JOINT REVIEW PANEL PUBLIC HEARING

IN THE MATTER OF Application Nos. 1844520, 1902073,
001-00403427, 001-00403428, 001-00403429, 001-00403430,
001-00403431, MSL160757, MSL160758, and LOC160842
to the Alberta Energy Regulator

GRASSY MOUNTAIN COAL PROJECT - BENGA MINING LIMITED VOLUME 29

VIA REMOTE VIDEO

December 2, 2020

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1	Proceedings Taken via Re	emote Video
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3	December 2, 2020	Morning Session
4		
5	A. Bolton	The Chair
6	D. O'Gorman	Hearing Commissioner
7	H. Matthews	Hearing Commissioner
8		
9	M. LaCasse	AER Counsel
10	B. Kapel Holden	AER Counsel
11		
12	K. Lambrecht, QC	Joint Review Panel Secretariat
13		Counsel
14		
15	T. Utting	IAAC Staff
16	E. Arruda	AER Staff
17	D. Campbell	AER Staff
18	T. Turner	AER Staff
19	T. Wheaton	AER Staff
20	A. Shukalkina	AER Staff
21		
22	M. Ignasiak	For Benga Mining Limited
23	C. Brinker	
24		
25	R. Warden	For Ktunaxa Nation
26	T. Howard	

1	K. Poitras	For Métis Nation of Alberta
2		Region 3
3		
4	Chief B. Cote	For Shuswap Indian Band
5		
6	B. Snow	For Stoney Nakoda Nations
7		
8	R. Drummond	For Government of Canada
9	S. McHugh	
10		
11	A. Gulamhusein	For Municipality of Crowsnest
12		Pass
13		
14	M. Niven, QC	For MD of Ranchland No. 66
15	R. Barata	
16	J. Nijjer (Student-at-La	w)
17		
18	B. McGillivray	For Town of Pincher Creek
19		
20	D. Yewchuk	For Canadian Parks and
21		Wilderness Society, Southern
22		Alberta Chapter
23		
24	R. Secord	For Coalition of Alberta
25	I. Okoye	Wilderness Association, Grassy
26		Mountain Group, Berdina Farms

1		Ltd., Donkersgoed Feeder
2		Limited, Sun Cured Alfalfa
3		Cubes Inc., and Vern Emard
4		
5	R. Cooke	For Crowsnest Conservation
6		Society
7		
8	G. Fitch, QC	For Livingstone Landowners
9	C. Agudelo	Group
10		
11	M. Sawyer	For Timberwolf Wilderness
12		Society and Mike Judd
13		
14	(No Counsel)	For Barbara Janusz
15		
16	(No Counsel)	For Jim Rennie
17		
18	S. Elmeligi	For Alberta Chapter of the
19	A. Morehouse	Wildlife Society and the
20	S. Milligan	Canadian Section of the
21	M. Boyce	Wilderness Society
22		
23	J. Gourlay-Vallance	For Eco-Elders for Climate
24		Action
25		
26	L. Peterson	For Trout Unlimited Canada

1	R. Campbell	For Coal Association of Canada
2	(No Counsel)	For Alistair Des Moulins
4		
5	(No Counsel)	For David McIntyre
6		
7	(No Counsel)	For Fred Bradley
8		
9	(No Counsel)	For Gail Des Moulins
10		
11	(No Counsel)	For Ken Allred
12	(Not Present)	
13		
14	(No Counsel)	For Monica Field
15		
16	S. Frank	For Oldman Watershed Council
17	A. Hurly	
18		
19	C. Forster, CSR(A)	Official Court Reporter
20		
21	(PROCEEDINGS COMMENCED AT	9:00 AM)
22	Discussion	
23	THE CHAIR:	Good morning, everyone.
24	Just a reminder that	live audio and video streams
25	and video recordings of t	his proceeding are available
26	to the public through the	e AER's website and YouTube.

- 1 Anyone in the virtual hearing room with their camera or
- 2 microphone turned on will be captured, and images and
- 3 recordings of you and your surroundings will be
- 4 broadcast to a publicly available YouTube video. If
- 5 you have concerns about this, please contact counsel
- 6 well in advance of the time you're scheduled to
- 7 participate to explain your concerns. We will make
- 8 best efforts to try and accommodate your concerns
- 9 considering the need for an open and transparent public
- 10 process.
- 11 So just before we start, Mr. Fitch, apologies for
- 12 the false start with your witness panel yesterday and
- 13 the abrupt ending to yesterday's session. The
- 14 Government of Alberta was experiencing issues with its
- 15 internet service, and that affected the AER systems
- 16 which rely on it. Things do seem more stable this
- 17 morning, so hopefully we'll get through the remainder
- 18 of the hearing without any further issues.
- 19 Is there any other preliminary matters or business
- 20 that we need to deal with before Mr. Fitch continues?
- 21 Hearing none, Mr. Fitch, I think you should just
- 22 assume you're starting all over and go from there.
- 23 MR. FITCH: Indeed. Thank you, Mr. Chair.
- 24 JAMES YOUNG, Previously Sworn
- 25 Direct Evidence of Livingstone Landowners Group
- 26 (Wildlife, including migratory birds and species at

- 1 risk, wildlife health, and human health risk
- 2 assessment)
- 3 Q MR. FITCH: Good morning, Dr. Young.
- 4 A DR. YOUNG: Good morning.
- 5 Q So I think we got you sworn and I got one question in
- to my examination, so we'll just back up and start with
- 7 Question Number 1 all over again.
- 8 So to begin, sir, you can confirm that you were
- 9 retained by the Livingstone Landowners Group to review
- the air quality assessment done for the Grassy Mountain
- 11 Project, having particular regard to the assessment's
- 12 consideration of Chinook winds?
- 13 A I was.
- 14 Q Okay. And can you confirm that you prepared a report
- for the LLG titled "Comments on Air Quality and
- 16 Meteorology Concerning the Grassy Mountain
- 17 Coal Project"?
- 18 A I did.
- 19 Q Okay.
- 20 MR. FITCH: And just for the record,
- 21 Mr. Chair -- we don't need to bring it up -- but
- 22 Dr. Young's report is Registry Document 552, starting
- at PDF page 53.
- 24 Q Dr. Young, can you confirm that your report was
- 25 prepared by you or under your direction?
- 26 A DR. YOUNG: Yes, it was. It was prepared

- 1 by me.
- 2 Q Thank you.
- 3 And do you have any corrections or amendments you
- 4 would like to make to your report?
- 5 A I do not.
- 6 Q Okay. And do you adopt your report as your evidence in
- 7 this proceeding?
- 8 A I do.
- 9 Q Okay. And, sir, you can confirm that in your report,
- 10 you acknowledged that as an independent expert witness,
- 11 you are under a duty to give opinion evidence that is
- fair, objective, and nonpartisan? Dr. Young?
- 13 A Yes, I -- I --
- 14 Q Okay.
- 15 A Yes, I acknowledge that.
- 16 Q Thank you.
- 17 Now, Dr. Young, you provided a curriculum vitae
- 18 which was attached as Appendix A to your report.
- 19 Again, that's Registry Document 552. The CV starts at
- 20 PDF page 559 -- sorry, 59. 59 I should say. You don't
- 21 need to turn it up, but I will begin my examination of
- 22 you by asking you to provide an overview of your
- 23 credentials.
- 24 A Thank you, Mr. Fitch.
- I am the president of (INDISCERNIBLE).
- 26 THE COURT REPORTER: I'm sorry, Dr. Young. I can't

1		hear you.
2	A	DR. YOUNG: (INDISCERNIBLE)
3	Q	MR. FITCH: Dr. Young, can you just
4		THE COURT REPORTER: Sorry. Sorry. I can't hear
5		the witness.
6	Q	MR. FITCH: Yeah. You're kind of faint,
7		Dr. Young. Is there a way you can amplify your voice
8		either by getting closer to your microphone or using
9		something?
10	A	Does that help?
11		THE COURT REPORTER: It's garbled. Your sound is
12		garbled.
13	Q	MR. FITCH: Okay. Can we try again?
14	A	DR. YOUNG: Okay. Sure. I am president
15		of Jim Young Atmospheric Services Inc. which I created
16		in March 2005.
17		Is that working better?
18	Q	Yes.
19	A	Okay. After 33 years in the private sector in the
20		private sector, I was the vice president and senior air
21		quality expert for SENES Consultants Limited, in
22		Richmond Hill, Ontario. I was also in the federal
23		government for a number of years, and the last position
24		was acting director acting director general
25		research, and that was for environment services,
26		Environment Canada.

1		THE COURT REPORTER: I'm sorry. I'm sorry.
2	Q	MR. FITCH: Sorry. Dr. Young, you're
3		going to have to slow down. Your connection, it's a
4		bit wonky, and so unless you speak slowly, it's very
5		difficult to hear.
6	A	DR. YOUNG: All right. Thank you.
7	Q	Yeah.
8	А	So I'll just go back.
9		In the federal government, I was acting director
10		general of research in the atmospheric environment
11		service of Environment Canada, and I was the chief of
12		the air quality section for Environment New Brunswick.
13		I continue to enjoy working in air quality and
14		weather services for both national and international
15		clients, although I am trying to retire.
16		I have had a number of high-profile clients,
17		including SENES Consultants, for about a 15-year
18		period sorry, 25-year period; RWDI since 2015, where
19		I'm their senior consultant following their
20		weather-related services; and for Arcadis Canada as an
21		air quality and weather advisor on legal cases.
22		In 2011 I was project manager for a state of the
23		science study for the city of Toronto which developed
24		climate statistics over the period 2040 to 2049 which
25		included statistics relevant to future wind
26		climatologies.

I was a Canadian technical secretary for the acid 1 2 rain program from 1979 to 1982 and was the coauthor of 3 a targeted acid rain strategy which Canada adopted in 4 1983. From January 1985 to December of 1996, I was the 5 6 Canadian co-chairman of the International Air Quality 7 Advisory Board of the International Joint Commission providing advice and guidance to the Commission on 8 transboundary air emissions. 9 10 I'm the past president of the Air and Waste 11 Management Association in Ontario and past president of 12 the Canadian Meteorological Motion Graphics Society, 13 and I am a professional engineer in the province of 14 Ontario. I have over 45 years of experience in applied 15 atmospheric research, I have served on international 16 17 scientific panels, and I am the author of over 100 18 scientifically (INDISCERNIBLE) papers and articles. 19 THE COURT REPORTER: I'm sorry. Could you repeat 20 that last part? "Scientific papers"? 21 Scientific papers and articles. Α 22 I have liaised with governments, other nations, 23 organizations, industry, universities, and the private 24 I have published a weekly blog on "Our Common Atmosphere" and a column for over five years in the 25 26 Kincardine Independent.

