



National Collaborating Centre
for Determinants of Health

Centre de collaboration nationale
des déterminants de la santé

Mind the Disruption

PODCAST EPISODE TRANSCRIPT & COMPANION DOCUMENT

SEASON 2 | EPISODE 1

Disrupting Environmental Racism

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Mind the Disruption is a podcast about people who refuse to accept things as they are. It's about people pushing for better health for all. It's about people like us who have a deep desire to build a healthier, more just world.

In the second season of Mind the Disruption, we explore **social movements for social justice**: groups of people working together to build collective power for change. Throughout the season, we delve into approaches for advancing racial equity, applying intersectionality, building community power and working together. In each episode, we name concrete actions that public health can take to work with others in service of social movements for social justice.

This episode companion document, available in English and French, provides a different way to engage with the podcast. It includes a written transcript of Episode 1 with key quotes, related resources and discussion questions to prompt reflection, sharing and action.

HOST



BERNICE YANFUL

Bernice Yanful (PhD) is a Knowledge Translation Specialist with the National Collaborating Centre for Determinants of Health (NCCDH), and she previously worked as a public health nurse in Ontario. Bernice is dedicated to advancing health equity with a particular focus on food systems.



PODCAST GUESTS*



DR. INGRID WALDRON

Dr. Ingrid Waldron is Professor and HOPE Chair in Peace and Health in the Global Peace and Social Justice Program at McMaster University; the founder and Executive Director of the Environmental Noxiousness, Racial Inequities and Community Health Project; and the co-founder and Co-Director of the Canadian Coalition for Environmental and Climate Justice. Her research focuses on the health and mental health impacts of social inequalities and discrimination in Black, Indigenous and other racialized communities, including mental illness, dementia, environmental racism and climate change inequities, and COVID-19. Her research and advocacy, as well as her 2018 book *There's something in the water: Environmental racism in Indigenous and Black communities* and her 2020 Netflix documentary of the same name, have played a pivotal role in creating awareness about and addressing environmental racism.



DR. GAYNOR WATSON-CREED

Dr. Gaynor Watson-Creed is the Associate Dean of Serving and Engaging Society for Dalhousie University's Faculty of Medicine, and an Assistant Professor in the Department of Community Health and Epidemiology. She is a public health specialist physician with 18 years' experience, and formerly served as the Medical Officer of Health for the Halifax area and Deputy Chief Medical Officer of Health for Nova Scotia. She also sits as chair or member of several national population health councils and boards, and was appointed to Canadian Institutes of Health Research's Advisory Board for the Institute of Population and Public Health in 2023. Gaynor is a passionate advocate for high-quality public health services and for anti-oppressive health care in Canada.

* Guests have provided the content for their introductions.

EPISODE DESCRIPTION

As founder and Executive Director of the Environmental Noxiousness, Racial Inequities and Community Health (ENRICH) Project, Dr. Ingrid Waldron works alongside African Nova Scotian and Mi'kmaq communities to disrupt environmental racism as a necessary part of the environmental justice movement. In this episode, Ingrid positions environmental racism as an urgent health equity issue and highlights how the ENRICH Project builds community power through meaningful partnerships, research and collective action. Dr. Gaynor Watson-Creed, a former Medical Officer of Health, then reflects on how public health can better respond to communities whose health is affected by systemic racism.

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QUOTES FROM SEASON 1

JENNIFER SCOTT

I think if I go to work today, I'll die.
 (Season 1, Episode 1)

PAUL TAYLOR

There's been a series of injustices that have allowed some people to have food and allowed other people to struggle for access to food. (Season 1, Episode 5)

SAMIYA ABDI

People are stuck in this powerlessness paradigm. (Season 1, Episode 3)

HARLAN PRUDEN

Always ask yourself "Why?"
 (Season 1, Episode 6)

SUME NDUMBE-EYOH

There were times when I would think maybe I'm going to get fired, right?
 (Season 1, Episode 2)

SAROM RHO

It's the moment of refusal.
 (Season 1, Episode 4)

HEATHER LOKKO

If we're not intentional about creating some discomfort, things won't change. It will stay status quo, and that's not okay.
 (Season 1, Episode 8)

INTRODUCING SEASON 2

BERNICE YANFUL (NCCDH)

Hi. Welcome to the second season of Mind the Disruption. I'm Bernice Yanful. I'm a Knowledge Translation Specialist at the National Collaborating Centre for Determinants of Health, an organization that moves knowledge into action with the goal of better health for everyone. I've also worked as a public health nurse in an Ontario public health unit, and I recently completed my doctoral studies at the University of Toronto.

This season, we're talking about social movements for social justice: groups of people working together to build collective power for change and health for all. We'll dive into a range of topics with people from across Canada. We'll talk about the environment, immigration status, food, birth, disability and poverty. We'll talk about racism, ableism and colonialism. And we'll talk about solutions and the power of collective action.

In each episode, you'll hear from a disruptor — someone who refuses to accept things as they are. They see something that is unfair or unjust, and they take bold, courageous action, often in the face of active resistance. They work with others to disrupt the status quo because they have a deep shared conviction that a better world is possible. You'll also hear from a second guest, someone who will reflect on how public health can do things differently and better. At the end of each episode, we'll name some concrete actions that public health can take to work with others in service of social movements for social justice.

REBECCA CHEFF (NCCDH)

This podcast is produced by the National Collaborating Centre for Determinants of Health. We support the Canadian public health community to address the structural and social determinants of health and to advance health equity. We are one of six National Collaborating Centres for Public Health working across Canada. We're funded by the Public Health Agency of Canada. We're hosted by St. Francis Xavier University, which is located on Mi'kma'ki, the ancestral and unceded territory of the Mi'kmaw People. This podcast is part of our organization's commitment to confront intersecting systems of oppression and to reveal concrete opportunities to disrupt racism and colonialism. The views expressed on this podcast do not necessarily represent the views of our funder or our host agency.

CONSIDER THIS!

Before reading or listening to this episode, think about your current understanding of environmental racism.

- Have you heard of this term before? What do you know about it?
- What have you learned about this at school, at work, in your life or in the media?
- How has your work intersected with this issue?

INTRODUCING THIS EPISODE

“It has a lot to do with what we often call “slow death versus fast death.” You know, George Floyd: fast death, visceral, gets to you, you can see it. Environmental issues: slow death, you can’t really see it. It’s very subtle, it happens over time. You can die from it, just like you can die from a policeman choking you. But it doesn’t get the visceral reaction, so it doesn’t get the attention.”

INGRID WALDRON

BERNICE (NARRATION)

That was the formidable Dr. Ingrid Waldron, the HOPE Chair in Peace and Health at McMaster University, talking about the need for more attention and action on environmental racism. Ingrid describes herself as a social scientist, interdisciplinary researcher, teacher, community advocate, author and film producer. For over a decade, Ingrid has been working alongside Black, Indigenous and other racialized communities to disrupt environmental racism as a key part of a larger social movement for environmental justice.

