



3 | *Annual Report*
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CANADA

MINISTER OF
NATIONAL HEALTH AND WELFARE

MINISTRE DE LA
SANTÉ NATIONALE ET DU BIEN-ÊTRE SOCIAL

Her Excellency the Right Honourable Jeanne Sauv ,
Governor General and Commander-in-Chief of Canada

MAY IT PLEASE YOUR EXCELLENCY:

The undersigned has the honour to present to your Excellency the Annual Report of the Department of National Health and Welfare for the fiscal year ending March 31, 1985.

Respectfully submitted,

Jake Epp
Minister of National Health and Welfare

This report is also
available on audiocassette

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The Department — Its Mandate

*The mandate of Health and Welfare Canada
is to promote and preserve the health
and to ensure the social security
and quality of life of all Canadians*

The Department — An Overview

Health Protection Branch

The Health Protection Branch carries out a wide range of activities intended to protect Canadians from hazards that may contribute to untimely illness or death. These activities include efforts to guard the safety and nutritional quality of foods, ensure the safety and effectiveness of drugs and medical devices as well as to control the availability of drugs that may be used improperly.

Other responsibilities of the Branch include programs to reduce the presence of dangerous chemicals in our environment, monitoring exposure to radioactivity, control of the safety of cosmetics and improving capabilities to diagnose diseases.

The Branch also has a continuing program to monitor trends in the incidence of communicable and non-communicable diseases in Canada.

Income Security Programs Branch

The Income Security Programs Branch has responsibility to promote and preserve the social security and social welfare of Canadians through the administration of the Old Age Security Act, the Family Allowances Act and Parts II and III of the Canada Pension Plan Act. The Branch is also involved in the formulation of policy and legislation related to the Branch programs.

Through a network of regional offices (located in the provincial capitals) and client service centres, the Branch provides a full range of services to the public, including provision of general information on all aspects of income security benefits.

Medical Services Branch

The Medical Services Branch provides services to highly diversified groups of clientele in the provinces and the territories, as well as to prospective immigrants and Canadian public servants and their dependents serving around the world.

Two major activities concern the preservation and improvement of the health of the nation's Indians and Inuit, and the responsibility for the provision of health services to the residents of the Yukon and Northwest Territories. Services are provided through a network of hospitals, nursing stations and health centres in communities throughout Canada.

The Branch operates the occupational health service covering public servants at home and abroad. It is also responsible for medical examinations and investigations conducted in the interests of aviation safety. Prospective immigrants to Canada are assessed as well as certain categories of visitors, to determine their acceptability from a health standpoint, and to protect the health of Canadians by minimizing the entry and spread of quarantinable and exotic diseases.

Social Service Programs Branch

The Branch administers major federal-provincial cost-sharing programs, grant programs and provides consultation and information to the provinces, voluntary organizations, and consumer groups. Through shared cost and other programs, financial assistance and funding is provided for welfare services, counselling and consultation on social and welfare-related issues which includes employability of Canadians, services to individuals afflicted with physical and mental impairment, child welfare and child abuse, family and community services, and voluntary action.

Contributions are provided to groups of retired persons to encourage utilization of skills, talents and experience for the community. The Branch provides funding to provincial and municipal welfare departments, voluntary agencies, citizens' groups, universities and other organizations to carry out research, demonstration and social welfare human resource development projects. The Branch operates a national day care information centre, an adoption desk and a clearinghouse on family violence.

Health Services and Promotion Branch

The Health Services and Promotion Branch has two main responsibilities: to encourage and assist Canadians to adopt a way of life that enhances their physical, mental and social well-being and to provide leadership and coordination in assisting the provinces and territories to improve and maintain their health services at national standards.

In the field of health promotion, the Branch works closely with provincial governments and non-government organizations to develop and deliver health information and education programs in such areas as smoking, alcohol use, nutrition, drug use, accidents, personal health care, and family and child health.

The Branch is also responsible for payments concerning provincial programs providing hospital, diagnostic, medical, and extended health care services, as provided by legislation and for monitoring provincial compliance with the program conditions associated with federal payments.

It is the responsibility of this branch to support scientific activities relevant to the concerns and objectives of the department and to provide for the training and maintenance of needed research personnel in the areas of health services and public health.

Fitness and Amateur Sport

The purpose of Fitness and Amateur Sport is to promote, encourage and develop fitness and amateur sport in Canada, a two-fold objective pursued through Fitness Canada and Sport Canada, chiefly by providing funds to national sport and physical recreation associations, agencies and special organizations.

Fitness Canada develops programs and materials designed to increase public awareness of the benefits of fitness and to encourage mass participation in physical activity. Sport Canada provides financial assistance to Canada's national and international athletes and teams for the purpose of training and competition as well as for the development of coaching and officiating. Sport Canada also assists in the staging of major international events in Canada and supports international sport exchanges.

