In addition to the physical aspects of mining on women's health, we also looked at the social and mental health issues of living in a remote and isolated mining community.

The project has two purposes:

1. To enhance the level of knowledge about the impact of mineral extraction on human health (particularly that of women)

2. To develop the capacity of women in mining communities to protect themselves and their families from these effects.

Statement of the Problem:

Worldwide, mining is one of the most dangerous occupations relative to other industries, with 15,000 fatal accidents annually. Mining also causes widespread environmental damage, including pollution of waters with acids and toxic metals, pollution from diesel machinery emissions, destruction of ecosystems and defacement of landscapes. Mining affects health at various levels, through environmental contamination of air, water and soil, through noise pollution, and through disasters and pit closures.

Although mining is known to be a dangerous occupation for its workers, less is known about the impacts of mines on the communities in which they are located. While technical and economic issues are carefully reviewed in the mine planning and environmental assessment stage, the effects on individual, family and community health is seldom scrutinized. Women, as members of their communities, have an opportunity to be at the forefront of knowing how mining projects affects health and could be the ones who address, contemplate and cope with the social and environmental impacts of mineral resource development. [1]

Description of Project

The project took place between March and November 2004, and included meetings, interviews, literature review and environmental testing, leading to the publication of this report. The project components consisted of the following:

Melanie Quevillon came to Labrador West from MiningWatch Canada, prior to our funding application, to conduct a preliminary assessment of the community's level of interest and to introduce the project to the community. Eighteen people met with her to discuss the project.

Catherine Coumans, Research Co-ordinator with MiningWatch Canada, co-ordinated the project and was the main contact person at MiningWatch Canada once the project got under way. Stakeholders were invited to attend a Community Based Research workshop (held in both English and French), conducted by Catherine Coumans. Eighteen women attended this event.

A structured interview format, with opportunity to add more information was held with ten key health care professionals and with twenty-nine women, randomly chosen.

A history of the development of the mines, community and women's issues was compiled. Previous health and environmental studies were examined. Discussions were held with key contacts at Environment Canada, the Provincial Government Dept. of Environment, the Newfoundland and Labrador Lung Association and the Newfoundland and Labrador Cancer Foundation.

Letters were written to the mining companies introducing our project and asking for their co-operation. IOC was quick to respond. Wabush Mines was not.

Water, air and soil samples were taken from around the area, supervised by Sue Moodie[*], a scientist under contract with MiningWatch Canada, who ensured that a proper "chain of custody" was followed to ensure that the samples could not have been changed or altered in any way. Community members were invited to a workshop, given an overview of the findings to date, and provided with training to conduct the samples. They were then encouraged to assist with the sampling process. Fourteen women attended this workshop, nine of whom were not at the original focus group meetings.

A meeting will be held following translation of this report, to present the findings to the community.

[*] Sue Moodie has an MSc. in Mining Engineering and an undergraduate degree in Toxicology. She works for a consulting firm (CCSG Associates), and has worked at the grassroots level with mining-affected communities for over 12 years

# Introduction to Labrador West




The project took place in Labrador City and Wabush, the twin towns commonly referred to as Labrador West (or in this report, as "the area"). It is situated on the mainland portion of the province of Newfoundland and Labrador, Canada. Fermont, Quebec, a smaller mining community, is located twenty-four kilometers to the west.

Labrador was one of the last areas in North America to be settled. It is a harsh, forbidding place. Its vast landscape (294,330 square miles) consists of fjords, forests, tundra, muskeg, rivers, and lakes, has only a total population of 28,201.[2] Most of the population is concentrated in the Labrador City-Wabush or Happy Valley-Goose Bay areas, with the remainder in the coastal villages. With the exception of Churchill Falls, the interior is devoid of population.[3]

According to the 2001 Census, the population of Labrador West is 9,638 (Labrador City: 7,744 and Wabush: 1,894). Of these, 9,110 have lived here for more than 5 years. The population is declining at a rate of –8.0% (in 1996, the total population was 10,473). The land area is 56.27 square kilometers, and the population density is 171.3 per square kilometer.

The Francophone population is about 500* (310 of whom speak French only) and the Aboriginal population (Innu, Inuit and Metis) is 255. The foreign born population is 160, the majority of whom (140) immigrated before 1991. The number of people from visible minorities is 95 (Black: 65, Chinese: 20 and Latin American: 10).

The median age of the population is 35.3, and the percentage of the population over the age of 15 is 82.0%.

Labour Force Participation is as follows:

| **Occupation** | **Total** | **Male** | **Female** |
|---|---|---|---|
| Total: Experienced Labour Force | 5,320 | 3,145 | 2,170 |
| Management Occupations | 530 | 315 | 215 |
| Business, Finance and Administration Occupations | 565 | 145 | 420 |
| Natural And Applied Sciences And Related Occupations | 230 | 160 | 70 |
| Health Occupations | 105 | 5 | 100 |
| Social Science, Education, Government Service And Religion | 220 | 35 | 185 |
| Art, Culture, Recreation And Sport | 50 | 15 | 40 |
| Sales And Service Occupations | 1,215 | 315 | 900 |
| Trades, Transport & Equipment Operators & Related Occupations | 1,785 | 1,700 | 80 |
| Occupations Unique To Primary Industry | 430 | 305 | 125 |
| Occupations Unique To Processing, Manufacturing And Utilities | 190 | 150 | 40 |

Mining continues to be the major contributor to the economy of Labrador West. Voisey's Bay, (a nickel mine on the north coast), is now hiring. New deposits of iron ore have been located northwest of Schefferville, with production planned for 2011.[4]

The mining industry may continue to diversify in the future, with alternative mineral outputs such as concentrate and pellets, a new dolomite mine, and two recently identified silica deposits. Promising finds have been made in graphite and gold, and active exploration is underway. Manganese, quartzite, chromite, mica and crushed stone are also prospects for future development.[5]

There is potential development of a new hydro-electric plant on the Lower Churchill River. Forestry, fishing, tourism and information technology is also poised for growth.[6] Although many new jobs will be created as a result of these initiatives, women are still not entering primary industries in significant numbers.

Recently it was announced that Wal-Mart would be opening a store this winter. It is ironic that in a unionized town, there is a real lack of awareness of the increased problems this could create.

* Source: Francophone Association

# History

Over 40 years ago, two mining companies set out to finance and build this community, its mines, plants, railway and port (in Sept. Illes and Pointe Noir, Quebec). The mining companies built an entire social infrastructure in Labrador City and Wabush (Newfoundland and Labrador). Homes, schools, health care facilities, recreational facilities, churches and so on, were built with no government money. In doing so, they opened up northeastern Quebec and Labrador West to unprecedented development.[7] Mining remains the primary industry and employer in this area.

Iron Ore Company of Canada and the Development of Labrador City

> The Iron Ore Company of Canada, (with Rio Tinto as a major shareholder), started work in the area in 1949. During 1959-60, a pilot plant was operated, followed shortly by the crushing plant, pellet plant, concentrator, office building and maintenance facilities. Since then, additional expansions to both the concentrator and pellet plant have taken place. Today, the mine has the capacity to produce 35 to 38 million tonnes annually but annual concentrate production is 18 million tonnes.[8] These pelletized products are shipped to Sept. Illes and sold worldwide.[9]
>
> IOC has the largest open-pit iron ore mining, concentrate and pelletizing operation the world. IOC's iron ore products are recognized as world class for quality, consistency and clean chemistry.[10]

Wabush Mines and the Development of Wabush

> Wabush Mines is a joint venture of Stelco, Dofasco and Wabush Iron Co. Iron ore deposits in the Wabush area were first examined in 1933. Between 1959-1961, construction began in Wabush. In 1963 a pellet plant was built at Pointe Noire. Today its pellet production has a rated capacity of 6.1 million metric tons per year.[11]

Between them, the Iron Ore Company of Canada and Wabush Mines provides 60% of Canada's iron ore exports.[12] The number of women working at the mines is still very low. At IOC, there are 841 men and 43 women. Wabush Mines have 386 men and 27 women.

# Studies Undertaken in the Past

Ambient Air Monitoring in Labrador City and Wabush [13]

A 1978 survey revealed that the levels of total suspended particulate matter frequently exceeded proposed provincial standards and were found to vary considerably depending upon prevailing weather conditions.

Analysis of data in respect to meteorological conditions suggested that it is IOC who has the major impact on ambient air quality. There was some evidence to suggest that Wabush Mines also influenced local air quality, but to a lesser extent, due to the difference in the processes of the two milling operations. In the Wabush process, the grinding uses a wet operation, while IOC uses a dry operation.

Labrador West Dust Study[14]

During the 1960's and 70's, steelworkers unions in Labrador West were concerned that their members were suffering from disabilities caused mainly by exposure to dust. After much pressure and public demand, the government agreed to conduct a medical study of employees working at the Iron Ore Mines in Labrador West, which was carried out in 1981. The results of the study confirmed that workers were indeed being affected by conditions in their workplace. A number of recommendations were suggested and implemented and it was hoped that this would raise awareness, reduce exposure and provide a better control over the in-plant environment.

The study revealed that through assessment of the working environment and the effect of past dust levels upon the health of the workforce that matters are not satisfactory. Fourteen cases of pneumoconiosis* were identified during x-ray evaluations and dust exposure histories. The appearance of pneumoconiosis at this early stage in the life of the mining operation is a matter of concern.

Ten year later, again after much pressure and publicity, a follow up health study was carried out, although not as comprehensive as they would have liked. This study again confirmed that workers in dust exposed areas were continuing to develop lung and respiratory disease. These studies identified workers with lung disorders that were not being picked up through their annual miner's medical examination. Although the United Steelworker's Union has been recommending that a follow up, full-scale study be done every five years, it has not happened. Despite company allegations that they have introduced improved dust control measures, the records do not support that those efforts have improved conditions greatly. Dust levels in many areas continually exceed the recommended levels.[15]

* Pneumoconiosis is the accumulation of dust in the lungs and the non-cancerous tissue reaction to the presence of that dust in the lungs.

Community Health Survey

In 2001 a Community Health Survey was conducted in all health regions of the province. In that survey, 65% of people in both Labrador City and Wabush rated their own health status as being very good to excellent. The rate of smoking was 4% higher than in the rest of the province and 42% of our population were overweight.*

The highest percentage (17.5%) of hospital admissions (1994 to 1999) for residents of Labrador West were due to diseases of the digestive system.

Rural, Remote and Northern Women's Health Study

In 2004, the Centres of Excellence for Women's Health conducted a study on "Rural, Remote and Northern Women's Health". Rural women spoke of the financial, emotional and social costs from the frequent need to travel away from home to obtain essential health services. Gas or flights are expensive, as are hotel rooms, parking, food, childcare and forfeited income. Traveling for health care is also related to high levels of stress associated with being away from family, especially during a health crisis. Even basic travel costs may not be covered, depending on the federal, provincial or territorial jurisdiction responsible.