After speaking with Ingrid, I spoke with Dr. Gaynor Watson-Creed, a public health physician leader and health equity champion.

Let’s take a minute to unpack the environmental justice movement in Canada. Black, Indigenous and other racialized communities have long mobilized for environmental justice — that is, for the right to be fairly treated and protected from toxic environmental waste and to be meaningfully involved in the decisions that affect their lives.

LOUISE DELISLE | When we got here, they decided they were going to put a dump where everything went. There was body parts, there was food, animals, anything and everything.

MICHELLE FRANCIS-DENNY | There was concerns about the impact on the environment.

MICHELLE FRANCIS-DENNY | [Cough]. That’s what our community smells like.

MICHELLE PAUL | In one view, in one instant, you’ll realize why we are here.

LOUISE DELISLE | How environmental racism has affected this community. It’s killing us.

Official movie trailer for [There’s something in the water](#)

BERNICE (NARRATION)

Those were the voices of community leaders from African Nova Scotian and Mi’kmaq communities. You’ve likely heard about contaminated water and how it affected the Black community in Flint, Michigan. But have you heard about the contaminated air, water and soil that continue to put Black, Indigenous and other racialized people in harm’s way right here in Canada? Or about the resistance that communities face when they ask for it to be cleaned up?

This problem has a name. It's called environmental racism, and it's a form of environmental injustice. It has to do with the intentional siting of dumps, slaughterhouses and paper mills next to racialized communities.

Environmental racism is a concern across Canada, and in today's episode we're focusing on Nova Scotia where people from communities like Africville, Shelburne, Pictou Landing and Acadia First Nation have been disproportionately exposed to environmental contamination and toxic industrial pollution.

Senator Wanda Thompson Bernard, the first African Nova Scotian woman to be appointed to the Canadian Senate, reflected on the story of Africville in a recent speech:

HON. WANDA THOMAS BERNARD | Let me tell you, we have many Flint, Michigans right here in Canada. Many of whom are still living under conditions that are killing them. One of the most widely known examples of environmental racism of a marginalized community in Canada is the story of Africville....

Africville was a vibrant community of African Nova Scotians. An open pit dump was placed 350 metres from this seaside community. They did not have clean drinking water. Throughout the 170 years Africville existed, a railway extension was installed through the community and the Halifax Explosion damaged the community. An infectious disease hospital was built nearby, a human waste disposal pit, a prison and slaughterhouses. It was the location chosen for a fertilizer production plant. Those were the conditions forced upon Africville.

Located in the city of Halifax, they were denied basic services, such as city water and sewer. Instead of providing services, the city chose to relocate the residents of Africville. To this day, I hear of anecdotal stories about the staggering number of former Africville residents who have died of various forms of cancer. The community has connected the dots, and perhaps the government should too. ([ParlVU video: Senate Sitting No. 124, May 16, 2023](#))

BERNICE (NARRATION)

Senator Thomas Bernard noted that the residents of Africville had connected the dots. The same can be said for the other African Nova Scotian and Mi'kmaq communities affected by environmental racism.

Families from these communities have seen higher rates of cancer, reproductive diseases, rashes, respiratory illnesses and traumatic stress. They've united with researchers, scientists, political champions and even filmmakers to advocate against the intentional siting of dumps, slaughterhouses and paper mills next to their communities.

And where is public health in all this? We'll explore that and more in today's episode.

TALKING WITH DR. INGRID WALDRON

BERNICE (NARRATION)

Our story begins just over 10 years ago. At the time, Dr. Ingrid Waldron was based at Dalhousie University in Halifax and was working in partnership with the North End Health Clinic on a project about gentrification. An environmental activist heard about this work and about Ingrid's hard-earned reputation as a good partner.

While Ingrid isn't African Nova Scotian herself, she was one of the few Black professors at Dalhousie University at the time. The activist approached Ingrid with an idea for a new project, and the rest, as they say, is history.

BERNICE

I was reading your book *There's something in the water*, and in that book, you mentioned that you were inspired to begin this project when you were approached by an environmental activist in 2012. Is that right? Can you tell me the story of that moment? How did that happen?

INGRID

Yes, it was a bit strange because this has become like my biggest project, but I had no real understanding or, to be honest, interest in environmental issues at

that point. And he reached out to me, he was an environmental activist, and he said, “It would be great if you can take on a project on environmental racism.”

And I looked at him strangely because I had never heard the term. And I said, “What is that?” And he explained it to me. And he said it would be working with Indigenous communities in Nova Scotia and African Nova Scotian communities. They’ve had dumps and waste sites in their backyard. So I was really hesitant to take it on because, number one, I knew nothing about the environment. I had no degrees in environmental science, environmental studies, and I just didn’t understand the term environmental racism. I thought to myself, “How could the environment be racist?” At that point not understanding that the policies are racist, just like everything else.

But I thought about it a little longer, and I said to myself, “Well, this is to me ultimately about health.” Because I think if people are concerned about having a dump in their backyard, I think immediately they go to cancer — I’m going to get cancer — they think about their health. And then I thought, “Well, these are the communities that I’ve really always wanted to work with. I know nothing about the environment. I don’t know what I’m going to do about that. That’s going to be a steep hill for me.”

“I thought to myself, “How could the environment be racist?” At that point not understanding that the policies are racist, just like everything else.”

INGRID WALDRON

But I also thought there was something, I don’t know what to call it, something risky about it. Not safe. It was highly political. It excited me. I thought, “This seems like maybe I can get in trouble or something.” I just thought it’s so risky and intriguing, and the projects I was doing

were nice and safe and I liked them, but there was something about this one. And I said to myself, “If I can get this right, if I can get this project right, maybe I can have some real impacts.”

And I think it was the danger of it, the fact that I didn’t know anything, and that it was risky and that I would have to learn something new, all of that intrigued me. So I hesitantly said to this activist, I said, “Yes.”

BERNICE

So when the activist approached you, the area was completely foreign to you. You didn’t have any background in it. You didn’t know anything about it, what it even meant. You mentioned this feeling of danger that appealed to you, but what else were you feeling?

INGRID

Yeah, I thought to myself, “I’m going to be found out.” The *real* environmental studies professors, the *real* environmental scientists, the *real* climate scientists are going to say, “What is Ingrid doing here? What does Ingrid know?” I thought, “I’m going to be found out.” I think it probably took only about a year for me to kind of get over that because I realized that I have a place in this. And I realized that I really valued that place, that sociological perspective I thought was key, and I can bring a lot to it.

BERNICE

So in the early days, how were you understanding what environmental racism is?

INGRID

Well, in the beginning, I guess I was looking to the academic literature. And the academic literature was indicating that it was about the disproportionate siting of toxic industries in communities that were either Indigenous or racialized and, of course, low income, and also living in isolated, out-of-the-way places, such as many African Nova Scotians, but also on reserves, which is the case with Indigenous communities.

Anti-Indigenous racism in Canada

National Collaborating
Centre for Indigenous Health.
[2013–2014].

