

# Looking for Solutions: A Community-Based Workshop on the Work-related Health Challenges in Labrador Shellfish Processing Communities – Battle Harbour, Labrador July 13-14, 2006

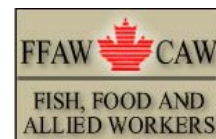
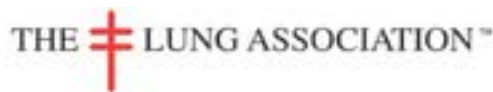
## A Summary Report

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Please Note: The opinions expressed in this publication are those of the author and do not necessarily reflect the views of the Public Health Agency of Canada.

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## Executive Summary

Shellfish processing can be dangerous work. Occupational health challenges have been identified as a serious issue within the shellfish industry. An estimated 32,000 workers living in hundreds of rural and remote communities worked in shellfish processing in Eastern Canada in 2004 (see [www.shellfishohs.ca](http://www.shellfishohs.ca)). It is estimated that up to 15% of workers in Labrador and Newfoundland could suffer from occupational allergy and asthma to snow crab. Other shellfish workers are also at risk, and work-related musculo-skeletal disorders are a common problem in the industry. Some of these health problems are poorly understood and consequently they are less commonly compensated than other injuries.

Representatives from the industry gathered together with policy makers, researchers and Labrador community groups in Battle Harbour to explore the occupational health risks and resources that exist along the coast of Labrador, to expand on our understanding of the issues of concern and to explore the possibility of a community based approach (CBA) to the problem. A CBA depends on community participation, requires collaborative decision-making and promotes sharing knowledge and information. With a CBA, those who are most affected by workplace health & safety conditions are involved in finding solutions to the occupational health problems they experience. This approach to prevention is a good fit for communities along the coast of Labrador because it allows those most involved and aware of the realities of their communities – realities such as workers with occupational diseases, resource scarcity and economic uncertainty – to play a leading role in deciding when and how to intervene.

The atmosphere of engagement, learning and collaboration and the richness of the diversity of people gathered at Battle Harbour demonstrated the value of coming together around an issue and the level of commitment of all stakeholders in the group to work collaboratively. The quality of the exchange of information, the opportunity to become more informed, the opportunity to form questions for which answers do not yet exist and the laying down of a plan to work together made this gathering exciting and productive.

The Steering Committee formed at the Battle Harbour meeting anticipate using this report as a springboard for ongoing discussion and action that will result in a Community Based Approach (CBA) to occupational health issues in shellfish processing communities along the coast. Participants proposed ways in which various partners could strengthen their roles within the industry and work more collaboratively and effectively. Participants suggested directions for future research that would be meaningful for plant workers, and laid out the beginnings of a plan for sharing information and knowledge that will have a profound impact on all those engaged in the shellfish industry.

SafetyNet, a community research alliance based at Memorial University in St. John's <http://www.safetynet.mun.ca/> is supporting the Battle Harbour Steering Committee in their efforts.

## 1.0 Introduction

Shellfish processing can be dangerous work. Occupational health challenges have been identified as a serious issue within the shellfish industry. Common risks to health include Occupational Asthma and Allergies (OAA), work-related musculoskeletal disorders (WMSDs), envenomation, injuries related to accidents, and others.

An estimated 32,000 workers living in hundreds of rural and remote communities worked in shellfish processing in Eastern Canada in 2004. Rural Atlantic Canada presents many unique challenges when addressing the area of occupational health and safety. For example, it is estimated that up to 15% of workers in Labrador and Newfoundland could suffer from occupational allergy and asthma to snow crab.<sup>1</sup> Other shellfish workers are also at risk, and WMSDs are a common problem in the industry.<sup>2</sup> Some of these health problems are poorly understood and consequently they are less commonly compensated than other injuries.

Representatives from the industry gathered in Battle Harbour to explore the occupational health risks and resources that exist along the coast of Labrador, to expand on our understanding of the issues of concern and to explore the possibility of developing a community based approach (CBA) to prevention developed in collaboration with policy makers and researchers. Insights from similar meetings held at Carbonear, Tors Cove and Goose Bay in the spring of 2006 are also included in this report.