Women in rural, remote and northern areas of Canada often experience triple disadvantage, because of their gender, location, and the interactions between the two. For women facing additional barriers of racism, poverty or lack of education, the negative health effects can be multiplied further. Many rural women spoke of not bothering to seek care until they were very sick. As a result, appointments for preventive measures are rarely made. Poverty and financial insecurity arising from unemployment or low wage and seasonal work was highlighted as having the greatest impact on their health.[16]

Health and the Environment

According to a study conducted by Health Canada in 1997, factors that influence our health include a complex interaction among our personal health practices, individual capacity and coping skills, social and economic factors, the physical environment and available health services. The relative importance of the various factors on health has yet to be fully determined.[17]

Education equips people with knowledge and skills for problem solving and helps give a sense of control over life circumstances. Education also increases opportunities for job and income security and job satisfaction. These are key factors influencing health.[18]

* body mass index greater than 27

The availability of emotional support from family and friends can help individuals deal with health-related problems or with issues that may result in health related problems. The lack of social relationships may have as important an effect on our health as other risk factors, such as smoking, reduced physical activity, obesity and high blood pressure.[19]

The World Health Organization reports that high levels of unemployment, underemployment and economic instability cause a significant increase in levels of mental illness and also have adverse effects on physical health. The effects occur not only among the unemployed but in their families and communities in general. Unemployed people appear to suffer more health-related problems, including psychological distress, anxiety, depression and limitation of activity. They also have larger numbers of hospitalizations and physician visits than do the employed.[20]

Health improves with increasing income, which influences the ability to pay for safe housing and sufficient nutritious food.[21]

What we transfer to our environment may eventually be transferred back to us – in some cases with adverse consequences. At certain levels of exposure, contaminants present in our air, water, food and soil can cause a variety of adverse health effects, such as cancer, birth defects, respiratory illness and gastrointestinal ailments. We face a variety of potential threats to our health from the environment. Some of them are of natural origin, such as the sun's ultraviolet rays. Other health threats result from voluntary behaviors, such as smoking. Canadians are also at risk as a result of both involuntary exposure to contaminants present in air, water, food and soil.[22]

## Major Issues in Miner Health

This study, done in 1998, found that while the increasing use of diesel-powered equipment improves the efficiency of mining operations, it also exposes workers to diesel emissions, a known human carcinogen containing fine particulate matter that can easily penetrate the lung. Long-term exposure is associated with increased lung cancer, while chronic exposure can cause coughs, headaches and reversible decreased lung function.[23]

# Health Professionals Questionnaire Results

Interviews were conducted with 10 key health professionals. Two of the respondents have practices only 2 years old and 3 of the respondents had conflicts of interest as their income comes from the mining companies. From some of the answers, it was obvious that the focus was on the general health of all residents, not just women's health issues. Comments in brackets represent the number of interviewees with similar perspectives. Comments without a bracketed number represent the ideas of one interviewee.

1 How long have you lived and worked in Labrador West?

- Most people responded to the number of years they had been employed. Answers ranged from 2-28, with the average being 14.

2 What were the more common illnesses at the beginning of your practice?

- ♣ Body pain (chronic headaches, lower back pain) (2)
- ♣ Pregnancy and obstetrics (575 babies born in peak year of 1975) and child-related illnesses (tonsils, croup, asthma) (2)
- ♣ Depression and alcohol related problems (3)
- ♣ Industrial accidents (2)
- ♣ Asthma
- ♣ Tubular surgeries
- ♣ Family violence
- ♣ Mental illness/conditions
- ♣ In the beginning, the hospital had both obstetrics and medical wards. As the birth rated declined, it was just medical. Now with an aging population, geriatrics make up the majority of spaces and often there is palliative care for patients.

3 Can you identify the most common diseases that are most prevalent now?

- ♣ Mental illness (depression/anxiety caused by separation, shift work, gossip and family dynamics) (4)
- ♣ Cancer (3)
- ♣ Alcoholism and other addictions (2)
- ♣ Chronic body pain (especially back pain) (2)
- ♣ Breathing problems (bronchitis, asthma and sinus troubles) (2)
- ♣ Aging women (menopause, thyroid, arthritis, fractures) (2)
- ♣ Digestive problems (heartburn, Crohn's constipation)
- ♣ Diabetes
- ♣ Heart related diseases
- ♣ Blood disorders such as hemachromatosis
- ♣ Iron deficiency
- ♣ Children's issues
- ♣ Family violence

- ♣ Separation and Divorce

4 Have you seen changes in the type of disease diagnosed/treated over this period of time?

- Yes (population aging, lower birth rates)
- Reported issues such as family violence and sexual abuse have become more evident, probably due to the increase in education and awareness.
- Prescription drugs problems are on the rise. A large portion of our female clients remain "closet" drinkers, coupled with prescription drug use.

5 How has community health changed over all during your years of practice?

- More health awareness (Women's Wellness Clinic, Heart/Health Coalition, Mental Health Awareness, women's support groups) has resulted in women taking responsibility for their own health by trying to live a healthy lifestyle (smoking cessation, losing weight, exercise) (2)
- Cancer unit to administer chemotherapy (2)
- Practice is still growing so I see something new every week
- Aging population
- Declining population
- Increasing social problems
- Diabetes nurses
- Improved diagnosis and early intervention
- Deterioration in the number of surgical procedures available, resulting in more patient transfers to outside centers.

# Community Questionnaire Results

Questionnaires were designed based on feedback from the focus groups developed in the community based research workshop. Interviews were held with 29 women, randomly chosen from 10 locations throughout the area. Included in the interview were 10 Francophones and 19 Anglophones, including 1 Inuit woman, 2 English-speaking women from other cultures and 1 woman in a wheelchair. All participants signed a consent form, and were guaranteed confidentiality. The results are tabulated in this report. Comments included in this section represent the views of the women interviewed.

Demographic Information

**Geographic Area:**

Both towns were divided up into 10 quadrants, and women were randomly chosen from each of the areas. An attempt was made to ensure that women in each of the quadrants were represented, but we were unable to interview anyone living in the Wabush Trailer Court.

| Location | Anglophone | Francophone | Combined |
|---|---|---|---|
| Lab City – North West | 16% | 30% | 23% |
| Lab City – North East | 5% | | 2% |
| Lab City – South West | 16% | 40% | 28% |
| Lab City – South East | 5% | 10% | 7% |
| Lab City – Harrie Lake | 16% | | 8% |
| Wabush – Trailer Court | | | |
| Wabush – North West | 5% | | 2% |
| Wabush – North East | 16% | 10% | 13% |
| Wabush – South West | 16% | 10% | 13% |
| Wabush – South East | 5% | | 2% |

NB. The number of interviewees for each quadrant does not reflect a percentage of the total population of the area.

**Gender**:

All those surveyed were women

**Age Group:**

| Age Group | Anglophone | Francophone | Combined |
|---|---|---|---|
| 20-30 | | 20% | 10% |
| 30-40 | 21% | | 10% |
| 40-50 | 32% | 40% | 36% |
| 50-60 | 32% | 30% | 31% |
| 60-70 | 5% | 10% | 7% |
| 70+ | 11% | | 5% |

**Education Status**:

According to Health Canada, higher levels of education are associated with better health. Education equips people with knowledge and skills for problem solving and helps give a sense of control over life circumstances. Education also increases opportunities for job and income security and job satisfaction. These are key factors influencing health.[24] According to the 2001 census, 38% of people in Labrador West have high school or less.[25]

| Education | Anglophone | Francophone | Combined |
|---|---|---|---|
| High School | 42% | 30% | 36% |
| College | 37% | 20% | 28% |
| University | 21% | 50% | 35% |

**Number Of Years Lived In Labrador West:**

| Number of Years | Anglophone | Francophone | Combined |
|---|---|---|---|
| 1-10 | 5% | 90% | 47% |
| 11-20 | 11% | | 5% |
| 21-30 | 47% | | 23% |
| 30 or more | 39% | 10% | 24% |

**Marital Status*:**

The availability of emotional support from family and friends can help individuals deal with health-related problems or with issues that may result in health related problems. The lack of social relationships may have as important an effect on our health as other risk factors, such as smoking, reduced physical activity, obesity and high blood pressure.[26]

| Marital Status | Anglophone | Francophone | Combined |
|---|---|---|---|
| Single | 11% | 30% | 20% |
| Married | 68% | 50% | 59% |
| Divorced | | 10% | 5% |
| Common Law | 16% | 10% | 13% |
| Separated | | | |
| Widowed | 5% | | 2% |

* According to the 2001 Census, 1,150 women in Labrador West were single, 2,320 were married, 175 were living common-law, 70 were separated, 210 were divorced and 145 were widowed. Labrador West has 335 lone parent families (260 are headed by women).

**Number of Children:**

| Number of Children | Anglophone | Francophone | Combined |
|---|---|---|---|
| 0 | 2% | 14% | 8% |
| 1 | 4% | 10% | 7% |
| 2 | 30% | 10% | 20% |
| 3 | | 29% | 15% |
| 4 | 23% | 38% | 30% |
| 5 or more | 38% | | 19% |

The women we interviewed had a combined total of 53 English and 18 French-speaking children. The Anglophone women had an average of 3 children, and the Francophone women had an average of 2.

**Ages of Children:**

| Age Range | Anglophone | Francophone | Combined |
|---|---|---|---|
| Under 5 | | 6% | 3% |
| 5-10 | 6% | | 3% |
| 11-20 | 25% | 33% | 29% |
| 21 and over | 70% | 61% | 65% |

**Location of Children:**

| Located | Anglophone | Francophone | Combined |
|---|---|---|---|
| Labrador West | 32% | 61% | 46% |

Of the remaining Anglophone children, 21% were in Alberta, 19% were in Ontario and the rest were scattered across Canada and the US. The remainder of the Francophone children were in Quebec (11%) with the rest scattered across Canada.

People of this province have always moved elsewhere to seek employment opportunities. Fort McMurray, Alberta, was referred to as our province's second largest city because of the thousands of former residents who have moved there and now call it home. Whitecourt, Brooks, Calgary and Edmonton Alberta, also have large numbers of former residents.[27]

**Parents still Living:**

| Parents Living | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 53% | 70% | 61% |

**Location of Parents:**

| Parents Located | Anglophone | Francophone | Combined |
|---|---|---|---|
| Labrador West | 45% | 14% | 29% |

A majority of Francophone parents (57%) were living in Quebec.

**Work Status:**

| | Work Status* | Anglophone | Francophone | Combined |
|---|---|---|---|---|
| Self | Full Time | 53% | 60% | 56% |
| | Part Time | 5% | 20% | 12% |
| | Seasonal | 5% | 20% | 12% |
| | Retired | 11% | | 5% |
| | Unemployed | 26% | 10% | 18% |
| Partner | Full Time | 53% | 50% | 51% |
| | Part Time | | | |
| | Seasonal | 11% | 10% | 10% |
| | Retired | 11% | | 5% |
| | Unemployed | 11% | 10% | 10% |
| | Deceased | 5% | | 2% |
| | No Partner | 11% | 30% | 20% |

| | Type of Employment† | Anglophone | Francophone | Combined |
|---|---|---|---|---|
| Self | Mine | 16% | | 8% |
| | Mine-Related | 11% | | 5% |
| | Non Mine-Related | 32% | 80% | 56% |
| | Home-Makers | 42% | 20% | 31% |
| Partner | Mine | 58% | 20% | 39% |
| | Mine-Related | 11% | 10% | 10% |
| | Non Mine-Related | 11% | 20% | 15% |
| | None | 20% | 50% | 35% |

## Social Health

In the following section, respondents provided an assessment of social issues affecting the community and social services available in the community.

Accessibility/Disabilities

| Accessibility | Anglophone | Francophone | Combined |
|---|---|---|---|
| Adequate | 42% | 30% | 36% |
| Inadequate | 42% | 60% | 51% |
| Do Not Know | 16% | 10% | 13% |

One of the respondents, who used a wheelchair and spoke from first hand knowledge, told us that accessibility is totally inadequate for people in wheelchairs. When she goes to the dentist, her husband has to carry her up the stairs in his arms because the dentist's office is not accessible.

* According to the 2001 Census, of the 5,670 persons reporting earnings in Labrador West, only 2,050 men and 885 women worked full year, full time.

† According to the 2001 Census, there were 1,905 men working in resource-based industries, and 265 women, in Labrador West.

Other respondents told us of family members who had difficulty accessing public buildings or services geared to their special needs.

Addictions

| Addictions | Anglophone | Francophone | Combined |
|---|---|---|---|
| Adequate | 32% | | 16% |
| Inadequate | 42% | | 21% |
| Do Not Know | 26% | 100%* | 63% |

Throughout the survey, people told us repeatedly that addictions of all kinds were a problem here. While people appreciated the ads on the cable station (for Alcoholics and Narcotics Anonymous), a treatment centre and specialized counselors are needed.

Public Transportation

| Public Transportation | Anglophone | Francophone | Combined |
|---|---|---|---|
| Adequate | 5% | | 2% |
| Inadequate | 95% | 100% | 97% |

Not everyone has money for cabs, and the women living in Harrie Lake or the Cashin/Cavendish area are a long way from the centre of town. Many of those interviewed felt we need a public transportation system (especially for seniors), to take people to the mall, Wabush, Fermont, Churchill Falls and Goose Bay.