Corporate Management Branch

It is the responsibility of this branch to provide a full range of policies and services for integrating effective planning, resource allocation, financial reporting and control. It also oversees the provision of departmental policies and central services in the areas of public affairs, informatics, administration and management practices. It is also responsible for the provision of personnel services for the Department in the areas of classification and organization, staffing, training, equal employment opportunities, policy, employee programs, staff relations and official languages.

The Branch is the departmental liaison with central federal agencies such as the Treasury Board and the Office of the Comptroller General. While the Branch provides a number of administrative services directly to Health and Welfare Canada's other branches, all planning, financial and most administrative services are extended through personnel in line branches.

Policy, Planning and Information Branch

The objective of the Policy, Planning and Information Branch is to provide authoritative advice to the Minister, Deputy Minister and program branches on trends and issues, policy requirements and information needs relative to departmental objectives, priorities and programs.

The Branch has three main roles designed to meet that objective. Firstly, it undertakes research analysis and gives advice on health and social policy issues. Secondly, for the program branches, it furnishes support for policy development activities. Finally, it provides to the department, its provincial counterparts and national and international organizations, efficient access to information on health and welfare-related matters.

Intergovernmental and International Affairs Branch

This Branch coordinates Canada's participation in matters involving international and federal/provincial liaison in the areas of health, social security and social affairs. One of its principal responsibilities is coordinating, monitoring and, where required, initiating departmental policies and strategies on issues which affect more than one branch or require inter-departmental consultation. It is responsible for coordinating metric conversion in the health, sports and recreation, and personal health care fields. It also maintains a centre for gathering and disseminating information on international trends in health and welfare matters.

Special Adviser — Policy Development

The function of this office is to advise the Deputy Minister on welfare and status of women concerns, and to coordinate program evaluation, the protection of privacy, and access to information. The Special Adviser is consultant to the department on the development of policies affecting social services and income security programs.

Principal Nursing Officer

The Principal Nursing Officer advises the department on matters concerning nursing and health. This includes studying and reporting on the professional and ethical responsibilities of nurses, and assessing the impact of nursing on the health of Canadians. Another responsibility includes promoting basic, higher and continuing education for nurses, and encouraging maximum utilization of Canadian nursing skills.

National Council of Welfare

The National Council of Welfare is a citizens' advisory body to the Minister of National Health and Welfare, communicating directly with the Minister on matters pertaining to the welfare of Canadians. Its 21 members, drawn from all provinces, are private citizens serving in their personal capacities rather than as formal representatives of organizations or agencies. The council regularly publishes reports on issues concerning poverty and social policy on such topics as income security, medicare, pension reform, taxation, social services, and poverty as it affects women, children, the aged, single parents and the community.

National Advisory Council on Aging

The National Advisory Council on Aging is a citizens' body which assists and advises the minister of National Health and Welfare on matters affecting seniors. It is represented by 18 members with various backgrounds and spheres of experience.

Internal Audit

The role of this directorate is to provide the Deputy Minister and senior managers with an independent, systematic and objective assessment of the department's operations and its responsibility to acquire and expend public funds with a high degree of integrity.

Medical Services Branch

By legislation or custom, Medical Services Branch provides a variety of health services to a number of client groups. These clients include registered Indians and Inuit, all residents of Yukon and the Northwest Territories, immigrants and temporary residents, international travellers, federal public servants, civil aviation personnel, the physically handicapped and disaster victims. The programs under which services are provided to these clients are Indian and Northern Health Services, Immigration Medicine, Quarantine Medicine, Public Service Health, Civil Aviation Medicine, Prosthetic Services and Emergency Services.

The objectives of Medical Services are to promote, preserve and improve the health of those whom it serves. Meeting such comprehensive objectives requires expertise in virtually every area of health care — community health, medical testing and screening, laboratory analysis, aero-space medicine, health education, etc. . .

Indian and Northern Health Services

Indian and Northern Health Services ensures comprehensive health care is made available to Canada's Indians, Inuit and residents of the Yukon and Northwest Territories, through a variety of means, including Medical Services Branch's own staff of nurse practitioners, physicians, health educators, dental therapists, and Community Health Representatives. Services are also provided through contribution and contract arrangements with native organizations and bands and faculties of universities. Provincial medical and hospital programs are utilized in the same manner as by the non-native population.

Continuing social and economic problems, including poverty, unemployment, minority status in a dominant non-native society, below-standard housing, water and sewage facilities, have impacted adversely on native health, resulting in a high incidence of accidental and violent deaths, including suicides. The major problem facing native communities is the high incidence of alcohol and drug abuse.

Through interdisciplinary groups, including representatives of Medical Services Branch, other branches of the Department of National Health and Welfare, other federal departments and agencies, as well as members of native organizations, strategies are being developed to improve the health of native

people through community health development, including health promotion and arrangements for transfer of health services to communities.

National Native Alcohol and Drug Abuse Program (NNADAP) — A community-based approach to prevention and treatment):

The NNADAP Program is oriented primarily towards the problems of on-reserve status Indians and the Inuit of Northern Canada.