This report describes the risks and resources discussed in these meetings and lays out elements of the initial action plan and framework for a CBA proposed by those gathered.

The Battle Harbour meeting demonstrates the value of coming together around an issue and the commitment of all stakeholders to work collaboratively. Getting to Battle Harbour took effort from all those who attended and was rewarded by the wonderful experience of visiting and working at this historic site for the fishery in Labrador. The atmosphere of engagement, learning and collaboration and the richness of the diversity of people gathered added to the experience of being in Battle Harbour. The quality of the exchange of information, the opportunity to become more informed, the opportunity to form questions for which answers do not yet exist and the laying down of a plan to work together made this gathering exciting and productive.

The Steering Committee formed at the Battle Harbour meeting anticipate using this report as a springboard for ongoing discussion and action that will result in a Community Based Approach (CBA) to occupational health issues in shellfish processing communities in their area. Participants proposed ways in which various partners could strengthen their roles within the industry and work more collaboratively and effectively. Participants suggested directions for future research that would be meaningful for plant workers, and

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<sup>1</sup> Howse et al (2006). Gender and snow crab occupational asthma in Newfoundland and Labrador, Canada. *Environmental Research*. 101: 163 – 174.

<sup>2</sup> Solberg, Shirley and Andrea Barron (2006). WMSDs and workplace factors affecting workers in a fish and crab processing plant. [Conference presentation]. Memorial University of Newfoundland.

laid out the beginnings of a plan for sharing information and knowledge that will have a profound impact on all those engaged in the shellfish industry.

SafetyNet, a community research alliance based at Memorial University in St. John's <http://www.safetynet.mun.ca/> is supporting the Battle Harbour Steering Committee in their efforts. SafetyNet, in partnership with several community groups including the Newfoundland and Labrador Lung Association, the Atlantic Networks for Prevention Research, Workplace Health Safety and Compensation Commission (WHSCC) and the Fish Food and Allied Workers Union, is carrying out a multi-phased project to develop and pilot test a community-based approach to shellfish processing occupational health. Once the community-based approach has been developed and pilot tested, a manual and other tools designed to help communities deal with these issues will be adapted and transferred to the other three Atlantic Provinces.<sup>3</sup>

## 2.0 A Community-Based Approach

Community Based Approaches (CBA) involve a range of different individuals and organizations that are reflective of the community. CBA is particularly appropriate in rural and remote communities such as along the coast of Labrador, because those involved are aware of the realities of the communities – realities such as workers with occupational diseases, resource scarcity and economic uncertainty. A community-based approach is a good fit with occupational health and safety issues because it depends on community participation, requires collaborative decision-making and promotes sharing knowledge and information. Because a CBA focuses on participation from every level, it allows for power, control, responsibility and ownership of a project to be shared. Essentially those who are most affected by workplace health & safety conditions are involved in finding solutions to the occupational health problems they experience.

### What has happened so far with the Community-Based Approach?

#### Phase One of the CBA: Regional Meetings in Newfoundland and Labrador

Four regional meetings were held in Newfoundland and Labrador during the spring and summer of 2006. Half day sessions were held in Carbonear, Tors Cove and Goose Bay concluding with a two day meeting in Battle Harbour from Thursday, July 13<sup>th</sup> to Friday, July 14<sup>th</sup>, 2006. The meetings were designed to bring key stakeholders together to:

- discuss the occupational health and safety (OHS) hazards of processing shellfish
- share information on the known occupational health risks
- identify available resources

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<sup>3</sup> This project is funded by the Public Health Agency of Canada, The Trudeau Foundation and by the Atlantic Network for Prevention Research, with support from SafetyNet and Memorial University. The tools will also be posted on an upcoming website on shellfish processing OHS in Eastern Canada where they can be accessed by workers, employers, health professionals and others interested in these issues.

- learn more about occupational snow crab asthma and allergy and work-related musculoskeletal disorders through presentations by researchers and occupational health and safety consultants
- identify assets and barriers that help or hinder the ability to work on OHS issues in plants
- identify regional issues and
- begin the process of collaboratively looking for solutions, particularly community based approaches.