1		In respect to winds	the impacts of wind speed
2		on dust, I have presented	d a paper on verification of
3		open source fugitive emi	ssion estimates.
4		THE COURT REPORTER:	I'm sorry. I'm sorry. I'm
5		having a hard time heari	ng you.
6	A	DR. YOUNG: I	'm sorry. I I don't know
7		quite what to do here.	I've got a headset on. It's
8		supposed to be state of	the art.
9		MS. ARRUDA:	Mr. Young, it's Elaine Arruda,
10		the hearing coordinator.	I'm wondering beside the
11		microphone icon in Zoom,	there's a little up arrow.
12		I'm wondering if you can	click that and go into your
13		audio settings.	
14		DR. YOUNG:	Sure.
15		MS. ARRUDA:	And check the input volume for
16		your microphone, and if	it's low, try to turn that up.
17		DR. YOUNG:	Where do I start? "Audio
18		Settings"?	
19		MS. ARRUDA:	Yeah. And then the second
20		sort of on the right-	hand side, there should be
21		something "microphone",	and then there should be "input
22		level volume" and a litt	le slider there.
23		DR. YOUNG:	"Input volume", yes, there is.
24		I see it.	
25		MS. ARRUDA:	See if you can turn that up.
26		DR. YOUNG:	No, it appears I cannot.

1	MS. ARRUDA:	Oh, okay. Can you tell me
2	what your mic says? Is	it is the side
3	DR. YOUNG:	It says, "microphone array,
4	Realtek high-definition	audio", and it's giving me an
5	input level which is abo	ut halfway up, and the volume
б	is about halfway up.	
7	MS. ARRUDA:	Yeah. I'm just wondering, you
8	can't turn you can't	slide that little slider
9	DR. YOUNG:	No.
10	MS. ARRUDA:	on the volume?
11	DR. YOUNG:	It doesn't seem to want to
12	slide at all.	
13	MS. ARRUDA:	Okay.
14	MR. AGUDELO:	Dr. Young, Elaine, this is
15	Cesar Agudelo speaking.	Dr. Young, if you click on
16	"automatic" there's a	box there that says
17	"automatically adjust my	volume".
18	DR. YOUNG:	Yes.
19	MR. AGUDELO:	If you unclick that so it's
20	not checked	
21	DR. YOUNG:	There we go.
22	MS. ARRUDA:	Okay. You should be able to
23	turn it up.	
24	DR. YOUNG:	Is that better now?
25	MS. ARRUDA:	Maybe talk a bit more.
26	DR. YOUNG:	Want it on (INDISCERNIBLE).

1		MS. ARRUDA: Still very muffled.
2	Q	MR. FITCH: It's a bit muffled, yeah.
3		Well, I don't know what we can do. Why don't we carry
4		on, and, Dr. Young, you're just going to have to
5		concentrate on speaking slowly and enunciating to the
6		best of your ability.
7		I think you were just telling us about a paper
8		that you presented related to the impacts of wind speed
9		on dust.
10	A	Correct. That was in 1978 to the APCA meeting, and it
11		was called "Verification of Open Source Fugitive
12		Emission Estimates".
13		In 1980 I presented a paper on climatological wind
14		speed profile relationships in Canada to the 15 Air
15		Congress.
16		In 1982 I prepared an NRC paper on the effects of
17		aerosols on atmospheric processes.
18	Q	I take it NRC is the National Research Council?
19	A	Yes, it is.
20		I have advised pit and quarry clients on dust
21		control during windy conditions.
22		I have advised on the potential for and impacts of
23		wind energy development
24		THE COURT REPORTER: I'm sorry. I'm sorry. I
25		missed. "Potential for"?
26	A	DR. YOUNG: I have advised on the
1		

1		potential for and the impacts of wind energy
2		development.
3		And most recently I've undertaken many forensic
4		meteorology studies and examined the effects on
5		atmospheric parameters on weather-related accidents.
6	Q	MR. FITCH: Thank you, Dr. Young. I'm
7		sorry it turned into such a trial.
8		Will you now please provide the Hearing Panel with
9		a summary of your written evidence?
10	A	Thank you, Mr. Fitch.
11		Good morning, Mr. Chairman and Panel Members.
12		My examination looked at whether or not high wind
13		speeds such as are seen in Chinooks have been examined
14		correctly in the air quality assessment done for this
15		project.
16		My assessment is that there was no serious
17		consideration of high wind speeds with respect to dust.
18		I have based this on the proponent's air quality
19		assessment report and its replies to a number of
20		information requests.
21		My first concern is that there seems to be a lack
22		of understanding in the air quality assessment about
23		the difference between gas dispersion and dust
24		dispersion.
25		In Addendum Number 11, reference is made to the
26		general equation 'C' is equal to 'Q' over 'U' for
I		

dispersion which applies to both gases and dust. 1 2 So before you go on, Dr. Young. 3 MR. FITCH: Zoom Host, can we pull up Addendum 11, which should be Registry Document 313, and 4 go to PDF page 10, towards --5 6 MR. FITCH: So I'm looking at the bottom 0 7 of the paragraph there, Dr. Young, and this is a preamble to an IR from the JRP, and it talks about --8 9 if we -- I think it's the second or third sentence, it 10 states: (as read) 11 Benga again referenced the inverse 12 relationship of 'C' equals 'Q' over 'U' --13 MR. FITCH: Yeah, that's good. Thank No. 14 you. 15 MR. FITCH: (as read) 0 -- which suggests that the concentration of 16 17 dust will decrease with increased wind speed. Sir, is that the reference you mean? 18 Yes, it is. 19 DR. YOUNG: Α 20 Okay. Please proceed. O 21 This equation basically says that concentration of a Α 22 pollutant at any point downwind is a function of the emission rate, 'Q', and the wind speed, 'U'. 23 24 For gases, the emission rate is a measure or an 25 estimated quantity based on conservation of mass 26 principles and is independent of wind speed.

- means that for gases, an increase in wind speed would result in a decrease in concentration downwind.
- For windblown dust particles, emission rate is a
- 4 function of wind speeds. In general, erosion of dust
- is proportional to wind speed to the third power.
- 6 THE COURT REPORTER: I'm sorry. "A third power"?
- 7 A DR. YOUNG: Yes.
- If you substitute 'UQ' for 'Q' in the equation,
- 9 you will find that 'C' is then proportional to wind
- 10 speed squared. That is the concentration of dust at
- any point downwind increases through the square of the
- 12 wind speed.
- Put simply, an increase in wind speed will result
- in an increase in dust, whereas -- an increase in dust
- emissions, whereas the air quality assessment in
- 16 Benga's own reply that was shown on the screen suggests
- 17 the opposite.
- 18 O Thank you.
- 19 A My second concern is the appropriateness of the
- 20 equations used by the USEPA and others to estimate dust
- emissions.
- 22 Q Sir, before you carry on.
- 23 MR. FITCH: Zoom Host, can we pull up
- 24 Registry Document 42, Consultant Report 1A, at PDF
- 25 page 193.
- 26 O MR. FITCH: Dr. Young, this is the -- I

1 take it this is the equation you just referred to? 2 Yes, it is. Α DR. YOUNG: 3 All right. Carry on, please. 0 4 This equation works well for estimating emissions over Α 5 a longer period, like a year, that can underestimate 6 dust emissions for an hour or a day because it -- based 7 on the frequency of winds above a threshold speed rather than the actual wind speed. 8 9 This approach does not recognize an increase in 10 dust amounts to higher speeds, so the fact that the 11 proponent has used 'F' equal to 100 percent will only 12 be conservative for total dust generated over a year, 13 but the method does not give an indication of just how 14 much dust is generated for any shorter period. 15 Okay. Thank you, sir. 0 MR. FITCH: 16 Now, Zoom Host, if we can go 17 to the next page in the same document, so that should be PDF page 194, and we're looking for Table A4-4. 18 19 There we go. 20 MR. FITCH: Sorry. Go ahead, sir. O 21 DR. YOUNG: Looking at this work, I -- I Α 22 used the Beaver Mines' hourly observing station data to try to reproduce what the proponent had done. 23 24 able to approximately match the maximum daily PM 10 25 emission amounts shown in Table A4-4 of the air quality So that would be in this table, the second row 26

report.

1		from the bottom, be 527 kilograms on a 24-hour day.
2		I estimated the maximum daily emissions to be
3		495 kilograms versus the proponent's prediction of
4		527 per PM 10.
5		What this shows for PM 10 is just that my analysis
6		of emissions approximately matches their emission
7		numbers for the worst day based on the last 12 months
8		of (AUDIO FEED LOST).
9		THE COURT REPORTER: I'm sorry. You have to
10		after you have to repeat that, after "worst day".
11	A	DR. YOUNG: Matches their emission numbers
12		for the worst day based on the last 12 months of
13		observed data quoted from Beaver Mines.
14		But what my analysis also shows is that the daily
15		maximum emissions can range from as high as 723 to as
16		low as 231 kilograms in a single 12-month period.
17		Emissions of 723 kilograms per day could mean at least
18		a 37 percent increase in concentration of dust on the
19		worst day above what the proponent has calculated.
20		This suggests to me that the proponent has not looked
21		at the worst case.
22		MR. FITCH: Zoom Host, can we go back to
23		PDF 193? So just the preceding page. And that
24		that's good. We want to look at the bottom paragraph.
25		There we go.
26	Q	MR. FITCH: Thank you, Dr. Young. Carry
I		

	1		on.
	2 <i>P</i>	A	DR. YOUNG: My calculations are based on
	3		the proponent's estimate of open disturbed areas
	4		totalling 35 hectares. I listened to Mr. Rudolph's
	5		discussion of this issue during cross-examination and
	6		would say that he did not make a strong argument for
	7		the figure of 35 hectares being a reasonable worst-case
	8		scenario. This is an important parameter because if it
	9		is an error, it has a direct relationship to emissions.
1	0		If it is too small by saying "50 percent", then
1	1		emissions would increase by 50 percent.
1	2 Ç	2	Thank you, sir.
1	3		MR. FITCH: Now, Zoom Host, can we please
1	4		pull up Exhibit 911.
1	5 Ç	2	MR. FITCH: So this is the Ono and Weaver
1	6		paper on dust emissions from Owens Lake. Dr. Young, do
1	7		you want to carry on?
1	8 <i>P</i>	Ą	Yes. This paper reinforces my belief that the USEPA
1	9		equation, Number 1, does not tell us what emissions
2	0		will be on the actual windiest day; and, Number 2, it
2	1		under-predicts emissions at high wind speeds.
2	2		Therefore, the use of the standard equation in this
2	3		case will underestimate emissions during a Chinook
2	4		wind.