Specialized Health Care

| Specialized Health Care | Anglophone | Francophone | Combined |
|---|---|---|---|
| Adequate | | 10% | 5% |
| Inadequate | 100% | 80% | 90% |
| Do Not Know | | 10% | 5% |

It was almost unanimous that specialized health care is inadequate. People identified the need for an oncologist, ob/gyn, ophthalmologist and children's neurologist.

Two women (one Anglophone) told us that they go to Fermont because they do not trust the doctors here.

* There was some difficulty with the translation of this word (addictions), which may have resulted in this response. The word used was "fiabilité". Later on in the questionnaire, it becomes obvious that the Francophone respondents had a lot of concern about this issue

Child Assessments

| Child Assessments | Anglophone | Francophone | Combined |
|---|---|---|---|
| Adequate | 5% | 10% | 7% |
| Inadequate | 68% | 70% | 69% |
| Do Not Know | 26% | 20% | 23% |

One person mentioned that the services done by our public health nurses are better than in other provinces. Another woman could not get an assessment for her child "because the problem might be hormonal".

Child Evaluations/Janeway* Team

| Janeway Team | Anglophone | Francophone | Combined |
|---|---|---|---|
| Adequate | | 10% | 5% |
| Inadequate | 58% | 70% | 64% |
| Do Not Know | 42% | 20% | 31% |

One of the women told us that when her son needed to be airlifted to the Janeway, there was a bad storm and he was sent to Quebec City instead. Later she was told that she was lucky, because the accommodations (for her) and the quality of care were better in Quebec. Although language could have been a barrier, since she does not speak French, everyone was very helpful.

Economic Opportunities

| Economic Opportunities | Anglophone | Francophone | Combined |
|---|---|---|---|
| Adequate | 5% | 30% | 17% |
| Inadequate | 95% | 60% | 77% |
| Do Not Know | | 10% | 5% |

Women indicated a need for an increase in the minimum wage, and better paying jobs. There are too many single Moms working multiple part time jobs.

One mother, employed at Voisey's Bay, must leave her family and spend 4 weeks away from home for every 2 weeks she is able to be at home. The project is "dry" or alcohol free, so when the men come home, they want to party and drink more, resulting in increased stresses on the family.

Despite repeated attempts made by the Labrador West Status of Women's Council, there is currently no day care centre in our area. Even if women could find good paying jobs, who would look after their children?

* Janeway is the Children's Hospital, located in St. John's, NL. They used to send an assessment team, but they no longer come to the area.

Gynecological Services

| Gynecological Services | Anglophone | Francophone | Combined |
|---|---|---|---|
| Adequate | 16% | 20% | 18% |
| Inadequate | 79% | 50% | 64% |
| Do Not Know | 5% | 30% | 17% |

Women mentioned that it was hard to get appointments: there were long waiting lists and no consistency. One woman told us that she misses a lot of work because of the debilitating pain of endometriosis. She needs a hysterectomy but can not afford to go to St. John's to get it, so she just lives with the pain.

Housing

| Housing | Anglophone | Francophone | Combined |
|---|---|---|---|
| Adequate | 16% | 30% | 23% |
| Inadequate | 37% | 60% | 48% |
| Do Not Know | 47% | 10% | 28% |

Many respondents mentioned that the condition of the houses is good, but the apartment buildings in town are all run-down. Others said that there is lots of housing available, but most of it is not affordable. Some women told us that it was easy to get into rent-geared-to-income housing, but that there is a need for this kind of housing for seniors, which would be close to town and all on one level. Others spoke of the stigma for their children of living in these units, located on the outskirts of town.

Legal Services Related to Divorce, Custody and Child Support

| Divorce | Anglophone | Francophone | Combined |
|---|---|---|---|
| Adequate | 11% | | 5% |
| Inadequate | 68% | 50% | 59% |
| Do Not Know | 21% | 50% | 35% |

| Custody | Anglophone | Francophone | Combined |
|---|---|---|---|
| Adequate | 11% | 20% | 15% |
| Inadequate | 68% | 50% | 59% |
| Do Not Know | 21% | 30% | 20% |

| Child Support | Anglophone | Francophone | Combined |
|---|---|---|---|
| Adequate | 21% | | 10% |
| Inadequate | 68% | 70% | 69% |
| Do Not Know | 11% | 30% | 20% |

Many women agree we need easier access to Legal Aid, including 1-800 numbers and more time with the lawyers in Goose Bay. They told us their frustration at the conflict of interest presented when their spouses are

seeing the only lawyer in town. They spoke of expensive retainers, and opportunities missed by trying to "do-it-yourself".

Settling family matters in a timely manner often presents problems for women who leave abusive situations. Spouses working with the mining companies are able to retain expensive legal representation, while women often have to rely on overworked legal aid lawyers. If one party has a lawyer interested in delaying they will find ways to lengthen the process. The Women Centre knows of several women who have had to work two jobs to support themselves due to the lengthy court process.

The Women's Centre has been at the forefront of advocating for more legal aid services in our area. Women's access to Legal Aid is unfairly limited; they are more likely to need Legal Aid in relationship breakdowns; and represent the majority of applications for child support and peace bonds, as well as those charged with summary convictions, none of which is provided by Legal Aid. Because more money is spent on criminal legal aid services than on civil legal aid, victims of violence are less likely to get assistance than the perpetrators.[28]

Our full time judge was replaced by a circuit court, which comes to town once a month. This has created a backlog of family cases. Wabush has now been identified as a potential site for a Unified Family Court, which would provide a "single-window concept" where family members can find judicial and other services to help them resolve all legal issues, especially with regard to children.

Confidentiality of Medical Information

| Confidentiality | Anglophone | Francophone | Combined |
|---|---|---|---|
| Adequate | 42% | 50% | 46% |
| Inadequate | 42% | 20% | 31% |
| Do Not Know | 16% | 30% | 23% |

One woman told us that when her husband went to the doctor to find out the results of his MRI, the nurse told him they had come back normal, across a waiting room full of people. He did not want people to know he had been for the test.

Aboriginal Services

| Customer Service | Anglophone | Francophone | Combined |
|---|---|---|---|
| Adequate | 5% | | 2% |
| Inadequate | 26% | 20% | 23% |
| Do Not Know | 68% | 80% | 74% |

| Education | Anglophone | Francophone | Combined |
|---|---|---|---|
| Adequate | 5% | | 2% |
| Inadequate | 32% | 20% | 26% |
| Do Not Know | 63% | 80% | 71% |

| Government Services | Anglophone | Francophone | Combined |
|---|---|---|---|
| Adequate | 5% | | 2% |
| Inadequate | 32% | 20% | 26% |
| Do Not Know | 63% | 80% | 71% |

| Legal Services | Anglophone | Francophone | Combined |
|---|---|---|---|
| Adequate | 5% | | 2% |
| Inadequate | 32% | 20% | 26% |
| Do Not Know | 63% | 80% | 71% |

| Medical Services | Anglophone | Francophone | Combined |
|---|---|---|---|
| Adequate | 11% | | 5% |
| Inadequate | 32% | | 16% |
| Do Not Know | 58% | 100% | 79% |

| Municipal Services | Anglophone | Francophone | Combined |
|---|---|---|---|
| Adequate | 21% | | 10% |
| Inadequate | 21% | | 10% |
| Do Not Know | 58% | 100% | 79% |

| Interpretation Centre | Anglophone | Francophone | Combined |
|---|---|---|---|
| Adequate | 5% | | 2% |
| Inadequate | 32% | | 16% |
| Do Not Know | 63% | 100% | 81% |

Only one of the respondents was an aboriginal (Inuit) woman, who felt the services were inadequate. Some people mentioned that services were better in Goose Bay, which has a much larger aboriginal population, but these are not available to the women in our area who might need them. Of those who said they did not know, it was obvious that they had never thought about the needs and services for women of other cultures before.

Francophone Services

| Customer Service | Anglophone | Francophone | Combined |
|---|---|---|---|
| Adequate | 11% | 20% | 15% |
| Inadequate | 26% | 80% | 53% |
| Do Not Know | 63% | | 31% |

| Education | Anglophone | Francophone | Combined |
|---|---|---|---|
| Adequate | 16% | 40% | 28% |
| Inadequate | 21% | 50% | 35% |
| Do Not Know | 63% | 10% | 36% |

| Government Services | Anglophone | Francophone | Combined |
|---|---|---|---|
| Adequate | 11% | 20% | 15% |
| Inadequate | 26% | 60% | 43% |
| Do Not Know | 63% | 20% | 41% |

| Legal Services | Anglophone | Francophone | Combined |
|---|---|---|---|
| Inadequate | 37% | 90% | 63% |
| Do Not Know | 63% | 10% | 37% |

| Medical Services | Anglophone | Francophone | Combined |
|---|---|---|---|
| Adequate | 5% | | 2% |
| Inadequate | 26% | 80% | 53% |
| Do Not Know | 68% | 20% | 44% |

| Municipal Services | Anglophone | Francophone | Combined |
|---|---|---|---|
| Adequate | 5% | 10% | 7% |
| Inadequate | 32% | 80% | 56% |
| Do Not Know | 63% | 10% | 36% |

### Francophone Comments:

The reasons for "inadequate" were primarily based on a lack of bilingual services. One woman indicated that the banks and airlines in particular, have a responsibility to provide bilingual services. Many of them were glad that there was a French school* here, but many upgrades are needed in order to keep the education competitive. Others mentioned that they did not notice a problem because they themselves were bilingual, and still others mentioned an appreciation for the English-speaking people who really try to communicate with them.

### Anglophone Comments:

Women mentioned that the services are evolving, and that the Francophone are better served than the Aboriginals. Others were grateful for the vibrant Francophone culture in our community. Others mentioned how hard it is for Anglophones going to Fermont, giving them a better appreciation for the difficulties of the Francophone people here.

Language Services for Women of Other Cultures

| Customer Service | Anglophone | Francophone | Combined |
|---|---|---|---|
| Inadequate | 74% | 70% | 72% |
| Do Not Know | 26% | 30% | 28% |

* 20-25 students attend this school

| Education | Anglophone | Francophone | Combined |
|---|---|---|---|
| Inadequate | 63% | 70% | 66% |
| Do Not Know | 37% | 30% | 33% |

| Government Services | Anglophone | Francophone | Combined |
|---|---|---|---|
| Inadequate | 63% | 70% | 66% |
| Do Not Know | 37% | 30% | 33% |

| Legal Services | Anglophone | Francophone | Combined |
|---|---|---|---|
| Inadequate | 63% | 70% | 66% |
| Do Not Know | 37% | 30% | 33% |

| Medical Services | Anglophone | Francophone | Combined |
|---|---|---|---|
| Inadequate | 63% | 70% | 66% |
| Do Not Know | 37% | 30% | 33% |

| Municipal Services | Anglophone | Francophone | Combined |
|---|---|---|---|
| Adequate | 5% | | 2% |
| Inadequate | 53% | 70% | 61% |
| Do Not Know | 42% | 30% | 36% |

NB: Of those interviewed, only 2 came from other cultures (non Aboriginal, Anglophone or Francophone)

There was no doubt in women's minds that language is a barrier. Some women thought we needed resources in place before newcomers arrived, with language classes and a "welcome centre" available to assist with the transition to a new culture.

Mental Health Services

| Mental Health | Anglophone | Francophone | Combined |
|---|---|---|---|
| Adequate | 26% | | 13% |
| Inadequate | 47% | 70% | 58% |
| Do Not Know | 26% | 30% | 28% |

Some people were concerned about a potential conflict of interest with an RN (with training in the medical model, on call to the rest of the hospital) as head of the department. Some felt that there is a need of professional workers instead of "medicine pushers". Specialties identified as being needed include marriage counselors, suicide prevention and debriefing, sexual abuse counseling, and an alcohol treatment program. Some people spoke of waiting lists that were too long, and needs going unmet as a result. The need for an addiction treatment centre was again mentioned.

Those who were pleased with the service mentioned that the services here are better than those provided on the island[*].

Support Services for Abused Women

| Services for Abused Women | Anglophone | Francophone | Combined |
|---|---|---|---|
| Adequate | 37% | 60% | 48% |
| Inadequate | 26% | 30% | 28% |
| Do Not Know | 37% | 10% | 23% |

Follow up for women who have left the shelter, bilingual services and education for those who have lived with abuse for years was mentioned as needing improvements. People were happy with the new location, visibility of services and availability 24/7.