Participants at each of these regional workshops included plant representatives (employers, workers, occupational health & safety representatives); researchers; health care professionals (local physicians, public health nurses, physiotherapists, massage therapists, and asthma educators); OHS consultants; unions (Fish, Food and Allied Workers Union); Association of Seafood Producers; town councils; the Departments of Fisheries and Aquaculture, Health & Community Services, and Government Services; the Workplace Health, Safety & Compensation Commission; the local Regional Economic Development Boards; and the Newfoundland and Labrador Lung Association.

### 3.0 The Battle Harbour Meeting: A Model for Future Meetings

The Battle Harbour meeting stands as a model for the first phase in the development of a CBA for OHS in shellfish processing because of the wide range of participants from many different levels and the quality of engagement, collaboration, and communication the group achieved. For two days the group shared information about risks, resources and realities, explored the issues from the perspective of the different participants, understood their common interests and made the commitment to move forward with an action plan.

The Battle Harbour meeting included time spent exploring two themes: risks and resources. On the evening of the first day there was a prescreening of the drama, *A Second Wind*, on the dilemmas associated with dealing with snow crab occupational asthma. Preliminary discussion focused on occupational health risks and challenges in the shellfish processing industry and began with a number of presentations given by:

- Dr. Barbara Neis, Co-Director, SafetyNet
- Linda Sagmeister, Ergonomist, Department of Government Services
- Dr. Shirley Solberg, Professor, School of Nursing, Memorial University

These were followed by a large group discussion among all participants. Presentations on resources available to deal with OHS issues were then given by:

- Kim Dunphy, Assistant Deputy Minister of Government Services,
- Linda Sagmeister, Ergonomist, Department of Government Services,
- Brenda Greenslade, Director, Prevention Services, NL WHSCC, and
- Dr. Ugis Bickis, an Industrial Hygienist.

These presentations have since been summarized and are available on the website [www.shellfishohs.ca](http://www.shellfishohs.ca) under the title *Occupational Health in Seafood Processing: Risks and Resources*.

The participants also discussed the possible roles of groups within and outside the community in the development of a community-based approach for dealing with OHS issues and directions for future work.

### **3.1 The Group Gathered**

All plants processing crab and/or scallop along the southern Labrador coast were invited through fax and telephone to attend the meeting in Battle Harbour. The main contact in each plant was asked to choose 2-3 participants from various levels within their plant (workers, management, union representatives). Invitations were also sent out to economic development associations, health professionals, and town councils who could play a role in promoting OHS within the shellfish processing industry in Labrador.

Participants included:

- employer and employee representatives from four shellfish processing communities along the southern Labrador coast: Mary's Harbour, St. Lewis, Black Tickle and Charlottetown attended.
- a variety of representatives from other organizations including the Workplace Health Safety and Compensation Commission, Department of Fisheries and Aquaculture, Department of Government Services and the regional zonal board.
- a number of researchers and professionals working in the areas of OHS

### **3.2 The Steering Committee Formed**

At the end of the Battle Harbour workshop, participants decided that one of the most important next steps would be to create a steering committee with representatives from all stakeholder groups. Representatives from each of the sectors represented at the workshop volunteered to join the steering committee.

The Steering Committee is comprised of:

- Plant workers from each community plant  
Mary Stevens - Mary's Harbour,  
Emily Holley – St. Lewis,  
David Campbell - Charlottetown and  
Levinda Keefe - Black Tickle;
- RED Board employee,  
Pauline Brown, from the Southeastern Aurora Development Corporation;
- Health Labrador health care professional,  
Donnie Sampson;



- Department of Fisheries & Aquaculture,  
Ian Burford;
- Assistant Deputy Minister of Occupational Health & Safety,  
Kim Dunphy;
- Director, Prevention Services, WHSCC  
Brenda Greenslade;
- Health & Safety Advisor, Fisheries Sector, WHSCC  
Karen Candow.

There was a strong feeling that to be truly representative of the coast the Steering Committee should include those not represented at the meeting such as plant worker representatives from the two communities unable to attend (Cartwright and Pinsent's Arm) and possibly from the Lance au Loup plant as well as plant owner representatives and managers from all plants.

