

**Consultation of Environmental Health
NGOs on Stakeholder Engagement
within
Health Canada's
Safe Environments Programme**



**Prepared for
Health Canada, SEP**

**Prepared by
Canadian Environmental Network/Reseau (RCEN) Health Caucus**

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ENGAGING ENVIRONMENTAL HEALTH NGOs WITH HEALTH CANADA'S SAFE ENVIRONMENTS PROGRAM (SEP)

INTRODUCTION

The Consultation of Environmental Health NGOs on Stakeholder Engagement within Health Canada's Safe Environments Programme (SEP) set out to seek expert advice on the best ways to engage environmental health NGOs in providing input on priorities for SEP and the possible forums for that engagement.



This report includes the results of the consultation workshop held on 16 January 2007, in Ottawa. It identifies past, present, and future relations between SEP and ENGOs, some suggested parameters for a dialogue framework between SEP and ENGOs, existing or required tools to facilitate stakeholder dialogue, and examines the support that would be required to facilitate participation of Canadian Environmental Network/Réseau canadien de l'environnement (RCEN) delegates in advisory capacities in the future.

This report also describes the RCEN's structure, role, and membership base; suggests strategies for increasing the representation of environmental health NGOs within the RCEN; and makes recommendations for developing a formal mechanism for effective, long-term stakeholder relations as a focal point between the RCEN and SEP.

The input of the participants identified in Appendix 4 is acknowledged. Without their participation and information, this report and potential follow-up could not have been realised.

Background

Introduction to SEP and the RCEN

Some basic background on SEP and the RCEN is helpful in order to assess the potential for an effective working relationship between the two parties.

Safe Environments Programme (SEP)

The Safe Environments Programme is part of the Healthy Environment and Consumer Safety Branch of Health Canada. It promotes healthy living, working, and recreational environments by identifying and assessing health risks to Canadians posed by environmental factors.

SEP works on a range of issues, including: risk assessment and management of toxic substances (CEPA), air quality and health, water quality and health, climate change and health, environmental epidemiology, contaminated sites, radiation protection, children's environmental health, and bio-monitoring and surveillance. Health Canada has identified a number of public involvement mechanisms, or tools,¹ to involve various sectors of the public so as to receive their advice, comments, review, or recommendations for action. As well, SEP develops national risk management strategies that:

1. help reduce risks to human health from the environment;
2. are supported by scientific research; and
3. directly align with Health Canada's Sustainable Development Strategy.²

¹ www.hc-sc.gc.ca/ahc-asc/public-consult/resource-centre-ressource/101/index_e.html

² http://hc-sc.gc.ca/ahc-asc/alt_formats/hecs-sesc/pdf/pubs/sus-dur/strateg/sds2007-2010-sdd/path-voie_e.pdf

Health Canada's Safe Environments Programme has been restructured toward a more functional focus that includes the establishment of a formal mechanism for stakeholder engagement. Within its Risk Management Bureau, the Risk Communications and Public Involvement Office is responsible for strengthening and formalising stakeholder relations with SEP.

RCEN (Réseau canadien de l'environnement - Canadian Environmental Network)

The RCEN³ is a national network of over 800 environmental non-government organisations (ENGOS) that are engaged in national and regional issues. The RCEN provides consultation bodies called caucuses that encourage and support groups that take part in public consultation processes, participate in working groups, or that select delegates to national and international conferences. The network employs various communication tools, such as electronic bulletins that inform local, regional, and national members on the issues and activities of the day, and facilitates interactive communications between members and the wider Canadian public. The RCEN also provides representatives to national and regional consultations so that the views of the environmental NGO sector are respectfully represented at discussion tables. As the environment is a shared responsibility, members are further linked at the provincial and territorial levels to give each member group the opportunity to be engaged and respond to provincial or territorial governments in a similar manner.



The RCEN is governed by a National Council made up of representatives from regional affiliates (mostly provincial or territorial networks) and national caucuses. The Council also has additional representatives from three sectors of society (francophone, aboriginal, youth) in order to ensure that the RCEN is fully representative of Canada's environmental community. The above structure is supported by staff at the national (Ottawa) level and affiliate (provincial and territorial) level. The provincial/territorial affiliates have a similar mandate as the national network with the exception that their work is regional in scope.