This series published by the National Collaborating Centre for Indigenous Health presents three fact sheets detailing the racism faced by Indigenous Peoples in Canada. The first fact sheet examines the historical context and various forms of racism. The second fact sheet discusses the impacts of lived and structural racism on First Nations, Métis and Inuit Peoples, and highlights issues in the justice and health care systems. The final fact sheet outlines policies, programs and strategies to combat anti-Indigenous racism.



So in doing the initial reading, the readings that I had to do, obviously, because I didn't know about this area, I was looking to people like Dr. Robert Bullard, who's considered to be the father of environmental justice.

And what I was seeing in Nova Scotia was consistent with that definition. I was seeing mostly Indigenous and Black communities near to these waste sites.

BERNICE (NARRATION)

In 2012, Ingrid established the ENRICH Project, a collaborative community-based research and engagement project on environmental racism in Mi'kmaq and African Nova Scotian communities. Ingrid told me about how at the beginning of this project, the focus was on building relationships and really understanding the challenges that communities were facing.

INGRID

In that first year, I was actually driving down to communities to meet them and to listen to them, which is something that many of them felt wasn't happening in terms of people listening to them. And just meeting with

them and developing relationships during those initial days, that would be 2012, 2013, I thought to myself, "This can be really meaningful if I do the right thing."

BERNICE (NARRATION)

Little did she know, as she was driving up and down the province and building those relationships, she was setting down a path of collective action and transformative change. In the years to come, Ingrid would work with community advocates to call attention to environmental racism in Nova Scotia with a book and a film each named *There's something in the water*.

She would publish game-changing research and witness real material changes for members of the affected communities. She would even collaborate on proposed federal legislation. Before we get any further, let's hear the story of Shelburne, one of the communities Ingrid has worked closely with through the ENRICH Project.

This is a story both about environmental racism and about community power and resistance.

The case of Shelburne

BERNICE

Can you tell me how the case of Shelburne in particular illustrates an example of environmental racism?

INGRID

So this is a community, they were descendants of Black Loyalists from the United States, like many African Nova Scotian communities. They arrived in the late 1700s in Nova Scotia. The dump, however, was placed there in 1942. So they've had to contend with that dump since 1942.

And over the years, they felt something is not right. They were looking at the health impacts, people dying, they weren't really sure what it was about. They would say that everything and anything was put into that dump, you know, syringes from the hospital, different

items from the hospital, from the navy base. Members of the community would throw stuff in there, anything and anything. So it was this kind of repository in a way for everything and anything.

And over time, they just noticed that people were contracting cancer, particularly men, leaving older Black women to fend for themselves. To the point where a popular Nova Scotian journalist actually called the community or tagged them with the name “the community of widows” because there are so many widowed Black women in the community with the men dying out of cancer and various illnesses. Over that time, they were thinking, “Ah, there’s something about this dump,” but they weren’t quite sure about it.

“A popular Nova Scotian journalist actually called the community or tagged them with the name ‘the community of widows’ because there are so many widowed Black women in the community with the men dying out of cancer and various illnesses.”

INGRID WALDRON

BERNICE

Something’s not right.

INGRID

Something’s not right, something’s in the water.

So it’s clear that this is a health issue. It’s also a mental health issue. That became clear to me when I held a workshop in one of the Black communities in Nova Scotia specifically to talk about the mental health impacts of having a dump near to your community.

This is a topic that’s really not discussed. Many of us who are interested in this work, we talk about the health impacts. But the mental health impacts? We don’t.

The Black folks in Shelburne talked very clearly about the PTSD in their community. And it could be from a lot of things, but that doesn’t discount the fact that it’s also about growing up with a dump in your community when you are a low-income Black community that’s already stigmatized. And you’ve got the north end of Shelburne, which is mostly White, and you’ve got the south end of Shelburne, which is mostly Black, and the way that northenders might perceive you as being the dump. You live near the dump, but you are the dump because you’re Black, you’re nothing. This is how many of them feel.

“The Black folks in Shelburne talked very clearly about the PTSD in their community. And it could be from a lot of things, but that doesn’t discount the fact that it’s also about growing up with a dump in your community when you are a low-income Black community that’s already stigmatized.”

INGRID WALDRON

So they talked about PTSD and stress. They talked about the mental health challenges that a lot of the men experience in Shelburne, and some of that is about the dump. The way they are perceived, the stigma, the taboo, having to walk past the dump and having the dump smell get onto their clothes and then arriving in their classroom where people think they smell, like all of that is about self-esteem. And when you’re already

Black and you're low income, you may have — not in every case — self-esteem issues because of that, because of how other people make you feel.

And then on top of that, you live near a dump. Well, that stigma has to have and take a toll on your mental health. Not to exclude the fact that when people are dying from issues that maybe are not related to mental health, they're dying on an ongoing basis from cancer. What kind of toll does that take on the community?

There was a certain point in time where one of the leaders in that community in Shelburne would reach out to me on Facebook, and every week she would say, "Ingrid, remember that guy I introduced you to? He died of cancer last week." That was happening every week she was reaching out to me on Facebook. And I'm thinking to myself, "I don't know this person that she's talking about, but the other members of her community, they do. What does that do to them? What kind of toll does that take to them and people that they know, part of this small community, and their family members are dying every week of some type of cancer." That is a mental health impact.

BERNICE (NARRATION)

Ingrid told me about how powerful it can be to name environmental racism and to understand that it's part of a larger pattern of institutionalized systemic racism.

INGRID

And then when I met with Louise, who was a leader there in 2015, and I introduced this term to her, environmental racism, she said, "Never heard of it. Is that what's been happening to us?" I said, "Well, it's part of a pattern, you know, what's happening in Shelburne. It's not just about Shelburne, it's a pattern. When you think of environmental racism, it's a pattern of other communities that have this experience as well."

But she had never, ever heard of the term. And she kind of sighed, and she said, "Finally, I have a term, something to put my hat on." Everything now came together and made sense for her, and that's when

Environmental racism and climate change: Determinants of health in Mi'kmaw and African Nova Scotian communities

Waldron I. [2021].

This case study written by Ingrid and published by the Canadian Climate Institute explores the intersection of structural determinants of health, environmental racism and climate change impacts in Nova Scotia. It provides public health officials, policy-makers, environmental advocates and academics with evidence-based approaches to develop inclusive policies that address health disparities and promote environmental justice.



she became this huge advocate around it in her community starting in 2015 after our conversation. I had a conversation with her because I wanted to hire her to do focus groups for me in the community about environmental racism and the health impacts. And it's just a clear example of that because it's been there since 1942 and it has that health component where people feel there's a connection between the high rates of cancer in the community.

It's also an example of environmental racism because another tenet of environmental racism is not being heard, is the communities that are not being heard. They're calling out to government, "Please do something," and they're ignored.

Environmental racism is also about having a seat at the table. This community does not. They've been asking the town council to involve them in decision-making, and they've been excluded.