- 25 Q Thank you.
- ${\tt 26} \quad {\tt A} \quad {\tt My} \ {\tt third} \ {\tt concern} \ {\tt is} \ {\tt the} \ {\tt data} \ {\tt presented} \ {\tt from} \ {\tt the} \ {\tt two}$

1		on-site monitoring stations.
2		MR. FITCH: Zoom Host, can we now go
3		to Registry Document 251, which should be the tenth
4		addendum, PDF page 24, and we're looking for
5		Table 1.5-2. There we go.
6	Q	MR. FITCH: Dr. Young.
7	А	DR. YOUNG: Thank you.
8		I have a couple of concerns with this data.
9		First, the proponent's measurements were only made at a
10		height of 2 metres, not the standard 10 metres. If you
11		look at the Beaver Mines data, which is at a standard
12		10-metre height, you will see wind gusts as high as
13		60 to 97 kilometres per hour over the past 12 months.
14		In addition, I note that monitoring from the
15		Environment Canada Crowsnest station just this month
16		shows maximum wind speeds of 91 and 97 kilometres per
17		hour on two different days, which leaves me concerned
18		about the representativeness of the on-site data.
19	Q	So, Dr. Young, just before you carry on.
20		MR. FITCH: Zoom Host, can we call up
21		Exhibit 914, please.
22	Q	MR. FITCH: So, Dr. Young, you just
23		mentioned that monitoring from the Environment Canada
24		Crowsnest station just this month shows maximum wind
25		speeds of 91 and 97 kilometres per hour on two days. I
26		take it you're referring to the data that's contained
I		

- in this document, which is Exhibit 914?
- 2 A Yes, I am. I'm looking at the column on the right-hand
- 3 side, and I can't quite see it because it ...
- 4 Move to the right a little bit, please. Okay.
- Well, underneath all the individual, you know,
- 6 pictures of people there are the numbers that I was
- 7 referring to.
- 8 Q Right. So we see, for November 3rd, a maximum gust
- 9 speed of 91 kilometres per hour; correct?
- 10 A I can't see that on my screen, sir. Sorry.
- 11 Q Okay. Anyways, it's in evidence. That's fine.
- 12 A Okay. I've got it.
- 13 O Yeah. And then on November 5th, 97 kilometres per
- 14 hour; correct?
- 15 A Yeah.
- 16 Q Okay. Can you carry on, then?
- 17 A My -- my second concern about the on-site monitoring is
- that a typical mon -- meteorological representation of
- 19 a site requires a minimum of 75 percent of the
- 20 available hours in each season to be gathered to ensure
- 21 the data is representative of the site.
- Here we have only two to three months of data from
- June through October in total, and it's only from one
- 24 season. We know from the Beaver Mines site that the
- 25 peak winds occur in the period November through
- 26 January, so even the peak period has not been assessed

- on the proponent's site.
- While the proponent says that the monitoring data
- 3 was not used in the model assessment, it has been used
- 4 to make conclusions to this Panel about the absence of
- 5 high winds -- high wind speeds on the site.
- 6 Q All right.
- 7 MR. FITCH: And, Zoom Host, can we go back
- 8 to Registry Document 251, so that's Addendum 10, and go
- 9 to PDF page 19.
- 10 Q MR. FITCH: So, Dr. Young, I see reference
- there to Benga noting that one-hour wind speeds in the
- range of 89 to 102 kilometres per hour have not been
- recorded at the four stations during the period
- examined. So that's your concern, that Benga is
- 15 stating that high wind speeds have not been recorded
- 16 on-site?
- 17 A DR. YOUNG: That's correct.
- 18 Q Okay. Carry on, please.
- 19 A So as you can see, Benga has reported that high wind
- 20 speeds have not been recorded on-site, which is
- 21 certainly at odds with the other observations in the
- 22 same area, as well as the Chinook climatology in this
- area which suggests 20 to 35 days of Chinook winds each
- 24 year.
- 25 Q Thank you, sir.
- 26 A In summary, my opinion is that high wind speeds

1		primarily due to Chinooks have not been considered
2		carefully enough and will almost certainly result in
3		a higher-than-predicted dust concentrations,
4		37 percent or greater, downwind of the proposed
5		facility.
6	Q	Thank you, Dr. Young. And I appreciate you taking care
7		to speak slowly and clearly.
8		MR. FITCH: So that concludes Dr. Young's
9		direct evidence, Mr. Chair.
10		I'm now going to turn to the other member of our
11		witness panel this morning, which is Dr. John Dennis.
12		Dr. Dennis, are you with us? John? I know he
13		was I see him. There he is.
14		DR. DENNIS: Can you repeat that, please.
15		I was just I just stepped away from my office.
16		MR. FITCH: No. That's okay.
17		So, Mr. Chair, the second member of the LLG's
18		witness panel this morning is Dr. John Dennis, who you
19		can now see on the screen.
20		Madam Court Reporter, I ask that Dr. Dennis be
21		either sworn or affirmed.
22		JOHN DENNIS, Affirmed
23	Q	MR. FITCH: Thank you, Dr. Dennis.
24		Can you confirm that you were retained by the
25		Livingstone Landowners Group to review the human health
26		risk assessment done for the Grassy Mountain

- 1 Coal Project?
- 2 A DR. DENNIS: Yes.
- 3 Q And, sir, can you confirm that you prepared a report
- 4 titled "Review of Human Health Risk Assessment,
- 5 Benga Mining, Grassy Mountain Coal Project"?
- 6 A Yes.
- 7 MR. FITCH: And, Mr. Chair, I note for
- 8 the record that the report is found in Registry
- 9 Document 552, starting at PDF page 64.
- 10 Q MR. FITCH: Dr. Dennis, can you confirm
- that your report was prepared by you or under your
- 12 direction?
- 13 A Yes, prepared by me.
- 14 Q Thank you.
- 15 And do you have any corrections or amendments you
- 16 would like to make to your report?
- 17 A I don't.
- 18 Q Okay. Do you report your -- sorry. Do you adopt your
- 19 report as your evidence in this proceeding?
- 20 A I do.
- 21 Q Thank you.
- 22 Sir, can you confirm that you acknowledge as an
- 23 independent expert witness that you are under a duty to
- 24 give opinion evidence that is fair, objective, and
- 25 nonpartisan?
- 26 A I do.

1 Thank you. 0 2 Yes. 3 MR. FITCH: Mr. Chair, Dr. Dennis's curriculum vitae is attached as Appendix A to his 4 report, Registry Document 552, starting at PDF page 80. 5 6 MR. FITCH: But for the purposes of today, 0 7 Dr. Dennis, I will ask you simply to provide a brief overview of your credentials. 8 9 Α Thank you, Mr. Fitch. 10 And before I begin, I hope I don't have the same 11 technical issues some of the other witnesses have had. 12 I do have some technology to help me speak slower, and 13 this was Mr. Fitch's idea, so there's a reminder on my If that fails, I have another piece of 14 computer. 15 support to talk even slower. But if I don't speak too -- slow enough and 16 17 clearly enough, and I appreciate the -- the pains the court reporter has, please interrupt me, and I will try 18 and do better. 19 20 My basic background from my education is a 21 bachelor in biochemistry. I took that in Canada. 22 then, when I was a young man, moved to England and did a master's in industrial hygiene, followed by a PhD in 23 medicine at the University of Newcastle's medical 24 25 school.

I stayed in England for much of my working career.

26

1		For 20 years I was a professor. I taught pollution and
2		health risk assessment; I supervised PhD students;
3		taught master's and bachelor's programs in pollution
4		and health, mainly occupational health, so the the
5		exposure in the workplace and the diseases of the
6		workplace and risk assessment there.
7		And and while I was there, I did consulting
8		work or advisory work to the World Health Organization,
9		to the United Nations, to the European Respiratory
10		Society. These were fairly multi-year projects that I
11		was involved with. I was exposed to a variety of
12		pollution and health issues. I was one of the members
13		of the British (AUDIO FEED LOST).
14		THE COURT REPORTER: I'm sorry. You broke up
15		sorry. You broke up there. I'm sorry. You broke up.
16		"One of the members of"?
17	A	DR. DENNIS: Oh, the British Occupational
18		Hygiene Society which is a UK body that governs health
19		and safety, occupational hygiene in UK industry.
20		There we were involved in advising on what
21		exposure standards needed to be revised, what
22		information should go into that revision, and sort of
23		we talking about risk assessment at a very high,
24		national level. These that that work the work
25		in my university teaching and doing research, I think,
26		gave me a good background in pollution and health risk
Ī		

1 assessment. And then after 20 years, I moved to Canada. 2 3 settled in Alberta. I set up a consultancy company. needed to get my -- my -- I wanted to raise my kids in 4 5 Canada; that's why we moved away from the UK. 6 And for the last 15 years, I have been running a 7 biotech company with an aerosol -- aerosol aspect in respiratory disease, but much of my time has been 8 involved in doing pollution and health risk assessment, 9 10 environmental impact assessment reviews in the oil 11 sands, from -- for power lines, for refineries. 12 fairly familiar with the Canadian and the Albertan environmental legislation and practices. 13 And so I welcome the opportunity to be here and speaking to you. 14 15 MR. FITCH: Thank you, Dr. Dennis. 0 16 Now, you have prepared a PowerPoint presentation 17 to guide your testimony this morning. Zoom Host, that's Exhibit 935. MR. FITCH: 18 19 If we can call that up. 20 MR. FITCH: All right. Dr. Dennis, do you Q want to start your presentation? 21 22 Yeah, please. Α 23 This is a -- really just a -- the -- obviously the 24 title -- the -- the -- the title page. going to be looking at the environmental impact 25 26 Specifically I'm looking at the human assessment.

