



PEI Advisory Council on the Status of Women

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**SUPPORT FOR A PROVINCE-WIDE BAN
ON COSMETIC PESTICIDES**

SUBMITTED TO THE STANDING COMMITTEE
ON AGRICULTURE, FORESTRY AND ENVIRONMENT

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Introduction

On behalf of the Prince Edward Island Advisory Council on the Status of women, thank you for the opportunity to make a submission today to the Legislative Standing Committee on Agriculture, Forestry and Environment hearings on the issue of cosmetic pesticides.

We welcome this opportunity to engage in public discussion and debate and to explain why the Prince Edward Island Advisory Council on the Status of Women **supports a province-wide ban on the non-essential use of pesticides for lawns, gardens, and landscaping in Prince Edward Island.**

The Prince Edward Island Advisory Council on the Status of Women is a government-appointed advisory agency with a legislated mandate to advise governments on issue that affect the status of women in Prince Edward Island. Based on the analysis we have reviewed, we conclude that cosmetic pesticides put the health of Prince Edward Island women and children at risk and have little or no counterbalancing health or economic benefits for women. We conclude that gender-based analysis of this public health and public policy question must lead decision-makers to support a province-wide ban.

Scientific research has repeatedly suggested that women, especially pregnant women, and young children are especially vulnerable to health effects from exposure to pesticides. A ban on cosmetic pesticides in Prince Edward Island would build on successful models from the province of Quebec and from many Canadian municipalities and would be a positive step towards encouraging the general and reproductive health of women and their families.

In support of our arguments, we offer some local and international analysis of leading research into the effect of pesticides on pregnant women, women in general, and children. However, we intend to argue a public policy and public health case, not to re-argue a scientific case. As our scientific grounding, we accept the findings of the Ontario College of Family Physicians' systemic Pesticides Literature Review, conducted in 2004. This study is a comprehensive listing of previous epidemiological studies of pesticide health impacts, and it takes a carefully critical stance on the scientific validity of each study it reviews. We find its synthesis, analysis, and conclusions to be based on rigorous, objective scientific assessment, with citizen health at the forefront of conclusions.

It is important to note from the outset that pesticide testing regimens, like many tests, typically focus on health effects on healthy adult male bodies as the norm, not on pregnant women's bodies or children's bodies. Likewise, testing tends to take men's lives, work, and behaviours as normative, rather than those of women or children. When we hear from corporations and proponents of pesticide use that pesticides are rigorously tested and carefully regulated, we must absolutely weigh this statement against the fact that it is impossible and unethical to directly test pesticides' effects on pregnant women or on children. Yes, the Pesticide Management Regulatory Agency argues that its "assessments include the application of extra safety factors to ensure that the most sensitive sub-populations [including pregnant women and children and environmentally sensitive individuals] are protected. For example, the PMRA pays special attention to the unique exposures and physiological characteristics of children, ensuring that factors such as their unique behaviours, different diets and lower body weights are considered." However, we would argue that if scientific ethics deem there cannot be studies to directly demonstrate pesticide safety for these vulnerable groups, then this fact alone burdens decision-makers with **a responsibility to follow the precautionary principle.**

In the case of cosmetic pesticides, the health risks to vulnerable people are not weighed against health and economic risks for society-wide food safety or food security: the risks are weighed against tidy lawns and hedges, bountiful roses, and earwig-free lettuces. **The best public policy, when it comes to these non-essential uses of pesticides, is to protect women**

and children against the health risk cosmetic pesticides could cause.

Pregnant Women

The Ontario College of Family Physicians' assessment concludes: "Pregnant women are a special risk group, given the findings showing increased risk of childhood acute lymphocytic leukemia when women use pesticides in the home and garden during pregnancy. Women who intend to become pregnant need specific information about avoiding pesticide use in their homes, gardens, and workplaces."