Within the caucus structure, a member organisation self-determines its level of activity, as well as the caucus(es) to which it belongs. For example, the Health Caucus has 38 member organisations; the Toxics Caucus has 57 member organisations. Each caucus is supported by a national caucus coordinator staff person. Caucus members, once constituted, determine the priority issues and activities upon which they will focus. Members select a steering committee to be responsible for administering caucus affairs and funds. The Health Caucus, for example, has seven steering committee members. Generally, caucus members get together as often as possible, allowing for the free flow and sharing of information, concerns, and experiences among environmental groups from across the country. Caucuses employ various communication mechanisms, such as conference calls, websites (including interactive websites), email, and occasional face-to-face meetings, all of which are available to the caucus members. Caucuses establish links with other sectors of civil society, other RCEN members, and other caucuses (often through cross-caucus activities), and frequently work with various levels of government.

³ www.cen-rce.org/eng/about_us.html

The mandate of the Health Caucus⁴ recognises the need to act on a range of environmental and related elements that influence the health and well-being of Canadian communities, our global neighbours, and Mother Earth. In its work, the caucus also promotes awareness of the complex relationships that effect ecosystem and population health.

The RCEN supports and strengthens the participation of ENGOs in public consultations with Environment Canada and other federal departments and agencies. The RCEN is favoured for its delegate selection process because it is transparent and bilingual, and is supported by the environmental community for its unparalleled and effective voice for reaching policymakers. (See Appendix 1 for the RCEN Model Delegate Selection Process.) RCEN members are encouraged to apply to participate in public consultations, working groups, and national and international conferences. At any one time, most caucuses are engaged in one or more discussion mechanisms.

A. Focus Issues

In a PowerPoint presentation during the RCEN-SEP Consultation, the issue areas that SEP works on were presented by a Health Canada representative. They are the following:

- Risk assessment & management of toxic substances
- Air quality and health
- Water quality and health
- Climate change and health
- Environmental epidemiology
- Contaminated sites
- Radiation protection
- Children's environmental health
- Bio-monitoring and surveillance

RCEN caucuses have evolved to include the broad topics of:

- Water
- Atmosphere/Energy
- Agriculture
- Toxics
- Mining
- Youth
- Health
- International Program
- Environmental Planning & Assessment
- Forests

The representatives who attended the consultation workshop considered the following overlapping issue clusters:

- Green community building
- Climate change
- Enforcement
- Environmental research
- Public awareness
- Mental health
- Food security
- Consumer product labelling
- Medicare, Health care system
- Human health development & children's environmental health
- Consumption, trade & economy
- Nuclear & radiation threats
- Education & data/information management
- Equitable distribution of funds/resources
- Toxics
- Collaboration (citizen engagement and governance)

⁴ www.cen-rce.org/eng/caucuses/health/index.html

B. Introduction to Process

Historically, the RCEN has been engaged predominantly in consultations with Environment Canada and Fisheries & Oceans Canada. In recent years, the relationship with the federal government has broadened to include more departments and more agencies, including Natural Resources Canada, Agriculture & Agri-Food Canada, Canadian International Development Agency, Foreign Affairs Canada, and Canada Mortgage & Housing Corporation. RCEN members have also been involved in Sustainable Development Strategy consultations with many departments. Delegates have been involved in a number of international events, such as the World Urban Forum (WUF) and the World Summit on Sustainable Development (WSSD). Throughout this evolution, the regional affiliates have worked at the provincial/territorial and regional levels with provincial and local governments on many similar and parallel issues and processes.

The Health Caucus, through the RCEN, worked from 1999 to 2003 with two major partners, the Health Information Resource Centre (HIRC) in PEI, and the Community Health Promotion Network Atlantic (CHPNA), in the form of the Eastern Co-operative Health Organisation (ECHO). ECHO's mandate was a bilingual regional internet-based consumer health information service that enhanced existing sources of health information and integrated government and non-government partners across Canada. It was a strategic linking of existing information sources developed in partnership with and funded by Health Canada. The ultimate success of ECHO was dependent on many groups working together. The goal was to build an integrated health information service. The RCEN's role was to broaden the scope of this health information service by creating linkages to environmental information.

Starting in November 2003, the Health Caucus began correspondence with the Health department, through its minister, to explore the possibilities of strengthening the relationship between the RCEN and Health Canada. These discussions included learning about existing or upcoming funding programs within Health Canada that would assist RCEN members in conducting their health- and environment-related work. In addition, the caucus wished to discuss the potential for further RCEN involvement in Health Canada consultations regarding the safety of food, water, children's health, environmental medicine, and a host of related health topics having environmental implications.

