

William V. Kennedy
Executive Director
Commission for Environmental Cooperation
Response via email: info@ccemtl.org



June 10, 2004

Dear Mr. Kennedy,

Re: Comments on Draft Report: Taking Stock, A Special Report on Toxic Chemicals and Children's Health in North America

The Canadian Partnership for Children's Health and the Environment (CPCHE) is an affiliation of non-governmental organizations and local health departments with expertise in issues related to children, health, public health and the environment. CPCHE Partners work together to address the impact of environmental contaminants and other hazardous substances on child health in Canada. We write today in response to your request for comments on the above-noted draft report (Special Report).

Several of our partnership members have closely followed, and/or participated, in the progress made by the Commission for Environmental Cooperation's *Cooperative Agenda for Children's Health and the Environment in North America*. Several of our member organizations have also participated in the iterative review of this report and have a great deal of confidence in the integrity of the work that produced it. We are very glad to see this Special Report finally published. It represents both a concrete step towards accomplishing a key goal within the Cooperative Agenda as well as a valuable contribution to the field of understanding children's environmental health issues.

Within a limited timeframe for reviewing a large report, and relying upon the fact that several of our members have been involved in the multi-stage process of reviewing this report, we offer several general comments.

First, the Special Report does an excellent job of accurately summarizing the complex scientific information about children's environmental health issues. We are aware of the extensive scientific peer review that has occurred during iterative stages of the development of the Special Report and can see the evidence of that peer review in the quality of the research and writing. The report does not overstate the scientific evidence and is careful to state the limits of the information base. This approach is entirely appropriate given the complexity of this field, the gaps in the knowledge base and the need to put what is known into appropriate context.

Second, the Special Report provides an important contribution to the ongoing collection of information about children's health concerns. As the CEC knows and has identified in other reports on these child health issues, there is an urgent need for methodical data collection to provide a better understanding of body burdens of chemical substances in children as well as the nature and circumstances of exposure (indoors and out). A recent proposal, by Statistics Canada, for the Canadian Health Measures Survey is a partial step in the right direction towards gathering some of these data. The Canadian work needs to be combined with efforts already begun in the United States and Europe for biomonitoring of toxic substances in human tissues. Equally important is the need for epidemiological research into child health beginning before conception and following through all sensitive life stages to the end of adolescence, as is proposed under the National Children's Study being developed in the US. As the CEC has also often

pointed out, including in the Cooperative Agenda, these initiatives can only be strengthened by international collaboration to efficiently build upon existing efforts and to strengthen the information base for all.

Alongside the necessary data collection for biomonitoring, the longitudinal scientific investigations of the National Children's Study, and other ongoing investigations within the scientific community. Information about the effects of, and exposure to, toxic substances on children's health is very troubling. The Special Report makes a valuable contribution towards furthering public understanding of these complex issues.

In particular, as has often been stated, the availability of Pollutant Release and Transfer Registry (PRTR) data from Canada and the US is a crucial component of public right-to-know in both countries, and hopefully in Mexico in the near future. While the accessibility of this information is fundamentally important to our organizations, and to the general public, it remains in many respects a very large pile of raw data. The CEC provides a valuable public service with the work that is done in the preparation of the *Taking Stock* reports.

Like the more general reviews of North American pollutant emissions and transfers provided in the CEC's annual *Taking Stock* reports, this Special Report on children furthers this valuable work. It is a fact that the public is faced with information about a dizzying array of substances (tens of thousands of them) and their possible role in contributing to extremely serious and worrying health effects in children. It is challenging and essential for this information to be put into context so that the public can be better informed about what the risks are and where to focus their energy in response. The Special Report provides this context by focusing on key pollutants of concern (lead, mercury, dioxins and PCBs) as well as the top 25 (in terms of volume of emissions) of the pollutants suspected or associated with cancer, neurotoxic effects and developmental effects.