Even with its assessments that ensure "sensitive sub-populations are protected," the Canadian Pest Management Regulatory Agency *itself* warns pregnant women against contact with domestic pesticides. Their website guidelines on home pesticide use clearly state: "Generally, pregnant women should avoid contact with pesticides. If this is not possible, pregnant women should follow the additional safety precaution of not re-entering the treated area for 24 hours after the pesticide has been applied." If the "treated area" in question is a green space beside a sidewalk a pregnant woman frequently uses — or, worse still, a lot adjacent to or just a breeze away from her home, this instruction poses serious challenges.

If a woman knows she is pregnant, she may be able to take steps to limit her exposure to pesticides in her neighbourhood. However, exposure to pesticides can have particularly dire consequences in the earliest stages of a pregnancy — even prior to a woman's knowledge of pregnancy — because it can affect the healthy development of a fetus' nervous system.

There are at least two weeks a month when a woman could be pregnant without knowing it. In a neighbourhood where people apply lawn and garden pesticides, if a woman who intends to become pregnant were to follow the PMRA's instructions to the letter, she would have to avoid the sidewalk for at least those two weeks every month. This might sound extreme, but consider that society already urges women who intend to become pregnant to avoid some prescription and over-the-counter medications, along with alcohol, smoking, tuna, partially cooked eggs, and changing the cat litter (among other items of an ever-growing list). Women of child-bearing age are urged to take daily vitamin supplements that are protective against neural tube defects.

A woman can *choose* whether or not she exposes herself to any of these negative or positive inputs. However, when a woman inhales a neighbour's application of pesticides against chinch

bugs, this is not her choice. If she sees a notification of pesticide use on her neighbour's lawn, her only choice is to stay home or take her chances with exposure, and this is not a choice any reasonable society should impose.

As a province, we have moved towards a system that creates protected zones around watercourses; water, we acknowledge, is basic to life. Women's health is also pretty basic to life. One step towards protecting women's health is to eliminate contaminants in her yard and garden and her neighbours' yards and gardens to allow her greater choice about what chemicals she exposes her body to.

Women in General

Women's bodies have higher lipid content than men's bodies, and there has been long-time concern that toxic substances such as pesticides have greater impacts on women's health than on men's because they and their byproducts tend to bio-accumulate in fatty tissues. Research by the Sierra Club in the United States used chemical exposure data from the US Center for Disease Control to determine that women's, children's, and Mexican-Americans' "pesticide body burden" is higher than men's, with women carrying "significantly higher levels of three of the six organochlorine (OC) pesticides evaluated."

Senior women may face special risks from cosmetic pesticides, since they tend to have longer life-spans than men and therefore experience pesticide exposure over a longer period, *and* they then live a longer time over which they can develop chronic illnesses and illnesses with a long latency. The Ontario College of Family Physicians' report states: "The elderly also have chronic neurological diseases that have been related to long-term pesticide exposure. These include Parkinson's disease, amyotrophic lateral sclerosis, and Alzheimer's disease . . . All these diseases are difficult to treat, which highlights the importance of prevention by reducing lifetime pesticide exposure."

It is also worth noting that women are more likely than men to suffer from Multiple Chemical Sensitivities, an illness that can cause acute and serious distress when the sufferer is exposed to lawn and garden pesticides.

Children

As noted, pesticide testing regimens focus on effects on normal-sized adults, not on children,

yet children face the greater risks of dangerous exposure. While children are less likely to be exposed to pesticides in their work, they eat more food, drink more water, and breathe more air per kilogram of body weight than adults. Children also tend to spend more time outdoors than do adults, and to spend that time playing and breathing close to the grass and to the ground.

Children may be affected more by domestic pesticides than almost any other kind of pesticides. In 1996, the Quebec Poison Control Centre and the Quebec Ministry of Environment and Wildlife released statistics on pesticide poisoning that reported 1,650 poisoning cases in the province. Of these cases, 79.4% were in private homes, and 46.1% of victims were children under five. One third of these children ingested pesticides orally, and just over one-third were exposed following a pesticide application.