In March 2006, a number of RCEN members attended the Contaminated Sites consultation in Ottawa. Further to this and the report from that meeting, Health Canada took the broader issues raised at the workshop to the other government departments involved in the Contaminated Sites Management Working Group (CSMWG). At that time, the RCEN expressed our willingness to participate in the follow-up with Health Canada regarding collaborating on the design phase of the Public Involvement Committee for the Contaminated Sites Action Plan (FCSAP).

In June 2006, the Health Caucus was fully involved in the Third World Urban Forum (WUF) in Vancouver, which was seen as a great success by participants and observers. We received positive feedback from both the Canadian WUF Secretariat and the UN-Habitat agency on our Roundtable on the Environment,⁵ in which Jack Nickel participated as the Health Canada representative. The positive relationship between the RCEN and Health Canada has been building over these past collaborations.

⁵ www.cen-rce.org/eng/caucuses/health/index.html#third

The RCEN has extensive experience working with many federal government departments to bring together stakeholders in multi-sectoral dialogues on environment-related issues, such as NPRI consultations, CEPA and CEEA legislative assessments, and triennial departmental sustainable development strategy reviews. We have the capacity and opportunity to communicate and engage a diverse range of stakeholder organisations across Canada.

In October 2006, Miriam Padolsky attended a Health Caucus Steering Committee meeting in Montreal. The meeting included an introduction to SEP and a presentation of the work plan of the Health Caucus and its member organisations. At that time, participants agreed that it would be beneficial to develop ENGO involvement in SEP's activities.



Following that meeting, the RCEN contracted with Health Canada to coordinate a RCEN-SEP Consultation on Stakeholder Engagement within Health Canada's Safe Environments Programme. The consultation took place in Ottawa on 16 January 2007, and this consolidated ENGO report on the outcomes is the contract deliverable. Consultation delegates were asked to provide input on SEP priorities and give feedback on specific policies and initiatives in the SEP program areas. (See Appendix 3 for the Consultation Agenda and Appendix 4 for the Consultation Participation List.) A discussion of the main findings follows.

DISCUSSION

Both parties acknowledged the benefits of mutual involvement in the various policy and program initiatives that work to build a healthier population and a healthy environment. They expressed a strong interest in formalising and strengthening the relationship at many levels and deepening ENGO engagement in the processes at Health Canada.

SEP identified many examples of where their stakeholder interactions can and do occur⁶. The RCEN has been a party to many of these same types of stakeholder interactions with a number of departments and other governments, and has developed an effective stakeholder engagement protocol that has been used for a number of years.

Those present at the workshop identified a spectrum of options for engagement, including a Memorandum of Understanding, a joint working group, and/or face-to-face ENGO/Health Canada meetings as possible mechanisms or tools for work at the national level. The Health Caucus was seen as a natural link or conduit between ENGOs and Health Canada. There was a sense that the roles and responsibilities of each player within this collaborative relationship must be clear and well-known, in addition to the importance of identifying specific/key contact people. Some suggested dedicating SEP staff time to nurture this relationship. There was also an interest in working more closely at the regional level. Some workshop participants identified the role of risk assessment in decision-making as a possible discussion topic for another meeting.

For all of above recommendations, there will be a requirement for some supports (e.g., per diems, consultation funding) to facilitate ENGO engagement, as many are volunteers. A number of different communication tools, such as fact sheets, listserves, websites, email and phone contact lists, could be used to promote relationship-building and information-sharing between the RCEN and SEP. Many are

⁶ www.hc-sc.gc.ca/ahc-asc/public-consult/resource-centre-ressource/101/index_e.html

now in use for other purposes. Also identified was the need for increased information, such as technical analysis, research, and policy, to be made more available to the public since a significant amount of environmental health data is either unavailable or inaccessible. Interest was also expressed to develop a mechanism to provide feedback to SEP, but it needs to be built into the systems of consultation to allow the volunteers to have adequate time to respond. Importantly, there needs to be recognition of the sometimes isolated nature of some communities (linguistic, cultural, geographical, and/or technical) in order to ensure a reasonable level of equity of access and to maximise the values of the input.

The systems need to be functional and accessible. We agreed that if this is to be done well, there may need to be accommodations made by both parties. This access may require changes in the system, as well as additional time, resources, or capacity-building. Much of this is common sense and known.

This early review of the relationship between the RCEN and Health Canada will be helpful as both parties will gain from an increased understanding of each other's respective needs, capacity gaps and limitations, and anticipation and troubleshooting of potential conflicting needs. Health Canada can build on the experience and understanding that the RCEN has gained with Environment Canada. Collaboration with Health Canada will help the RCEN build a broader base of support for environmental health concerns in communities throughout Canada.