### **3.3 The role of Collaborative Partners**

SafetyNet will support the Steering Committee by developing a report based on the Battle Harbour meeting, providing support for committee coordination, and financial support for teleconferences and steering committee activities. These actions are consistent with their Public Health Agency of Canada grant objective of developing and pilot testing a community-based approach to OHS in shellfish processing communities. The maximum funding available for each project is \$10,000. Information on the design of the CBA will be incorporated into SafetyNet's manual for CBA approaches to shellfish processing OHS.

## **4.0 Understanding the Dynamics which Impact OHS in Shellfish Processing**

OHS within the shellfish processing industry has its own unique problems. Workshop participants raised issues specific to their regions as well as those that are relevant to many other small communities in Newfoundland and Labrador. Participants suggest that Occupational Health issues in the shellfish processing industry are influenced by many factors and affect a wide spectrum of people, from plant workers and their families to policy makers, union employees, researchers, and employers. Engaging all of these groups in looking for solutions allows for a greater chance of being effective, having as wide an impact as possible and ensuring that the solutions are sustainable.

#### **4.1 From the perspective of the workers**

The reality is that injured workers can experience severe health and socio-economic problems. Particularly when a clear diagnosis is not available, some workers struggle with the choice between work and health. Workers find themselves trying to get through the short duration of time the plant is open because there are no other employment options. The economic and resource uncertainty and the changing nature of the industry in terms of what is processed, when and where, are also factors that workers no doubt consider when they may be putting themselves at risk. For example it may appear less serious to a worker who chooses to go to work for one more season when there is no guarantee there may be another season.

Work is highly seasonal and the industry is plagued by uncertainty making it difficult for injured workers to take time off work without jeopardizing their eligibility for Employment Insurance and future employment.

Seasonal workers with low wages generally do not have access to drug plans or sickness benefits and this may limit their access to important drugs and treatments essential to rehabilitation and effective management of their illness.

Workers must often travel long distances for health care, especially if they are required to see a specialist. Travel may also be hampered by poor weather or road conditions and by long waitlists for access to specialists.

Unfortunately workers are faced with a slippery slope. There is pressure in the short term to under-report illness out of fear that plants might close. Yet when we fail to prevent or accommodate an injury, it can result in clusters of injured or ill workers which in turn places a substantial health burden on the families, communities and health care professionals within them. In the long term, should a plant close, the community will be left with both the loss of its major industry and responsibility for a large number of workers whose employment alternatives and quality of life are compromised by work-related injuries and illness.

#### **4.2 From the perspective of the companies**

Industry uncertainty and limited access to research results and to OHS expertise make it difficult for companies to invest in improved prevention. There is a serious shortage in rural areas of OHS specialists and health professionals knowledgeable about these risks who are available to support industry and workers in their efforts to deal with these problems.

Resource shortages, market and other sources of uncertainty can discourage investment in plant infrastructure essential to reducing risk and limit the funds available for investment in training and OHS expert advice. Fixing this problem requires not only improving the management of our resources – a major focus of industry and government at present – but also addressing the industry's long term need for a healthy, stable workforce. It appears

that Labrador's crab stocks are responding to quota cuts and seem to be increasing. This bodes well for a continued fishery and the need to plan for a future rather than operate season to season with the expectation that the crab fishery might be over. Planning for a future with jobs and health is necessary for the good of plant workers, families, communities and the industry.

Increased awareness and action to reduce the risks associated with shellfish processing among workers and their families could help address the challenges posed by emerging labour force shortages in the industry. If no action is taken, workers and their children may begin to avoid the industry because of perceived risks. Recruitment problems could contribute to the challenges facing workers left in the industry many of whom appear to have injuries and illnesses that can make it difficult for them to do their jobs.

#### **4.3 From the perspective of the communities**

One of the biggest issues for many rural Newfoundlanders and Labradorians is geographic isolation. Shellfish processing communities are often single industry communities and dependent on the employment and revenue generated by local plants. The plants are often open for a short season and workers no doubt feel the need to seize the work opportunity. Rural and remote shellfish processing communities are associated with substantial occupational health risks. Access to OHS training among youth and adults in these communities can also be hampered by distance, cost and education/awareness. Failure to prevent injury and illness can result in a large number of injured and sick workers clustered in a single community amplifying the substantial social, economic and health challenges confronting employers, workers and their families and the community as a whole.