- 1 health risk assessment within it.
- 2 Next slide, please.
- We have been listening to the hearing, and I've
- 4 been sort of butterflying into the hearing proceedings
- 5 over the course of the last weeks. I know and
- 6 everybody knows that the EIA covers many topics.
- 7 I'm -- I'm really only looking at the risks to human
- 8 health and the human health assessment part of it,
- 9 though I've skimmed on the air quality reports and some
- 10 other aspects of the EIA, but I'm focusing on human
- 11 health.
- 12 I reviewed the human health risk assessment -- the
- 13 HHRA -- sections of the environmental impact
- 14 assessment, as well as published literature, which
- isn't included in the EIA, which I consider to be
- 16 highly relevant to the discussion on potential risks
- 17 from Grassy Mountain.
- And my main concern, which I'll be coming to
- 19 towards the end of this short presentation, is that the
- 20 project EIA does not address a large body of literature
- 21 which has reported health issues associated with
- 22 mountaintop mining practices, and this is of existing
- 23 epidemiology that really should be in front of the
- 24 Panel and should be considered as part of the process.
- Next slide, please.
- 26 This is a -- a slide of the processes that the --

Benga has used to estimate the risk to human health. 1 2 The schematic and -- and -- to the right is the -- I 3 took that from the EIA. I think everybody has seen it 4 in the EIA. All the arrows show the transmission paths 5 for pollutants. 6 So starting at the left, you have a mine. The 7 mine emits chemicals of concern to the air, to the water, to the soil. It deposits in the air and the 8 9 water and the -- it deposits in the -- in the water and 10 the soil. It may go into biota. It may be transformed 11 during the practices. It may move to receptor sites, 12 and humans and animals are exposed to the pollutants. 13 That's how the emissions are modelled, 14 mathematically modelled. They're identified going to the bullet points on the left-hand side of the screen. 15 The -- the nature and concentration of emissions are 16 17 quesstimated based on prior experience and known 18 engineering and -- and chemical process. mathematically modelled to look at the dispersion, the 19 20 dilution of these pollutants as they move across the 21 landscape. They are estimated as to what kind of 22 concentrations will be deposited at receptor sites and community and recreational areas in and around the --23 24 the region, and (AUDIO FEED LOST) --25 THE COURT REPORTER: I'm sorry. You cut out. 26 0 DR. DENNIS: -- humans are expected --

1		THE COURT REPORTER: I'm sorry. You cut out.
2	Q	MR. FITCH: Dr. Dennis, you sort of cut
3		out as you were addressing the fourth bullet there.
4	А	DR. DENNIS: The modelled numbers are
5		compared to estimated safe doses that are established
6		by regulatory bodies, safe exposure limits. If the
7		model value is lower than the safe exposure limit,
8		there's no risk; if it's higher, there's risk; if it's
9		the same, it's red-flagged.
10		So in the risk assessment process of hazard
11		quotient I heard Health Canada mention this
12		yesterday hazard quotients is 1; it's right on the
13		edge of being an issue. I heard the preference for .2.
14		But when you have a a level that's near the a
15		predicted level that's near the established exposure
16		level, then that flags up the need for further
17		refinement of the model, some reevaluation of
18		assumptions that might underlie the model, perhaps the
19		removal of some conservative parts of those assumptions
20		to see if the it's reasonable to get the estimated
21		number nearer the the accepted exposure value.
22		Next slide, please.
23		The discussions that have gone on in the hearing
24		have talked about some of the hazard quotients and
25		cancer risks that have been derived from the project.
26		I don't want to spend too much time talking about the
Ī		

- 1 detailed results of the human health risk assessment
- 2 other than to say it's a fairly linear and standard
- 3 approach to doing a human health risk assessment using
- 4 this process.
- 5 But the basic conclusion of the risk assessment
- 6 from Benga is that the Grassy Mountain Coal Project
- 7 will have no impact, no significant health impact, or
- 8 it's not expected to have any significant health impact
- 9 to surrounding community members, to people living
- 10 around -- in the region of the mine.
- 11 And there are a number of areas that this is
- 12 expressed within the report, but this is one of the
- 13 cut-and-pastes from the EIA, from the human health risk
- 14 assessment, which I think has been tabled and discussed
- 15 before. A conclusion of no impact.
- 16 Next slide, please.
- 17 I have a -- problems; I have concerns with the
- 18 conclusion of no significant health impact based on
- 19 what I know about the complexities of how to assess
- 20 risk and linearity and limitations of the report.
- 21 There are many uncertainties and complexities inherent
- 22 in human health risk assessment. The EIA relies solely
- 23 on modelled data. That's a very -- a very narrow scope
- 24 of inquiry. The project does not address real-world
- 25 health studies which have reported health impacts
- 26 associated with similar mining operations. And I want

- 1 to bring the Panel's attention to those and share my
- 2 opinion of why they're relevant.
- 3 Next slide, please.
- 4 So just to address those three points that I
- 5 had -- I had introduced. The complexity I see of the
- 6 multi-step human health risk assessment process,
- 7 there's many steps involved. Each of them involves
- 8 assumptions, guesstimates. Just going through these
- 9 list of bullet points on the slide, we need to identify
- 10 the chemical emissions and -- and all the chemical
- 11 emissions, and -- and we may have a good idea of what
- 12 they are. Sometimes we don't, but Benga seems to have
- 13 a pretty good handle on that.
- 14 We need to -- to estimate the emission
- 15 concentrations to air, land, and water. So how much of
- 16 this material is coming out into air, land, and water?
- 17 And in terms of atmospheric pollution, what particle
- 18 size is it? Particle size is very important in terms
- of how it's transported in the atmosphere and how it's
- 20 received by the human host and -- and in the
- 21 environment.
- 22 The estimation of dilution rates as this -- these
- 23 various pollutants move across the landscape. We just
- 24 heard from Mr. Young -- Dr. Young who talked about the
- 25 complexity of mathematically modelling high winds
- 26 situations. And I've driven through the Crowsnest

- 1 Pass, and I know how windy it can get and how extreme
- 2 the weather can be. And that might confound the
- application of most of the air modelling systems
- 4 that -- et cetera, that -- that I've been associated
- 5 with and -- and know a little bit about.
- 6 We need to estimate the amount of exposure, the
- 7 dose, the how much -- how -- what volume of material
- 8 (AUDIO FEED LOST).
- 9 THE COURT REPORTER: I'm sorry. You're cutting
- 10 out.
- 11 A DR. DENNIS: -- it entailed --
- 12 THE COURT REPORTER: I'm sorry. I'm sorry.
- 13 Q MR. FITCH: Dr. Young [sic], you cut out
- 14 during your discussion about dose.
- 15 A DR. DENNIS: Thank you.
- And it's -- it's Dennis. Don't worry, Gavin.
- 17 Q Oh, sorry, Dr. Dennis. Yeah.
- 18 A Yeah.
- 19 Q My apologies.
- 20 A No problem.
- 21 We need to estimate the dose of exposure. Not as
- 22 straightforward as the human health risk assessment
- 23 might have you believe. It's complicated. Many
- factors associating it. It's a multi-step process.
- Once we've got that dose, we need to compare it to a
- safe level.

- 1 So let's talk about the safe -- safe level. How
- 2 do we derive safe levels to chemicals? The most
- 3 powerful is through epidemiological studies where human
- 4 beings have been exposed to that pollutant and health
- 5 effect is being seen. We often find those in the
- 6 occupational setting. Workers in the occupational
- 7 setting in particular industries are often exposed to
- 8 fairly high levels of particular pollutants, and
- 9 they're monitored by the health and safety processes
- 10 within industry for compensation for other reasons. So
- 11 we often derive our epidemiological human exposure
- 12 studies from the work environment.
- 13 When we don't have human data, we have to rely on
- 14 animal studies to guess what the toxicity is, to guess
- 15 what that chemical -- how that might relate to human
- 16 beings. And -- and sometimes there's no published
- 17 information on particular chemicals. I've been
- 18 involved with some of those in England. And when
- 19 there's no established literature, you really have to
- 20 quess. You -- sometimes if it's, say, a weird looking
- 21 aldehyde, you -- you start using similar exposure
- 22 limits to other aldehydes, hoping that there's nothing
- 23 else strange going on, so you use what we call a
- 24 "surrogate chemical".
- 25 We heard from Health Canada, and I've been aware
- 26 of this for some years, that our standards for air

- 1 quality are not necessarily protective of health.
- 2 They're -- they're guides to -- to -- to be ceiling
- 3 exposures to what -- that we shouldn't be exposed past
- 4 that. They're not "pollute up to" standards. Nobody
- 5 is meant to be exposed to all those different chemicals
- 6 up to the standard. I think you'd have a very
- 7 individual -- very ill individual if -- if they were.
- 8 They're -- they're guides.
- 9 Many of the exposure limits that we have, we can
- 10 talk about them as being safe limits, but they're
- 11 really -- many of them are intended to be, Well, we --
- 12 we really want to keep the exposures as low as we can
- 13 because we still have residual risk.
- It gets really complicated when you're not just
- 15 looking at exposure to one chemical but you're looking
- 16 at exposure to two chemicals or three chemicals or five
- 17 chemicals or ten chemicals, and invariably we are. It
- 18 gets very complicated when we're looking at healthy
- 19 people and extremely complicated when we're looking at
- 20 ill people, people with respiratory problems. I think
- 21 of 15 percent of the kids in -- in Alberta have asthma,
- 22 about 8 percent of adults have asthma. They're
- 23 particularly sensitive to a whole range of pollutants,
- 24 and there are many other -- other illnesses that affect
- 25 somebody's sensitivity to pollution. "Sensitivity" is
- 26 the wrong word. Vulnerability.

