THE BOARD OF HEALTH PRESENTS REPORT 08-006 AND RESPECTFULLY RECOMMENDS:
1. Child and Adolescent Budget 2008/2009 (BOH08026) (City Wide) (Item 5.1)
   (a) That the 2008/2009 budget submission for Child and Adolescent Services, which is 100% funded by the Province and outlined in Appendix A attached to Report 08-006, be approved.
   (b) That a temporary reduction of 0.6 FTE for the budget year 2008/2009 with a permanent decision being contingent on the 2009/2010 budget be approved.
   (c) That the Mayor correspond with the Minister of Children and Youth Services requesting an increase in funding to the Child and Adolescent Program at levels that will, at a minimum, keep pace with annual increases to approved staffing complements and associated operational costs.

2. Public Health Report to the Community (BOH08025) (City Wide) (Item 5.2)
   That Report BOH08025 – Public Health Report to the Community, be received.

3. Research Funding: Immigrant Women’s Perception of their Lived Experience Accessing Breast Health and Screening through Hamilton Women’s Health Educator Program (BOH08022) (City Wide) (Item 5.3)
   That staff be directed to utilize available funding to increase staff by 0.5 FTE Public Health Nurse for a two year period in order to conduct the study: Immigrant Women’s Perception of their Lived Experience Accessing Breast Health and Screening through Hamilton Women’s Health Educator Program.

4. Heat Health Warning System Update & Review of 2007 Experience (BOH07024(b)) (City Wide) (Item 5.4)
   That Report BOH07024(b) - Heat Health Warning System Update & Review of 2007 Experience (BOH07024(b)) (City Wide), be received.

5. 2008 Heat Response Plan (ECS08027(a)) (Item 5.5)
   That Report ECS08027(a) – 2008 Heat Response Plan, be received.
6. Water Fluoridation (BOH08024) (City Wide) (Item 7.1)

(a) That Report BOH08024 – Water Fluoridation, be received

(b) That the Mayor correspond with the Ministers of the Environment, Health and Long-Term Care, Health Promotion and the Chief Medical Officer of Health for Ontario, requesting the support and establishment of an Ontario Fluoridation Office, to be fully funded by the Province.

(c) That staff be directed to prepare a detailed cost analysis, with a broad range of alternative methods of fluoride delivery approaches; including toothbrush programs on up, and report back to the Board of Health.

7. Health Risks Associated with Cell Phone Towers (BOH08013) (City Wide) (Item 7.3)

That Report BOH08013 – Health Risks Associated with Cell Phone Towers, be received.

8. Communications (Item 11.1)

That the dispositions for the following Items of communication be approved:

(a) Letter from Ken Arnold MB BCh, President, Ontario Medical Association, respecting nurse-only clinics.

Recommendation: Be received.

(b) Copy of letter from Pat M. Madill, AMCT, CMM 1, Regional Clerk, Durham Region to the Premier of Ontario respecting memorandum from Dr. Robert Kyle, Commissioner & Medical Officer of Health, dated April 24, 2008 regarding Grey Bruce Board of Health Resolution respecting rabies vaccines for farm animals.

Recommendation: Be endorsed.

(c) Letter from George Smitherman, Deputy Premier, Minister of Health and Long-Term Care, respecting XVII International AIDS Conference being held in Mexico City, Mexico, August 3 to August 8, 2008.

Recommendation: Be received.

FOR THE INFORMATION OF COUNCIL:

(a) CHANGES TO THE AGENDA (Item 1)

The Clerk advised the Board of the following changes to the agenda:

(i) Added as Item 7.1(c)(c) – Written Submission regarding Water Fluoridation from Dr. Patricia Chow-Fraser, Professor and Chair, McMaster University, Department of Biology

(ii) Added as Item 7.1(d)(d) – Written Submission regarding Water Fluoridation from Robert Trow

(iii) Added as Item 7.1(e)(e) – Written Submission regarding Water Fluoridation from Karen and Erwin Buck

(iv) Added as Item 7.1(f)(f) – Written Submission regarding Water Fluoridation from Larry Farrauto