#### **4.4 From the perspective of health professionals**

Rural and remote communities also have very limited access to health professionals with the training and skills necessary to diagnose and treat some occupational diseases and conditions. Given that local health professionals are often the first line of detection for problems like occupational asthma, these gaps can delay or interfere with the diagnosis of occupational diseases and conditions, delaying recognition of problems within plant labour forces and can hinder access to compensation. High turnover among health professionals can lead to problems with continuity of care.

#### **4.5 Communication Barriers**

Other potential obstacles to properly addressing OHS issues in rural communities include communication barriers between community members and outside researchers or professionals, lack of Internet access and limited computer skills.

## **4.6 Need for Action**

We must begin to address these issues in Newfoundland and Labrador and indeed in Atlantic Canada as a whole.

We must work towards preventing work-related health problems, accommodating affected workers and reducing the risk of further injury. We need to improve access to appropriate and high quality diagnostic and treatment tools.

In situations where accommodation at their original workplace is not possible, individuals need appropriate compensation and provision of alternative employment options.

The Community Based Approach project is a first step in beginning to address those needs. It has gathered groups and individuals who have a role to play, encouraged the exchange of ideas and information about risks and resources for addressing those risks and will support the development of responses to the identified needs.

## **4.7 OHS Risks**

At each of the four meetings, researchers presented on work they've done to better understand health risks within the shellfish processing industry, including work-related musculoskeletal disorders (WMSDs) and respiratory problems among snow crab processors.

WMSDs are injuries to soft tissue like muscles and nerves, which are usually caused gradually over time by repetitive motion, heavy lifting, cold temperature and awkward postures. Evidence shows that they are common in shellfish processing plants, as about half of all WHSCC claims in fish processing between 1999 and 2005 were for WMSDs.

Occupational asthma is a work-related health condition that causes air passages to become smaller leading to shortness of breath, wheezing, cough and chest tightness caused or aggravated by workplace exposures to allergens, chemicals and other agents. A major cause of occupational asthma in shellfish processing plants is exposure to aerosolized crab and shrimp proteins. Workers who breathe in these proteins can become sensitized to them resulting in skin problems among some workers and asthma in others. Exposures to sulphites, cleaning chemicals and forklift fumes can also contribute to respiratory problems among shellfish processing workers.

Participants at the Battle Harbour Meeting were excited to learn more about the risks and how they affect workers. They also identified occupational health concerns, risks and challenges and, based on their experience, brought new questions forward about other potential risks.

### Occupational Health Concerns Noted:

- **Lack of information:** physicians and workers do not easily recognize shellfish allergy or asthma and this contributes to a lack of recognition about the seriousness of work-related health problems. There is clearly not enough research done in this field.
- **Spreading effect:** There is a concern that one allergy may lead to other allergies and that family members of plant workers are at risk of exposure to allergens brought home from the plant.
- **Headaches/migraines:** Some participants identified problems with headaches and migraines and questioned whether they might be work-related. Could they be caused by ergonomic problems, environmental triggers (perfumes, cleaners, etc), temperature?
- **Compromised reproductive health:** Some participants raised the concern that there is a perceived high incidence of miscarriage among plant workers. Some women are planning their pregnancy around plant work.
- **Pressure on healthy workers:** There can be additional emotional and physical stress on healthy workers as they accommodate those who are sick.
- **Extra work during peak times:** During high season, at times when the workload is heaviest, and when rest breaks are most necessary to prevent injury, workers tend to get fewer breaks and work is more demanding.
- **Financial insecurity:** Some workers lack health insurance or can't afford to take time off because this could jeopardize access to EI. They fear complaints could end in job loss.

### 4.8 Issues of concern and questions that need further examination

1. Has there been research done on miscarriage occurrence among shellfish plant workers?
2. Is there a possibility that shrimp may cause asthma and allergy?
3. Is information that is brought in at the management or administrative level trickling down to the workers?
4. How can groups concerned about OHS continue to work more collaboratively together?