The NNADAP objective is to arrest and offset high levels of abuse of alcohol, drugs and substances through the provision of financial, administrative and programmatic support of those native communities requiring assistance developing and maintaining abuse prevention projects and treatment services.

The NNADAP philosophy advocates a culturally relevant, community-based approach to program development. The incorporation of appropriate Indian and Inuit cultural values, beliefs and customs into generic advocative, educational and counselling practices is the identifying characteristic of the program.

Nutrition

Increasingly, nutrition is recognized by Indian and Inuit people to be a key factor in maintaining health. During 1984/1985, a working group on nutrition was established "to determine and develop health promotion strategies to address the most critical health issues faced by native people".

Attention was given to processes supporting successful community health initiatives drawn from success stories in community-based services. Community priorities were identified and they included diabetes, infant nursing-bottle caries, alcohol rehabilitation, nutrition and the nutrient value of native foods. A five-year strategy has been proposed for a new thrust in health promotion.

The final report of the "Survey of Infant Feeding Practices from Birth to Six Months, 1983" was completed. The results will be interpreted by regions to consider various approaches to improve prenatal and breastfeeding education.

Many regions are now working more closely with native organizations to develop culturally appropriate nutrition education materials. For example, materials were developed by the Dene Nation in the NWT. A series of video tapes has been produced by the Tree of Peace Friendship Centre in Yellowknife to promote nutrition education.

National School of Dental Therapy

The National School of Dental Therapy in Prince Albert, Saskatchewan, trains dental therapists in a two-year program, following grade 12 graduation, to provide primary dental care in isolated Indian communities in the provinces and in Yukon and the Northwest Territories.

As part of a special agreement with International and Intergovernmental Affairs, Medical Services branch, CIDA and CUSO, the school will, in July 1985, commence training six Mozambique students per year for three-year period to assist that country in setting up a similar program.

Nursing Directorate

In the latter part of 1984, a Nursing Directorate reporting to the Assistant Deputy Minister of Medical Services Branch was established. It is expected that this organizational change will bring improved direction and support to nurses at all levels of the organization, facilitate enhanced coordination of the nursing team at branch headquarters and ensure nursing representation at the senior level of policy making and administration in the branch.

The nursing occupational group comprises the largest number of health care professionals in the branch.

Environmental Health Services

The Second National Workshop for Environmental Health Officers was held to discuss current environmental issues. Progress and results to date of national advisory committees on common carriers and on quarantine were reviewed and revised. Work on Indian housing through a third national advisory committee was initiated at this workshop.

With respect to Indian Environmental Health and the Memorandum of Understanding between Environment Canada, Indian and Northern Affairs and National Health and Welfare, three meetings of the Headquarters Standing Committee were held. These meetings help to produce standards for design, construction and operation of environmental facilities and services on Indian reserves. Eight Regional Technical Working groups were also initiated and meetings held during the year.

Volume 2 of "Methylmercury in Canada" was published in 1984. This document reviewed the existing monitoring and educational programs initially set up along with all test results up through 1982.

During the first three months of 1985, four one-week training courses in basic occupational hygiene were given to 111 Environmental Health Officers from regional and zone offices across Canada.

Public Service Health

A moderate increase in budget has permitted the purchase and distribution of educational materials for the inservice and continuing education of Public Service Health staff in the Regions.

Medical assessments have increased both in volume and frequency with the establishing of pre-employment guidelines for specific correctional service personnel and with the increased frequency of examinations in several other occupational groups.

Nursing services have emphasized worksite visits, as well as the provision of other services by nurses.

Environmental Health Officers are answering requests for investigations of indoor air quality, asbestos removal and noise.

Public Service Health staff is sitting on departmental and interdepartmental committees concerning lifestyle and stress management, occupational health and safety, screening examinations of laboratory staff national criteria for "posture chairs" in the office and health and safety aspects of technological change.

Indoor air pollution, office automation, ergonomic considerations and their health related concerns continue to dominate.

Occupational Health Unit

The Occupational Health Unit provides consultative, field and analytical services in support of the Public Service Health and Indian and Northern Health programs. Major areas of concern during the year included the health aspects of secondary tobacco smoke in federal workplaces, air quality studies associated with "tight building syndrome", health problems related to the use of oil-based drilling muds on offshore drilling rigs and the assessment of blood PCB concentrations in Indian communities of Moose Factory Zone.

Immigration Medical Services

The Immigration Act (1976) requires all persons immigrating to Canada, as well as certain categories of visitors (students, season workers, long-stay visitors) to undergo a medical examination. Physicians of this department assess these examinations, abroad and in Canada, and provide individual assessments to immigration or visa officers. This activity provides an overall advisory function to the Department of Employment and Immigration as well as meeting the cost of non-insured health costs generated by indigent immigrants and government-sponsored refugees in Canada.