(v) Added as Item 7.1(g)(g) – Written Submission regarding Water Fluoridation from Aliss Terpstra CNP, Research Coordinator, Second Look – Fluoride Toxicity Research Collaborative

(vi) Added as Item 7.1(h)(h) – Written Submission regarding Water Fluoridation from Jim Gilhuly

(vii) Added as Item 7.1(i)(i) – Written Submission regarding Water Fluoridation from Arlene Howchin

The Clerk also noted that Item 7.3 – Health Risks Associated with Cell Phone Towers (BOH08013) (City Wide), had been revised as staff had inadvertently omitted the Planning and Economic Development Considerations, which now appear on pages 5 and 6 of revised Report BOH08013.

The July 9, 2008, agenda of the Board of Health was approved, as amended.

Dr. Richardson introduced Dr. C. Mackie, the newly appointed Associate Medical Officer of Health, to the Board.

(b) DECLARATIONS OF INTEREST (Item 2)

There were none declared.
(c) MINUTES

The Minutes of the May 27, 2008 meeting of the Board of Health was approved, as presented.

(d) DELEGATION REQUESTS

The following delegation requests were approved to speak before the Board of Health at the July 9, 2008 meeting:

(i) Lynn Aquin, Campaign for Adequate Welfare and Disability Benefits, wishing to address the Board today respecting trigger points for a heat alert. (See Item 5.4) (Item 4.1)

(ii) Cindy Mayor, regarding potential health effects of water fluoridation. (See Item 7.1) (Item 4.2)

(iii) Diane Sprules, BSc, MSc (Biology), People for Safe Drinking Water, wishing to make a presentation respecting tooth decay and fluorosis rates from fluoridated and unfluoridated communities. (See Item 7.1) (Item 4.3)

(iv) Russell Simon, wishing to present a short video respecting the issue of removing fluoride from the municipal water supply. (See Item 7.1) (Item 4.4)

(v) Peter Van Caulart, Environmental Training Institute, regarding contaminants within the fluoridation compound hydrofluosilicic acid used for Hamilton’s drinking water fluoridation program. (See Item 7.1) (Item 4.5)

(vi) Liz Hughes, to present information on water fluoridation from Dr. James Beck. (See Item 7.1) (Item 4.6)

(e) Public Health Report to the Community (BOH08025) (City Wide) (Item 5.2)

At the request of the Board, Eric Mathews, Manager, Environmental Health Section, provided a verbal overview of Report BOH08025.

(f) Heat Health Warning System Update & Review of 2007 Experience (BOH07024(b)) (City Wide) (Item 5.4)

Rob Hall, Director, Health Protection Branch, provided an overview of Report BOH07024(b) – Heat Health Warning System Update and Review of 2007 Council – July 10, 2008
Experience.

Councillor T. Jackson wished to be recorded as OPPOSED to the receipt of Report BOH07024.

(g) **2008 Heat Response Plan (ECS08027(a)) (Item 5.5)**

Staff (Community Services) was directed to include recommendations respecting items 1, 2 and 3, listed under the Options for Expanding Hamilton’s Heat Response, as shown in Report ECS08027(a), when reporting to the 2009 budget deliberations.

(h) **PUBLIC HEARINGS/DELEGATIONS (Item 6)**

6.1 **Carole Clinch, May 14, 2008, wishing to address the Board respecting water fluoridation (See Item 7.1)**

The presentation, made by Carole Clinch, respecting water fluoridation, was received.

6.2 **Lynn Aquin, Campaign for Adequate Welfare and Disability Benefits, wishing to address the Board respecting Trigger Points for a Heat Alert (See Item 5.4)**

The presentation, made by Lynn Aquin, on behalf of the Campaign for Adequate Welfare and Disability Benefits, respecting trigger points for a heat alert, was received.

6.3 **Cindy Mayor, regarding potential health effects of water fluoridation. (See Item 7.1)**

The presentation, made by Cindy Mayor, respecting the potential health effects of water fluoridation, was received.