Environmental racism is also about the slow clean-up of environmental waste. Well, it's been in the community since 1942, and they finally got clean-up 2016, but not really clean-up. It wasn't really officially closed. It's being closed now, or what we call being decommissioned, but look how long it's taken.

BERNICE

Oh, I thought it was closed in the 1990s. That's not the case?

INGRID

We often say "closed" in quotation marks. It was kind of closed temporarily and then reopened.

BERNICE

Oh, wow.

INGRID

And then in 2016, Louise, the advocate I mentioned, kind of got them to close it then. So I thought it actually was closed, and then I'm hearing that it was decommissioning a dump means it's officially closed.

BERNICE

Oh, so it wasn't decommissioned. Okay.

INGRID

So it was closed in 2016 but not decommissioned, so that means not officially closed. So the official closing is happening all now, but once again, the community is frustrated because — why not call on us to talk about this decommissioning? They have not been included in the conversation.

I mean, Louise and the community would like to be included in the decommissioning conversation. This is in their backyard. And once again, excluded. All of these things are actually examples of environmental racism.

This is a community that also has well water that has a higher level of contaminants than municipal water. You and I are on municipal water, town water — tends to be cleaner. Well water tends to have contaminants, more likely to. The community, the Black community has been on well water since they arrived in Nova Scotia, right?

So that's another kind of example of an environmental injustice where you have the north end of Shelburne, mostly White, on town water, municipal water.

BERNICE

Cleaner.

INGRID

And the south end, mostly Black, well water. Like, that to me is stark. And it's another example of spatial inequalities that's very connected to environment, right? It's about the water.

Meanwhile, the town says, "Stop playing the race card." You know, another way to kind of undervalue, dismiss, disregard the community by saying you're playing the race card, where you have a community in Canada that doesn't have clean water. In Canada? *In Canada?* Well, we know the Indigenous communities don't as well, right? This is Canada, right? But to say that you're playing the race card is problematic, deeply problematic.

I would say Shelburne is a fantastic example, one of the oldest Black communities in Canada or I think the oldest, and they cannot get clean water. They don't seem to be heard by their own town council. And this is something that's continued on and on, that's been frustrating to the point where I think they've kind of given up on the town council, which they shouldn't because it should represent them, and they've kind of done it their own way.

Five principles of environmental racism

BERNICE

And in that example of Shelburne, as you mentioned, it kind of shows the different dimensions of environmental racism. So not only the disproportionate exposure to environmental risks, but also the slow response, the denial of the issue, the lack of engagement in decision-making. It demonstrates all of those different elements that you've been discussing.

INGRID

If you look at the definition put out by Dr. Robert Bullard, the definition of environmental racism, he has five principles. Everything you just said or what

I explained relate to each of those five principles: not have a seat at the table; the people most impacted are the people who are not engaged; the slow rate of clean-up; the disproportionate siting of these toxic facilities; and policy, that it all stems from environmental policy. So what we see on the ground, the spatial patterning of industry disproportionately in Indigenous, Black and other racialized communities is due to or rooted in policy.

“What we see on the ground, the spatial patterning of industry disproportionately in Indigenous, Black and other racialized communities is due to or rooted in policy.”

INGRID WALDRON

All of those things you and I just talked about with respect to Shelburne and other communities are reflected in Dr. Robert Bullard’s definition and its five principles of environmental racism perfectly.

BERNICE (NARRATION)

Dr. Robert Bullard is considered by many to be the father of environmental justice. He describes environmental racism as presenting in five different ways:

1. The disproportionate location of pollution and contamination near Indigenous and racialized communities
2. The limited political power these communities have to resist these decisions
3. The public policies that sanction these decisions and the resulting health harms
4. The environmental policies that result in slow clean-up of contaminants and
5. The exclusion of Indigenous and racialized communities from environmental decision-making processes

When I hear Ingrid talk about Shelburne, it’s clear to me that environmental racism is an important health and justice issue.

But Ingrid told me that in the early days of her work, environmental racism wasn’t always easily understood. She had to work hard, alongside community leaders like Louise, to raise awareness and gain support.

Raising awareness and overcoming racial procrastination

INGRID

There was a time when newspapers would post responses or people’s comments. I don’t know if they do that anymore, but they used to. And I looked at a comment, I shouldn’t have, and the person said, “Is Dr. Waldron really serious? Environmental racism? What is she going to come up with next? Environmental sexism?”

I actually laughed because I think that’s funny, actually. You know, he says, what is she coming up with next?

BERNICE

Like you invented it.

INGRID

Like I’m just sitting at home, creating—

BERNICE

Putting random words together.

INGRID

But I remember that comment in the newspaper, and I remember, I think that’s in a sense what many people thought is like, “Oh, my God, here we go again, another excuse to talk about racism. Now you’re talking about environmental racism. What exactly does that mean? How can the environment be racist?”

And I get it, actually, because don’t forget, I didn’t know what it was. So I actually didn’t take it that personally. I said to myself, “Get to work, Ingrid. What this means is you have to create awareness.”

And I spent so much time in Nova Scotia putting on events. And I feel it kind of worked because I think if there's one place in Canada that's heard of this topic, that has an understanding of it, I think it's Nova Scotia.

So that awareness actually created an understanding and, to a certain extent, empathy and volunteerism by young people who said to me, "I went to your event last night, didn't know about this, can I help?"

BERNICE (NARRATION)

As Ingrid raised awareness about the health issues that communities were facing, she unapologetically made race central. She told me more about the importance of disrupting Whiteness and the larger environmental justice movement.

INGRID

What I found in Nova Scotia was that there was a tendency to obscure the significant role of racism — and that's in everything in Canada, you know, in Canada, we don't like to talk about racism — but a tendency to obscure the significant role that race plays in environmental issues.

“Before we get to the environmental justice, we've got to talk about the environmental racism because the environmental justice are the tools that will correct environmental racism.”

INGRID WALDRON

I think, I'm not saying I'm the first one, but I think I made race central when I was in Nova Scotia, whereas I think other activists there were obscuring race within other things. They would also use the term *environmental justice*, you know, even scholarly work by mostly White scholars, White professors, they would start with the

term environmental justice. And for me, it was like, well, before we get to the environmental justice, we've got to talk about the environmental racism because the environmental justice are the tools that will correct environmental racism.

In other words, when you go to your doctor, you're not going to take the prescription and you're not going to do what the doctor says until he gives you the diagnosis. You want to know all about the diagnosis and the illness that you have, and then you will accept the medication to address the illness.

I look at environmental racism the same way. Where all these scholars and activists were saying environmental justice, environmental justice, I was saying, "Wait, wait a second. We haven't gotten to the justice yet. Why are you talking about it? We're still in environmental racism. Let's figure out the tools of justice to address environmental racism." But you can't figure out what tools need to be developed until you get a sense of what's happening.