While there are other ways of prioritizing the information and the substances, the Special Report provides one approach, and notes both the strengths and the limitations of the summarized information. The focus on these three health effects is entirely appropriate as there are legitimate scientific reasons to be concerned that trends in such health effects in North American children are associated with toxic pollutants, in complex ways that are not fully understood. The Special Report serves an important function in furthering public understanding of these issues and assisting with access to information about them.

Like other *Taking Stock* reports, the Special Report also provides information about emission trends including where emissions have been reduced and noting where the overall situation has improved. Again, this is entirely appropriate, and helps with both alleviating the stress of what can be an alarming and depressing topic, as well as helping to further focus efforts and priorities.

One area for further focused effort that is underscored by this Special Report is the need for targeted programs for the education and training of risk assessors, toxicologists and epidemiologists, especially in Canada and Mexico. As you will know, this need to expand risk assessment capacity and expertise is also recognized within the Cooperative Agenda and the CEC has made important contributions in North America to furthering such goals. The Special Report also reinforces the legitimacy of recommendations made by many commentators of the need for comprehensive evaluation of the best available technologies for hazardous waste treatment and disposal. As the Special Report notes, this is a major source of chemical releases to the environment and to humans.

The one major omission in the report is that respiratory effects, in particular a review of the major pollutants suspected or known to be associated with these effects, was not included. However, we fully understand that this topic is enormous and worthy of an entire special report on children in its own right.

We strongly encourage the CEC to expand this approach within the *Taking Stock* series. In particular, a report on respiratory toxins affecting children in North America could take a similarly detailed look at the PRTR data on suspected and known respiratory toxins as well as aggregate and analyze the information that is known about the major respiratory toxins emitted from the transportation and energy sectors. Such a report could, again, put the PRTR data into that broader context of air pollution issues of concern to children. A perspective on indoor air contaminants could also be included.

In short, we applaud the CEC for its initiative and leadership on the *Cooperative Agenda for Children's Health and the Environment in North America*. As one of the "deliverables" in that agenda, the Special Report is an excellent first step towards providing another valuable contribution to the public understanding of environmental health issues in North America, in particular by providing the value-added analysis of PRTR data that the public, and most public interest organizations and community groups do not have the resources to do on their own. We strongly support the updating of the PRTR data so that the results in this draft Special Report can be compared to more recent data and trends discerned.

Thank you for the opportunity to respond to this consultation and we look forward to the publication of the Special Report and the ongoing refinement of this "special report" approach within the CEC and the *Taking Stock* series.

Sincerely,





Kathleen Cooper
Senior Researcher
Canadian Environmental Law Association
on behalf of the following member organizations of the Canadian Partnership for Children's Health and Environment (CPCHE)

Canadian Association of Physicians for the Environment
Canadian Child Care Federation
Canadian Environmental Law Association
Learning Disabilities Association of Canada
Ontario College of Family Physicians
Ontario Public Health Association
Pollution Probe Foundation
South Riverdale Community Health Centre

Enclosure: profiles of signatory organizations

Canadian Partnership for Children’s Health and Environment

The following members of the Canadian Partnership for Children’s Health and Environment (CPCHE) are signatories to this letter. CPCHE is an affiliation of groups working to improve children’s health and environment. (For more information about CPCHE: www.healthyenvironmentforkids.ca.)