In addition, there is valuable analysis and transferable knowledge available to Health Canada from the RCEN-Environment Canada relationship (see Appendix 2 for the Summary and Recommendations of the 2003 workshop on enhancing the working relationships between Environment Canada and ENGOs). For example, both departments will have a common and consistent consultation process. When there is need for joint action, it should be easier when both parties approach the stakeholders in a similar manner.

With the collaborative engagement of ENGOs in the development of a formalised stakeholder engagement process, the work of ENGOs with Environment Canada is validated, and their advocacy work to promote environment and human health is recognised. A joint ENGO-Health Canada consultation development process will reduce the risk of confusion and/or frustration, and will result in a more positive and productive experience for all involved.

In order to move forward and to capture the energy and willingness to work together on this relationship, there will need to be some follow-up communication and, probably, additional face-to-face meeting(s). As indicated, there may need to be some attempts to use short-term projects (e.g., a focus on risk assessment, as mentioned above) to further nurture the consultative relationship, to understand the skills and capacity of each party, to gain mutual trust, and to understand that both parties have the protection of the environment and human health as their ultimate goals, aside from the fact that they may have different methods to achieve those goals.

BUDGETARY IMPLICATIONS

The discussion above, and recommendations described below, represent a range of budgetary implications, from little or no cost to limited consultation and meeting supports to a stable and formalized relationship such as that between the RCEN and Environment Canada. They could be regional or national, specific or broad in scope. The steps forward should be clearly defined and reasoned. The type and number of commitments will likely increase as the relationship deepens. With the beginning of this relationship, we hope that both parties will acknowledge the value of more consultation, seek points of engagement, and see that support for the processes are necessary and mutually beneficial.

COMMUNICATIONS PLAN

The final report will be provided to Health Canada and to the RCEN. It will be the responsibility of each party to make the final report available to their respective constituencies. It has already been determined that discussion of the final report will be on the agenda of the next meeting of the RCEN Health Caucus Steering Committee, where response(s) and possible action(s) will be considered. The RCEN Board of Directors will be informed at the same time.

DELEGATED AUTHORITY

As both parties have authorities that are their respective decision-making bodies, each will need to be made aware of the intent of each other and give some measure of approval, depending on the level of action. Each has some delegated authority and access to funds for some options. Some modification of current practice could be implemented with minimal impacts on the general administration of each body.

RECOMMENDATIONS

The RCEN and Health Canada agree to take the following steps:

1. Work to define their intended relationship.
2. Identify lead officials or contact points to maintain open communication.
3. Provide this consolidated ENGO report to the RCEN's and Health Canada's respective authorities for the further development of a set of mutual steps and actions.
4. Organise a meeting to explore some short-term projects of mutual benefit. These could be an upcoming consultation, or the modification of some elements of the current communication process. It could be regional or national in nature, and could include such activities as issue-based consultations or educational workshops. (Appendix 5 includes the results from the RCEN-SEP Consultation's issues-cluster activity, and provides a sample of possible issues for a future issue-based consultation.)
5. Develop a process of evaluation and follow-up.



Appendix 1

A Model Process for Delegate Selection⁷

Note: The information on this page is an example of the activities and procedures that are characteristic of the Delegate Selection Process. Please understand that, due to differing requirements, not all of these activities occur with every consultation.

1. Environment Canada contacts RCEN with a request for delegates (electronically and in both official languages) for a specific consultation or workshop, 6 to 8 weeks in advance.
2. RCEN prepares a call for delegates in French and English with the details of the consultation and then distributes it to the Regional Networks, the appropriate caucuses, the Weekly E-bulletin and the RCEN website.
3. RCEN and EC negotiate for equal stakeholder representation and to provide capacity support, including translation and simultaneous interpretation needs and funding for ENGO participation. As well, they negotiate whether a position paper or other deliverable is required, and any other particulars.
4. A contract between RCEN and EC is drafted, distributed, revised and signed and redistributed.
5. RCEN forms a Delegate Selection Group, consisting of at least two members of a Caucus Steering Committee in addition to a National Caucus Coordinator who will act as secretary. Selection criteria are established.
6. Responses to the Call for Delegates are collected and acknowledge by the National Caucus Coordinator.
7. Applications are assessed by the National Caucus Coordinator to determine if they are members-in-good-standing and if they meet basic criteria.
8. After the deadline for applications, the list of applicants is distributed to the Delegate Selection Group. A conference call for the Group is arranged.
9. The Delegate Selection Group discusses the applicants and makes a decision based on the pre-determined selection criteria.
10. All applicants are notified of the Group's decision.
11. Environment Canada is provided with the list of delegates. Further negotiations that may arise are conducted.
12. The results of the delegate selection and relevant contact information are posted to the RCEN membership, via the caucus mailing lists, the RCEN Weekly E-bulletin and the RCEN website.
13. Selected delegates are sent further information about the particulars and background of the consultation by EC, well in advance of the consultation.
14. RCEN coordinates an opportunity for the selected delegates to exchange information prior to the consultation (either face-to-face or via conference call).
15. EC arranges travel and accommodation for each of the delegates.