So I see that as racial procrastination in a way that there's this hold on talking about environmental racism. And this is not just an issue related to environmental issues but to everything in Canada. When we talk about racism in education, racism in immigration, racism in the health care system, this notion that it doesn't exist, that it doesn't play a significant role.

BERNICE

Yeah. And I think that tendency of people wanting to ignore race or racism is reflective of a larger discomfort talking about these issues, right?

INGRID

Yes.

BERNICE

So wanting to move to talking about class, wanting to just talk about environmental justice, I think there's a deep discomfort there.

INGRID

Yes.

BERNICE (NARRATION)

Ingrid just mentioned how racial procrastination delays action on systemic racism in health care, immigration and more. In the Canadian environmental justice movement, racial procrastination looks like resistance and delays from White decision-makers, scholars and activists to see, hear and act on environmental racism.

Ingrid made this point in her book *There's something in the water*, published in 2018. The book documents grassroots resistance and mobilization efforts by Mi'kmaw and African Nova Scotian communities who have experienced environmental racism and a range of related physical and mental health issues.

The book caught the attention of Elliot Page, a Nova Scotia-born actor and advocate. Elliot approached Ingrid to collaborate on a film of the same name. The film was a huge success, reaching a large audience and marking a turning point for raising public awareness, understanding and support for addressing environmental racism in Nova Scotia.

I spoke with Ingrid about what has happened since the film was released, and our conversation turned back to the town of Shelburne. Ingrid told me more about how,

[There's something in the water: Environmental racism in Indigenous and Black communities](#)

Waldron IRG [2018].

Environmental racism has been long used as a method of erasure of Indigenous and Black communities. In this book, Ingrid takes Nova Scotia as a case study to provide an overview of environmental racism and its health impacts on Indigenous and Black communities in Canada. She also provides public health professionals, policy-makers and community members with examples of grassroots resistance movements against environmental health risks.



despite the increase in awareness and overall support for the issue, Louise and other community members are still fighting for a clean environment in which to live, grow, play and learn.

BERNICE

In the film that came from the book — that's an excellent documentary, by the way, I really, really enjoyed it — the story of Shelburne is also profiled in the film. What has happened since that time?

INGRID

Oh gosh, lots. Thanks to the fact that Louise has done a lot with other community members. The film premiered at Toronto International Film Festival September 9th of 2019, and then it went to Netflix end of March 2020.

What was exciting at that point is that Elliot Page gifted the community with a new community well, because I told you that they'd been on well water that's contaminated. So now the south end community, the Black community has their own well. Unfortunately, the town council refused to accept this gift by Elliot Page.

BERNICE

That's wild.

INGRID

They said, "That's reverse discrimination, and that well should not be for the Black community, and the Black community will not use it. What a waste of time and effort. So we need to put it central in the community so everybody has access to this well." Now, that makes no sense because, as I said, the White community is on town water.

BERNICE

Right.

INGRID

So they saw this as reverse racism. So that was a back and forth between the community for a long time. And then, as I said, the community sometimes says to themselves, "We're going to do it our way."

So what they had to do, unfortunately or fortunately, is go outside of Shelburne and put the well there. So even though the well is not directly in the Black community, it's near to the community and accessible to a certain extent. It would be great if it was, but the town council has the final decision, obviously. So if they said, "Nope, you can't have it in the south end," they can't.

So they found a way to place it outside the south end but close to the community, and they have been working with a Nova Scotia Community College environmental science professor to install that well. So that's very exciting, and I thank Elliot Page for that. Elliot Page has also agreed to pay the annual fees for that.

BERNICE

Oh, that's great.

INGRID

Since that time also, my project, the ENRICH Project, was involved in a water-testing project in Shelburne. So for the first time they were able to get their water tested and find out what contaminants are in the water. So that's really huge because once you know what's in your water, then you know how to manage your drinking water supply.

In 2018, I connected with Ecojustice, which is a Canadian law charity. I met with the lawyer there. I talked about the communities I was working with, including Shelburne, and they have been since then working with Shelburne.

Also, I'm happy to hear that Louise Delisle, she actually launched a case through the Human Rights Commission of Nova Scotia.

Since the movie, as well, I believe Housing Nova Scotia, the government department Housing Nova Scotia, donated private wells to residents in Shelburne.

I'm also excited to say that since the movie, I mean, Louise and the other women in the film have become a bit of celebrities.

BERNICE

Yeah, they're everywhere!

INGRID

They're flying across the country, giving talks, and I love to see this!

Partnering in community-based research

BERNICE (NARRATION)

Ingrid and I spoke about the importance of building community power and leadership for social change. Ingrid reflected on the importance of doing research differently and the role she played in supporting community members to navigate systems. She also reflected on building multidisciplinary relationships with human rights lawyers, environmental scientists, decision-makers and elected officials.

INGRID

In Louise, I found a true leader. I found somebody who is leading. And the way the community-based research that I've done has lifted, I guess, in a way or supported the community to now fly on their own is the way it should go.

You know, from the time that I decided to hire Louise to do the focus groups instead of me — like, you hire the community member because people know Louise, they don't know me. From that time to when they got together in the focus groups, and they got some sense of solidarity, and then they decided to form an NGO called South End Environmental Injustice Society, the first eNGO the Black community has ever formed. And then when they formed that, they were able to close the dump in 2016 or "close it," you know, close in quotation marks. The stuff that has been done by Louise and by the eNGO they formed, everything they've done since is an example of how community-based research should go. It's a perfect example.

But you've just got to have the right mix of people. You've got to have a leader like Louise who is willing to take up the sword. And I'm there to help. The academic is not there to lead. The academic is not there to intervene and tell people what to do. The academic is there to identify the resources that might be lacking and that the community needs in order to fly.

“The academic is not there to lead. The academic is not there to intervene and tell people what to do. The academic is there to identify the resources that might be lacking and that the community needs in order to fly.”

INGRID WALDRON

So that is my role. I do feel I have a pivotal role in everything that's happened. I think Louise would agree with that. I brought the project to them. I brought the topic to them. I supported the work financially through funding and research. But what I saw later on is a community and a leader that took it upon herself to do the work and can do the work now, in many ways on her own, can navigate the systems, has the networks now, has the networks of lawyers and environmental scientists that she can call on now that she didn't have before, and now can fly.

And that's community-based research. That's what it should do.

Legislative efforts and advice for advocates

BERNICE

Let's talk a little bit about this piece of legislation that's currently under review with the Senate. So that also came from the ENRICH Project. Can you talk about that legislation and how you hope it will impact people's lives, for example, the residents of Shelburne?

INGRID

Well, the root of that legislation, which is a federal legislation, came out of a Nova Scotia legislation — or a Nova Scotia private member's bill that I co-created with former politician Lenore Zahn. She was an MLA in Nova Scotia, and I connected with her in 2014 around Christmas time, just trying to figure out if I can develop relationships with MLAs in Nova Scotia.

