

Not just garbage that's a risk to public health: nurses

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Toronto Public Health workers are among those eager to get back to work once a tentative deal is ratified. Nurses have been warning Torontonians that public health risk grows with every day they are away from their jobs.

“We have mandated programs and these programs cannot possibly be completely offered the way that they can when we are working,” said Lyba Spring, a sexual health promoter who has worked at Toronto Public Health for 27 years. Some 1,800 unionized public health staff is on strike. The health unit is now staffed with about 200 non-union employees and managers.

The critical programs public health workers say are most affected by the strike include pandemic planning, infection prevention and control, pre- and post-natal parenting programs, and public health inspections. Experts have predicted the city will see an increase in sexually transmitted infections and unwanted pregnancies because city run sexual health clinics are closed.

Striking workers say managers and replacement staff cannot adequately provide the scores of public health services needed to keep the city healthy, and warn the strike is especially hurting the city's most vulnerable citizens, including youth, the poor and new immigrants.

Here are some of the professionals raising the alarm:



Saphia Omar

A public health nurse of 16 years who works with the city's Investing in Families initiative in the Jane-Finch community.

Omar, who speaks Swahili, Somali and some Arabic, is worried new moms with no family support, particularly new immigrants for whom English is not their first language, are struggling without her services.

“When the new mom leaves the hospital, within 24 or 48 hours, depending on the need, the mother is visited at home to help with the baby, for breast-feeding advice, for her own comfort,” Omar said. “She may not know how to bathe or feed her baby. We teach her all that. Without those services, she will be stranded.

Omar, who has between 20 or 30 cases at any time, also counsels parents who have older children and who may be suffering depression, anxiety and even suicidal thoughts.

“Without these services, who is meeting those parents? Who is helping them?” Omar said. “It really bothers us, when we think about our clients. We wonder: “What is so-and-so doing, how is she managing? But we can't go to help.



Marina Johnston

A mental health nurse with 21 years experience, Johnston works with one of the city's three crisis response units.

"I'm concerned about the people that don't have a voice in our city," she said. "The people who are marginalized, the people who are very poor and who live in communities that are under-resourced."

In the past five weeks, there have been many instances where the crisis response unit would have been needed, said Johnston, who was the crisis response co-ordinator for last summer's Sunrise propane blast.

The unit, which provides psychosocial support to families and communities in need, responds to shootings, unexpected deaths, suicides, sexual assault and child abductions, said Johnston. The units, she added, are also called upon after a major accident or disaster, such as the six-alarm fire which gutted a stretch of Queen Street West in February 2008.

Asked for a specific example of where her services were missed because of the strike, Johnston pointed to the city's Tamil community, which is reeling after two young Tamil men were killed earlier this month.

"We worked with some of the Tamil youth in the spring, providing support to them and they were concerned about mounting racism and violence in their communities," Johnston said. "That would have been one of the incidents we would have responded to."



Betty Wu-Lawrence

The registered nurse is the only sexual health nurse in the city who speaks Chinese.

"I'm the only one for the whole entire Toronto," said Wu-Lawrence who speaks Cantonese and Mandarin. "Sexual issues are so personal, people don't want to — or can't afford to — bring an interpreter. They don't want their family or the community to know about it."

Any person in the city who needs sexual health counseling in Cantonese or Mandarin is referred to Wu-Lawrence. She visits city run sexual health clinics and also goes into the Chinese community to tell them where they can get help for any sexual issue. She provides advice on contraception and the prevention and screening of sexually transmitted infections.

"I understand the cultural taboos around sexual health," she said, adding new immigrants and their children often face a cultural clash between traditional and Canadian value systems.

"I counsel a 15-year-old Chinese male who comes from a very traditional Christian family. He realizes he is gay, but his parents have asked him to promise never to do that," said Wu-Lawrence. "I am always there for him to contact me. I don't want people to decide they can't live anymore because of these problems."

"I miss my clients," she said.