People also expressed interest in having more information on causes of migraines in plants, ventilation issues, staying healthy throughout the work season, preparation for

returning to work, being able to differentiate between sore muscles and serious muscle problems.

#### 4.9 Resources to address OHS

At the first three meetings there was some general discussion on assets available for dealing with OHS issues, including:

- **Alternative local jobs within the plant or outside, in the region:** beneficial to be able to work in own community
- **Technological improvements that might reduce risk**
- **Health & safety committees:** these are an important resource but are not always in place and some have been organized only recently and may need more training
- **Access to health care and fitness facilities:** this was only mentioned in Carbonear
- **Dedication of employees**
- **Increased awareness**

At Battle Harbour there were four presentations on: Government Services as a Resource for OHS; Ergonomics; Industrial Hygiene; and the services provided by the Workplace Health Safety and Compensation Commission. Although all of these were recognized as possible assets for improving occupational health and safety, participants agreed that use of these resources within their communities was limited for a number of reasons, including:

- **Lack of effective feedback concerning the results of inspections:** Many plants would like a report card accompanying government inspections, to allow them a comparative view of other plants, as well as positive feedback instead of getting attention only when there is a problem.
- **Lack of universal standards:** There is no universal norm for all plants in terms of ergonomic initiatives and health & safety committees, and many plants still do not have them.
- **Pressure on individual:** Much of the responsibility for addressing OHS problems lies with the individual, rather than the workplace or the community.
- **Lack of communication:** Much silence still surrounds OHS problems within communities and families, and many times important information is not passed down the ladder from employer to employee.

As noted, resources do exist to address some of these OHS problems, but participants mentioned many times throughout all the meetings that communication is key to using resources effectively; otherwise the people who need the resources may not know they are there, or are not able to use them appropriately.

## 5.0 NEXT STEPS

### ROLES: HOW TO STRENGTHEN RESPONSES TO ADDRESS THE ISSUES

One of the most important aspects of a community-based approach is the sharing of information, the sharing of responsibility and the identification of community and governmental and other assets to deal with problems. Participants at the Battle Harbour meeting discussed the roles that groups and organizations can and should play in prevention of injury and disease and supporting those with work-related health problems. Discussion focused on ways that various groups could strengthen their responses and action and thereby contribute successfully to addressing the problem.

Group	Ways to strengthen responses
Health Care Professionals	<ul style="list-style-type: none"> <li>- need to be involved within plant, ie. with assessments, but need support from employer</li> </ul>
Researchers	<ul style="list-style-type: none"> <li>- be clearer about what research is and its purpose, to ensure that non-researchers understand intent</li> <li>- find out what communities need for research and try to establish relationship with workers</li> <li>- use knowledge transfer to overcome language barriers</li> </ul>
Department of Fisheries & Aquaculture	<ul style="list-style-type: none"> <li>- consider employee safety equal to food safety</li> <li>- develop standards around environmental and health &amp; safety concerns</li> <li>- need to ensure fisheries regulations are complementary rather than in conflict with OHS regulations</li> </ul>
Schools	<ul style="list-style-type: none"> <li>- promote the WHSCC high school course and start teaching it earlier</li> <li>- promote general awareness of OHS issues among children</li> </ul>
WHSCC (Workplace Health, Safety and Compensation Commission)	<ul style="list-style-type: none"> <li>- work with employees and use their expertise</li> <li>- work more closely with a number of groups like plants, research groups, clinics</li> </ul>

Regional Economic Development Board	<ul style="list-style-type: none"> <li>- need to gain more knowledge on OHS issues</li> <li>- initiate discussions with town councils because OHS affects everyone in community</li> <li>- consider health an important aspect of economy</li> <li>- target other occupations</li> <li>- consider hiring an OHS person for the region to provide support to industry, workers and communities</li> <li>- when exploring economic development alternatives look for employment alternatives for injured and ill workers</li> </ul>
Town Council	<ul style="list-style-type: none"> <li>- educate whole community about OHS at plants, not just plant workers</li> <li>- try to provide fitness opportunities in town</li> </ul>
Employers	<ul style="list-style-type: none"> <li>- use HACCP (Food Safety Program) principles, which they are already familiar with, to better understand OHS guidelines</li> </ul>
Companies	<ul style="list-style-type: none"> <li>- heighten awareness of responsibility of OHS problems, doubly necessary because owners do not live in local area and head offices are elsewhere</li> <li>- legislated requirement to provide a safe environment and to inform workers of work-related risks in their plants</li> </ul>