Health Canada recognizes that "violence against women . . . is rooted in the social, economic and political inequality of women."[29] Since these inequalities are high in Labrador West, we can suggest that violence is one of the effects on women's health.

Services for Elderly Women[†]

| Services for Elderly Women | Anglophone | Francophone | Combined |
|---|---|---|---|
| Adequate | 5% | | 2% |
| Inadequate | 63% | 70% | 66% |
| Do Not Know | 32% | 30% | 31% |

Needs identified include: a podiatrist/foot care services and laser surgery for cataracts. Women were happy with the quality of respite workers.

Services of Female Doctors

| Services of Female Doctors | Anglophone | Francophone | Combined |
|---|---|---|---|
| Adequate | 11% | | 5% |
| Inadequate | 68% | 90% | 79% |
| Do Not Know | 21% | 10% | 15% |

Most women did not know that we now have a female doctor (Dr. Lucky). A second female doctor is expected shortly. There are currently 3 female doctors in Fermont, some of whom speak English.

Occupational Training

| Occupational Training | Anglophone | Francophone | Combined |
|---|---|---|---|
| Inadequate | 63% | 90% | 76% |
| Do Not Know | 37% | 10% | 23% |

[*] Newfoundland

[†] According to the 2001 Census, there were 135 women in Labrador West over the age of 65. There were 605 people reporting hours of unpaid care or assistance to seniors. 360 of these were women.

Women told us that in the late 70's, it was easy to get hired by the mines with no experience or education, but this is not possible now. Now there are too few training choices especially for jobs that are available here and night courses are unaffordable for many. More trades training geared to the needs of women would be helpful. There needs to be better marketing of correspondence courses, as many people think you need a computer to take them, which is not necessarily true. The Newfoundland and Labrador Organization of Women Entrepreneurs (NLOWE) was seen to be helpful to women wanting to start a business.

With only 38%* of people in Labrador West having completed high school or less,[30] retraining for other jobs is more difficult for many women.

In the past, the College of the North Atlantic offered courses without available jobs for their graduates. As a result, many women were left with high student debt, no means to pay it off and had to find work that did not make use of their training.

Recently the College has worked with IOC and Steelworkers Union #5795 to respond to the large number of retirees (300-500) expected over the next five years, by developing a 3 year diploma program in Mining and Mineral Processing.[31] In September 2003, it was changed to a two-year program (5 academic semesters and 2 work terms). In 2004, the program changed again, to the new Mining Technician program. Graduates may find employment as part of the Operations and Maintenance teams in a mining environment, or find employment as a millwright apprentice. 60-78 of the current graduates have secured employment in the local area.[32]

In the past year, the number of female students greatly exceeds the number of males, as shown in the table below:

| College of the North Atlantic Program | | | |
|---|---|---|---|
| **Intake** | **Male** | **Female** | **Total** |
| January 2000 | 97 | 23 | 120 |
| September 2001 | 95 | 25 | 120 |
| September 2003 | 5 | 1 | 6 |
| September 2004 | 18 | 42 | 60 |

The RMS Safety Institute is now training operators for IOC, Wabush Mines and Voisey's Bay. Twelve members of the Inuit, Innu and Metis Nations have come here for six weeks of intensive training. They will be followed by another 12 people from the aboriginal groups . . . The goal of the Institute is to have a complete Heavy Equipment Training School set

* This figure might reflect those with high school certificates, who have left the area for employment or further education, and who were not living here when the census was taken.

up in the Bruno Plaza.[33] Will it serve the needs of the local people too? How many women will benefit?

Visiting Psychiatrist

| Visiting Psychiatrist | Anglophone | Francophone | Combined |
|---|---|---|---|
| Inadequate | 68% | 90% | 79% |
| Do Not Know | 32% | 10% | 21% |

Some women were not aware that we had one, others said they only checked up on medication dosages and did not provide other needed counseling, and others said they needed to come more often.

Other Comments

Many women expressed concern about the lack of fresh fruit and vegetables and the outdated foods still on the shelves. They asked us, "if they can get good food in Fermont, why can't we get it here?"

Women working in the mines have problems getting gloves, boots and clothing to fit them.

The craft guild is inadequate for women wanting more training in traditional crafts.

## Equal Opportunities

*Despite the federal Royal Commission on the Status of Women thirty years ago, women's voices are still not being heard. The Newfoundland and Labrador Royal Commission on Renewing and Strengthening our Place in Canada report told us that, even though there have been advances in many areas, women in Newfoundland and Labrador and in Canada have still not achieved equality.*[34]

Who is more likely to have a full time job in Labrador West, a man or a woman*?

| Full Time Job | Anglophone | Francophone | Combined |
|---|---|---|---|
| Man | 100% | 100% | 100% |

Who is more likely to have a job in the mines, a man or a woman?

| Job in the MInes | Anglophone | Francophone | Combined |
|---|---|---|---|
| Man | 100% | 100% | 100% |

Women were happy to report that over the years, we are seeing more women working at the mines.

* According to the 2001 Census, 2,050 men and 885 women in Labrador West worked full year, full time.

Who is more likely to have a job with a pension in these towns a man or a woman?

| Job with a Pension | Anglophone | Francophone | Combined |
|---|---|---|---|
| Man | 100% | 100% | 100% |

Who is more likely to work at more than one job at the same time in Labrador West? A man or a woman?

| More than One Job | Anglophone | Francophone | Combined |
|---|---|---|---|
| Man | 16% | | 8% |
| Woman | 79% | 80% | 79% |
| Either | 5% | 20% | 12% |

When the men had more than one job, both were likely to be good paying jobs, but for women, both jobs were likely to pay minimum wage.

Who is more likely to have one job for life in Labrador West, a man or a woman?

| One Job for Life | Anglophone | Francophone | Combined |
|---|---|---|---|
| Man | 100% | 100% | 100% |

Who is more likely in Labrador West to have a job that matches their education and training, a man or a woman?

| Job that Matches Education and Training | Anglophone | Francophone | Combined |
|---|---|---|---|
| Man | 95% | 40% | 67% |
| Woman | | 10% | 5% |
| Either | 5% | 40% | 22% |
| Do Not Know | | 10% | 5% |

There is a perception that women need more education to compete with men, and that there are at least 9 male teachers working in the mines because it pays better.

Who is more likely to have a higher annual salary, a man or a woman*?

| Higher Annual Salary | Anglophone | Francophone | Combined |
|---|---|---|---|
| Man | 100% | 100% | 100% |

One woman mentioned her frustration with several employers, who hired her at minimum wage, regardless of her education and experience, and who were not interested in helping her to advance.

Who is more likely to have benefits associated with their job, a man or a woman?

* According to the 2001 Census, the average earnings of all persons with earnings in Labrador West was $51,109 for men and $18,988 for women.

| Benefits with Job | Anglophone | Francophone | Combined |
|---|---|---|---|
| Man | 100% | 90% | 95% |
| Either | | 10% | 5% |

We were told that benefits for women are improving, and one woman told us that she gets a better benefit package than her husband gets from IOC.

In concluding these questions, some women expressed that there is a need for training men in their new roles as husbands, fathers and sons.

## Poverty

Do you feel there is an increase in poverty issues in Labrador West over the years?

| Increase in Poverty | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 84% | 40% | 62% |
| No | | 20% | 10% |
| Do Not Know | 16% | 40% | 28% |

There is a growing gap between rich and poor.* An increasing number of minimum wage, part-time jobs, the cost of living not matching income, the lack of jobs, hours being cut back due to the strike, addictions and buying "toys" they can not afford were identified as some of the causes of poverty.

Teachers told us they see a lot of children in school not getting the proper care or proper nutrition at lunches and breaks. An increasing number of families can not afford to buy textbooks. There is an increase in teen pregnancies, and higher use of social services. Asbestos siding needs to be removed from the houses and many people can not afford to do it.

## Isolation

| Do you Feel Isolated | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 89% | 80% | 84% |
| No | 11% | 20% | 15% |

* According to the 2001 Census, the median family income in Labrador West for couple families is $78,213, and in lone parent families it is $19,574.

Factors contributing to a sense of isolation were ranked as follows:

1. Lack of Extended Family

| Lack of Extended Family | Anglophone | Francophone | Combined |
|---|---|---|---|
| Self | 47% | 90% | 68% |

Not only do many women experience a lack of extended family in the area, but some are not even able to get out for significant events (births, deaths, weddings) because of the high cost of airfare. Many would like to be closer to family.

2. Road Conditions in and out

| Road Conditions | Anglophone | Francophone | Combined |
|---|---|---|---|
| Self | 68% | 70% | 69% |

Many women complained about the poorly maintained gravel roads, and the long drive to get out. Another told us that she felt a lot less isolated, since they built the road.

3. High cost of travel

| High Cost of Travel | Anglophone | Francophone | Combined |
|---|---|---|---|
| Self | 89% | 90% | 89% |

Many women commented on not being able to visit family and grandchildren as often as they would like, and others spoke of not being able to afford to take their families out for vacation.

One woman told us, "I needed a CAT scan and had to go to Goose Bay. It cost over $400 to fly, which I could not afford, so I took my car over the road and ruined my tires and had to replace my windshield. It ended up costing more money than if I had flown."

In addition to cost, availability of flights out also increases a sense of isolation. One woman told us she has a son with diabetes. When he broke both wrists in a skiing accident, the local hospital would not repair them. All available flights out were booked and they had to wait for 5 days to get out so he could get them set.

4. Lack of social, cultural, entertainment and recreational opportunities

| Lack of Social, Cultural, Entertainment and Recreational Options | Anglophone | Francophone | Combined |
|---|---|---|---|
| Self | 79% | 70% | 74% |
| Do Not Know | | 10% | 5% |

Many women commented that all the basics are covered but they missed the variety of choices of goods and services, not being able to buy clothes that fit or foods suitable to food allergies and sensitivities. Others spoke of the cost to attend and the lack of variety at the Arts and Cultural Centre (the same acts coming back year after year). Others missed being able to go for a drive and shopping at farmer's markets. Some mentioned that there were too many bugs to enjoy the outdoor lifestyle. Others mentioned the lack of awareness or tolerance of people with differences, due to lack of exposure (prejudice, sexual orientation, classism, sexism). One woman told us that she was very discontented for her first fifteen years here, until she bought a cabin, which has provided a great retreat.

5. Lack of employment opportunities

| Lack of Employment | Anglophone | Francophone | Combined |
|---|---|---|---|
| Self | 74% | 60% | 67% |

Women with specialized training mentioned that they were unable to find employment that matched their skills. Others mentioned that with lack of work, young people are more likely to get involved with drugs or alcohol, or have to move away to find work.

6. Lack of training opportunities

| Lack of Training | Anglophone | Francophone | Combined |
|---|---|---|---|
| Self | 68% | 80% | 74% |
| Do Not Know | 5% | | 2% |

Women complained that the courses offered at the college were too expensive, and that enrollments were often too low to warrant holding a class, even for those who signed up.

7. Dependence on Partner's Income

| Dependence on Partner's Income | Anglophone | Francophone | Combined |
|---|---|---|---|
| Self | 58% | 40% | 49% |

Women mentioned that they liked the lifestyle provided by their husband's income. Others are proud of having jobs that enable them to be independent. Others complained that the lack of employment options kept them at home doing all of the housework.*

8. Long cold winters

| Long Cold Winters | Anglophone | Francophone | Combined |
|---|---|---|---|
| Self | 79% | 80% | 79% |

The local hotel is called the "Two Seasons". Snow is frequently on the ground in June, and can come again in September.

9. Friends leaving the area

| Friends Leaving | Anglophone | Francophone | Combined |
|---|---|---|---|
| Self | 68% | 80% | 74% |
| Do Not Know | | 10% | 5% |

10. Not being independent

| Not Being Independent | Anglophone | Francophone | Combined |
|---|---|---|---|
| Self | 37% | | 18% |
| Do Not Know | | 20% | 10% |

One woman mentioned that she gets in a rut and does not leave the house. Another said she kept her husband around simply for snow removal.