- 1 There's potential synergism between chemicals. So
- 2 if you have one chemical that's a respiratory irritant
- 3 and another chemical that's a respiratory irritant, if
- 4 you were exposed to both often, you might expect a -- a
- 5 doubling of effect if the -- both of the units are
- 6 exposure of 1; 1 plus 1 is 2.
- 7 Synergism is when one chemical, perhaps something
- 8 that affects the functioning of the liver, is --
- 9 presents to a human being and then another chemical
- 10 comes along -- around, which normally the liver
- 11 would -- would detoxify, but perhaps the liver's
- 12 compromised, so you have an exposure to that chemical
- 13 where 1 plus 1 is 3, and that's synergism. And that is
- 14 not taken to [sic] account in the -- Benga's
- 15 submission.
- 16 And on the -- on the back of all of
- 17 that, we have ever-evolving understanding of the health
- 18 impacts of pollution on healthy and compromised people.
- 19 It's not like our exposure standards are staying still.
- 20 They're continually being revised and reviewed as new
- 21 literature comes up, as new understanding comes up, as
- 22 new animal data comes forward, as a new understanding
- 23 of exposure to mixtures comes forward. It's
- 24 complicated.
- We've seen in the past sort of paradigm shifts in
- 26 our understanding. PCBs, they weren't a problem in the

1		'60s. They were a real problem by the time the '70s
2		rolled up as evidence amounts to what the environmental
3		impact is, what the health impact on health is. It
4		takes a while for industry and government and the
5		establishment to move past (AUDIO FEED LOST).
6		THE COURT REPORTER: I'm sorry. You are cutting
7		out.
8	A	DR. DENNIS: to the next. You see it in
9		the PCBs I mentioned; you've seen it with asbestos.
10		Sorry.
11		THE COURT REPORTER: I'm sorry. You cut out again.
12	А	DR. DENNIS: We've seen it with PCBs,
13		asbestos, lead, benzine, hexavalent chromium. The
14		Erin Brockovich story that turned into a movie, became
15		quite famous, a a soluble form of of chromium.
16		There there that's an interesting example because
17		chromium as a metal has various oxidative states. So
18		as a pure metal, not terribly toxic. As a soluble
19		metal in its as Chromium 6, very toxic;
20		carcinogenic. As Chromium 3, not very toxic.
21		We worked with welders and my PhD was on
22		welders and asthma where we saw welders who had
23		become sensitized to chromium and stainless steel
24		welding constrict the respiratory tract by turning and
25		touching, with wet hands, a stainless steel tap. So
26		they become very, very sensitive to to certain
1		

- 1 pollutants. I'm digressing.
- 2 The point is: Paradigm shifts occur. It takes a
- 3 while for the establishment to absorb the new
- 4 understanding and move past that. Human health risk
- 5 assessment is a complex process.
- 6 Next slide, please.
- 7 So Benga's human health risk assessment is narrow
- 8 in scope. It relies solely on mathematical modelling,
- 9 comparing some guesstimated values to published data.
- 10 Other bodies use a more holistic, more
- 11 sophisticated, a more broad interpretation of health,
- 12 and a more broad interpretation of how we should impact
- 13 potential health from projects. It -- that process is
- often called "health impact assessment", "human health
- 15 impact assessment", or "HIA". Health Canada supports
- 16 that. The World Health Organization supports that.
- 17 The USCDC and EPA support that process.
- 18 And in this process, you don't just rely on
- 19 modelled data, but you certainly want to see that model
- 20 data because it's a really good first pass at what
- 21 pollutants might become a problem, but you also want to
- 22 look at what other -- other information you've got
- 23 available. And the most powerful information we can
- 24 have available are assessments of the direct measures
- 25 of health.
- Is there -- if you've got an exposed human

- 1 population, has there been an increase in cancer
- 2 incidents? Has there been increase in any other toxic
- 3 aspect or illnesses in the community? As well as
- 4 indirect measures of health. Do we have -- can we
- 5 assess what blood concentrations are or changes in
- 6 physiology of human tissues? We want to use whatever
- 7 information we have available to feed into the
- 8 understanding of what the impacts might be. We don't
- 9 want to rely on one narrow scope of assessment.
- 10 Next slide, please.
- 11 We have that kind of information available. It
- 12 wasn't addressed in the human health risk assessment of
- 13 Benga's EIA. It wasn't addressed anywhere else in the
- 14 EIA, to my knowledge. But in the northeast United
- 15 States of America, there is a mountain chain, the
- 16 Appalachian Mountains. It has a -- similar, I think,
- 17 coal seams and certainly mining operations that we've
- 18 seen proposed for Grassy Mountain. We've had
- 19 mountaintop removal coal mining going on since the
- 20 1960s. It accelerated from the 1990s to present. It's
- 21 still going on. There's a very large population base,
- 22 a lot of mines. And there's been many health studies
- 23 associating living near, working in, being exposed to
- those mining operations with human health impacts.
- Next slide.
- 26 There are the -- to my knowledge, around 30-plus

studies which have been published reporting health 1 2 problems in these areas, and this is a chronological list of some of them. I don't want to go into any 3 4 detail on any one of these papers. I can if people 5 would like to. But perhaps starting in 2007 and -- and 6 the -- the author of this report, Michael Hendryx, is 7 one of the main authors in -- one of the main authors of this literature list and one of the -- one of the 8 9 go-to gurus for health impact. He's a statistics 10 epidemiologist, a professor in the States. 11 They looked at hospitalization patterns and 12 published early indications that there might be an 13 They looked at health indicators of residents, 14 third bullet point. Looked at mortality rates, how --15 what age do you die? How often do people die at 16 certain age groups? And Number 4, looked at lung 17 cancer (AUDIO FEED LOST). THE COURT REPORTER: I'm sorry. 18 You're cutting 19 I'm sorry. out. 20 DR. DENNIS: Thank you. Α I will look at my Post-it even harder. 21 22 MR. FITCH: It's just, every now and 0 No. again, your audio goes a bit wonky. 23 24 So you were on the four -- you were just 25 mentioning lung cancer on that fourth point. 26 Α Yeah. Let me just do -- just one break. I just want

- 1 to open a door and try and get a stronger signal. I
- 2 did actually measure the strength of my signal this
- 3 morning, so I think I'm thinking -- sitting in the best
- 4 place, but if it cuts out again, I might move my
- 5 computer.
- 6 The -- the fourth paper addresses lung cancer
- 7 mortality; the fifth paper, heart and respiratory and
- 8 kidney disease. These are looking at the disease rate
- 9 in communities you would associate to being living near
- 10 coal mining operations versus, perhaps, the state
- 11 average or communities that are living distant from
- 12 coal mining operations. Mortality, heart disease,
- 13 cancer mortality, and health and quality of life, human
- 14 cancer.
- 15 Next study -- next slide.
- 16 I'm going to show you some -- one single graph
- 17 that summarizes one of the papers on this patient --
- 18 Paper Number 13 on fetal birth weight and problems
- 19 with -- with neonates. Health and quality of life,
- 20 more birth defects, chronic cardiovascular disease,
- 21 cancer rates, cancer mortality, adult tooth loss in
- 22 Paper 21, drinking water violations.
- 23 And the next slide, please.
- Depression, mental issues, respiratory symptoms.
- 25 "COPD" is chronic obstructive pulmonary disease.
- 26 Tumour formation. I'm just going through my

- 1 highlighted yellow flags. Blood inflammation, public
- 2 health impacts, and syndromes, multiple in -- in --
- 3 in -- illness syndromes. When the medical community
- 4 doesn't really know what something is, they call it a
- 5 "syndrome". It's a real health issue, but they don't
- 6 really have any other handle, so they call it a
- 7 "syndrome".
- 8 I want to say that these are -- these 30-odd
- 9 papers here -- I was an academic. I've spent quite a
- 10 lot of research money in my decades as being an
- 11 academic. It's hard to attract research funding. I
- 12 found it very hard to attract research funding. I
- 13 probably got -- for every three or four grants I wrote,
- 14 I got perhaps one, and then the reviewers would hassle
- 15 me about some of the expenditure or some of its design.
- 16 Obtaining money to do research is a peer-reviewed
- 17 process. It's not easy. You are competing against
- 18 your colleagues. Grant funders don't want to give away
- 19 money for studies that are unmerited, that will -- will
- 20 misguide the scientific community.
- 21 Once you've got the funding, you spend the money
- 22 with colleagues, with a number of research students and
- 23 other -- and other clinicians or epidemiologists,
- 24 whoever is involved, and you seek to execute the
- 25 objectives of the study. Then you publish the study,
- 26 and you publish the study -- you are not publish -- if

- 1 you are not publishing studies in peer-reviewed
- 2 journals where your colleagues are reviewing it and --
- 3 and -- and improving the paper and bouncing the paper
- 4 if it doesn't have integrity, you don't get -- you
- 5 don't get more money for research. You have to have
- 6 integrity in -- in the whole process.
- 7 So there's -- there's integrity in the process for
- 8 writing the research grant in the first place, there's
- 9 integrity in executing a research grant, and there's
- 10 integrity in publishing a research grant.
- I see these dozens of papers, and it leads me to
- 12 conclude there's something going on in relation to the
- 13 epidemiology of -- in terms of establishing health
- 14 impact in coal mining operations.
- 15 Next slide, please.
- Because I have not done this work, I don't know
- 17 the academics who have done this work. I reached out
- 18 to Michael Hendryx, who's a prof in the States --
- 19 fairly busy guy now 'cause he's -- he's the head of his
- 20 department -- to talk to him about -- on the -- on the
- 21 phone to talk to him about what he thought about this
- 22 decade of research, and he shared this view with me
- 23 which I wanted to reproduce here. I include his --
- 24 he -- he sent me an email, which I -- I -- I think is
- 25 very valuable, and -- and a very seminal authoritative
- 26 summary written by one of the -- one of the -- one of

1 the main authors of a number of these papers, and I put 2 it in Appendix B of my report in its entirety. 3 The -- the summary view is that mountaintop removal, coal mining (AUDIO FEED LOST) --4 5 THE COURT REPORTER: I'm sorry. You're cutting 6 out. 7 MR. FITCH: Sorry, Dr. Dennis. 0 Dr. Dennis, just as you were starting your summary 8 9 view, you cut out again. 10 Α DR. DENNIS: I'm going to move and see if I 11 can do a better job. Hopefully -- hopefully a 12 different area of -- my location will improve it for 13 you. 14 Can you hear me? 15 Yes. 0 16 I hope this is better. Okay. 17 The -- the health problems that look to be associated with mountaintop removal are higher cancer 18 rates, higher heart and -- and lung disease rates, 19 20 higher kidney disease rates, higher rates of birth 21 defects, and higher rates of impaired functioning --22 other higher lung functioning -- physiologic functioning due to health problems. 23 24 And that -- the pattern of these results suggest 25 that they are not caused by confounding variables like 26 age or smoking or the selection of a biased population

base. They're not -- they don't seem to be associated
with obesity or underlying health occasions that the -the epidemiology has accounted for many of these
confounding variables.