And we met in 2015 for coffee. And she said to me, “We can develop a private member's bill. I have to warn you, they don't tend to pass into law, but they can give your project and this topic a lot of attention.” And she was right. It did go to second reading, but it never went any further. And then in 2020, just before COVID hit, she said, “Ingrid, you know I'm an MP now, and I'd like to look at that bill again. Why don't we turn it into a federal bill?” And I said, “This is going to be fantastic. That means we can look at the rest of Canada, not just Nova Scotia.”

So we took that old bill from Nova Scotia, and we modified it. I said, “I think we can make it a little bit more robust. Let's talk a little bit more about reparations. Let's talk about disaggregated race-based data and all these much more robust things.” She did. We put it forward.

BERNICE (NARRATION)

We heard from the Honorable Senator Wanda Thomas Bernard at the beginning of this episode, speaking about environmental racism in Africville. Here she is again speaking about the bill and the proposal for a national strategy to address environmental racism.



HON. WANDA THOMAS BERNARD | Environmental racism is a great example of colonization doing its job: wiping out Indigenous and Black people in Canada. Reconciliation cannot happen without putting a stop to environmental racism. Let's send this bill to committee quickly. This is not a topic to debate. It's a topic to act upon and act upon quickly. (ParlVU video: [Senate Sitting No. 24, May 16, 2023](#))

BERNICE (NARRATION)

At the time of this recording, Bill C-226 has made it through second reading at the Senate. To mobilize support for this legislation, Ingrid co-founded the Canadian Coalition for Environmental and Climate Justice. To learn about the coalition and get involved, visit ccecj.ca.

Senate passes long-awaited legislation to tackle environmental racism in Canada

Canadian Coalition for Environmental and Climate Justice. [2024].



This press release from the Canadian Coalition for Environmental and Climate Justice chronicles how Bill C-226, the National Strategy on Environmental Racism and Environmental Justice Act, passed the Senate and became law in June 2024, marking a historic step in recognizing environmental racism in Canada. The Act mandates the government to investigate the links between racialization, socioeconomic status and environmental risk, and to develop a national strategy on environmental racism and justice. Intersectoral coalition members, including Ingrid, emphasize the importance of data collection as a starting point to understand and mitigate these issues. The passage of this bill reflects a commitment to creating more equitable environmental policies and addressing the disproportionate impact on communities forced into marginalization.

What we've learned from Ingrid is that it's important to work with others to

- raise awareness
- build community power
- and connect with political champions for meaningful policy change

Earlier, Ingrid said she was hesitant to take on this work because she wasn't an environmental scientist. She told me about how, looking back, partnerships have been key to filling that gap.

INGRID

I felt I had to wait to know everything to do something. That I needed to find the right expert on this to do something. And if I couldn't find that person, then I would be paralyzed. And I would say to people, just from my experience on this project, you have a place. Don't wait just to do something. You can do something now.

“Don't wait just to do something. You can do something now. The whole point of partnerships is to fill the gaps, the gaps that you have in your experience. That's the whole point of it. You should never expect yourself to have everything.”

INGRID WALDRON

The whole point of partnerships is to fill the gaps, the gaps that you have in your experience. That's the whole point of it. You should never expect yourself to have everything. And when I think back to my project, the multidisciplinary partnerships I've brought along through this project — the hydrogeologist, you know, I never, ever thought I'd be working with a hydrogeologist, like for what?; environmental scientists;



people in political science, which is social science, which is my area, I guess — but the kinds of experts and disciplines I've brought to the project has been one of the most interesting things for me because I'm learning. And it's not just the professors, it's the students who are coming from multiple disciplines. I learned from them. It made the projects much more interesting, much more revealing, and that's what it's about. So when we talk about partnerships, the whole point is that they're going to fill in the gaps, the things that you don't know, the knowledge gaps in your experience, and that's what they're for.

The fact that I entered into this project not knowing about this topic and feeling a lack of confidence that I wasn't in the right place, and that a bill can come out of this, that a book can come out of this, that a Netflix documentary can come out of this wows me.

I didn't seek out this project. I didn't seek out the book. The publisher came to me to ask me to write the book. I wasn't planning to write a book on environmental racism. The documentary came to me. I didn't pursue. I didn't run after Elliot Page. I didn't think I was going to have a documentary on Netflix.

And then in the end, I truly believe that it will help communities, that while I didn't think I knew what I was doing, that in the end, everything made sense and that there has been real impacts in communities. I've seen it because I have relationships with them.

BERNICE

What is biggest piece of advice you'd give to someone who wants to be engaged in addressing environmental racism or like issues?

INGRID

I would say, "Don't stop." And you can say that for any issue, but this is a particularly frustrating, slow topic. I've seen it. I see climate justice activists on the ground marching, and then things don't go their way and things turn around, and then they stop and they get discouraged, and then they start up again.

I think the environmental justice sector, now that I'm in it — I wasn't in it, of course, 11 years ago, I knew nothing about it — but I see it now. I see climate and environmental justice is a slow process. And that has a lot to do with the fact there's a lot of money involved. It's about capital and profit. So it's a tough issue to change. And I would say to people involved in these sectors, climate, environment, don't give up, you have to keep going. That's what I've had to do. I didn't feel I had an alternative. So don't give up. Be persistent and consistent. The communities have, you know. It's like if they can do it, the communities who are actually directly impacted, then we owe it to them.

"And I would say to people involved in these sectors, climate, environment, don't give up, you have to keep going. That's what I've had to do. I didn't feel I had an alternative. So don't give up. Be persistent and consistent. The communities have, you know. It's like if they can do it, the communities who are actually directly impacted, then we owe it to them."

INGRID WALDRON

BERNICE (NARRATION)

I was so grateful to have had the chance to speak with Ingrid. I learned about how environmental racism affects people's physical and mental health. I learned about how communities are mobilizing and uniting with partners across Canada to create transformational change. And I learned about how decision-makers and even other environmentalists procrastinate when it comes to taking action on environmental racism.

TALKING WITH DR. GAYNOR WATSON-CREED

BERNICE (NARRATION)

The conversation has left me with a key question. What can public health do to better respond to the needs of racialized communities? To reflect on this question, I spoke with Dr. Gaynor Watson-Creed, the Associate Dean for Serving and Engaging Society in the Faculty of Medicine at Dalhousie University.

Gaynor spent 16 years as a public health leader in Nova Scotia, in both local and provincial medical officer of health roles. She is a Black woman and a well-known health equity champion. What's interesting is that around the time that Ingrid founded the ENRICH Project, Gaynor was the Medical Officer of Health for Halifax and the surrounding area, then called the Capital Health District.

Ingrid came to her to discuss the health issues being identified by African Nova Scotian and Mi'kmaw communities. In a true example of reflective practice and humility, Gaynor recalled that early conversation and reflected on how public health organizations can, unintentionally, be complicit in upholding systemic racism.

GAYNOR WATSON-CREED

I'm not even sure that Ingrid remembers the story, but she did reach out to Capital Health, to me specifically as the Medical Officer of Health at the time, so this would have been somewhere around the time that she first came to the province in, maybe, around 2012. And she pointed out that she had been hearing concerns about environmental health and potentially toxic exposures and the number of different outcomes related to those exposures in certain communities around Nova Scotia.