11. Traditional Role of Women in the Family

| Traditional Role of Women | Anglophone | Francophone | Combined |
|---|---|---|---|
| Self | 53% | 30% | 41% |
| Do Not Know | | 10% | 5% |

Many women said that not having work created this problem. Others mentioned the loneliness and isolation of not being respected for their opinions, especially in a male

* According to the 2001 Census, 3,555 women reported hours of unpaid housework in Labrador West.

dominated workplace. Another told us that it is more of a problem here than other places she has lived. Others told us that traditional roles are all that many have known, so they do not know it is a problem.

Women often complain that their spouses give them an allowance and they have no idea of the family earnings. Marriage breakdown, which is relatively high in Labrador West, adversely affects women who have not finished high school or who do not work outside the home, as their incomes are reduced and they often end up on social assistance.

**Other Comments Relating to Isolation:**

The Francophone women spoke of having to work harder to be heard, as a double minority (woman and Francophone). Others spoke of noticing the isolation particularly when their children were sick and they experienced first hand, the lack of medical services, long waiting lists, bad roads and expenses of going out. Others told us that not having a car increased their sense of isolation. One spoke of having to put plastic on the windows in the winter, causing her to feel trapped inside her house. Another said that with no government services here, time zone differences made it difficult for working women to make calls outside work hours. Several told us they had seen increased risk factors for poor physical and mental health compared to living in other less isolated places. A woman in a wheelchair told us that this added a whole new dimension to being isolated, as it was physically impossible for her to participate in community activities. The most poignant comment came from a woman who said: "if a man really loved his wife, he would never bring her to the middle of nowhere. There should not be mining towns."

Of the women who did not feel isolated, they mentioned being busy with full time employment, involvement in the community and enough money to do what they want. Several mentioned that opening up the road reduced their sense of isolation, and that traveling great distances contributed to family bonding. Another mentioned the size of the town was small enough to feel part of a "family unit" but large enough that people can live separate lives.

<u>Known Isolation Factors</u>

The following points reflect what has been gleaned from background reading undertaken as part of this project, combined with what the authors know to be true about our community.

1. In a national study on Health Concerns for Northern/Isolated areas, women spoke of the financial, emotional and social costs from the frequent need to travel away from home to obtain essential health services. Travel is expensive, as are hotel rooms, parking, food, childcare and forfeited income. High levels of stress are associated with being away from the family, especially during a health crisis. Even basic travel costs may not be covered. Rural women have to travel long distances to obtain health care and are often without easy access to transportation. As a result, they are less likely to use health services.[35] Unless women are connected with the mining companies there is limited subsidy for travel. This presents an enormous financial burden on the women who have to go out of town for medical treatment. The working poor women and single mothers often have to delay medical treatment if they can not come up with the money.

2. Labrador West is isolated from other communities, except for Fermont, Quebec (population 2,700), which is a twenty minute drive. Churchill Falls, (population 600) is a three-hour drive and Happy Valley-Goose Bay, (population 9,000) is an eight hour drive east, by dirt road. Baie Comeau, Quebec (population 50,000) is an eight-hour drive west, over gravel road and dilapidated pavement. People use this road to travel to other places in Canada.

3. The Quebec North Shore and Labrador Railway, is used to bring iron ore to Sept Isles and Point Noire, Quebec. It can accommodate passengers for a fee. Workers from the two mining companies are given vouchers for their vehicles. Anyone not working with the mining companies has to pay approximately $300 to have their vehicles taken to Sept. Isles. The service is poor. Food is not available on the 8-hour trip and vehicles do not travel with the passengers. Cars are shipped (at owner's risk) on the freight train, necessitating nearly a week without a vehicle, an overnight stay and additional expenses.

4. Cost of air travel is extremely high to connect with other communities. Approximate cost to travel to Goose Bay is $450.00 return. To travel to the Island portion of the province is even higher at approximately $1400 return.

5. Since the downgrading of our local hospital, people have to use either gravel road or air to access medical services, not provided in Labrador West.

6. Smart Labrador has reduced some of the isolation by providing video conferencing for services in justice, health, education and community life. It has been used for meetings, conferences and special events.

7. Long cold winters keep people indoors. Fear of forest fires, bears and bugs keep some people from enjoying the wilderness in the summer.

8. People can not sell their houses and even if they can, comparable houses in other parts of Canada are much more expensive, trapping many retirees here.*

9. A vast land mass with a limited population leads to religious, ethnic and professional isolation especially for those who are the only one of their kind.

10. People leaving the area due to lack of training, education and employment opportunities, often results in dysfunction for families and communities.

11. Due to the isolation and lack of family support, women need more services and support groups. If our population is to remain healthy as it ages, these services must be provided repeatedly, even if they are poorly attended.

12. Newfoundland and Labrador have one of the highest income tax rates in Canada. Those with the lowest incomes are the most seriously effected.

13. Those most likely to leave the area are young (under 35), single, university educated professionals who came to Labrador for the experience and the money. Women who fit these categories, and who choose to stay, are more likely to feel isolated than others.[36]

14. There is a strong undercurrent of alienation in Labrador. Labrador feels as ignored by the provincial government as the province feels ignored by the federal government.[37]

15. While other parts of Labrador are focused on low-level flying, hydro development, land claims and the fishery, this area's focus is solely on mining.

16. There is a perception by fellow Labradorians that Labrador West is a "Cadillac" community without special needs (ie. food banks). This too, creates a sense of isolation and alienation.

17. Labradorians feel that there is a lack of respect, on the part of the federal government and other Canadians, for the people of this province, for the contributions they have made to Canada. We are

* According to the 2001 Census, the average value of dwellings in Labrador West is $70,604.

treated on a formula basis as 1.7% of the population of Canada and therefore politically irrelevant.[38]

## Shift Work

| Life Affected by Shift Work | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 58% | 10% | 34% |
| No | 42% | 90% | 66% |

Since the majority of people working at the mines are men, it is the women who must accommodate the work schedules (for example, keeping children quiet while spouses sleep).

Women report that IOC is very good at accommodating both spouses in choosing their shifts but at Wabush Mines, choosing shifts is done by seniority.

Women told us that as shiftworkers, they can not eat or sleep properly. Night shifts are the hardest. Their whole bodies feel "out of whack". One woman mentioned that she travels around the province for her work, which is a big adjustment for her family when she is gone so much. Another woman told us that she when her mother works shifts, she takes care of her own family as well as her disabled father, who still lives in the family home.

The majority of Francophone workers do not work shifts. When the women we interviewed were asked about factors contributing to problems with shift work (below), most answered on behalf of other women.

Problems caused by shift work were ranked as follows:

1. Mental Health/Depression:

| Mental Health/Depression | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 32% | 70% | 51% |

2. Loneliness:

| Loneliness | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 37% | 90% | 63% |

One woman spoke poignantly about her own experience: "my husband works night shift on the weekends, so I feel really lonely, over-eat and don not go out. By the end of his shift, he is so dragged out he does not want anyone around. His days off are during the week, so he goes to the cabin, but I can not

go because I have to work. We hardly ever see each other, and when we do, he is always tired." Another told us that her mother was lonely and depressed as a result of her husband working shifts.

3. Separation/Divorce:

| Separation/Divorce | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 11% | 80% | 45% |

4. Parenting Problems:

| Parenting Problems | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 26% | 50% | 38% |

5. Partying on Off Days:

| Partying on Off Days | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 16% | 50% | 33% |

6. Child Care Issues:

| Child Care Issues | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 32% | 70% | 51% |

Child care, difficult to find at the best of times, is even more difficult with 12 hour shifts. Some women spoke of having to bring children to work with them, when they could not find childcare.

One woman told us that when she was originally hired, she only worked 9-5. Her job now extends into the evening, so with both she and her husband both working shift, neither spends much time with the children.

Another woman worked for a business open 24 hours a day. Her shifts constantly change and she was exhausted all the time. As a single Mom, she requested steady days, so she could provide her teenagers with consistency and stability, but was told to either accept the changing shifts or quit.

Another Mom with a blended family admits to feeling resentful when her stepdaughter does not go to her Mother's on the weekends. With her husband working, she has to do all the work for his child.

7. Difficulty Scheduling Time for Family:

| Difficulty Scheduling Time | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 37% | 60% | 53% |

One woman told us her father was never off at Christmas or birthdays when she was growing up. Others said they had no social life or activities when spouses worked opposite shifts.

## Security

Do you think Labrador City and Wabush have a long-term future as towns?

| Long Term Future as Towns | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 26% | 50% | 38% |
| No | 68% | 50% | 59% |
| Depends on Outcome of Strike | 11% | 40% | 25% |
| Do Not Know | 5% | | 2% |

There are many differing viewpoints about the long-term future of these towns. Some people say that there is enough ore to last 30 years. Others say 100. No one seems to know for sure. It is commonly accepted that when the mines are finished, the town will be plowed under, but not one of the people we spoke to, wondered what would be done to properly take care of the environment at that time.

Travellers on the Baie Comeau road are constantly reminded of what happened in Gagnon, a mining town that was dismanteled in the 1970's, and are only too aware of what happens to a town when a mining completes its operations.

Attitudes seem to have changed since the strike began. Women told us that they were not as optimistic as they were before. Previous mine-owners were seen as more concerned about the town and its people, so in previous strikes, they never doubted that the town would survive. Now they are not so sure.

Other women told us that as long as we depended solely on the mines, we would not have a future. They told us that unless we discover other minerals or diversify the economy, we will not have any security.

With residents of Labrador West feeling uncertain about the future of their town, and residents of Goose Bay facing a

similar future with the loss of the military base, many people wondered if Labrador has a future at all.

Do you feel secure about keeping your current job?

| Feel Secure about Current Job | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 47% | 50% | 48% |
| No | 26% | 40% | 33% |
| Do Not Know | | 10% | 5% |
| Retired | 16% | | 8% |
| Unemployed | 11% | | 5% |

One woman told us that her hours were cut back during the strike and another mentioned that she felt secure, but that she could be transferred anywhere, anytime.

Do you feel secure about your spouse's current job?

| Secure About Spouse's Job | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 21% | 20% | 20% |
| No | 37% | 40% | 38% |
| Depends on Outcome of Strike | 11% | | 5% |
| No Spouse | 16% | 40% | 28% |
| Retired | 16% | | 8% |
| Unemployed | 5% | | 2% |

Has the strike affected the way you have answered these questions?

| Effect of Strike on Answers | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 42% | 40% | 41% |
| No | 58% | 60% | 59% |

One woman told us that during the strike, she realized that everyone is affected, even if they do not work for the mines

## Contributions to Living by the Mining Company and Governments

Have you noticed increases or decreases in contributions to living in Labrador West by:

Mining Companies:

| Contributions by Mining Companies | Anglophone | Francophone | Combined |
|---|---|---|---|
| Decrease | 100% | 90% | 95% |
| Do Not Know | | 10% | 5% |

In our survey, people mentioned the loss of the bus to the ski hill, mall and trailer court, the company plane, funding to volunteer organizations (schools, ski clubs, youth centres),

sports grants for high school students, reduction in travel allowances and the transferability of train vouchers.

Previous mining companies were seen to be good corporate citizens, approachable for funding for individuals and community needs, but those days are long gone. Recently both mining companies have cut their school board grants by 50%, affecting salaries and transportation incentives for teachers. As a result, there will be less incentive for good quality teachers to stay.

Provincial Government:

| Contributions by Provincial Governments | Anglophone | Francophone | Combined |
|---|---|---|---|
| Decrease | 95% | 40% | 67% |
| Do Not Know | 5% | 60% | 32% |

In our survey, women mentioned the poorly maintained highways and hospital, additional costs for students (text books, school fees), decreases in health and social services, professional development grants for teachers and the loss of hydro counter service. Others mentioned the high cost of gas (no self-serve), and reduced or inconvenient airline schedules, with multiple stopovers and no direct flights.

Municipal Government:

| Contributions by Municipal Government | Anglophone | Francophone | Combined |
|---|---|---|---|
| Decrease | 58% | 20% | 39% |
| Stayed the Same | 16% | 30% | 23% |
| Do Not Know | 26% | 50% | 38% |

In our survey, women mentioned potholes in the roads and shopping centre, school bus fees, “boil water” advisories and a loss of community events.