The health problems seem to be most severe in areas where mining is -- where the amount of mining is greatest, and it seems to be worsening in recent years, and they are present for men and well and children, and they reflect more than just occupational exposure.

Next slide, please.

Is this audio better? Is it clearer?

12 Q Yeah. So far it's -- so far so good. Why don't you carry on.

14 A Okay. Roger that.

The US government got involved a few years ago in the controversy and the public outcry around health effects with mountaintop mining. They commissioned a meta-analysis of the data. And this is one of the most powerful things that we can do. We do it in medicine a lot when we want to -- when we want to assess the effects of a particular drug or treatment -- a certain treatment approach, many published -- papers are published perhaps on one case, one patient, or a -- a few patients from a clinic, and -- but they're published in many different areas, in many different countries, so you can then assemble all that data and

- 1 do a metaanalysis of the paper. So you're not doing
- 2 original research; you're reviewing, in a critical way,
- 3 all the papers that have been published, and that's
- 4 what the US government -- the US federal government
- 5 decided to do with these 30-odd studies in the
- 6 Appalachian Mountain areas which were reporting on
- 7 human health issues. And that was published recently,
- 8 in 2017, and it was titled "A Systematic Review of
- 9 Community Health Impacts of Mountaintop Removal
- 10 Mining".
- I thought this was another important paper to have
- in front of the Panel, so I reproduced it in my [sic]
- 13 entirety in Appendix C. It was nine pages of academic
- 14 paper if people would like to look at some of the
- 15 detail. I won't talk about a lot of the detail except
- 16 for one example figure.
- 17 Next slide, please.
- 18 Ah. No, I won't. First I'll introduce how they
- 19 did it. What the -- a group of scientists
- 20 commissioned -- federal scientists who -- and probably
- 21 co-opted academic scientists as part of this work, what
- 22 they had -- they did was they captured, through
- 23 literature searches, library literature searches, over
- 24 3,000 studies, and they whittled these studies down to
- 25 include the 33 most relevant human health studies that
- 26 looked at health aspects of humans associated with coal

- 1 mining. 29 of these studies were reported from -- in
- 2 communities and 4 were occupational, i.e., the
- 3 workforce.
- 4 So each paper, and there's 33 that they capture,
- 5 was -- was reviewed by, first, one -- in parallel, one
- 6 person and then another person. These were qualified
- 7 reviewers, and they weren't sharing their results.
- 8 They were reviewing each paper according to some strict
- 9 criteria to assess the -- the viability of the results,
- 10 to assess any potential bias in the paper, the
- 11 weaknesses of the study, the integrity of the
- 12 conclusions, the appropriateness of the methods,
- 13 et cetera.
- 14 If -- at the end, they had a score sheet. If they
- 15 had a discrepancy between the two reviewers, then a
- 16 third person was brought in. So this is a very, very
- 17 powerful way of reviewing a mass of papers that are in
- 18 the literature to see if there's a consistent message
- 19 coming out.
- 20 Next slide, please.
- 21 So this is one graph I did want to show you. This
- 22 one is really focusing on the Ahem publication of 2011
- 23 that looked at birth defects in communities associated
- 24 with MTR mining. So the way that this -- these results
- 25 were being expressed in the paper and were, that you
- 26 have (AUDIO FEED LOST).

1		THE COURT REPORTER: I'm sorry.
2	Q	MR. FITCH: Sorry, Dr. Dennis. You cut
3		out again there just as you started to talk about the
4		graph that we can see on on your slide.
5	A	DR. DENNIS: Right. The
6	Q	Can you start again?
7	A	Yeah. The the the bottom black dots show a
8		a a measure of 1. This is the kind of a unit
9		an adjusted prevalence ratio of 1 means you don't have
10		an increased level of disease or decreased level of
11		disease. The greens [sic] triangle show the prevalence
12		of certain birth defects in communities associated with
13		coal mining operations, and the bar on either side of
14		it, those that bracketed bar, is the 95 percent
15		confidence interval. So we're all, you know, working
16		with stats. We know there's variability, so we're
17		looking at mean values and the spread of that mean
18		value.
19		My Stats 101 understanding which can get is
20		that if the if the confidence interval don't overlap
21		with your line of identity, you have significant
22		difference. And most of these reported birth defects
23		show that we do have an increased health impact, an
24		increased number of birth defects.
25		So if you looked at the first one, any con the
26		first green triangle, any congenital abnormality, the

- 1 value looks like it's about 1 and a half. Adjust the
- 2 prevalent ratio of 1, the next vertical white line is
- 3 2, so it's about 1 and a half. And sometimes -- going
- 4 down the list. The fourth one down, "Circulatory,
- 5 Respiratory, Congential Abnormalities", looks like the
- 6 value is 3, so three times higher.
- 7 That was one of the papers that was reviewed by
- 8 the US federal group. It looked like -- it looks like,
- 9 to me, there is something going on. There is
- 10 weaknesses with every paper. One of the main
- 11 weaknesses that the federal government found was the
- 12 lack of exposure data.
- 13 If you go to the next slide, please.
- 14 Summary of the analysis study. It did identify
- over 30 studies associating human health impacts with
- 16 mining. MTR -- mountaintop removal -- mining
- 17 recognized that each of the studies contained
- 18 limitations. Most of the studies didn't have very good
- 19 exposure data. It's really expensive and very
- 20 difficult to collect in an epidemiologic study, health
- 21 study, exposure data. It probably would cost you -- I
- 22 don't know -- five to ten times more than the actual
- 23 clinical work in doing it at least. And so that was
- 24 the main limitation of the study, that they were often
- 25 retrospective studies looking at where do you live and
- 26 what kind of health impacts are you seeing in those

1 hospitals, those clinics, in that population near where 2 you live. 3 But their -- the -- the federal government concluded, Hey, we can't say with any certainty -- we 4 can't say with any certainty, but it looks like there's 5 6 something going on. And there's been no unequivocal 7 study to -- yet. But these are relative --8 So, Doctor --0 9 Α Yes. 10 Dr. Dennis, before we move on to the next slide, the 0 11 author of Benga's human health risk assessment, 12 Mr. Mitchell, talked a little bit during his testimony 13 about this -- these -- this evidence, if I can call it 14 that, from -- from Appalachia, and he said, essentially, there's just so much noise in these 15 16 studies that they couldn't really come up with anything 17 conclusive. Can you comment on that? Do you agree? Every study will have limitations, and any one of 18 Α these studies, in isolation, you could say, Well, it's 19 20 just the one study. There's just too many of them. 21 They're all showing the same thing. I've been involved 22 in designing epidemiological studies. On my PhD, we 23 did the epidemiology of asthma in welders. 24 what -- does welding cause asthma? Took us three 25 years. We spent 2-and-a-half-million pounds in 1987. And we -- and we -- and we didn't show it. 26

- 1 negative result. But we really would have benefited
- 2 for -- having more people in our study.
- 3 It's hard to do epidemiology and get an
- 4 unequivocal result. There is noise associated with --
- 5 with every study.
- 6 Academics don't want to wander into the world and
- 7 create problems when there isn't one. I don't know any
- 8 academics that do that. There are too many authors
- 9 involved in these various studies, too many coauthors,
- 10 too many granting bodies, too many journal -- journals
- 11 publishing and reviewing the data to tell me that these
- 12 studies should be dismissed.
- So for anybody to say, Oh, there's just too much
- 14 noise, I would love to have that debate. I think if
- 15 that's a solid view and it can be defended, let's have
- 16 the debate. But these studies weren't included at all
- in the human health -- human health risk assessment.
- 18 I think that's an oversight. I think that these
- 19 studies are highly relevant. I think they are the
- 20 definitive -- definitive human health data that we
- 21 have. Does mountaintop removal processes impact the
- 22 health of the population living near them? How else
- 23 are you going to collect the data?
- I think modelling only is a -- is a long reach and
- 25 a very limited scoped way of trying to assess that
- 26 health effect. This is -- this is the gold standards,

and there's too many of these -- there's too many of these studies to dismiss.

So that's my response, Mr. Fitch. They [sic] are just too many of these studies all pointing in the same direction. Each of them does have limitation. Each of them has noise. All epidemiology does. But that's the game that we play in trying to understand how pollution impacts health.

- 9 Q All right. Thank you, sir.
- 10 A Next slide, please.

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I want to talk a little bit about the 11 12 precautionary principle. I saw it mentioned again and 13 again and again in the EIA and certainly in the human 14 health risk assessment. The precautionary principle 15 says, Hey, because we don't really know everything, because this is kind of complicated, because we don't 16 17 know how mixtures behave and what the exposure really is, let's put in layers of protection to our assessment 18 so as we do the screening, we can flag up things that 19 20 If there's a problem, we can maybe are a problem. 21 remove some of those layers of protection and -- and evaluate it further, but that's a great way of 22 screening chemicals. 23

You don't want to hurt people if you can avoid it, but you also want to progress and -- and get on with business of life. Okay. In [sic] the precautionary

- 1 principle was applied here, I would think that these
- 2 health studies should be included in the assessment.
- 3 They should be considered, debated, refuted if it's
- 4 justified, but they should be included in the
- 5 assessment. To ignore them, to leave them out, to keep
- 6 your scope narrow on modelled assessment and ignore
- 7 this gold standard epidemiological work I think is
- 8 crazy.
- 9 I think that we should assume that there -- these
- 10 studies may have merit until the time that we can
- 11 dismiss them and say, Hey, no, they don't have merit
- 12 for these reasons. There's been a bigger study done,
- or other reviewers have found problems with these
- 14 studies so that the -- the -- the conclusion should be
- 15 dismissed.
- But to my mind, they're valid studies, they were
- 17 done with integrity, they were published with
- 18 integrity, they have a message to say, and I think we
- 19 should pay attention to it. This is an area of the
- 20 world that has the most mountaintop mine -- mountaintop
- 21 removal mining on coal that I know of. It's a huge
- 22 pollution base. It's the best data that we have. It's
- 23 good epidemiology showing that there are health issues.
- 24 And I don't know -- we don't know and I don't know what
- 25 environmental constraints those mining operations have.
- 26 That hasn't been examined at what time -- at mining