⁷ www.cen-rce.org/eng/consultations/delegate_selection.html

16. Delegates attend the workshop and prepare notes for their report. A post-consultation debriefing is coordinated by RCEN.
17. RCEN oversees the preparation of the report, arranges for translation and distributes the report to its members for endorsement.
18. The report from the consultation is posted in French and English on the RCEN website.
19. RCEN collects, consolidates and inspects original receipts and travel claim forms from delegates and sends them to EC for reimbursement.
20. Finally, an invoice for expenses incurred by RCEN is prepared and delivered to EC with the endorsed report.

Appendix 2

Enhancing Working Relationships between Environment Canada and Environmental Non-Government Organisations (ENGOS) Workshop held March 21, 2003⁸

Hosted by the Canadian Environmental Network (RCEN), sponsored by Environment Canada

Summary and Recommendations

This workshop was the first of its kind and was successful in initiating a meaningful and open dialogue among staff of Environment Canada (EC) and members of the Canada's environmental non-government organisations (ENGOS). Overall, the workshop was highly constructive and mutually enlightening, generating many useful suggestions and fostering a healthier relationship between EC and ENGOS.

Workshop Goals

- Create a forum of discussion between EC and ENGOS in order to learn from each other
- Identify challenges in public consultations
- Recommend ways for EC to enhance the involvement/input of ENGOS in the areas of federal policy, program development and decision-making processes
- Provide consistent methodologies to increase effectiveness in consulting with ENGOS
- Develop a follow-up process between EC and ENGOS

Workshop Structure

The day-long workshop began with a welcoming introduction from Assistant Deputy Minister Diane Carroll and explanatory introductions to its process and goals by Ann Dostaler of EC and Brigitte Gagne of RCEN, followed by a presentation of the history and new governance structure of the RCEN by Steve Rison, Chair of the RCEN Transitional Board of Directors. The day included:

- Presentation of priorities of EC
- Mapping of the consultation process from the perspective of EC and from RCEN
- Identification of challenges
- Breakout groups – constructing a successful public consultation
- Vetting solutions
- Presentations on consultation experiences – success and less successful
- Development of a follow-up process

Summary of Challenges

The following list is a synthesis of the challenges and barriers identified to meaningful ENGO participation in federal and international consultation, programs and delegations (see Appendix 1 for detailed comments):

1. Unequal influence and representation among stakeholders – under representation of ENGOS
2. Lack of funds for full ENGO participation from beginning to end of the process
3. Lack of early engagement of ENGOS in process design (terms of reference)
4. Lack of charitable status for many ENGOS leads to restriction of resources
5. Insufficient notice of upcoming consultations resulting in inadequate preparation
6. Systemic language barriers preventing the full participation of francophones

⁸ www.cen-rce.org/eng/consultations/documents/challenges_public_consultation.pdf

7. Frustration with the outcomes of consultations, results of efforts unknown or unavailable to public
8. Participation of interested parties restricted by highly technical nature of consultations.

Summary of Proposed Solutions

The following list is a synthesis of proposed solutions to the challenges identified above (see Appendix 2 for detailed comments):

1. Develop a common and consistent consultation process across government departments
2. Ensure ENGO involvement from the beginning (development of the terms of reference) to the end of the process
3. Develop a process that ensures equal influence and representation among the stakeholders
4. Pressure higher levels of government to provide sufficient funding for full ENGO participation
5. Establish an effective and methodical process of communicating consultations outcomes to ENGOs and general public
6. Establish protocols for bilingual consultation process (i.e. simultaneous release of documents in both official languages, simultaneous interpretation at consultation)
7. Provide better preparation for ENGO delegates (clearly identify expected results of the consultation, history of the process, terms of reference, list of experts and sufficient background information)
8. Build alliances (formal and informal) between and among ENGOs, government and industry