Changes caused by reductions in spending were ranked as follows:

1. Increase in cost of electricity:

| Cost of Electricity | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 100% | 80% | 90% |

When the town was first built, the mining companies were responsible for the hydro infrastructure, and sold it back to Newfoundland Hydro for a dollar. Now Hydro rates increasing

by 240% over the next 4 years, as the Hydro company attempts to equalize payments across the provincial "interconnected grid".

2. Downgrading of health care facilities:

| Downgrading of Health Care Facilities | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 95% | 70% | 82% |

3. Elimination of subsidies to school boards:

| Subsidies to School Boards | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 89% | 70% | 79% |

Several women mentioned that kids now have to pay for their text books and supplies, where in the past, it was all supplied for free.

4. Reduction in municipal grants:

| Reduction in Municipal Grants | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 84% | 40% | 62% |

5. Loss of travel subsidies from mining companies/company plane:

| Loss of Travel Subsidies/ Company Plane | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 89% | 70% | 79% |

6. Lack of maintenance of infrastructure/road conditions:

| Maintenance of Infrastructure/Roads | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 95% | 100% | 97% |

7. Loss of French Immersion:

| Loss of French Immersion | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 74% | 70% | 72% |

### Retirement in Labrador West

| Retiring in Labrador West | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 47% | 20% | 33% |
| No | 37% | 80% | 58% |
| Already Have | 11% | | 5% |
| Depends on Strike | 5% | | 2% |

For those who would consider retiring here, many said they liked the small town atmosphere. Many came here as children and considered this "their home". Others had friends and family here, others cited cheap housing* and cost of living. Some liked the beauty and others even liked the long cold winters. One woman told us she was the only craftsperson in her field, and liked her corner on the market. Another said she did not have specialized health needs that would require her to leave.

For those who would not stay, the majority of reasons included no family or friends here, the need for medical care, and a dislike of the long cold winters and outdoor lifestyle. Other people found it too remote and isolated, too expensive to get out, and an inadequate social structure for seniors. Some told us this is a working town, others had their fill of living in isolated places. Some found recreational and social opportunities limited and others complained of a lack of attention from all levels of government. Some were concerned about long term health implications and another told us that the sense of security she used to feel was gone.

*"We were told that there is a "next wave" of escalating out-migration as parents follow their children and grandchildren to other parts of Canada, while maintaining their homes for vacation properties".*[39]

We see this happening here already, as many houses stand empty, waiting the return of their owners in the winter.

## Mental Health

| Mental Health | Anglophone | Francophone | Combined |
|---|---|---|---|
| Adequate | 26% | 10% | 18% |
| Inadequate | 58% | 70% | 64% |
| Both | 5% | | 2% |
| Do Not Know | 11% | 20% | 15% |

* According to the 2001 Census, the average gross monthly payments for rented dwellings in Labrador West is $377/month, and for owner-occupied dwellings, it is $411/month.

For the women who found the services adequate, women told us that the workers went beyond the call of duty, were always available and that the service was better here than on "the island".

Those who found the services inadequate told us that they knew of an incident of family violence in which a child needed immediate attention, and services were unavailable to help her through the crisis, that there are long waiting lists caused by not enough workers to go around. One woman expressed her frustration at having to go out of the area if she wanted sexual abuse counseling beyond the basics, and having to do without because she could not afford it. Others said we are in a lose-lose situation (ie. depression with no extended family, no specialized counseling, the cost of going out and if you do, no immediate family or friends to help)

**What do you feel are mental health issues for women in Labrador West?**

Women told us that the major mental health issues were addictions (alcohol, drugs, gambling), burn-out, depression, family breakdown, violence, abuse and suicide. Their mental health was effected by noise pollution (from grinding concentrate, unmanned train and warning from trucks backing up), long cold winters, no extended family, lack of resources, no specialized professional practitioners, menopause, lack of work or nothing to do, the Wabush Mines hills closing in on the town and a general sense of powerlessness and helplessness in their perception of corruption and collusion between mining companies and governments. Our children live sheltered lives and are unprepared for life "outside". Still others talked about the difficulties in being vocal. When they challenge authority or advocate for services, they are silenced and experience repercussions throughout the community.

Issues affecting mental health were ranked as follows:

1. Lack of Confidentiality:

| Confidentiality | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 47% | 40% | 43% |

Women told us that mental health and addictions services are still too visible, especially for those in wheelchairs. If they need to get upstairs, a worker needs to come down and everyone knows why they are there.

2. Long Waiting Lists:

| Long Waiting Lists | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 47% | 30% | 38% |

3. Lack of specialist "Mental Health Workers":

| Lack of Specialist Mental Health Workers | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 68% | 90% | 79% |

Women told us they did not like having medication offered as an alternative to therapy or to the speciality services they need. Specialities needed include: marriage, sexual abuse, addictions, burn-out, suicide prevention and bereavement counselling as well as support groups for single parents.

4. Depression:

| Depression | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 63% | 60% | 61% |

Women told us that depression was caused by isolation, lack of family support, no jobs, no money, single parent stresses and shift work. There needs to be more awareness about this issue.

Women need to be educated about their financial responsibility. They told us about expensive "toys" bought by their husbands, and their responsibility on loans they did not want. Many people are being encouraged to declare bankruptcy, when there might be other options that could be explored.

One woman's father-in-law worked here for 30 years and hated every minute of it. He did not socialize, did not like the outdoors and never made it his home. He was attached to the island and just wanted to go home, but he stayed because of the money. Imagine what message he taught his children, and imagine the effect on his wife.

5. Navigating the System:

| Navigating the System | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 32% | 70% | 51% |

Many women expressed a need for a central location for information, and better publicity about what is out there. There are women dealing with family issues who still do not know where to go for help.

6. Dust Problems:

| Dust Problems | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 79% | 70% | 74% |

> Ever since the crushers started crushing the ore, dust has been a problem. Although watering and planting has helped somewhat, the water trucks can not water the high walls where most of the dust comes from. Summer is often intolerable. On windy days, the dust blows everywhere. On streets closest to the tailings, dogs bring it into the house on their feet. Clothes turn gray on the clothesline. Cars washed are dirty the next day. There is too much dust inside and one woman complained of "gunk" in her nose, which was not there during the strike. Everyone is concerned about potential health problems.

7. Low Self-esteem:

| Low Self-Esteem | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 37% | 70% | 53% |

> Women do not feel valued in a mining town. There are so few opportunities for education or employment, so little money and they do not have a voice. Those who are working experience job related stress as a result of harassment. Motivation and lack of incentives to return to work creates learned helplessness. Low self-esteem is particularly acute in teens, who experience the effects of classism and peer pressure.

8. Addictions:

| Addictions | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 26% | 90% | 58% |

> Beer is cheaper than Pepsi at most of the bars and too much party life increases alcoholism, putting further stresses on families. An addictions (alcohol, drugs and gambling) treatment program would be very welcome here.

9. Gambling:

| Gambling | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 5% | 80% | 42% |

10. Eating Disorders:

| Eating Disorders | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 26% | 90% | 58% |

Women admitted to binging, obsessing about food and not eating properly. One woman said that we had lost 2 young women with eating disorders, because no one knew how to help them.

11. Self Injury:

| Self Injury | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 11% | 10% | 10% |

12. Family Breakdown:

| Family Breakdown | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 37% | 90% | 63% |

Some women talked about how difficult it was, being with the children 24/7. When marriages break down, shared parenting is not equally shared and the men often get away with their responsibilities. Our teens are in trouble and there is no one to help them.

13. Cycles of suicide:

| Cycles of Suicide | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 21% | 70% | 45% |

Some women admitted to having had suicidal thoughts, and another mentioned that everyone knows someone who has tried or been successful.

14. Family Violence/Woman Abuse:

| Family Violence | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 32% | 90% | 61% |

Women said there was a lot of physical, mental and emotional abuse in this community, and a lot of bad relationships.

Since the new crisis shelter opened this year, there has been a significant increase in visits to the shelter. They are now able to provide services to non-resident clients and provide public education programs.

**Hope Haven Yearly Shelter Statistics**

| Year | # of Women | # of Children | Crisis calls | Occupancy Days |
|---|---|---|---|---|
| 2001-2002 | 21 | 15 | 77 | 128 |
| 2002-2003 | 10 | 5 | 54 | 62 |
| 2003-2004 | 20 | 5 | 88 | 113 |

| 2004 | April | May | June | July |
|---|---|---|---|---|
| # of Women | 4 | 2 | 1 | 4 |
| # of Children | 2 | 1 | 1 | 1 |
| Occupancy Days | 12 | 4 | 2 | 14 |
| Crisis Calls Received | 23 | 8 | 11 | 8 |
| General Calls/Visits | 124 | 72 | 28 | 32 |
| Information Calls/Visits | 110 | 49 | 39 | 29 |
| Ex-client Calls/Visits | 10 | 6 | 3 | 10 |
| Outreach and Community Work | 24 | 26 | 70 | 42 |

15. Poverty:

| Poverty | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 16% | 40% | 28% |

We heard how lack of money limits access to proper food, clothing, medical, recreational and social activities. We heard about increasing teen pregnancies.

16. Stigma around Seeking Help:

| Stigma Around Seeking Help | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 42% | 80% | 61% |

Women told us that the stigma is more a fear of being judged, or people spreading gossip. There is a need to educate people around confidentiality in their personal lives, and to focus on the positive and not the negative.

## Physical Health

We asked the following question: "Have you or any family member had a medical condition for which treatment was unavailable in Labrador West?"

| Health Care Unavailable | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 84% | 40% | 62% |

When it opened, the hospital had services for 93 beds. Since then, the total bed count has gradually been reduced to 20, and

many reductions and changes in services and programs have taken place.[40]

Most Common Medical Conditions

In order of frequency, from more than one woman, we heard that cancer, depression, hysterectomies, breathing problems, addictions, thyroid, headaches, arthritis and malpractice were the most common problems. Several women wondered about both graveyards filled with infants. Was this indicative of an excessive infant mortality rate, or did it only appear to be disproportionate because many of the adults are "shipped out" to be buried in the communities from which they came.

Other answers spontaneously given included: obesity, endometriosis, high blood pressure, heart problems, aneurysms, osteoporosis, kidney stones, ear and nose surgery (shunts and tubes in ears), enlarged glands, back and neck problems, dysplasia, bladder infections, digestive problems, gall bladder, and diabetes.

Two women (one Anglophone, one Francophone) told us they went to doctors in Fermont because they felt their concerns were being dismissed here.

Do you feel that any of these medical conditions faced by women are linked with living in Labrador West?

| **Medical Conditions Linked to Living Here** | **Anglophone** | **Francophone** | **Combined** |
|---|---|---|---|
| Yes | 58% | 30% | 44% |
| No | 11% | 20% | 15% |
| It is Possible | 5% | 20% | 12% |
| Do Not Know | 26% | 30% | 28% |

When asked why they thought the medical conditions might be the result of living here, several women answered that it could be caused by inhaling and ingesting the iron in the air, isolation, depression, asbestos in the siding of the houses, the expense of travel, long cold winters, the lack of awareness of proper nutrition or how to cook healthy food and the DDT that was sprayed around town years ago.

Other suggestions include: extended family so far away, carbon emissions from cars left running in the winter, the men at the mines peddling around in PCB's, disturbed sleep from the train whistle blowing all night long, lack of social life for single women, poor quality fruits and vegetables, lack of upgrading of mine and not being involved in activities outside the home. One woman suggested our immune systems are depleted from lack

of sunshine. Another suggested that the arthritis may be caused by cold weather.

From one of the participants who works in one of the schools, we learned that the air quality in the schools is not good. She mentioned frequent respiratory ailments after school opens, which go away in the summer.

Of the women who said they did not think the diseases were linked to living here, reasons cited include many of the same diseases found in other places, or due to aging. Others simply said we do not have enough information to know why.