6.4 **Diane Sprules, BSc, MSc (Biology), People for Safe Dinking Water, wishing to make a presentation respecting tooth decay and fluorosis rates from fluoridated and unfluoridated communities. (See Item 7.1)**

That the presentation, made by Diane Sprules, BSc, MSc (Biology), People for Safe Dinking Water, respecting tooth decay and fluorosis rates
from fluoridated and unfluoridated communities, was received.

6.5 Russell Simon respecting the Issue of Removing Fluoride from the Municipal Water Supply (See Item 7.1)

Russell Simon withdrew his request to speak in order to permit other speakers to utilize his time.

6.6 Peter Van Caulart, Environmental Training Institute, regarding Contaminants within the Fluoridation Compound Hydrofluosilicic Acid used for Hamilton’s Drinking Water Fluoridation Program (See Item 7.1)

The presentation, made by Peter Van Caulart, Environmental Training Institute, regarding contaminants within the fluoridation compound hydrofluosilicic acid used for Hamilton’s drinking water fluoridation program, was received.

6.7 Liz Hughes, to present information on water fluoridation from Dr. James Beck. (See Item 7.1)

The presentation, made by Liz Hughes on behalf of Dr. James Beck, respecting water fluoridation, was received.

(i) STAFF PRESENTATIONS (Item 7)

7.1 Water Fluoridation (BOH08024) (City Wide)

Dr. Peter Wiebe, Program Manager, Dental Program Section, provided an overview of Report BOH08024 – Water Fluoridation.

Dr. Dick Ito, President of the Ontario Association of Public Health Dentistry, also provided a Powerpoint presentation respecting water fluoridation.

Amanda Gillis, Senior Policy Advisor, Health Canada and Valerie Malazdrewicz, Senior Policy Advisory, Health Canada provided a joint presentation respecting Health Canada’s position and current activity respecting water fluoridation.
The following written submissions, respecting Report BOH08024 – Water Fluoridation, were received:

(a) Brian W. Baetz, PhD, P. Eng. FCSCE, Professor and Director, Engineering & Society Programme, McMaster University, June 5, 2008.

(b) Robert Korol, P. Eng. and Prof emeritus, Civil Engineering at McMaster University, June 9, 2008.

(c) Chris Horlacher, Hamilton resident, June 10, 2008.

(d) Norah Kraft and Jeffrey Doyle, Carlisle residents, June 11, 2008

(e) Christopher Maingot, St. Catharines resident, June 12, 2008

(f) Joan Goliboski, Hamilton resident, June 13, 2008

(g) Rashne Baetz, M.A. Sc., Environmental Engineer, Dundas resident, June 13, 2008

(h) Mark Ysseldyk, Waterdown resident, June 12, 2008

(i) Bruce Spittle, New Zealand, June 11, 2008 – due to bulk only a portion of the attachment to his submission is included in the agenda. The balance can be viewed on line on the links provided in Mr. Spittle’s e-mail.


(k) Tim Fraser, London, Ontario, June 17, 2008

(l) Dr. Joelle Zagury, Hamilton, June 17, 2008

(m) Patricia Wheeldon, President, Citizens Against Fluoridation, Australia, June 17, 2008

(n) David Hill, Professor Emeritus at the University of Calgary, June 23, 2008

(o) Tracie Daigle, Hamilton, June 12, 2008

(p) Bobby McClintock, Honolulu, Hawaii, June 20, 2008

(q) Teri Jaklin ND, Waterdown Clinic of Naturopathic Medicine, June 26, 2008

(j) Oversight of Small Drinking Water Systems (BOH08014) (City Wide) (Item 7.2)

Item 7.2 - Oversight of Small Drinking Water Systems (BOH08014) (City Wide), was tabled to the August meeting of the Board of Health.
(k) **Health Risks Associated with Cell Phone Towers (BOH08013) (City Wide)**

(Item 7.3)

Rob Hall, Director, Health Protection Branch, provided a presentation respecting Report BOH08013 – Health Risks Associated with Cell Phone Towers. Ron Wheeler, Manager, Investigations and Compliance, Central and Western Ontario District, Industry Canada, was available to answer questions, as was Tim McCabe, General Manager, Planning and Economic Development Department and Ray Lee, Senior Project Manager, Legislative Approvals.