<p>Canadian Association of Physicians for the Environment (CAPE)</p> 	<p>CAPE is a group of physicians, allied health care practitioners and citizens committed to a healthy and sustainable environment. As an organization composed mostly of physicians, CAPE brings its health expertise to environmental issues, and is an important voice for environmental health in Canada. CAPE addresses issues of environmental degradation by educating health care professionals and the public and advocating for stronger environmental policy (www.cape.ca). Children's environmental health is CAPE's priority issue, and it informs all the education and advocacy that CAPE does in working for a healthier environment.</p>
<p>Canadian Child Care Federation (CCCF)</p> 	<p>CCCF is a national, non-profit, membership-based organization whose mission is to improve the quality of child care services for Canadian families (www.cccf-fcsge.ca). Since 1987, it has developed bilingual resources and training materials that support quality early childhood education learning and care. It continues to create networks with others working to support children’s healthy development. CCCF has 9,500 members working in a variety of child care settings including child care centres, family day homes, pre-schools, nursery schools and after-school programs. Members also teach at Canadian colleges and universities.</p>
<p>Canadian Environmental Law Association (CELA)</p> 	<p>CELA is a non-profit public interest organization, founded in 1970. It is an environmental law clinic within Legal Aid Ontario - dedicated to providing legal services to low income people and disadvantaged communities, as well as advancing the cause for strong environmental protection through advocacy, education and law reform. In addition to providing direct legal representation and summary advice, CELA's law reform and public educational mandates are to ensure access to environmental justice and protecting citizens’ environmental rights.</p>
<p>Learning Disabilities Association of Canada (LDAC)</p> 	<p>LDAC is a national, non-profit, volunteer-based organization founded in 1963 with the mission of representing persons with learning disabilities and those who support them. The LDAC activities include the collection and dissemination of information on learning disabilities in the areas of prevention, early identification, assessment, education, intervention, social interaction, health, coping skills, family support, advocacy, transitions, employment, and justice to consumers, parents, professionals, various levels of government, and other agencies. It has published a number of manuals, guides, self-help and reference books to meet growing needs, and has developed screening and teaching tools to increase the literacy skills of adults with learning disabilities.</p>

<p>Ontario College of Family Physicians</p> 	<p>The Ontario College of Family Physicians (OCFP) is the Ontario Chapter of the College of Family Physicians of Canada (CFPC). The OCFP is a provincial, voluntary, not-for-profit organization whose mandate includes undergraduate, post-graduate education, the continuing professional development of family physicians and the maintenance of high standards of medical care and education in family practice. The OCFP is the voice of family medicine in Ontario and represents more than 6,300 family physicians who provide patient care for remote, rural, suburban, urban and inner city communities throughout Ontario. The building and maintenance of high standards of practice, the continuing professional development of our members and improved access to high quality family medicine services for all residents of Ontario are at the heart of our organization.</p>
<p>Ontario Public Health Association</p> 	<p>Founded in 1949, the Ontario Public Health Association (OPHA) is a voluntary, charitable, non-profit association. OPHA is an organization of individuals and Constituent Associations from various sectors and disciplines that have an interest in improving the health of the people of Ontario. The mission of the organization is to provide leadership on issues affecting the public's health and to strengthen the impact of people who are active in public and community health throughout Ontario.</p>
<p>Pollution Probe Foundation</p> 	<p>Pollution Probe is a Canadian environmental organization that defines environmental problems through research, promotes understanding through education, and presses for practical solutions through advocacy. It asserts a dedication to achieving positive and tangible environmental change. Designed on a partnership-building platform, the Foundation engages government agencies, private businesses and other non-profit organizations that have a legitimate interest in an issue to help find solutions. Headed by a Board of Directors and an Advisory Board, this donor-based organization seeks to represent the needs of the general public. It prides itself on a non-partisan, though politically engaged, approach; and strives toward fair-minded, results oriented endeavours. Pollution Probe has four major programmes: Air; Water; Energy; and Indoor Environments. It is also working on several special initiatives including an Environment and Child Health Programme. The goal is to serve the needs of both our own and future generations for a clean and healthy environment.</p>
<p>South Riverdale Community Health Centre (SRCHC)</p> 	<p>The SRCHC is a community-controlled organization that believes health is a state of physical, mental and social well-being. It holds that the health centre's role is to provide quality primary care while engaging in clinical, social, economic, political, cultural, and educational initiatives that promote health. They adopt the World Health Organization's definition of health – health is a state of complete physical, mental and social well-being and not merely an absence of disease or infirmity. Health is a fundamental human right. It is central to social, economic and personal development.</p>