We asked the following question: "I am going to ask you about a list of diseases that were identified in our Focus Groups as being common in Labrador West. Do any of those apply to you, family and friends?"

| Disease | Self | | Family | | Friends* | |
|---|---|---|---|---|---|---|
| | Anglophone | Francophone | Anglophone | Francophone | Anglophone | Francophone |
| ADHD | | | 5% | 20% | 47% | 20% |
| Arthritis | 53% | | 37% | | 42% | |
| Asthma / Allergies | | 30% | 58% | 50% | 21% | 30% |
| Autism | | | 5% | | 21% | |
| Brain Cancer | | | 11% | 20% | 11% | 30% |
| Breast Cancer | 11% | | 26% | 10% | 32% | 80% |
| Leukemia | | | 11% | | 32% | 20% |
| | | | | | | |
| Digestive Diseases | 5% | 10% | 16% | 20% | 11% | 10% |
| Colitis | 5% | | 16% | | 26% | 30% |
| Crohns | | | 21% | | 11% | 20% |
| Irritable Bowel | 21% | | 21% | | 26% | 30% |
| Bowel Cancer | | 10% | 11% | | 11% | |
| | | | | | | |
| Reproductive Health | | 10% | | 10% | | 10% |
| Ovarian Cancer | | | 16% | | 21% | |
| Cervical Cancer | | | 5% | 10% | 16% | |
| | | | | | | |
| Respiratory Diseases/Lung | 5% | 10% | 16% | 10% | 16% | 20% |
| Sarcoidosis† | 5% | | 5% | 10% | 5% | |
| Silicosis‡ | | | 16% | 10% | 26% | 10% |
| Pneumoconiosis§ | | | 11% | | 16% | |
| | | | | | | |
| Thyroid | | | | | | |
| Hypoactive | 26% | 20% | 42% | 10% | 21% | 10% |
| Hyperactive | | 20% | 16% | 20% | 16% | 10% |
| | | | | | | |

* People may have reported medical conditions of family and friends who are not living in Labrador West
† Sarcoidosis: inflammation of tissues throughout the body
‡ Silicosis: caused by the inhalation of dust
§ Pneumoconiosis is the accumulation of dust in the lungs and the non-cancerous tissue reaction to the presence of that dust in the lungs.

| | | | | | | |
|---|---|---|---|---|---|---|
| Heart disease | | | 16% | 20% | 16% | 40% |
| High Blood Pressure | 16% | 20% | 37% | 20% | 16% | 30% |
| High Cholesterol | 11% | 20% | 42% | 40% | 26% | 30% |
| Other | | | | | | |
| Dry Skin (dry air) | 5% | | | | | |
| Foot problems such as calluses and spurs (concrete floors) | 5% | | | | | |
| Lung Cancer | | | 11% | | | |
| Hysterectomy | 16% | | 5% | | 16% | |
| Endometriosis | | | | | 5% | |
| Irregular Heart Beat | | | 5% | | | |
| Depression | 5% | | 5% | | 5% | |
| Macular Degeneration | | | 5% | | | |
| Multiple Sclerosis | 5% | | 5% | | | |
| Miscarriage | | | | | 5% | |
| Birth Defects | | | | | 5% | |
| Foods coming out without being digested | | | | | 5% | |
| Tear Ducts Dried out | | | | | 5% | |
| Obesity | 5% | | | | | |
| Migraine Headaches | | | 5% | | | |
| Childhood epilepsy | | | 5% | | | |
| Fibromyalgia | | | 5% | | | |
| Hiatus Hernia | 5% | | | | | |
| Myloma | | | 5% | | | |
| Breast Lumps | 5% | | | | | |

The following chart shows the actual instances of hospitalization in Labrador West.

| **Cause of Acute Care Hospitalizations** | **2001-2**[41] | **2000-01**[42] | **1999-2000**[43] |
|---|---|---|---|
| Digestive Diseases | 25 | 20 | 32 |
| Hysterectomy | 13 | 24 | 18 |
| Lung Diseases | Less than 10 | 20 | 23 |

The following chart shows actual cases of cancer in Labrador West between 1980-2002. Further details were unavailable, since the numbers were quite low. Their policy states that if there is any potential to identify persons, the data will not be released.[44]

| **Type of Cancer** | **Lab City** | **Wabush** |
|---|---|---|
| Breast | 43 | 16 |
| Cervical | 12 | |

The following chart shows actual causes of death in Labrador West [45]

| Cause of Death | Numbers* |
|---|---|
| Neoplasm (Cancer) | Less than 10 |
| Endocrine/Nutritional/Metabolic Disorder | Less than 10 |
| Circulatory Disease | Less than 10 |
| Musculoskeletal system/ Connective Tissue Disease | Less than 5 |
| **Totals** | **18** |

Air Quality

Do you think there is too much dust in the air in Labrador West?

| Too Much Dust | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 89% | 80% | 84% |
| No | 5% | 20% | 12% |
| Do Not Notice | 5% | | 2% |

Some women complained of everything being dirty, and it not being fun to go outside on windy days. Some spoke of sore throats that would not go away. Others told us that the company's attitude is that "it is all part of the job and comes with the territory." There was a general consensus that perhaps the town was located too close to the mines, that more monitoring needs to be done, that environmental groups should be putting pressure on mining companies to clean up and that we need to spend more money to improve the environment.

Of the women who did not think the dust was excessive, we heard that since IOC converted to a water process, the dust level is much better, and that there is much more pollution in large urban centers.

Labrador West's George Kean, President of USWA Local 5795, was the first person in Canada to prove a secondary disease was caused by silicosis. His research on the internet from studies done in England to Japan helped win a major award for one of his members suffering from dust related silicosis. Although the original claim was denied by doctors in the province and the Workers Compensation Commission, Kean persisted and proved his point, that the failure of the member's kidney was a result of silicosis, a lung disease contracted by breathing in silica particles found in iron ore deposits.[46]

* To minimize the chance of identification, exact counts are not shown.

Are you aware of the major dust study carried out in Labrador West in 1982?

| Aware of 1982 Dust Study | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 74% | 10% | 42% |

Many women were aware that it had been done, but never heard the results and did not know if any follow up had been done.

Do you think it is important to know what is contained in the dust coming from the mining companies?

| Important to Know What is in the Dust | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 100% | 90% | 80% |

Do you think it is important to know what is contained in the smoke stack emissions of the mining companies?

| Important to Know about Smoke Stack Emissions | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 100% | 100% | 100% |

Do you think it is important to know about the quality of our water supply?

| Important to Know about the Water Supply | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 100% | 100% | 100% |

Women were concerned that the water supply for Lab City, is located under the smoke stack, so how could it not have pollutants in it? Another said, "They have always told us our water is good, but you hear different things about whether it is fit to drink. It is hard to know what to believe."

If you think it is important to know the answers to the questions above, who should be responsible for informing the public?

| Who is Responsible for Informing Us | Anglophone | Francophone | Combined |
|---|---|---|---|
| Mining Companies | 84% | 90% | 87% |
| Federal Government | 79% | 80% | 79% |
| Provincial Government | 74% | 60% | 67% |
| Municipal Government | 89% | 100% | 94% |
| Media | 79% | 90% | 84% |

Although women thought it was important to get the information, many wondered if we would ever get the truth, or if the federal government would care. Some suggested that the municipal government should be the most interested, but others

suggested an outside source would be more trusted. Another reminded us that the media can not give us good information, if what they get is unreliable.

## Smoking

Do you smoke?

| Do You Smoke | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 42% | 50% | 46% |

Have you smoked in the past?

| Smoked in the Past | Anglophone | Francophone | Combined |
|---|---|---|---|
| Yes | 47% | 50% | 48% |
| No Answer | 26% | 50% | 38% |

When did you quit?

| When Did You Quit | Anglophone | Francophone | Combined |
|---|---|---|---|
| Within the past year | 5% | | 2% |
| 1-5 Years Ago | 5% | | 2% |
| 5-10 Years Ago | 5% | | 2% |
| 10 Years Ago or More | 21% | 40% | 30% |

# Water and Soil Quality

## Water

With the exception of the first ever boil order (August 13-27, 2004), due to coliform, and the second one following closely behind on October 5-8, 2004 (due to inadequate chlorination), Labrador West has consistently exceeded all water quality measurements . . . Recently the Labrador City town council approved the start of an extensive water quality study, to examine the micro-organism content in the local water supply.[47]

A recent inspection of the Labrador City water tower discovered a fixture in dire need of repair . . . The inner surface coating is very deteriorated and requires complete relining. Pitting in some of the floor plates has gotten so thin, it has to be done now. It would be a risk to leave it for another year . . . while the work is being done, residents should not see any change in their water supply.[48]

There has been some concern expressed about the lack of fish to be caught this year. Gary Peckham of 53 North, the local newsmagazine, interviewed several Conservation Officers at the Environment and Conservation office, who

suggested that the large snowfall this past winter, the late spring, abundant rainfall and late and sporadic insect emergence are the causes.[49]

## Soil

### Tailings

Both mining companies have begun a seeding program that is helping to reduce the amount of airborne dust around town. However, with a limited area being seeded each year and tailings still being generated, it will take many years to address the problem[50]. The union would like to see the government pressured to complete those programs at a faster rate and to hold them accountable for work done.[51]

### Biodiversity

Earthwatch, an independent environmental assessment and research firm will lend their expertise to the ongoing biodiversity megaproject currently underway at IOC. The project, begun several years ago, includes the containment of tailing dust, the control of red water, the establishment of a wetland area, and the refoliation of the tailings.[52] The plan is to establish a natural marshland that could act as a primary filter, while also supporting a diverse mixture of plants and animals. A dyke will contain the tailings in a part of Wabush Lake, and a tailings planting plan will return many affected areas to a more natural stage. The plantings on the tailings and artificial beach are already creating new environments, and this year, a survey of birds on the tailings' new layer of grasses and sedges noted dozens of species, in good number.[53]

Wabush Mines has embarked on a 3 year "tailings reclamation" project. They have provided vegetation cover to 800 acres, with another 2000 acres planned. This year native mosses have appeared, which were not planted, but it is obvious that the program is creating an environment where the mosses can re-establish. Foxes have been sighted on the tailings, further evidence that the program is working.[54]

# Limitations to the Project

Health refers to all aspects of well-being: physical, mental, social, emotional and spiritual. This Project did not address the spiritual well-being of the women of Labrador West, nor did we explore personal health practices (such as alcohol consumption, physical activity and exercise, eating habits, sexual practices, coping skills, genetic make-up, or number of physician visits), all of which could have an effect on women's health.

The unique conditions of female employees working in the mines and/or mine-related occupations was not considered in this project.

Possible question design errors may have led to some inconsistent recording of information. Our sample size was small, giving us an overview of issues and concerns rather than precise measures of health status or determinants. The meaning we attach to people's answers was also informed by the information gathered in the focus groups and community based workshop sessions of this project.

Because the identity of all determinants of health and the relationships among them are complex, it is often difficult to isolate and measure their effects.

Roadblocks and Complications

Getting information from the mining companies, health professionals and government departments was more difficult than we imagined. Some agencies seemed unsure of the statistics themselves and were reluctant to give over what they had, stating "they were not sure the information would give us what we want".

Information was requested under the Freedom of Information Act, which is required to give information within 30 days. The diskette containing air monitoring data from 1993-2003, arrived 60 days later, as this report was being finalized, leaving no time for interpretation of the data. They are "still assessing whether they can release the Receptor Modeling Report for IOC and will advise on this shortly." The costs for copying each report is as follows: IOC Stack Testing ($254 for the full report, or $22 without appendices), Wabush Mines Source testing ($41 for the full report or $10 without appendices), and IOC Risk Assessment ($28).

We sent a letter to Labrador Aboriginal Affairs to learn more about the rationale of establishing permanent communities away from this area, when the mining companies started working here, but have not heard back from them to date.

Labour Disruptions

Unionized workers at Wabush Mines were on strike from July 5-October 11, affecting approximately 300 workers. IOC followed suit (July 19- September 27), affecting over 800 workers.

This strike lasted throughout the duration of this project, affecting the questionnaire and environmental sampling results. This provided us with a unique opportunity to see what the area is like without the mines operating, so that when we test again, we will have accurate comparison data and can prove what is mine-related.

# What Has Been Learned About Engaging Women in the Issues

Community Response

- Many people expressed their gratitude that the two Women's Centres have undertaken this Project, claiming "it is long overdue".