### Steering Committee

The Steering Committee will move the project further along, and ensure continuity of communication. Momentum from the initial regional meeting will be kept up as committee members continue to meet, and decide which actions need to be taken. It was noted that everyone would like to see the results of action by the steering committee before the beginning of next season and by the middle of April, 2007.

Participants at the Battle Harbour meeting met with their respective groups (plant workers, researchers, health care professionals, government, and the Regional Economic Development Board) and a brainstorming session was conducted on how to continue in the immediate future and how to support a collaborative process. Suggestions centred around education and communication among all important stakeholders.

Group	Objective	Actions (what steps are necessary to achieve the objective)	By Whom	By when



<p><b>Plant Workers identified a need to:</b></p>	<ul style="list-style-type: none"> <li>• communicate expectations of both plant workers and management, including the legislative responsibilities of managers;</li> <li>• increase awareness among plant workers of government roles and responsibilities;</li> <li>• set timeframes and carry out evaluations;</li> <li>• educate not only the health and safety committees, but also plant workers who can then train their colleagues who would be more likely to listen to them than to a supervisor;</li> <li>• increase involvement of other community members in OHS issues;</li> <li>• ensure communication between all health and safety committees;</li> <li>• secure funding to enable the sustainability of these actions.</li> </ul>			
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<b>Group</b>	<b>Objective</b>	<b>Actions</b>	<b>By Whom</b>	<b>By when</b>
<p><b>Health Care Professionals focused on specific actions such as:</b></p>	<ul style="list-style-type: none"> <li>• training in mask fit-testing for workers;</li> <li>• a back injury prevention program;</li> <li>• a program for year-round health and wellness for workers.</li> <li>• need to be better informed about plant operations, as well as about Workplace Health, Safety &amp; Compensation Commission processes.</li> <li>• Steps to address mental health problems, including stress, were also identified as a priority</li> </ul>			
<b>Group</b>	<b>Objective</b>	<b>Actions</b>	<b>By Whom</b>	<b>By when</b>

<p><b>Government Officials</b></p>	<ul style="list-style-type: none"> <li>strengthen the collaboration and information sharing among groups, as well as between government departments</li> <li>help enable communities and plants to become more self-sufficient through longer, more engaged visits by government inspectors.</li> </ul> <p>The WHSCC and the Department of Government Services should:</p> <ul style="list-style-type: none"> <li>share training initiatives,</li> <li>coordinate schedules to travel together to plants,</li> <li>help facilitate workers' forums.</li> <li>Government departments could also share information more freely amongst themselves by holding joint in-services for inspectors.</li> </ul>			
<p><b>Group</b></p>	<p><b>Objective</b></p>	<p><b>Actions</b></p>	<p><b>By Whom</b></p>	<p><b>By when</b></p>
<p><b>Regional Economic Development Board</b></p>	<ul style="list-style-type: none"> <li>more engagement of other community members, including the town council, in health and safety issues for the whole community</li> <li>potentially creating a position within the economic zone to work only on health and safety matters</li> <li>communication among all stakeholders and more education were seen as key. More specifically, newsletter and web-posted meeting minutes were suggested as informational tools that would be freely accessible.</li> </ul>			
<p><b>Group</b></p>	<p><b>Objective</b></p>	<p><b>Actions</b></p>	<p><b>By Whom</b></p>	<p><b>By when</b></p>

<p><b>Researchers</b></p>	<ul style="list-style-type: none"> <li>• creating Frequently Asked Questions (FAQ) document on musculoskeletal disorders;</li> <li>• producing a shorter, summary presentation containing the key points in the risks and resources presentations for use in future meetings, etc. and making it available on the web;</li> <li>• providing training and learning opportunities for healthcare professionals;</li> <li>• researching exposure control (degree to which workers are exposed to air borne allergens and ways to reduce these exposures);</li> <li>• keep research participatory.</li> </ul>			
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## 6.0 CONCLUSION