Specific Comments about Challenges

1. Both EC and ENGOs share frustration in getting their agenda on the agenda of other departments and agencies
2. Other constituencies (i.e. industry) have better established (and non-transparent) access to EC departments than ENGOs
3. To compensate for our lack of resources and influence compared to industry, we rely on good process for the purpose of fairness. This is why we are so insistent on process and access to other ministries.
4. It often appears that there are no results from the consultation processes (hence, one must question if limited ENGO time and resources might be better spent on other means of action)
5. There is a general disenchantment with government – a questioning of fair process
6. Reports from consultations are not adequately communicated to the public
7. Means of financial support for meaningful participation of ENGOs is inadequate
8. Reimbursement can be a major issue (sometimes it takes 6 months to be reimbursed)
9. Sometimes, huge documents requiring printing are sent to delegates only days before a consultation (paper and printer resources can be scarce at the home of a volunteer)
10. There are often enormous inconsistencies among consultation processes
11. Clear guidance on what is expected in report deliverables is often not forthcoming
12. The huge amount of collective material being presented to ENGOs for comment from the various consultations is overwhelming
13. The limits of science must be recognised – we need to move policy forward in absence of the certainty of science
14. Translations of consultation prep documents are often late

15. There is a severe lack of funds for ENGO preparation
16. Environmentalists are outnumbered by industry at consultations on average 10-1
17. Need common ground rules at EC and RCEN for deliverables
18. Information gaps (i.e. specific people with answers) are not provided in preparation
19. Delegates don't have time or resources to write up reports after consultations
20. Representation of francophones is restricted systematically
21. Jargon is often prohibitive to the participation of all interested groups
22. Commitment to ENGO participation from government needs to be long-term
23. Consultation reports need to be available to general public
24. Lack of charitable status for many ENGOs leads to restriction of resources, barrier to participation
25. All contacts with corporate sector need to be disclosed
26. EC needs to keep in mind that delegates volunteer their time
27. Invite only ONE ENGO to a consultation isolates that ONE person
28. Difficult sometimes to identify an appropriate ENGO on very specific consultations
29. Balanced and impartial facilitation is needed at consultations
30. Amount of money available to EC to conduct the consultation is often very limited
31. The limited focus of consultations disallows the consideration of contributing circumstances (the bigger picture)
32. Use of volunteer sector initiative in competition for funding allows other NGOs to compete for the same money
33. We are restricted by the limits imposed by current political realities (US policies, NAFTA)
34. The level of knowledge requested for participation in some consultations is imposing to many groups

Specific Recommendations

1. To affect the agendas of other ministries, we should take advantage of the fact that they **MUST** consult on their sustainable development strategy
2. To address the expense, alternatives to face-to-face meeting consultations should be creatively explored (i.e. web-based, teleconference, videoconference)
3. Means for augmenting and maintaining the administrative base of ENGOs should be considered (i.e. assistance with charitable status)
4. Establish a process that ensures that francophones can participate from beginning to end
5. Ensure that consultation goals and process to be used are clear from beginning to end
6. Documents should be provided to clearly outline background, science and consultation goals
7. There needs to be a process of evaluation and follow-up (that engages participants)
8. It is important to select qualified ENGO reps from qualified organisations
9. EC needs to be aware of the services offered by ENGOs and by RCEN
10. Active recruitment of ENGOs to RCEN should be encouraged by EC
11. RCEN should be involved in the development of departmental consultation processes

12. The building of relations and trust among EC staff and members of ENGOs should continue to be pursued
13. Alliance building among our institutions should be pursued
14. ENGOs can support EC and other gov't departments. in bringing programmes to the public
15. RCEN should review the priority plans submitted to Cabinet
16. RCEN should develop a consultations training module for new (and existing) ENGO participants
17. Obstacles need to be disclosed early on (i.e. political objection, provincial-federal jurisdiction)
18. Trust must be built through honest and open disclosure of positions, constraints
19. ENGOs should be engaged with EC in consultation planning (i.e. facilitation, agenda development)
20. We should strive for long-term, consistent engagement of specific ENGOs on a file
21. The Canadian Standards Association "Guide to Participation" should be consulted for ideas to assist the development of our consultation process
22. Youth should be engaged from pre-consultation (i.e. research) to the end
23. Government should use ENGOs as allies
24. Government should use ENGOs to identify 'red flags' early in the consultative process
25. Consider a different style of meeting (i.e. sensitive to the differences of participants; circle format; avoid agenda cramming; participatory)
26. For optimum preparation and engagement of ENGOs, EC Risk Assessors should contact RCEN at the preliminary draft assessment phase
27. RCEN should monitor CEPA website regularly and report news to members
28. Provide list of EC experts early in the process
29. There should be no impediments (i.e., charges) to access information
30. Ensure outcomes of a consultation process are received by ENGOs at the same time as other stakeholders
31. Establish informal semi-annual Gov't/ENGO discussions about upcoming issues
32. Establish relationships with industry stakeholders