(l) **Outstanding Business List (Item 11.2)**

Item “C” – Fluoride in Drinking Water, was considered complete and removed from the Board of Health’s Outstanding Business List.

(m) **ADJOURMENT (Item 13)**

There being no further business, the meeting adjourned at 2:30 p.m.

Respectfully submitted,

Councillor L. Ferguson, Deputy Mayor
Board of Health

Stephanie Paparella
Legislative Assistant
July 9, 2008
General Contact Numbers

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<tr>
<td>Alcohol Drug and Gambling Program</td>
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<td>Child and Adolescent Services</td>
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<td>Dental Clinic</td>
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<td>Environmental Health Inspection Duty Line</td>
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<td>Health Connections</td>
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<td>Safe Water Program</td>
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<td>STD and Sexual Health Hotline</td>
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<td>Tobacco Hotline</td>
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<td>Vaccine Information Line</td>
<td>905-540-5250</td>
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<td>West Nile Virus Information</td>
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<tr>
<td>Workplace Health</td>
<td>905-546-2424 x3065</td>
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For clinic locations and information and for all other inquiries please visit our website: [www.hamilton.ca/publichealth](http://www.hamilton.ca/publichealth)

City of Hamilton Information Line: 905-546-CITY

Mailing Address
Office of the Medical Officer of Health
1 Hughson St. N 4th floor
Hamilton, ON L8R 3L5
It is my pleasure to present the 2007 Public Health Services Report to the Community. As Mayor and chair of the City’s Board of Health, I want to acknowledge that the health and well-being of all residents in our community is a top priority. This report provides a snapshot of the many accomplishments of the City’s Public Health Services over the past year, while maintaining our commitment to open and transparent communication with the public.

During 2007, City Council approved a new vision statement for the City Of Hamilton: “To be the best city in Canada to raise a child, promote innovation, engage citizens and provide diverse economic opportunities.” This corporate vision is clearly supported by the Strategic Plan 2007-2010 adopted by Public Health Services.

Last year I made a personal commitment to work with our Medical Officer of Health and our community partners to address the issue of childhood obesity and to face the challenges of the environmental health of our local landscape and the effects on air quality. I am pleased that goals within the new Strategic Plan for Public Health Services relate directly to these issues.

Much of the work of Public Health Services is done in the background, yet the results are very visible within our community. They advocate for healthy lifestyle choices and prevention of chronic diseases. They also have programs to support safe food, and provide support to parents and young children.

They cannot do it alone. I would like to encourage all of us to make wise choices on our health. It is only by doing this that we will be able to achieve overall health in our community. After all, it is only through cooperation, collaboration and consensus that can succeed as a community. I also want to commend the efforts of all Public Health Services staff who work tirelessly to ensure that all residents of Hamilton have a healthy environment in which to live, work, and play.

Sincerely,
Fred Eisenberger
Mayor – City of Hamilton

I am proud to present the Public Health Services 2007 Annual Report to the Community. The Mission of Public Health Services is to work together with the community to assess, promote, and protect health and to prevent disease and injury. The nature of our task is such that in some cases, people aren’t aware of what we do. Therefore, I welcome the opportunity to demonstrate our accomplishments and give you a glimpse of the work that we do everyday across Hamilton.

As part of our ongoing commitment to provide quality programs and services, Public Health Services adopted a new Strategic Plan for 2007-2010 that outlines our organization-wide goals and provides the basis for action plans to achieve them. The plan is based on input from our staff, partners, and clients.

Our Vision is to be an effective, innovative and efficient organization that is recognized as essential to the health and well-being of people in Hamilton. This strategic approach helps us focus on the key issues that will help us achieve that vision. There is always more to do than we have resources, so the plan ensures that we get the best value for your taxpayer dollar.

I would like to thank the 2007 Board of Health members for their leadership in the governance of public health programs. I would also like to thank our dedicated staff and volunteers who deliver each of the various programs and services to the community. Through our combined efforts, we will help make Hamilton the healthiest community possible.