Phase One of the Community-based Approach to Shellfish Processing OHS project resulted in four regional meetings including one two-day workshop in Battle Harbour Labrador. The consultations and discussions were productive first steps in establishing a community-based approach to dealing effectively with occupational health and safety issues in the shellfish processing industry in Atlantic Canada. The two-day meeting at Battle Harbour, in particular, can be used as a model for workshops in other regions and provinces because of the diversity of participants and strong representation of policy makers who were able to engage in meaningful discussion on what the problems are and what can be done about them.

The Steering Committee formed will use this report as a blueprint for beginning their work. SafetyNet will organize a teleconference to solicit feedback on the report and to initiate discussions about next steps in early October.

## Appendix A

### **Battle Harbour Workshop – Looking for Solutions: A Community-Based Workshop on the Work-related Health Challenges in Labrador Shellfish Processing Communities July 13-14, 2006**

#### **Agenda**

##### **July 13<sup>th</sup>**

**12:00 – 1:00 Lunch, Welcome and Introductions**

**1:00 – 1:30 Workshop Objectives and Process, Review of the Agenda**

**1:30 – 2:30 Shellfish Processing Occupational Health – Issues and Challenges**

- Linda Sagmeister, Ergonomist, Department of Government Services: What is a Work-Related Musculoskeletal Disorder
- Shirley Solberg, School of Nursing and SafetyNet and Paul Kean, Union Local President, Beothic Fish Processors: Work-related musculo-skeletal disorders and snow crab processing
- Barbara Neis, SafetyNet: Respiratory problems among Shellfish Processing Workers

**Large Group Discussion:** Are there any other occupational health issues in shellfish processing that we should be discussing?

**2:30 – 2:45 Break**

**2:45 – 3:45 Resources for preventing occupational injury and disease**

- Kim Dunphy, Assistant Deputy Minister, Department of Government Services: Government Services as a Resource for OHS
- Linda Sagmeister, Ergonomist, Department of Government Services: An Introduction to Ergonomics
- Ugis Bickis Asst. Prof. (Adj.), Mining Engineering and, Community Health & Epidemiology: Identifying and Reducing Work-related Exposures
- Brenda Greenslade, Director of Prevention Workplace Health Safety and Compensation Commission (WHSCC): A General Overview of the Workers Compensation Process.

**3:45 – 4:15 Facilitated Small Group Discussion**

Are you aware of these resources? Are they being used locally? If not, why do you think they are not being used locally? Can you think of other resources that are being used on the coast to help prevent occupational injury and disease?

**4:15 - 4:45 Feedback to the large group**

**5:00 – 6:00 Battle Harbour Tour**

**6:00 – 7:00 Supper**

**7:00 – 8:00 Tools for a community-based approach to occupational health in shellfish processing**

Presentation of the **OHS in Shellfish Processing in Eastern Canada** Website.

Screening of **A Second Wind** – docudrama on the dilemmas associated with crab asthma

**8:00 - 9:00 Group Discussion**

**July 14<sup>th</sup>**

**8:00 – 8:45 Breakfast**

**8:45 -9:00 Check-in, review of the day's agenda**

**9:00 – 10:15 Developing a Community-Based Approach to OHS in Shellfish Processing - Facilitated Small Group Discussions**

What part might the following groups play in reducing risk and promoting the health and opportunities of shellfish processing workers and their communities?

Union leaders, the Companies, Town Councils, RED Boards, Health Professionals and Health Labrador, Department of Government Services, the WHSCC, Researchers and Educators/Trainers

**10:15 – 10:45 Break and Check-out (Working Break for Facilitators)**

**10: 45-11:15 Feedback**

**11:15 – 12:00 Brainstorming: Moving from Jobs or Health to Jobs and Health**

**12:00 – 1:00 Lunch**

**1:00 – 2:00 Next Steps**

**2:00 – 2:15 Evaluation and Closing**

**2:30 Board ferry to return to Mary's Harbour (1<sup>st</sup> crossing)**