The Ontario College report pays particular attention to children's pesticide exposure: "Children are another very important group with specific vulnerability to pesticides. Family doctors need to consider possible pesticide exposures, *which can occur by take-home exposures from a parent's workplace, use of pesticides on lawns, gardens, schoolyards, and parks, or by treating/spraying pets or homes* [emphasis added] . . . We have reported on many studies showing excess cancer risk in children exposed directly or indirectly to pesticides. These associated cancers include: brain cancer, kidney cancer in offspring of occupationally exposed men, and excess acute lymphocytic leukemia in children whose mothers used pesticides in homes and gardens during pregnancy. In spite of the important concern that pesticides may be toxic to the developing nervous system, only two studies (both positive) specifically examined neurological effects in children."

Whether the scientific evidence of health impacts such as cancer or neurological effects is conclusive or not, why on earth would we take the chance that children might be harmed, just for the sake of *non-essential* applications of pesticides on lawns, gardens, and landscaping?

Gender-Based Analysis Lacking

Recommendations and regulations on cosmetic pesticides have not undergone gender analysis to include particular impacts on women.

The current requirement for the sale of dangerous and harmful domestic pesticides is that they must be sold behind the counter, by trained and certified staff who can help ensure that

individuals receive product-specific information when they purchase these products. Given what we have said about potential health risks to women and children, product-specific information is not enough. As the Ontario College has said and as we quoted above, “Women who intend to become pregnant need specific information about *avoiding* pesticide use in their homes, gardens, and workplaces [emphasis added]”; information on how to use domestic pesticides safely is not what they need. Further, “certified staff” are not trained to assess whether or not pesticide-buyers have *neighbours* who intend to become pregnant. A public policy solution aimed at individual consumers and their household safety cannot be sufficient. As soon as the pesticides are applied near a sidewalk or other shared space, the issue becomes a *neighbourhood* issue.

If there is any public policy benefit of cosmetic pesticides, one would assume it must be economic: the sale and application of pesticides creates profit that goes somewhere. However, while women and children disproportionately bear the health impacts of pesticides, it is easy to surmise that a gender-based analysis of economic impacts would reveal that women and children are also the groups the least likely to gain economic benefit from cosmetic pesticides. Children neither sell nor apply pesticides. Women of child-bearing age are prohibited by reason of safety from applying pesticides, and women of child-bearing age are a significant proportion of the workforce.

It is true that if cosmetic pesticides are banned province-wide, lawn care companies will have to adapt, and this will have costs. However, we could also predict that more of the cost of lawn and landscaping care would stay in the local community, rather than being sent out of the community to transnational chemical corporations. Organic lawn-care and gardening are more labour-intensive: if the demand for tidy lawns and gardens remains strong, this could lead to more (and safer and more healthy) local labour opportunities for both women and men.

Conclusion

When the 1997 Round Table on Resource Land Use and Stewardship reviewed the “Non-essential Use of Pesticides,” they found that “not enough care [was] being taken to protect the interests of homeowners, their neighbours and especially those who suffer from extreme sensitivity to pesticide formulations.” They recommended a certification program for all those involved in the sale of home and garden pesticides, and this has been implemented, as discussed above. However, they also anticipated that municipalities might ban cosmetic pesticides, stating that “Urban areas are a special case of people living in a relatively confined

space, and they call for the utmost care in applying these poisonous materials.” Ten years later, municipal bans have not followed. Municipalities have stated that they are looking to the Province for leadership on banning cosmetic pesticides; this only makes sense in a province with the majority of its landscape outside municipal boundaries.

The Prince Edward Island Advisory Council on the Status of Women calls on the Government of Prince Edward Island to ban cosmetic pesticides and therefore to eliminate unnecessary potential health risks for women and their families and for all current and future citizens of Prince Edward Island.