At the time, my response to her was something like this: that public health has a protocol for cluster investigations, and we could engage in the cluster

investigation around this. However, the outcome of most cluster investigations often doesn't find what the community is looking for. And when she described the different outcomes that she was hearing about in the community, I said, "Many times what we find is, for example, those cancer outcomes often have different causes when we look at them. Different cancers have different causes. So the community may think that they're related, but they may not be, and is the community prepared for that conversation?"

I think about that conversation a lot because there's a way in which it signalled to me then, I thought about it since then, in the days after, what public health could reasonably offer. And I still think about it because it pointed out a number of things.

It's a conversation we weren't ready for in the public health system.

And I would say, in particular in the Nova Scotia public health system, the context at the time was their environmental health colleagues were in a different department, so they weren't situated with public health, which meant public health expertise and environmental health was surface level at best.

We didn't have the university partnerships to be able to draw in other experts into the conversation. And we were relying on environmental science, environmental public health science that I'm going to say was outdated and not keeping up with the times and the reality of different communities.

In fact, I would say that some of what we were relying on was colonial environmental science in that it didn't even stop to consider the idea that colonial structures themselves might actually be at the heart of differential outcomes occurring in different populations. That's interesting for public health, which prides itself on being equity-focused in its work.

But in 2012, we were missing so much of that conversation.

“Some of what we were relying on was colonial environmental science in that it didn’t even stop to consider the idea that colonial structures themselves might actually be at the heart of differential outcomes occurring in different populations.”

GAYNOR WATSON-CREED

Importance and limitations of cluster investigations

BERNICE

Yeah, absolutely.

So in 2012, when Ingrid touched base with you about what she was hearing and what was going on, and you said that you mentioned that you could do a cluster investigation, but usually the outcome isn’t what the community is looking for. Can you tell me a little bit about a cluster investigation? What does that involve, and why did you feel like it wouldn’t give the community what they were looking for?

GAYNOR

Yeah, I mean, certainly in part. I think probably what I also said to her was that I’m not sure that Nova Scotia Public Health is resourced to do a cluster investigation properly anyway. So that was part of the concern.

But a cluster investigation is public health’s kind of methodology for investigating an outbreak, not of communicable disease, but of a chronic disease or environmental outcome.

It’s this idea that you might see a cluster of outcomes, for example, in one geography or one area or one

period of time, and so the investigative process is similar to outbreak investigation. You’re looking for, well, what is the source of these outcomes? Who else might be affected by these outcomes? What does that tell us about what mitigations need to be put in place? So it’s basically another way of saying an outbreak investigation, it’s just not for communicable disease. So when it’s non-communicable disease, we have traditionally used the term cluster investigation.

BERNICE

I worked at a health unit, as I mentioned, but I don’t have experience with cluster investigations. So I was doing a little bit of research to understand more about what it entails. And it sounds like an incredibly important but also very complex process.

And so thinking about cluster investigations within a public health organization context, in your view, do you believe that it should be a standard service that we’re able to offer communities who raise concerns around environmental exposures or what have you? Do you feel like it’s something that we should be able to do?

GAYNOR

In theory, yes. Notwithstanding the pieces that you’ve offered around the complexity and resource intensity of a cluster investigation, but they are important. And, you know, sometimes cluster investigations lead to exactly what Dr. Waldron’s work has exposed. Another famous example of a cluster investigation might be the one that led to the exposure of the outcomes, I think in Michigan, that’s detailed in the Erin Brockovich story, as an example.

This is what cluster investigations are designed to do. It is a public health methodology. And I feel like we don’t give it enough attention maybe. I’m not sure that we’ve modernized cluster investigations to the extent that they need to be available to us to look at 2023 questions and outcomes of interest.

And the challenge again with cluster investigations is that so often what public health has tried to avoid

— and I think this speaks to maybe something else that we need to modernize or think differently about — is heightening anxiety in a community and maybe providing false hope that there's an answer, when the statistics that were traditionally quoted around in cluster investigations were that 95% of them actually didn't lead to a satisfactory outcome for community.

But I also think the communities are wise enough and smart enough to be able to know what to do with that information when presented with it. And certainly our capacity to rapidly enter into at least the preliminary stages of an investigation and get some early answers as to which way do we think this is going to go would be beneficial to that ongoing understanding.

So yeah, I do, I think about that moment in 2012 a lot. And I think, “Wow, that was a miss” and also speaks to some new learning, I think, that we need to acquire in public health if we're going to stay in the place that we've traditionally been around doing these types of investigations of disease outcomes.

BERNICE

So, thinking about 2012, what do you wish your organization would have been able to offer to Ingrid? What would that ideally have looked like?

GAYNOR

So we've talked about the cluster investigation capacity, and I think our capacity to come alongside Ingrid and the community and do that work would have been really helpful. I like to think so.

Surveillance data and its implications

GAYNOR

The other thing that we've been missing over the years — and there are parts of the country that do this quite well, but again here in the Nova Scotia context, we've struggled to get there — has been high-quality surveillance data.

BERNICE

Okay.

GAYNOR

Disaggregated a number of ways that might have already pointed to some outcomes or some risk factors of interest between different communities. So we don't have, for example, or didn't have at the time, robust environmental data disaggregated by geography and by community in terms of where we might expect exposures, for example, to occur, or even where we might expect concerns to occur that we might proactively seek out.

“Public health is actually the only branch of the health care system that has an obligation, in many cases a legislated responsibility, to systematically identify and uncover disparities in health outcomes for the purposes of resolving them.”

GAYNOR WATSON-CREED

We don't have outcome data disaggregated, for example, by race and ethnicity, although that data collection has now started in the province of Nova Scotia as a result of the [Fair Care Project](#). So that's helpful.

But, you know, I regularly come to, when I'm speaking with public health audiences, for example, this idea that public health is actually the only branch of the health care system that has an obligation, in many cases a legislated responsibility, to systematically identify and uncover disparities in health outcomes for the purposes of resolving them. But you can't do that

if you don't have a surveillance system that's actually targeted at finding disparities along the lines that we think that disparities break. And we know that we see health disparities, for example, differentially in different racialized populations.

But we didn't set up surveillance systems in the province of Nova Scotia to be able to detect that, and so we didn't have that in 2012. So all those things, I think, would have been much more helpful than where we landed in that first conversation.

BERNICE

And to the point of surveillance data, I think it can be so incredibly helpful, but it's also fraught, right, with controversies in terms of why that data is being collected, for what ends and what purposes. Can you talk to me a little bit about that?

GAYNOR

The conversation in Nova Scotia, for example, with the African Nova Scotian community has been decades long. And with a community that has repeatedly said, "We know we are at risk for differential health outcomes. And if you don't help us to uncover where those differences are happening, you are being complicit in racism because you are burying the truth of our experience by not sharing that data."