Sincerely,
Elizabeth Richardson, MD, MHSc, FRCP
Medical Officer of Health
City of Hamilton
Public Health Services

Achievements

- Approval and adoption of the PHS Strategic Plan 2007-2010
- Delivery of the Hamilton Partners for Healthy Weights campaign to confront the growing epidemic of obesity
- Hamilton became the third health unit in Ontario to enact mandatory food safety certification for food premise personnel
- Planned and implemented Best Start Postpartum Depression Mood Disorder and 18 month developmental assessment initiatives
- In partnership with Environment Hamilton, the Hamilton Eat Local Project and Social and Planning Research Council, organized a public forum entitled ‘Planning for Food Security in Hamilton’ that attracted over 150 interested citizens. A community food continuum was developed and produced for the City of Hamilton.

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Helping Families

**Mental Health/Outreach Team - Client story**

Claire, aged 18, was referred to the Mental Health/Outreach Team by a youth serving agency in 2006. Claire had decided to move out of her home family for a variety of reasons and needed assistance. An Outreach Worker started to work with Claire around her housing, but it became evident that Claire had many issues with which she needed support. After a couple of months of staying with friends and renting a room, Claire decided to move out of town to live with a family member. The Outreach Worker assisted Claire in making the arrangements so it would be an easy transition for her. Claire returned to Hamilton about 6 months later and because she had built a relationship with outreach staff she felt comfortable to call and request help. When she first returned, Claire stayed in shelters and with friends for a few months. Finding an apartment for her was difficult. She had been diagnosed with bipolar disorder, had suicidal thoughts and was not taking her prescribed medications. Her health issues needed attention before a housing search could be started. During this time, Claire met her partner Kerry. Claire was able to live at Kerry's mother's apartment, but this did not last long. Eventually, they were both asked to leave and became homeless.

Finding accommodation for Claire and Kerry was very challenging for a variety of reasons. They wanted to stay together and had few options in terms of emergency housing. Kerry had never been homeless and did not want Claire to leave her side. They found a spot on the mountain brow beside a rock, which became their home from April to July. Outreach staff visited them and stayed connected. During cold or wet weather conditions they would stay with friends. Every time the Outreach Worker met with Claire and Kerry, other pressing issues needed to be addressed, such as food, showers, health appointments and medications.

To be able to comprehensively assist Claire and Kerry, the Outreach Worker sought the assistance of partner agencies to help with the housing issue. This partnership assisted Claire and Kerry in finding a suitable apartment, which they moved into in mid-summer. It is now December, and with the help of several social service agencies and friends, Claire and Kerry take great pride in having a beautifully furnished small apartment. Both attend school, and although Claire has a high school diploma, she wants to upgrade so she can attend college. She continues to take medication for her bi-polar disorder and is ready to join a mood disorders group. She is in the process of applying for ODSP, but is still interested in part time work. Kerry is now willing to look into her symptoms of depression and to seek treatment. Kerry's brother completed suicide a few weeks ago. Together they are working through this tragedy with lots of support from family and professionals. In 2008 they plan on participating in a youth group to reduce the stigma of depression and suicide. They are together and supporting one another on life's journey.

City of Hamilton Public Health Nurses Shelley Thorsen and Lindsay Buffet save the day.

As first time parents, we arrived home from the hospital with our newborn daughter, completely overwhelmed. Our physician recommended contacting Health Connections for assistance with breastfeeding and caring for our child.

We contacted Health Connections and spoke with Public Health Nurse Lindsay Buffet. Our conversation put our minds at ease and made us feel that we were not alone. Lindsay's empathy and professionalism were sincerely appreciated. She expressed concern for our well-being and took action by scheduling a home visit with Public Health Nurse Shelley Thorsen later that afternoon.

We were immediately relieved upon meeting Shelley. Her warm personality made us feel comfortable. She conveyed information tailored to meet our needs, in a compassionate and non-judgmental manner. She restored our confidence as parents and helped us make informative choices for our child.