Appendix 3

RCEN-SEP Consultation Meeting DRAFT Agenda January 16, 2007 Delta Ottawa Hotel and Suites, 361 Queen Street, Ottawa

Consultation Facilitator: Chantal Bois

Minutes: Sarah Heiberg (except during break-out groups)

- 8:30 am BREAKFAST (provided)
- 9:00 am Welcome and introduction by facilitator
Presentation of the purpose of the consultation and the agenda
- 9:10 am Brief go-around of introductions
Name, organization, what has been your experience with Health Canada and where would you like to see that relationship go? (in two sentences)
- 9:45 am Presentation by Health Caucus Co-chairs Arciris Garay and Sheila Cole
- 10:15 am BREAK
- 10:30 am Presentation by Health Canada, Safe Environments Programme
- 11:00 am Facilitator presents questions and gives instructions for break-out session and “issues cluster” activity
- 11:30 am Participants are invited to get up for the “issues cluster” activity before lunch
- 12:00 pm LUNCH (provided)
- 1:00 pm Break-out session
- 2:00 pm Reports back to the larger group (15 min. each)
- 2:45 pm BREAK
- 3:00 pm Facilitator summarizes outcomes from reporting back session and facilitations discussion around “issues cluster” activity
- 3:45 pm Concluding remarks by Health Caucus Co-chairs and Health Canada representative
- 4:00 pm Conclusion

Appendix 4

RCEN Consultation Participation List

Workshop Delegates:

Philippe Bourke, RNCREQ (Quebec)

Stephen Collette, Your Healthy House with Peterborough Green Up (Ontario)

Sara Edge, *Alternatives* Journal (Ontario)

Jim Elliott, The Gaia Group (Saskatchewan)

Dorothy Goldin, Women's Healthy Environments Network (Ontario)

Diane Griffin, Island Nature Trust (Prince Edward Island)

Kapil Khatter, Environmental Defence (unable to attend due to illness) (Ontario)

James Landry, Club Ornithologie du Madawaska (New Brunswick)

Sandra Madray, Chemical Sensitivities Manitoba (CSM) (unable to attend due to illness) (Manitoba)

Maggie Paquet, Citizens' Stewardship Coalition (British Columbia)

Steve Rauh, Campaign for Pesticide Reduction, Winnipeg (Manitoba)

Robert Rattle, Clean North (Ontario)

Kimlee Wong, The Social Planning Council of Winnipeg (Manitoba)

Health Caucus Co-Chairs: Sheila Cole, Environmental Health Association of Nova Scotia (Nova Scotia), and Arciris Garay, Youth for Social Justice Network (British Columbia)

Also attending were the following representatives:

Chantal Bois (RCEN Associate Executive Director)

Kim Hannah (Consultation Policy Advisor, Healthy Environments and Consumer Safety Branch, Health Canada)

Sarah Heiberg (RCEN National Caucus Coordinator)

Heather Hurst (Stakeholder Relations and Consultations, Environment Canada)

Sue Milburn-Hopwood (Risk Management Bureau, SEP, Health Canada)

Marie-Chantal Ouellette-Tremblay (Risk Communications and Public Involvement, SEP, Health Canada)

Miriam Padolsky (Risk Communications and Public Involvement, SEP, Health Canada)