- 1 operations in the States.
- 2 Next slide, please.
- 3 So in summary, what I've been saying, just to go
- 4 through these bullet points, that in the project EIA,
- 5 it concludes that health impacts are not expected and
- 6 based its conclusion of no impact on modelled data. It
- 7 does not take into account published human studies
- 8 reporting health impacts from similar existing
- 9 operational mountaintop removal mining operations in
- 10 the Appalachian area of the United States.
- 11 And there are many reasons why modelled data
- 12 cannot predict with certainty human health impacts.
- 13 I've listed some of them in my presentation. The human
- 14 health risk assessment contained in the project EA
- 15 presents only a partial picture. It doesn't -- does
- 16 not mention nor take into account the plethora of
- 17 available -- I would call it the "real-world human
- 18 health studies" -- real-world human health studies
- 19 associated with these mining operations.
- 20 And I think that the epidemiology that has been
- 21 published associating mountaintop removal coal mining
- 22 with health should be considered to be at least of
- 23 equal, if not higher value than any modelled data of a
- 24 mine that's not yet built.
- 25 And my job is to inform the Panel of my
- 26 professional objective opinion of -- as a third party

1 as to -- with no stake in the game, like, is this -- is 2 this human health risk assessment real? Is it a good 3 It's certainly linear. I do believe it's limited one? 4 in scope -- scope. I do believe the Panel should 5 acknowledge, recognize there are -- there's other 6 evidence available in the world that provides much more 7 authoritative assessment of potential health impacts from these kind of mining operations rather than just 8 9 modelled data alone.

And the next slide, please.

I just wanted to leave something more pleasant up. This is showing a -- one of -- a local -- picture of a local resident, father and son walking around, just to remind myself and everybody that we're talking about human health. What we're trying to do is protect the health of the population that live there. That -- that's what we're about here. And we have to balance that up with economic development and all the other issues that are going on.

I think the Panel has -- has got a complex task to do. I wanted to make sure that they had at least all the -- another view of health that's not so linear and dismissal -- dismissive as the -- as -- as Benga's, There is no impact from this project. I suspect that's not the case. Thank you.

26 O Thank you, Dr. Dennis.

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1		MR. FITCH: Mr. Chair, that concludes the
2		direct evidence of this witness panel. They are now
3		both Dr. Young and Dr. Dennis are now available for
4		cross-examination by Benga and questions from other
5		participants, including the Panel.
6		THE CHAIR: Okay. Thank you, Mr. Fitch.
7		Mr. Ignasiak or Mr. Brinker, does Benga have
8		questions for this witness panel?
9		MR. BRINKER: Yes, we do, Mr. Chair.
10		THE CHAIR: Okay. I'm going to suggest
11		that maybe we take our break now. I think staff were
12		going to have a look at Dr. Young's audio settings and
13		just see if there was anything further they could do
14		just to ensure that he doesn't continue to experience
15		issues when he's answering questions.
16		So let's take a 15-minute break now. It's 10:14,
17		and we'll resume at 10:30. And if Mr. Young can stand
18		by, staff are going to see if they can help with the
19		audio settings.
20		MR. FITCH: Thank you, sir.
21		(ADJOURNMENT)
22		THE CHAIR: We're ready to go. So go
23		ahead, Mr. Brinker.
24		Mr. Brinker Cross-examines Livingston Landowners Group
25	Q	MR. BRINKER: Just to start, good morning,
26		Dr. Dennis and Dr. Young. Thank you for joining us
Ī		

1 this morning. Can you hear me okay? 2 DR. DENNIS: I can. 3 0 Okay. Perfect. 4 Dr. Young, can you hear me okay? 5 Α DR. YOUNG: Yes, I can. Can you hear me 6 all right? 7 Perfect. 0 Yes, I can. 8 So, Dr. Young, just a couple questions for you. 9 Dr. Young, you currently live and work in Ontario. 10 I have that right? 11 Yes, you do. Α 12 I believe I saw in a form you attached to your report in CIAR 552 that you work in Tiverton, Ontario. 13 14 Is that right? 15 That's correct. That's (AUDIO FEED LOST). Α 16 I think I've lost your audio there. Sorry. 17 THE CHAIR: Yeah. Hold on a sec. I also don't see the court reporter. 18 19 THE COURT REPORTER: Sorry. 20 THE CHAIR: Did you catch that, 21 Madam Court Reporter? Were you there? 22 THE COURT REPORTER: Yes. 23 THE CHAIR: Okay. Thank you. 24 MR. FITCH: I can't see --25 MR. BRINKER: Sorry, Dr. Young --O 26 MR. FITCH: -- Dr. Young at this point.

- 1 MR. AGUDELO: I can see him, and I think his
- 2 audio -- his video is streaming.
- 3 Dr. Young, can you speak for a second?
- 4 A DR. YOUNG: Yes. Hello. I'm here.
- 5 MR. AGUDELO: Okay. So can you see him now?
- 6 O MR. BRINKER: Yeah, I see you, Dr. Young.
- 7 Sorry. I'll re-ask that last question. You
- 8 just -- you glitched out a little bit there.
- 9 So you said you work currently in Tiverton,
- 10 Ontario; is that right?
- 11 A Yes. That is where I am current living, and I'm trying
- to retire, so I'm not actually doing all that much
- work.
- 14 Q Okay. And looking at your CV in the Livingstone Group
- 15 submission, I just want to get a handle on where you
- 16 worked in the past. You did your PhD at the University
- 17 of Waterloo in Kitchener, Ontario; is that right?
- 18 A That's correct.
- 19 Q Okay. And then you spent a couple years working in
- New Brunswick; is that -- is that also right?
- 21 A Sorry. You broke up there. I didn't quite catch that.
- 22 O I'll repeat that, Dr. Young.
- 23 A You broke up there. I didn't hear your question.
- 24 Q I'll repeat my question now for you, Dr. Young.
- 25 So after you finished your PhD, you spent a couple
- 26 years working in New Brunswick; is that correct?

- 1 A Yes. I -- I worked for Environment Canada for the
- 2 first couple of years. Then I moved to (AUDIO FEED
- 3 LOST).
- 4 Q Sorry, Dr. Young. I think you cut out there for a
- 5 little bit. Could you repeat that?
- 6 A Yes. When I first graduated, I joined the --
- 7 Environment Canada in their research group. I worked
- 8 there for a couple of years. Then I went to
- 9 Environment New Brunswick to run their air quality
- 10 program. Then I came back to Ontario to join a
- 11 consulting company, and then I went back to Environment
- 12 Canada.
- 13 O Okay. So since that time, have you worked primarily in
- 14 Ontario?
- 15 A My -- I've been headquartered in Ontario, but I have
- worked on projects around the world.
- 17 Q Okay. So, Dr. Young, can you tell me when you were
- 18 retained to put together the report on this project?
- 19 A Yes. I'd have to look it up to be sure, but it was
- 20 within the last two to three months.
- 21 Q Okay. And did you have a chance to come to Alberta
- between the time you were retained and the time you
- 23 completed your report?
- 24 A I did not.
- 25 Q Okay. When was the last time you were in Alberta?
- 26 A It was probably during my work career. I would guess

1 maybe ten years ago at the -- maybe even longer. I'm 2 not sure. 3 Okay. Have you ever been to the Crowsnest Pass? 0 I have not. 4 5 So you've never been on the project site? 6 Α I have not been on the project site. Okay. Those are all the questions I have for you, Dr. Young. 8 9 And I don't have anything for you, Dr. Dennis. MR. BRINKER: 10 So that's it for me, 11 Mr. Chair. 12 THE CHAIR: Thank you, Mr. Brinker. Okay. 13 Ms. LaCasse or Ms. Kapel Holden, any questions for 14 this panel? 15 MS. LACASSE: No, we don't have any questions, Mr. Chair. Thank you. 16 17 THE CHAIR: Okay. Thank you. Mr. Lambrecht? 18 Mr. Chair, I have no questions 19 MR. LAMBRECHT: 20 for this panel, and I thank them for their evidence and 21 participation in the Joint Review Panel process. 22 THE CHAIR: Okay. Thank you. 23 Mr. O'Gorman, any questions? 24 MR. O'GORMAN: Thank you, Mr. Chair. just have one question, and it's for Dr. Young. 25 26 Alberta Energy Regulator Panel Questions Livingston

1 Landowners Group 2 MR. O'GORMAN: Good morning. Good morning, 3 Dr. Young. Good afternoon, I guess, in Ontario. So I think --4 5 DR. YOUNG: I'm --Α 6 Right. 0 7 (INDISCERNIBLE - OVERLAPPING SPEAKERS) THE COURT REPORTER: I'm sorry? 8 9 0 MR. O'GORMAN: I think --10 THE COURT REPORTER: I didn't hear what the witness 11 said. 12 DR. YOUNG: I said it was -- it's just Α 13 slightly afternoon here, sir. 14 MR. O'GORMAN: So just one question for you. 0 15 I think you indicated that you listened late last week 16 when your counsel Mr. Fitch was examining Benga and 17 their experts on the air -- on the issues related to your expertise on air issues. 18 Is that right? 19 DR. YOUNG: Yes, sir. That is correct. Α 20 0 So I'm not going to haul up the transcript, but 21 there was something that was said I'd just like your 22 view on. I hesitate to put words into Mr. Rudolph's mouth, Benga's witness, you know, speaking to most of 23 24 their air quality work. I don't think -- I don't think 25 I'm about to mischaracterize what he said, so I -- you 26 know, I'll be -- someone correct me if I -- if I get