We are grateful to the City of Hamilton for providing this service and employing exceptional staff. We highly recommend this service to those adjusting to parenthood.

Mike & Mary-Lou

**Nurse Family Partnership**

This past year saw a lot of preparations for the launch in 2008 of a pilot program called the Family Nurse Partnership. The program will be a first for Canada.

David Olds and his colleagues developed and implemented a nurse home-visiting program for poor, first-time mothers in a high-risk area of Albany, New York, beginning in 1977. This program, called the Nurse Family Partnership (NFP), begins during pregnancy and provides nurse home visitation to mothers until their children are two years old. The NFP program focuses on the importance of employing nurses in serving families during pregnancy and the early years of the child’s life.

Three separate trials of the NFP program conducted in 1978, 1990 and 1994 showed that the program improves pregnancy outcomes, improves the health and development of young children and helps parents create a positive course for themselves. In 1996, Olds and his colleagues began to share the NFP program with local communities in the U.S.A. The program is currently provided in more than 290 counties and 25 states. The NFP is now spreading internationally with sites in Great Britain, the Netherlands, Germany, and Australia. The City of Hamilton Public Health Services is honoured to be the first Canadian site with 5 PHNs plus a backup participating in an 18 month feasibility study. The PHNs have already received their first two levels of training and will start working with families in 2008.
### Helping the Community

#### Public Health Dental Services for Families at Ontario Early Years Centres

Many low income families do not have dental insurance. Cultural and language issues compound the financial barriers that many clients face. The Public Health Services, School Dental Program and the Family Health Program in collaboration with Ontario Early Years Centres, (OEYC) and Affiliated Services for Children and Youth have made efforts to improve access to dental treatment for vulnerable groups throughout Hamilton. Services provided by the program include: early identification, providing information about Public Health Services and education to promote good oral health. Public Health Services Dental Hygienists visit various OEYC sites to provide no charge dental screenings for children. Dental Hygienists also provide individual and group oral health education sessions.

Lorraine Bothen, OEYC Early Years Facilitator, Sanford Neighborhood Site stated, “A terrific partnership has developed between Public Health Services School Dental Hygienists and the OEYC’s...”. The OEYC’s host workshops for families with young children (birth to 7 years). Parents learn how to take care of their children’s teeth and how to improve their own oral health. Many families have benefited from this service. Translators are available to assist families who are not English speaking. This provides a positive first experience for many families to receive oral dental health information and care. OEYC families have expressed appreciation for the friendly, knowledgeable advice and care provided by the Dental Hygienists. Children receive their own toothbrush and a timer so they can time themselves when brushing their teeth. Families feel comfortable to ask questions in this supportive environment. This service provides a positive experience for families and supports ongoing good oral health practices.

#### Engaging Youth Leaders in Community Partnerships

This year the Hamilton Drug and Alcohol Awareness Committee (HDAAC) supported its first ever youth engagement project. Members of HDAAC facilitated young people in the development of a community presentation focused on the consequences of underage drinking and illicit drug use. This opportunity allowed young people to express their personal stories related to substance use and encouraged and challenged youth participants to make positive life choices and take control of their future.

Not only was this project a huge success, it sparked a new focus for HDAAC. The newly formed youth sub-committee has begun planning for 2008 activities. Here’s what the youth-subcommittee had to say about their experience working on the project:

> "I now have a better understanding of how to prevent substance abuse in our community." (Parm, 21 – Volunteer, Hamilton Drug & Alcohol Awareness Committee)

> "My experience working with public health and other community agencies with the Hamilton Drug and Alcohol Awareness Committee has really provided me with a lot more insight and information. Working on this year's Drug and Alcohol Awareness event was an extremely positive experience and I am going to continue to work on this issue in my community." (Gersonn, 22 – Volunteer, Hamilton Drug and Alcohol Awareness Committee)

> "Working on this project really impacted me. It felt great and I want to do it again. Working on a committee to help prevent kids from doing drugs was really important and I had no idea that I could use my knowledge and experience to help others." (Dan, 24 – Volunteer, Hamilton Drug and Alcohol Awareness Committee)

To learn more about the Hamilton Drug and Alcohol Awareness Committee visit [www.ruware.ca](http://www.ruware.ca).