And that, to me, as a public health practitioner, is a far more racist approach than anything that we might have designed by way of trying to get that surveillance data in place. I recognize that the term surveillance is loaded, and public health uses it in a particular way that other agencies don't use it, so maybe we need to come up with a different term for it. Population health assessment data, for example, might be better. But that argument from the African Nova Scotian community, I think, is a really compelling one and one that I remind myself of regularly as I've embarked on bits of work to try and improve the surveillance situation here in Nova Scotia.

You know, it's a similar conversation with Indigenous communities. But they're also very clear, as are African Nova Scotian communities, and as they should be, that how the data is interpreted and how the data is ultimately used to inform policy cannot happen without the full involvement of those communities.

And there is a high risk of data being misinterpreted if it's not validated in those really important ways by community. So that's part of an anti-oppressive approach. I've been parts of conversations where, for example, political decision-makers have seen bits of surveillance data and immediately jumped to a conclusion that actually has no relevance to the current situation. Because they're not exposed to the context that community can bring around, no, this is actually what the data means, and here's how we know this is what it means because this is our lived experience of this environment.

So that interpretation step with community is a really important part of the practice, and so that means that there would have to be a relationship there that requires time to build.

All of those pieces are certainly part of the picture.

BERNICE

And I think that's a key point you mentioned there, where you talked about how these conversations around surveillance, especially with African Nova Scotian communities, are decades old. So for decades, being in relationship with these communities, understanding how to approach the data, interpretation, etc.

And so it has to be context-specific, right? Because what data collection might look like in some place won't be the same as another. So when we're building these systems, really being rooted in the context in which we're working, I think that's really important.

GAYNOR

Absolutely. In the context that we're working and also in answering the questions that those communities in that context have, which may be very different, for example, than the questions that the research community has. So what we don't want to do is build a surveillance system that's only about that, only about academic questions, for example, answered by researchers, if that's devoid of the community questions that are coming forward.

Which is exactly what Dr. Waldron's uncovered when she first started that work in Nova Scotia, right? The community questions that needed to be answered were what got her attention. That's what should get all of our attention.

“What we don't want to do is build a surveillance system that's only about that, only about academic questions, for example, answered by researchers, if that's devoid of the community questions that are coming forward.”

GAYNOR WATSON-CREED

Shifting public health practices

BERNICE

A lot of the things that you're talking about will require some shifts, both in our thinking in terms of what public health does and should do as well as shifts in, you know, allocation of resources and staff time, etc.

How do we put those shifts in place, or what is needed to get public health to think differently about our role when it comes to these issues?

GAYNOR

Oh, it's a good question, Bernice. I think from a leadership position, we would need to get clear on what level of integrity do we want to hold around our work? And by integrity I mean, do we want to be the type of public health we say we want to be?

BERNICE

I love that.

GAYNOR

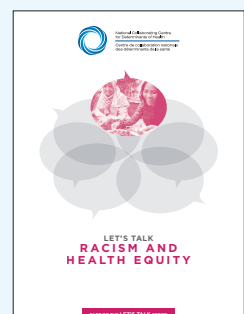
We have been in the equity conversation a *long* time, and we have missed some big elements of what it actually takes to create equity across communities. If we're going to be honest about what we do next, then we actually need to look at that critically, we need to examine some of our own very colonial practices in public health. If we're going to thrive as a public health system, then I do think we have some growing to do in this health equity conversation that we have held forever, in a space of we already know what we need to do, which is we need to solve poverty and along the way make sure that we guarantee incomes and food security and housing security. We've always been in that conversation.

Let's Talk: Racism and health equity

NCCDH [2018].

Settler colonialism manifests in many ways, one being through health and social inequities. This document from the NCCDH's Let's

Talk series provides an overview of race, racism and racialization. It allows public health practitioners to take a critical look at their work, and to examine how beliefs shape their practices and how to reorient them to a more critical and anti-racist approach.



So tactically is the next question. Tactically, what does that actually mean we do for different communities? And what if the context in the community means that we need to think radically differently about how we would approach those challenges?

We can't discern the context without good surveillance data, without knowledge of what's actually happening in that community. We can't get that without the relationship with the community. So there are some fundamental building blocks that we would need to look to as well as fundamentally considering whether or not our approaches are, even inadvertently, inherently colonial and how we shift that.

EPISODE TAKEAWAYS

BERNICE (NARRATION)

Talking to Gaynor helped me think through how public health can avoid racial procrastination and better see, hear and respond to the needs of racialized communities. Gaynor said that public health needs to be willing to rethink the tools that are typically used to identify health problems, like cluster investigations and population health assessment or surveillance.

Both Ingrid and Gaynor emphasized that doing health equity work means keeping race and racism central. That means building relationships with racialized communities, responding to the concerns being raised, and looking to communities to interpret and contextualize the data we collect. These are all ways that people working in public health can disrupt the status quo and contribute to larger social movements like environmental justice.

If public health doesn't want to be part of the problem, then we need to work with others to be part of the solution.

If you enjoyed this episode, check out two of our past episodes: "[Disrupting Whiteness](#)" and "[Disrupting the status quo \[in\] public health.](#)" We've included these, along with links to related resources, in our episode notes.

Production for this episode was led by Pemma Muzumdar and Rebecca Cheff, with contributions from Bernice Yanful and Carolina Jimenez.

PEMMA MUZUMDAR (NCCDH)

Thanks for listening to Mind the Disruption, a podcast by the National Collaborating Centre for Determinants of Health.

Visit our website nccdh.ca to learn more about the podcast and our work.

This season of Mind the Disruption is hosted by Bernice Yanful and is produced by Rebecca Cheff, Carolina Jimenez, Bernice Yanful and me, Pemma Muzumdar. The Mind the Disruption project team is led by Rebecca Cheff, with technical production and original music by Chris Perry.

If you enjoyed this episode, leave us a review! And share the link with a friend or a colleague. Hit the "follow" button for more stories about people working with others to challenge the status quo and build a healthier, more just world.

REFLECTION QUESTIONS

We encourage you to work through these questions, on your own or in a group, to reflect on this episode and make connections with your own context.

INITIAL REACTIONS

- What is something that surprised you in the conversations with Ingrid and Gaynor? How did you feel as you were reading or listening to this episode? What prompted these feelings? How can you use them to fuel action?

CONNECTING THIS TO YOUR CONTEXT

- What examples can you think of where certain communities face disproportionate environmental health risks?
- Reflecting on the importance of building relationships with communities when addressing health disparities:
 - » How can public health practitioners ensure that community voices are heard and valued in the data collection and interpretation process?
 - » What are some practical steps you can take to build relationships with the communities you engage with?

DISRUPTING FOR A HEALTHIER, MORE JUST WORLD

- Gaynor mentions the need for public health to examine its own colonial practices. What might this examination look like, and what changes could result from it?
- How can public health systems ensure that their approaches are not inadvertently perpetuating systemic racism?

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