

Table 2: A timeline of community awareness and action: The history of Sarnia’s fight for asbestos recognition

Workers raised awareness	<ul style="list-style-type: none"> • A worker at Fiberglas Canada (owned by Owens Corning) tracked obituaries and with help of the Occupational Health Clinic for Ontario Workers (OHCOW) raised the alarm; • Over 1000 claims were filed to the Workers’ Compensation Board (WSIB), many for cancer; • Since the Holmes Foundry (closed in 1980) and Owens Corning Fiberglas (filed for bankruptcy in 2000) were already closed, the workers were the ones who held the institutional memory of these two companies.
Community involvement	<ul style="list-style-type: none"> • A community organization took a very strong leadership and advocacy role. • A researcher became the Executive Director of OHCOW, and conducted an analysis of the cluster of cancer and deaths; • With the help of the union, the widows and victims came together to form a group; • The fight for recognition of occupational disease sets up a divide in the community, with many workers regarding exposures as part of the job, concerned about their pensions, and grateful to the companies for their well-paying work; • The widows joined the union in a sit-in at the Ontario legislature and negotiated the temporary funding of OHCOW in Sarnia.
Union involvement	<ul style="list-style-type: none"> • The unions got involved and took a very strong leadership role. • In 1998, the Health and Safety Co-Chair of a CEP local union organized two intake clinics for workers who worked at Fiberglas Canada and Holmes Foundry; • He helped found an organization of widows, the Victims of Chemical Valley; • The Ontario Federation of Labour (OFL) organized a cross-Canada tour to raise awareness of occupational disease with the victims group; • The OFL and the Victims group raised awareness of their plight in the Ontario legislature; • In 1999, the OFL held a conference on occupational disease and 1000 members attended; • The OFL created a one-day workshop on occupational disease that was widely taught to workers and activists; • The Victims organization (VOCV) was recognized in the Ontario legislature; • The Sarnia occupational health clinic (OHCOW) received temporarily funding.
Media attention	<ul style="list-style-type: none"> • From 1998-2000, at least 30 major articles (front page) and editorials were written about asbestos and cancer in Sarnia; • An annual march was organized by the VOCV and the Union to raise awareness.
Political action	<ul style="list-style-type: none"> • Local politicians discuss the health impact of asbestos (occupational exposures and cancer was mentioned in the Sarnia municipal council); • In 1999, a private member’s bill on allowing benefits for side-exposure victims (wives of workers), (Lynne Henderson Bill) achieved second reading; • The Ministry of Labour (MOL’s) department of hygienists and other clinical practitioners was not shut-down, despite wide-spread cut-backs led by the government of the day. This is considered significant; • The MOL lowers some occupational exposure limits for particularly toxic substances;

	<ul style="list-style-type: none"> • The MOL makes the occupational clinic in Sarnia permanent in 2004. This is a big achievement, but the MOL emphasizes that it will not fund prevention activities or activism at the occupational clinic. This significantly reduces community leadership on the issue of occupational exposures.
Industry reaction	<ul style="list-style-type: none"> • Industry dominates as the major employer in a relatively homogeneous community. • Industrialization, globalization, and automation led to severe cutbacks of the workforce. Major plants were closed in 2003 and onwards. By default, fewer workers are exposed to chemicals; • Industry outsourced much of the most toxic work to non-unionized contractors; • The Sarnia-Lambton Environmental Association, with representation from 20 companies, monitors the companies' environmental emissions. The Sarnia-Lambton Industrial Educational Co-operative establishes common OHS education for workers in the petrochemical industry; • The industry has helped fund a health study (2014) that will examine the health effects of environmental emissions; • Established a relationship with the First Nations communities that border on some of their properties; • New companies are now built away from the Sarnia river and industrial outputs are monitored more closely.
Community achievements	<ul style="list-style-type: none"> • Compensation claims are now processed with greater understanding by WSIB; • A hospice was established; • The community built a memorial to the victims of chemical valley; • A clinic for occupational health (OHCOW) achieved permanent funding; • The "toxic blob" in the Sarnia river was cleaned and is slowly dissipating.
Unintended outcomes	<ul style="list-style-type: none"> • With layoffs, cutbacks, and closures, the unions lost a significant amount of their power base and their ability to demand change. They now focus on survival, retention of jobs, and saving pensions, and do not have the time or resources to launch another campaign on occupational disease; • Community leadership has dissipated; • OHCOW lost its ability to do prevention work and ceased to be a major community hub for activism