### Statistics:

- Promoted mental health through 68 Youth Net Hamilton focus groups with 632 youth participants
- Reached 23738 elementary and secondary students from 415 schools with substance abuse prevention education
- 3737 grade 7 and 8 students from 114 schools participated in an interactive workshop to educate students about the harms and consequences associated with drug and alcohol use
- 1207 students in grades 9 to 12 participated in the 2007 Hamilton Student Drug Use Survey
- Women’s Health Educators delivered 62 presentations to approximately 700 individuals from the Arabic, Chinese, South Asian & Vietnamese communities on chronic disease prevention and cancer screening and provided cultural and linguistic support to 128 women for cancer screening appointments
- 44 Community Food Advisors with 23 newly trained CFAs provide presentations, demonstrations and displays about safe & nutritious selection, preparation and storage of food
- 431 women registered for Woman Alive! program
- 25 new workplaces registered for the Healthy Workplace Innovation Series
- Hamilton Walks built a stronger foundation for physical activity opportunities by facilitating connections among over 40 groups/organizations who promote walking and/or active modes of transportation in Hamilton
- Distributed 95,000 new Canada’s Food Guides
- Feel the Power Feel Fit Girls Campaign was delivered in 16 Hamilton high schools, reaching 1272 female students
- Distributed 2500 Hamilton Partners for Healthy Weights posters to community agencies and organizations across Hamilton
- Reached more people in the underserved communities through expanded chronic disease prevention messages delivered by Women’s Health Educators and through Woman Alive series expanded to 5 sites in 2007
- Provided dental services through 3,432 client visits to the Upper Ottawa dental clinic, and 1,533 visits to the Community Health Bus

What does it take to foster skill development for women from the South Asian community? Roodaba Seema has to hop on the HSR to meet women in their community and help them navigate transportation and health services in Hamilton.

Roodaba Seema emigrated from Pakistan and adopted Hamilton as her home. Her desire to help women of diverse communities, led her to work as a Women’s Health Educator with the City of Hamilton Public Health Services. Roodaba Seema is passionate in her role of assisting women to navigate the Canadian health care system and maintain health.

Roodaba Seema arranges health talks in community settings, such as the Riverdale Community Centre. The talks are given in Hindi, Punjabi, or Urdu so that women have access to culturally appropriate and language specific health information. These sessions promote cancer screening, healthy lifestyle choices, friendships, and facilitates learning about other health services.

Educational sessions facilitated by Roodaba Seema create a snowball effect beginning with one woman coming to an educational session, she tells others, and brings more women. As a result, a woman contacts Roodaba Seema for assistance to book an appointment for either a mammogram or Pap test and accompanies the woman in need of language and cultural support.

In the recent collaboration with Woman Alive!, Roodaba Seema provides interpretation during yoga and aqua fit classes to increase physical activity within her community. As a result, some women are becoming more actively involved in the community by pursing job opportunities, furthering their education and a few are training to be certified fitness instructors. Ultimately this translates into more skills, more opportunities, and enhanced community capacity.

Roodaba Seema Alvi is one of four Women’s Health Educators working within the City of Hamilton Public Health Services, Healthy Living Division. The Women’s Health Educator Program has reached hundreds of immigrant women in 2007.
## Protecting Hamilton

### Infectious Disease Program
- 93 total number of outbreaks
- 1,114 total number of cases investigated
- 915 calls to Disease Intake Line
- 135 calls handled after-hours

### Tobacco Enforcement
- 1,278 inspections of workplaces and public places
- 556 tobacco vendor display inspections
- 1,204 youth access and enforcement checks

### Public Health Hazards
- 1,173 complaints
- 218 inquiries

### Rabies
- 1,720 human exposure investigations
- 167 people received vaccination
- 214 animals tested
- 5 animals that tested positive (all bats)