- People enjoyed the focus groups and data collection activities. They were very forthcoming with their participation, so it is important for us to provide good follow up and keep them informed.

- We learned how complacent people are, how difficult it is to get them engaged in the process, how many feel they have nothing to offer, how intimidated they are to ask questions, and how difficult it was to get them engaged in the process.

- There were more volunteers to do the testing than we required. Some of the participants were disappointed not to have had their homes "chosen" as test sites.

- More women would have participated in the testing of water and soil samples if the equipment had been set up and ready to go at the stated time, and if people had been better dressed for the weather that arose during the workshop.

- Women are concerned about the safety of their drinking water and the effects of dust on their lungs.

- With any awareness comes a responsibility to make change. This has raised anxiety levels and in some cases, increased women's sense of powerlessness and helplessness. We see this as a jumping off point to more action.

- Many women grew up in poverty and are enjoying the affluent lifestyle provided by the mines. They are reluctant to complain, for fear of losing what they have already gained.

- As one woman put it: "As I become more aware of women's issues, I realize there are more grey areas than black and white."

What Surprised Us

- We expected to find a pattern in people's physical health problems, but discovered instead that people were more concerned about addictions and abuse, shift work and isolation leading to increasing marital breakdown and depression. When changes are subtle from day to day, the problems are chronic and harder to trace back to living in a mining community.

- During exploratory talks with members of the community, there was lots of positive response and enthusiasm for the project, but we found that some of those who had been most supportive in the beginning, were hesitant and non-committal once the project got off the ground.

- We learned a lot about complacency, indifference and apathy among the women in our community. The whole community seems to be waiting for the information to come to them, without their having to go out and find it for themselves. Assumptions are being made that others are looking out for our interests. For example, many people were aware of the dust study but did not get any information and did not follow up themselves. Others are interested in the topic, but can not be bothered to come out and participate.

- People are afraid to bite the hand that feeds them. The attitude seemed to be "I live here, I work here, so I have to put up with it". People are blinded by the good wages and nice town.

- The more information we gathered, the more we realized we needed, giving us more enthusiasm for phase 2.

- Communities are not always aware about studies done and their results. We found out by accident, about a cancer study done, showing the actual incidences of cancer in Labrador West between 1980-2002. Without the right contacts, you will not get the right information. It really is who you know.

- This project was seen as a women's project, not a full fledged community project. We will need the support of the entire community to follow up on the recommendations.

- Young women in particular are not aware of issues that affect their elders, or women of other cultures.

- Some of the Francophone women in the community are not aware of the resources available to them, or where to find bilingual support.

- People in wheelchairs have limited access to the community and they often feel left out. As a result of this project, levels of awareness are being raised on both sides.

- People in mining communities have many fears: what is really in the air and water and who can be trusted to give accurate information? Those with strong opinions are afraid to speak out, for fear of losing their jobs. Many are afraid that they will not be able to get the money out of their homes when the mines close.

- Isolation has kept women blinded to the existence of many things. Many people do not know what exists beyond the confines of their families: simple things, like where the tailings come out, the presence of a community college, the view from the top of Smokey Mountain, or the existence of the community garden was new information to many of the participants.

- Our population is aging. Out-migration has caused a decrease in the number of women between the ages of 20 and 30.

- Until we know for certain that there are no contaminants in the water, soil or air, people's stress levels will remain at a level that will compromise their immune systems.

- Many of the people who live here come from rural communities and are used to a lack of services, so anything is better than nothing. They do not know what they do not have, so they do not expect things to be different.

- Employees, who gather important statistics, do not always trust their own information, and if they do they often disengage from the process without using their information to make efforts to change.

- Despite the affluence of the community, only a small minority volunteer to make things better. As people burn out, there is no one to step forward to take their place.

What We Have Learned

- The subject is much broader than the scope or time for this project would allow, which limited us in what we could do.

- The process has raised concerns about living in a mining town, which empowered some and overwhelmed others.

- We have learned who to call, where to go for information, who can be trusted and who can not.

- The strike has changed the way that many women live their lives. For many, this was their first strike, and for some there is an increasing sense that their once-safe communities are no longer safe.

- Many of the women married early, came here from lives of isolation and poverty and now have easy lives. They like their lives and do not want anything to change.

- Professional staff are stretched to their limits, just doing their jobs and do not have the energy, time or resources for the additional responsibilities of

proposal writing or interdisciplinary cooperation. Those who need the help the most are falling through the cracks.

- Early intervention is critical, but even with the establishment of the newly created Family Resource Centre, there are still no resources in place for parents and communities to respond effectively to the needs of children during their most critical years.

# What We Wonder

Physical Health Issues

- Lives have been lost due to lung disease. What is being done to stop this problem? How are the mines, unions and municipalities taking responsibility?

- What risks are attached to diesel exposure, contaminated drinking water, sulfur dioxide and for workers at the blasting site and slurry plant?

- What is the incidence of hearing loss, carpal tunnel syndrome, or injuries to the neck, back, hands and elbows, common among many miners.

- How does one test for compromised immune systems as a result of learned helplessness and lack of control over our lives? What hope can we give people?

- What are the dangers in eating fish from Wabush Lake, due to the excess aluminum exposure, and whose responsibility is it to notify the public?

- What are the implications of asbestos being discovered at J.R.Smallwood Middle School?

- What vitamins can we be taking to offset the effects of the ingestion of minerals?

- Are the graveyards filled with infants indicative of an excessive infant mortality rate, or does it only appear to be disproportionate because many of the adults are “shipped out” to be buried in the communities from which they came?

Social Health Issues

- Despite the small number of Anglophone women reporting concerns with low self-esteem, addictions, gambling, eating disorders, family breakdown, cycles of suicide, family violence and women abuse, the Labrador West Status of Women Council has worked with a great number of Anglophone women with the same problems. Are the Francophone women more open about these issues? What is the extent of the problem for the Anglophone women in our community?

- We noted that the establishment of the Innu communities of Sheshatsiu and Davis Inlet* were created in the late 1950's, around the same time as the mines were being established. We wondered what happened to the Aboriginal people who lived here at that time.

- What are the effects of consumerism and classism and the growing gap between rich and poor in this community?

- What kinds of jobs are being done by women working for the mining companies? Are they doing the same jobs as men?

Environmental Issues

- What was the follow up to the dust study done in the early 1990's called and how can we get a copy?

- We understand that there was a study done by IOC in 2002 on the workers at the mines, and that it is still in draft form. We wonder what it contains.

- Were the recommendations of the various studies ever implemented? What still needs to be done?

- We discovered that Environment Canada had exempted the Mining companies from some of the tests required by law and wondered what made the mines in our towns different from the other mines in Canada.

- We understand that both mines have not been in compliance with some environmental laws and are trying to catch up. What are the consequences of non-compliance and how are they administered?

- Which species are at risk and what is being done to protect their habitat?

- What about the ozone layer? What is the status of the provincial government on implementing programs for recovery and recycling of ozone depleting substances?

* Now called Natuashish

- What steps are being taken to return the environment to its natural state, once mining operations have completed?

- Where do women go, whose spouses are affected by industrial exposure to contaminants in the workplace, when not much effort is being made to change these environmental conditions by the Occupational Health and Safety workers.

- How many years were residents exposed to DDT and what effects does this have on health?

# Opportunities for the Future

Labrador's small population, dispersed over an immense land mass, inevitably results in a high cost of delivering services, a reality which will continue to provide us with challenges and opportunities for creative problem solving, well into the future. Some potential opportunities for further exploration are outlined as follows.

Linkages, Networking and Partnerships

The business community recognizes linkages between social and economic development by including social partners in planning and implementation of certain activities. Communities or municipalities are thinking more about partnerships and networking to secure resources for their communities.[55]

Tracking and interpreting incidence of dust exposure and diseases is extraordinarily difficult.[56] The Newfoundland and Labrador Centre for Health Information is developing a health registry, which will provide a unique personal identifier and client registry. This will make it easier to keep track of people's health records, even after they have moved from the area.

The Community Health Needs and Resources Assessment of the Labrador Region will determine whether the real health needs of community members are being met. Conducting such an assessment will start the community on the path of wellness by identifying the primary health concerns and resources in the community and using these as a basis for setting priorities, establishing strategies and measuring the progress of population health initiatives.

The Newfoundland and Labrador Lung Association could be encouraged to conduct a study on the effects of mining on the respiratory health of the citizens of Labrador West.

Economic Development

A youth employment strategy is being developed for Labrador.[57]

Violence

Funding could be sought to address the high incidence of violence in the community, through the Community Mobilization Fund.

Labradorians for Peaceful Communities, the regional violence prevention coalition, has plans to map out violence prevention and community safety resources and opportunities in Labrador.[58]

Provincial Wellness Strategy

The Newfoundland and Labrador provincial government is developing a Provincial Wellness Strategy, which aims to improve the health status of the population and to improve the capacity of communities to support health and well-being.

To develop the strategy, the health council has been working on a variety of initiatives with the Provincial Food and Nutrition Strategy, Healthy Environments, Coalition for Active Living, Mental Health and Health Promotion Inventory and Database.[59] Representatives from the Labrador West Status of Women Council are already part of a local group focused on these issues.

# Use of the Final Report

Distribution of Final Report

It is important for all of the women involved to have ready access to the report, in either Anglophone or Francophone. If funding is available, additional copies could be placed in all of the provincial libraries, union offices, Women of Steel and the College of the North Atlantic's Employee of the Future Program, and Women in Trades and Technology Program.

Electronic copies could be made available through posting it on various websites or creating links from one website to those sponsored by MiningWatch Canada, the Provincial Advisory Council on the Status of Women, Femmes Francophones, Health Centres of Excellence and/or IOC.

Articles or reports could be written and placed in various publications.

How the Report will be Used

A meeting will be held within the next two months, to release the results to the community. It will be a resource for the community that can be used in future years to carry on with the work started by this process. It can be used by as a tool for additional funding, to take the process to the next level.

The document is also important to others across Canada and around the world, to assist in their efforts to improve the quality of life of women and their families, living and working in mining communities.

# Conclusion

We have begun a process that can be ongoing. The first step was to raise awareness and get people thinking, so that blinders can come off, and people can come out of denial. From this project, people have learned the questions to ask and know they have a right to ask for and expect answers. We have encouraged women to become more politically and community minded. We are pleased that this project has achieved its objectives, and look forward to taking it further.

A lot of groundwork has been done, but we need the time and resources to effectively understand the implications for our community. To effectively implement the recommendations, we need to find ways for the community to see this project as everyone's issue and take ownership of it. Solutions can be found when the community is fully involved.

Recommendations for the next steps can be found in the executive summary.

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# Appendix One:  Key Contacts

# Key Contacts

Community Health Needs and Resources Assessment: contact Dr. Sandra MacDonald, Primary Investigator at 709-777-6679.

Environment Canada, Environmental Economics Branch for work on the health and economic costs and benefits of pollution, contact Rochelle Owen. 819-997-7061

Freedom of Information: Ken Dominie (Assistant Deputy Minister of the Environment and the Freedom of Information Coordinator) 709-729-7413 or Tina Coffey, PO Box 8700, St. John's, NL, A1B 4J6, 709-729-2575 or 709-729-5783

Labrador-Grenfell Health Authority Corporation: contact Delia Connell at 709-897-2267

IOC Environmental Supervisor, Greg Sinclair and Community Liaison, Patsy Ralph 944-8400

MiningWatch Canada, Research Coordinator, Catherine Coumans, 613-569-3439

Newfoundland and Labrador Cancer Foundation: Susan Ryan at 709-777-7602

Newfoundland and Labrador Lung Association, Jennifer Donovan: 1-888-566-5864

Newfoundland and Labrador Dept. of Environment and Conservation, Pollution Prevention Division, Environmental Biologist was Barrie Lawrence, 709-729-6052. Barrie is now the Senior Atmospheric Scientist at SENES Consultants in Richmond Hill, ON.

Town of Labrador City regarding quality of water supply: Jeff Boland, 944-2621

Town of Wabush regarding quality of water supply: Ron Parsons, 282-5696

Wabush Mines, Environmental Coordinator, Guy Moores, 285-7266

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