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**Re: Notice of intent – Proposed new requirements for consumer chemical products under the *Canada Consumer Product Safety Act***

Environmental Defence, Canadian Association of Physicians for the Environment (CAPE), Breast Cancer Action Quebec and the Women's Healthy Environments Network welcome the opportunity to submit these comments in regards to the consultation on the [proposed](#) new requirements for consumer chemical products under the *Canada Consumer Product Safety Act* (CCPSA).

The health and environmental impact of chemicals in consumer products is a significant public health concern, and has been for many years. This proposed initiative brings the federal government closer to its [election promise](#) to “put Canadians’ health and safety first” and the Minister of Health’s [mandate](#) to “introduce mandatory labelling of chemicals in consumer products.”

It can also address the interests of the vast majority of people in Canada who, according to government [research](#) on this issue:

- are concerned about the potential health impacts of the products they buy and use (94%)

- state that ingredient information is important (68%), and it influences their product purchases (76%)
- want “information on the chronic health effects of products on product labels” (79%)
- want mandatory labelling of these health hazards (75%)

Many people in Canada assume that the products that are on the shelf do not contain hazardous substances, therefore it is important to communicate to them when there are substances of concern that can be harmful to them and their families’ health.

Managing the health and safety of families, particularly in terms of household, personal care and cleaning product purchases, is a [gendered burden](#), most often taken on by people who identify as [women](#). This work is not possible without easily understood ingredient information needed to make decisions that protect health. This is particularly true for parents and pregnant people attempting to reduce exposures and protect prenatal and children’s health.

Physicians and patients often have difficulty accessing information about [product ingredients](#) of concern, and there are socioeconomic, literacy and language barriers to accessing less hazardous products. Managing harms from exposure-related disease, such as sensitization, asthma and cancer, can involve attempting to reduce or eliminate further exposures to product ingredients that can aggravate symptoms and conditions. Managing reproductive health, fertility issues, and pregnancies and the associated [protocols](#) can be difficult without ingredient transparency and disclosure.

Information about chemicals in consumer products is important, as is access to low-cost, safe alternatives given the affordability crisis and ongoing barriers to health equity experienced by low-income and racialized communities. These communities are often unable to [practise precautionary consumption](#) and this contributes to inequitable care and health burdens. These communities are also harmed throughout the hazardous chemical production, use and pollution lifecycle. The optimal aim is elimination of hazardous chemicals in products for health protection of both workers involved in the manufacture of products, as well as end-users of products. Hazardous products contribute to increases in hazardous chemical production, which have surpassed a [planetary boundary](#).

Exposure-related disease and harms are preventable, and we applaud this government for beginning to address hazards in products. Through product labelling, disclosure to users can create the market and consumer pressures needed to drive **reformulation of products to less hazardous alternatives**. Reformulation with **hazard and harm prevention should be the ultimate goal**.

A greener, toxic-free future is urgently needed, and this transparency and disclosure initiative is one step towards the benefits of [chemical regulatory approaches](#) that prevent complex exposure-related disease management, disability and treatment, and their associated costs to individuals, families and the public health system. The benefits to women’s health, children’s health and workers are of particular importance.

While advances are being made to reduce cancer rates overall, exposure-related cancers are disproportionately impacting [racialized communities](#) and [workers](#), and products used in these communities and workplaces must, at a minimum, communicate hazards within a right to know framework, and ultimately become less hazardous. Currently, only two to five per cent of cancer research funding in Canada goes towards [prevention](#), and this disclosure initiative will support people's ability to avoid carcinogens in products.

We must do more to address inequity, and **carcinogens and mutagens should be prohibited in consumer products** (Question 3). This phaseout must begin now, and any essential use in the interim that does not have a safer alternative must be clearly labelled with a hazard symbol.

Reproductive health is [in decline](#) around the world, and is being impacted by endocrine-disrupting substances. The gendered impact of this harm cannot be overstated, as parents, girls, women, and people with uteruses attempt to protect their reproductive health in a context where research links precocious puberty, infertility, polycystic ovarian syndrome (PCOS), fibroids, and other conditions linked to endocrine disruption.

**Reproductive toxicants and endocrine disruptors should be severely restricted in products** (Question 3), and must be clearly labelled to better protect prenatal and reproductive health. Substances with **acute and chronic organ toxicity must also be prioritized for phaseout** (Question 3), and clearly labelled in the interim.

We agree with the proposed criteria and requirements for HHOCs (Question 1), and would **add endocrine-disrupting chemicals and any cumulative effects** (including synergistic, aggregate or mixture effects) to this list of criteria. We believe it is reasonable to expect that these substances are **labelled, with clear symbols and plain language, and the specific health harms** linked to these substances. Environmental Defence's 2017 research [report](#) on this issue provides guidance on the types of symbol and text-based labelling needed in Canada.

Sensitization is mischaracterized in the Notice of Intent as allergens, or "hypersensitivity," yet the [mode of action](#) of these substances is often the source of the inflammatory response and creates the sensitization reaction itself, as opposed to the individual being inherently allergic or sensitive. These substances, in an occupational context and at a high enough concentration threshold for inclusion in Material Data Safety Sheets (MSDS), are accompanied with warnings that indicate appropriate personal protective equipment (PPE) to guard against the development of these sensitization reactions. However, the same ingredient in products can be unlabelled, and may not indicate that protection is warranted in a use context. Occupational hazard must be acknowledged, and we can no longer ignore the often gendered and racialized impacts of product use, such as domestic workers and household cleaners. **Sensitization should be clearly labelled, with descriptions of common symptoms of what a sensitization reaction may look like (e.g. rash) in this product's use scenario.**

We support the additional protections proposed, such as childproof containers (Question 3), as these are complementary tools for addressing the harms of these substances in products, particularly for children. An ambulatory reference to the Global Harmonized System of Classification and Labeling of Chemicals ([GHS](#)) for HHOCs in consumer chemical products is appropriate in our view, assuming the principle of non-regression is maintained. A hybrid model is acceptable, with the most protective requirement taking precedence. We support alignment with the [EU](#) on classification, labelling and packaging of substances and mixtures.

**The hazard-based symbol should be prominent, and front-of-package** (similar to other hazard-based symbols). A peel-back label should only be used to provide additional information on a given product, indications for users to identify an adverse reaction, and PPE needed to reduce the potential harm.

We agree that sellers can provide safety and ingredient information on the web — *in addition* to the front-of-package hazard symbols, signs and symptoms of reactions, harms associated with a hazardous exposure communicated on a product, and ways to reduce that harm — as needed to communicate potential harm. This would allow for additional languages and accessibility for those seeking information in other languages, and those managing complex health conditions who must avoid in-store exposures to potential sensitization ingredients.

Implementation of these requirements is needed immediately. Any cost or economic burden arguments levied by companies should not be accepted when weighed with the potential health costs that result from exposure to high hazard substances. Further, we discourage the alternative approach mentioned that would move to a purely risk-based approach; there is a need to incorporate hazards for a more fulsome capture of the potential harms to all users given variations in susceptibility to exposure for biological, social or economic reasons.

Additionally, education for consumers and retailers on the hazard symbols included on product labels, and the less hazardous and low-cost options available to people, can be done to complement this labelling initiative and answer questions and concerns from the majority of product users who are seeking ingredient information and information on the sensitization, acute, and chronic health effects of products.

Thank you for this initiative to bring more transparency and disclosure to products that fall under the CCPSA. We support the government in its efforts to protect people and the environment from these hazards, and we look forward to your response to this submission in the near future.

Sincerely,

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