### West Nile Virus
- 141 standing water complaints investigated
- 533 surface water treatments
- 2,901 monitoring visits
- 38,000 catchbasins checked four times per year
- 893 dead birds reported
- 189 dead birds picked up
- 40 dead birds tested for West Nile Virus (6 positive, 36 negative)

### Sexual Health
- 4,023 clients seen at 4 clinic locations
- 289 PAP tests
- 939 STI exams
- 1,557 contraception visits
- 184 treatments for genital warts
- 174 pregnancy tests
- 114 emergency contraceptives
- 798 clients seen at Well Women Clinics
- 353 anonymous HIV tests performed
- 250,416 condoms distributed
- 1,528 calls received by the Sexual Health Information Line

### Food Safety Program
- 760 individuals certified as Safe Food Handlers
- 5,322 routine inspections of food premises
- 1,183 additional re-inspections to ensure corrective action taken

### Safe Water Program
- 765 samples taken
- 30 beach closures (14 at Bayfront)

### Tuberculosis Control Program
- 38 active cases
- 716 inactive cases

### Vaccine Preventable Diseases Program
- 21,658 immunizations at community flu clinics
- 383,645 doses of all vaccines distributed to physician’s offices

### Immunization Program
- 1,063 people immunized by public health services staff
- 10,603 doses of hepatitis B, 5,434 doses of meningococcal C, and 1,509 doses of HPV vaccines completed at school-based clinics
- 7,703 letters sent to parents requesting information on immunizations, 607 students suspended for incomplete records

### Sexually Transmitted Diseases
- 1,054 reported cases of Chlamydia
- 196 reported cases of gonorrhea
- 26 reported cases of HIV/AIDS
- 51 reported cases of infectious and non-infectious syphilis

### Van Needle Exchange
- 217,000 clean needles were distributed with 192,000 collected

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### A Story of Hope

As a Karen Refugee, Hope fled persecution as part of a minority ethnic group from Burma, now known as Myanmar. She had spent the last 11 years living in the jungles and refugee camps of Thailand. In November of 2006 she arrived in Hamilton along with her mother and two brothers. They were some of the more than 800 Karen Refugees accepted into Canadian cities.

Hope and her family were given enhanced screening for tuberculosis (TB). The refugee camp, Mae La Oon, where Hope’s family had lived had high rates of TB. Soon after arrival, Public Health Nurses worked closely with the newcomers. In many cases, the nurses were not just the first healthcare workers the newcomers met but the first Canadians. The Public Health Nurses provided more than just the enhanced TB screening, often providing counseling to clients on a variety of health and social issues.

With her excellent English skills learned at school in the refugee camp, Hope became an interpreter and helped bridge the language barrier for her fellow refugees. She enjoyed working alongside the Public Health Nurses so much that she has been inspired to become a nurse herself. Earlier this year she graduated from High School and plans to attend Mohawk College this Fall in the nursing program.
2007 Budget

Total: $39,616,483

2007 Revenues

Total: $39,616,483

2008 Aspirations for Hamilton Public Health Services

- Continue implementation for the PHS Strategic Plan
- Develop and implement a strategic communications plan for PHS
- Develop an action plan and policies to respond to new “human health based air quality criteria” from the Ministry of the Environment
- Implement transfer of the new Small Drinking Water System Program
- Implement web based disclosure system for food premise inspections
- Develop a tracking system to measure illness, injury rates and other indicators specific to Public Health emergencies
- Continue development and implementation of PHS emergency and pandemic plans
- Train 22 new volunteers for the Community Food Advisors program to expand reach
- Implement the Nurse Family Partnership Feasibility Study

Prospective Challenges for Hamilton Public Health Services

- Changing provincial government organizational structure: Ministry of Health Promotion has created additional new funding and reporting relationships.
- Changes in funding formula and environment: The provincial/Municipal ratio has varied; lack of increases for 100% provincially funded programs.
- Outcomes based reporting: Requires new approaches to program and service management, economic evaluation and planning.
- New provincially-mandated IT systems: Introduction of information management systems without commensurate funding enhancements has resulted in increased workload in order to meet provincial expectations.
- Ongoing debate about where best to invest Public Health resources: population wide programs or high risk groups.