1		this wrong.
2		When Mr. Fitch was asking him about this issue
3		around whether windblown dust emissions and whether
4		the windblown dust in your paper, you talk about
5		that should vary with the cube of the wind speed, and
6		they had a conversation about that, and Mr. Fitch asked
7		Mr. Rudolph if he agreed with that, and there was
8		reference to a paper that you folks filed and
9		One of the things that I took from that
10		conversation was that I think I heard Mr. Rudolph
11		express that using that approach wouldn't necessarily
12		be appropriate for regulatory applications such as
13		this.
14		Do you remember that being said, that aspect of
15		that conversation?
16	A	Yes, sir. I remember him saying that.
17	Q	Okay. So I guess what I would put to you is two two
18		parts. I assume you would argue would you argue
19		that it is appropriate to factor in into thinking
20		about windblown dust that the dust source term for
21		emissions would should vary with the cube of the
22		wind speed?
23		And I guess I'll the second part of that
24		question is if you do if you do agree that that
25		should be used in regulatory applications, why? Why
26		would you argue that that's something that should have

1 been done here? 2 Sir, I was not -- I was not actually arguing for the 3 cube of the wind speed to be used. What I was mainly suggesting was that the dust is lifted up by the wind 4 5 speed cubed but that the regulatory version that has 6 been used is a conglomeration of many, many studies, 7 and they are -- they were looking for simple factors in order to look at dust and dust generation. 8 And when 9 you do that, you have to ignore some parts of the 10 physics to do that. 11 So, for example, the frequency factor, anything 12 above a wind speed of 5.36 metres per second, was found to be representative of those days that would produce 13 14 high dust. And if you look -- as I say, if you look at 15 a yearlong, that would give a very good estimation. 16 The problem is: When you are looking at 17 individual days, you can find that the -- that simplistic equation doesn't work very well. 18 regulatory purposes, most of the time it works. 19 20 this situation, we (AUDIO FEED LOST) at Chinook days 21 (AUDIO FEED LOST) doesn't work with a high wind speed, 22 so I was trying to show you (AUDIO FEED LOST) that situations like high wind speeds properly --23 24 notwithstand -- (AUDIO FEED LOST). 25 MR. FITCH: Sorry. Dr. Young, it's 26 Mr. Fitch. So just when you started the key part of

1 your answer, your audio started to go wonky. Maybe you 2 can go back and start again at the point where you were 3 saying, basically, what you were trying to show in this 4 case. Sorry. I'll try again. 5 Α DR. YOUNG: 6 Okav. What I was trying to show was that the 7 (AUDIO FEED LOST) approach underestimates emissions at I'm just suggesting that in this 8 high wind speeds. 9 particular case, when you have Chinook winds, which are 10 basically high wind speeds, that there's no reason to believe that the regulatory equation will work any 11 better at this -- for this location than it did at 12 13 Owens Lake. 14 MR. O'GORMAN: Okay. That's all I needed to 0 15 Thank you, Dr. Young. I appreciate your time. 16 Dr. Dennis, you as well. 17 Thank you, both, for appearing before us, 18 submitting your written reports. We appreciate the work you folks did. 19 MR. O'GORMAN: 20 And I have no further 21 questions, Mr. Chair. 22 THE CHAIR: Mr. Matthews, any Okay. 23 questions? 24 DR. YOUNG: Thank you very much. Α 25 MR. MATTHEWS: Yeah, just a minor question 26 for Dr. Dennis.

1 MR. MATTHEWS: You know, in the area where 0 2 the project is located, we have a mine -- significant 3 coal mining community adjacent to or to the west in the 4 Elk Valley, and from what we understand, a significant number of the population from Blairmore work in the 5 6 valley -- the Elk Valley neighbourhood, I guess. 7 How would you differentiate between the health effects on the community if you have a migrant -- or 8 migratory, if you will, workforce going between one 9 10 area where there's active coal mining and an area 11 currently where we don't have any coal mining? 12 would you differentiate that in the future when mine --13 when -- let's say, Grassy does get approved. 14 you differentiate the health effects? DR. DENNIS: 15 I think it would be probably Α 16 impossible to do because the population isn't big 17 enough to do it. Look -- if I could just sort of sidetrack a little 18 bit and talk about COVID. You know, I think we've all 19 20 been watching with interest the vaccines that have been 21 developed. Pfizer tested 30,000 people, 15,000 in each 22 arm, of those who got a placebo and those who got a In the placebo arm, 8 people got COVID, and 23 24 in the vaccinated arm, I think 600 people got COVID, so 25 there's a 95 percent, you know, success rate. 26 needed 30,000 people to differentiate that.

with the -- that -- the 95 percent, there's still a 1 2 spread around the prediction. Well, is that going to 3 be true of the general population? We don't know yet. 4 It still could be skewed one way or the other, which is 5 why the FDA requires 30,000 people in a very, very 6 carefully controlled study. 7 I don't think you will ever be able to tease out the health effects on coal mining in any of those 8 9 communities. The population will be too small. You 10 have to rely on data from other sources, which is why I 11 think the Appalachian data is so useful, because there 12 are a -- millions of -- millions of people in the 13 population base there. 14 So, Mr. Matthews, I don't think -- I don't think 15 you could ever see it. I don't think you could ever 16 It'll just be lost. And if somebody has a 17 cancer or whatever -- they can have an argument, and it's going to cause them stress, and it's going to 18 19 cause a controversy, but you'll never be able show it 20 one way or the other. 21 Thank you. Thank you for your answer, 0 That's great. 22 Dr. Dennis. And thank you, Dr. Young, for your contribution 23 24 I have no further questions. 25 THE CHAIR: Thank you, Mr. Matthews. 26 Gentlemen, I have no further questions for you,

- 1 so, again, on behalf of the Panel, I'd like to thank
- 2 you both, Dr. Young and Dr. Dennis, for the written
- 3 submissions and your participation here today. It will
- 4 be helpful to the Panel, so thank you.
- 5 Mr. Fitch, any re-direct?
- 6 MR. FITCH: No, sir, no re-direct.
- 7 (WITNESSES STAND DOWN)
- 8 Discussion
- 9 MR. FITCH: And I believe that we have the
- 10 distinction of having put forward the final witnesses
- in this five- to six-week-long hearing, so like others
- 12 before me, I would like to take this opportunity to
- thank you, sir, and the Panel Members and Panel staff
- 14 and the court reporters and everyone working behind the
- 15 scenes to essentially pull off this virtual hearing. I
- 16 think, notwithstanding last night and a few glitches
- 17 this morning, it's actually gone remarkably smoothly.
- 18 So thank you for that. And thank you for giving the
- 19 Livingstone Landowners Group the opportunity to
- 20 participate.
- 21 THE CHAIR: Okay. Yeah. Thank you very
- 22 much, Mr. Fitch. And we appreciate everyone's
- 23 cooperation in these unusual times, so thanks for that.
- 24 Mr. Ignasiak or Mr. Brinker, does Benga intend to
- 25 present any reply evidence?
- 26 MR. BRINKER: No, sir, Mr. Chair.

- 1 THE CHAIR: Okay. Thank you.
- 2 So with that, that brings us to the end of the
- 3 evidentiary portion of the hearing, with a few minor
- 4 items still to be dealt with.
- 5 So the Panel's intention would be once we receive
- 6 the ACO report and the responses to any outstanding
- 7 undertakings and any related follow-up to those
- 8 undertakings, we would then close the evidentiary
- 9 record at that time.
- 10 My understanding is that there's currently
- 11 three -- three undertakings outstanding. One is
- 12 Number 10, and that's the one related to Dr. Rasouli,
- 13 and Benga already spoke to that. So I think the intent
- 14 will be if we do not receive a response to that by the
- 15 close of the record, we will just consider it not
- 16 responded to. And I understand Benga is -- is fine
- 17 with that approach.
- 18 The other two are Undertakings Number 27 and 28,
- 19 and they related to the undertakings that I requested
- 20 on Monday, and my understanding is those are probably
- 21 going to be submitted shortly. So those should not
- 22 delay the close of the record.
- 23 If there is any follow-up required to those final
- 24 two undertakings, the Panel would propose that it be
- 25 done in writing, and it'll be done in an expeditious
- 26 manner so as to -- not to interfere with closing of the

- 1 record probably later this week or, at latest, early
- 2 next week once we have the ACO report.
- 3 So the Panel will close the record of the
- 4 proceeding, of course, once it has received written
- 5 final argument from Benga and the other participants,
- 6 as outlined in the schedule that we discussed and
- 7 posted. So, again, anticipated that the record for the
- 8 proceeding would be closed either late on January 15th
- 9 or very shortly thereafter once all the final argument
- 10 has been received.
- 11 Following that, the Panel will review the evidence
- 12 and prepare its report, which will include its
- assessment of the effects of the project, the Panel's
- 14 decision in its capacity as the Panel of AER hearing
- 15 commissioners, and its recommendations to the federal
- 16 minister of Environment and Climate Change under
- 17 SEIA 2012.
- Before we adjourn, are there any other matters
- 19 that the participants want to raise at this time?
- 20 MR. BRINKER: Mr. Chair, I just have a few
- 21 words to share, not a matter, but I just want to --
- 22 THE CHAIR: Sure.
- 23 MR. BRINKER: -- echo Mr. Fitch's
- 24 sentiments. I just wanted to -- on behalf of myself,
- 25 Mr. Ignasiak, and Benga to thank the Panel and all the
- 26 Panel staff and court reporters for conducting the

1	hearing in such unusual and difficult circumstances
2	giving up, I know, several evenings and several
3	Saturdays over the last month. So we thank you for
4	that.
5	THE CHAIR: Okay. Thank you, Mr. Brinker.
6	Okay, hearing none, the Panel would like to thank
7	everyone for their participation in the hearing, and,
8	again, the Panel appreciated everyone's willingness to
9	participate in this new world of online hearings and
10	kind of roll with some of the minor glitches we
11	experienced that were all made necessary by the current
12	COVID-19 pandemic. I think we made a bit of history
13	here in terms of conducting such a large and complex
14	hearing in a in a fully online format.
15	So with that, thank you, everyone, and the hearing
16	is now adjourned.
17	
18	PROCEEDINGS CONCLUDED
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1
     CERTIFICATE OF TRANSCRIPT:
 2
 3
          I, Claire Forster, certify that the foregoing
     pages are a complete and accurate transcript of the
 4
     proceedings, taken down by me in shorthand and
 5
     transcribed from my shorthand notes to the best of my
 6
     skill and ability.
 8
          Dated at the City of Calgary, Province of Alberta,
     this 2nd day of December 2020.
 9
10
11
     <Original signed by>
12
13
14
     Claire Forster, CSR(A)
15
     Official Court Reporter
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