Appendix 5

RESULTS FROM THE ISSUES-CLUSTER ACTIVITY

CATEGORY	ISSUES
Green Community Building	<ul style="list-style-type: none"> Green community planning
	<ul style="list-style-type: none"> Municipal planning to cope with building in the coastal zone (or not) due to climate change
	<ul style="list-style-type: none"> Building community capacity to self-govern and self-care (psychology of sustainability: understand sustainability and well-being psychologically)
	<ul style="list-style-type: none"> Impacts of deficient urban organisation (sprawl) and health
Climate Change	<ul style="list-style-type: none"> Mental health, hope and engaging communities in solutions
	<ul style="list-style-type: none"> Linkages
	<ul style="list-style-type: none"> Municipal planning to cope with building in the coastal zone (or not) due to climate change
Enforcement	<ul style="list-style-type: none"> Lack of response to peak oil / end of oil and gas; emergency preparedness protocols
	<ul style="list-style-type: none"> Biomonitoring and surveillance... Then what? Policy and enforcement
	<ul style="list-style-type: none"> Whistle blower protection
	<ul style="list-style-type: none"> Regulation and guideline enforcement
	<ul style="list-style-type: none"> Enforcing idling bylaws
	<ul style="list-style-type: none"> Lack of action on known health risks (e.g. lead in children's products)
	<ul style="list-style-type: none"> Unwillingness to embrace simple and known technologies for source water protection (i.e. compost toilets)
	<ul style="list-style-type: none"> Perception that governments are too concerned about backlash from industry (various ones) to give the public adequate information on health effects (including potential) of contaminants
Environmental research	<ul style="list-style-type: none"> Validate technology – Put R&D resources into non-toxic alternatives
	<ul style="list-style-type: none"> Action for prevention: Whose science? Who pays? Who influences policy? Whistle blowers?
	<ul style="list-style-type: none"> Different input (to process) sources (technical, anecdotal, etc.)
	<ul style="list-style-type: none"> Emerging knowledge (e.g. epigenetics)
	<ul style="list-style-type: none"> Ecotoxicology
	<ul style="list-style-type: none"> To much emphasis on "experts" (who are removed from issues)
Public awareness	<ul style="list-style-type: none"> People don't know you exist (SEP). You need a public awareness campaign
Mental health	<ul style="list-style-type: none"> The link between environmental quality and mental health
	<ul style="list-style-type: none"> The link between consumption and mental health

Food security	<ul style="list-style-type: none"> ● Accessibility, adequacy, etc. ● Removal of so many pesticides ● Local food security and consumer choice ● Pesticides: How to get more proactive efforts at organic agriculture
Consumer product labelling	<ul style="list-style-type: none"> ● Publicity control ● Lack of labelling on consumer products ● Toxins in consumer products
Human health development and Children's environmental health	<ul style="list-style-type: none"> ● Chain "womb to tomb" ● The link between chronic illness (obesity, cardiovascular illness, cancer) and deficient urban planning ● Windows of vulnerability like FAS which pays attention to neurological impacts of toxics are not paid attention to ● Children's environmental health windows of vulnerability (timing more important than dose?) Risk assessment??? Toxic soup??? ● Body burdens? ● Toxins
Consumption, trade, economy	<ul style="list-style-type: none"> ● Restrictions, limitations, negative effects of free trade policies on environment and health ● Reduce pollution by reducing consumption ● Link between noise and health ● The sustainability of the family farm (issues surrounding health and degrading subsidies)
Medicare, Health care system	<ul style="list-style-type: none"> ● At consultations, have physicians present to answer health-related questions ● Train doctors and public health
Citizen engagement and governance (Collaboration)	<ul style="list-style-type: none"> ● Need environmental medicine specialists on staff at both EC and Health Canada ● Wider, more inclusive stakeholders participants (categories) ● Holistic, Transdisciplinary ● Public needs to link "environment" with "health" ● Collaborative networking that transcends socially constructed political boundaries (able to observe ecological/health issues that are transboundary, such as air, water, poverty, violence, inequality...) ● Youth involvement ● It's not about "us" and "them": UNITY!

Education and data/ information management	<ul style="list-style-type: none"> ● Increasing citizen awareness of environmental bill of rights (and empowering them to be able to respond to violations) ● I need consumer accessible fact sheets like CMHC ● Need studies to track and measure multiple chemical sensitivity in the population ● Health tracking data (e.g. cancer and geography, where people live) ● Build up of contaminants in people (heavy metals) and education the public ● I want easy access to SEP's research and information ● Community right to know by-laws
Nuclear and radiation threats	<ul style="list-style-type: none"> ● Radionuclide contaminants of water and ecosystems ● Health risks inherent in nuclear fuel chain ● Nuclear expansion: energy relationships need to phase out both coal and nuclear in favour of energy efficiency, conservation and renewables ● Nuclear waste and contamination issues: phasing out the production of nuclear waste ● Radiation and health: Ionizing radiation; tritium and carbon 14 in the drinking water of millions of Canadians and MOH in Toronto (ministry of environment in Ontario – Letter – Resolution)
Equitable distribution of funds/resources	<ul style="list-style-type: none"> ● Poverty ● Environmental health and political justice/equity (the ability to obtain information and resources in order to secure one's interests) ● Lack of \$\$\$ ● The role of social determinants of health ● Lack of First Nations involvement ● Too many hurdles in obtaining Health Canada funding ● Racism
Toxics	