

**House of Commons, Standing Committee on Health
Lung Cancer in Canada, 18 June 2015**

**Speaking Notes for Erica Phipps, Executive Director, Canadian Partnership for
Children's Health and Environment (CPCHE)**

Good afternoon and thank you for the opportunity to contribute to this important discussion. I'd like to share a few perspectives based on our work to raise public awareness – particularly among families with young children – about the lung cancer risk posed by radon and what can be done to reduce that risk.

My name is Erica Phipps, and I serve as Executive Director of the Canadian Partnership for Children's Health and Environment, or CPCHE.¹ CPCHE is a collaboration among public health, medical, legal and child-focused organizations that have been working together for nearly 15 years to advance children's environmental health protection in Canada. The ten core CPCHE partners include the Canadian Environmental Law Association – you'll be hearing from my colleague Kathleen Cooper in a few minutes – and the Canadian Child Care Federation, which has been actively involved in our work to promote radon action in the child care sector.

Much of our work within CPCHE involves engaging with and learning from service providers – such as public health nurses and child care providers – who work with families on a day-to-day basis, and empowering them to integrate children's environmental health protection into the support they provide to families. So I thought it would be fitting to start with one of their voices.

These are the words of a child care provider in Winnipeg who was one of the participants in the radon "Vanguard Initiative" that CPCHE and the Canadian Child Care Federation undertook last year with support from Health Canada.² She said:

"I wouldn't want to work in a centre that had [high radon] and didn't do anything about it. I wouldn't want to do that. I wouldn't work there. And I wouldn't put my children in the centre either."

This child care professional had known very little about radon before getting involved but she, like others in the project, was motivated to learn more because of her dedication to the children in her care and her desire for a healthy workplace. It did not take her – or any of the other child care staff involved in the project – very long to "get" that this is a critical issue and one that demands action. Through the Vanguard project, she and other child care providers shared information on radon with client families and voluntarily tested their own child care centres for radon. Through that process, the project participants made the transition from a group of people who had hardly heard of radon to being nearly unanimous in rating it as a high priority for health in their centers.

And when asked what they thought would need to happen to protect children and staff from this lung cancer risk, most felt that radon testing would somehow need to be made mandatory.

In the words of another participant:

"What I see in child care tends to be... people don't take action unless they're forced to, unfortunately. ...It's like carbon monoxide detectors, right? We never had them before and then finally we were forced to have them and so everybody got them. And you know meanwhile they're only like \$40 or \$50, and yet

¹ www.healthyenvironmentforkids.ca

² *CPCHE/CCCF Vanguard Initiative to Promote Radon Awareness Among Child Care/Early Childhood Professionals and the Families They Serve: Project Report* (Sept. 2014) available at: <http://www.healthyenvironmentforkids.ca/resources/cpchecccf-vanguard-initiative-promote-radon-awareness-among-child-careearly-childhood-prof>

people didn't do that before it was made sort of expected of us. So... I think unless it was made mandatory or there was some kind of assistance in ensuring that it was done, I think it would be unlikely to get done..., when it *should* be.

This viewpoint was echoed by others, and supported by the results of the Vanguard project. Despite good intentions and the fact that radon test devices were supplied directly to the participating daycares, only two-thirds of them were able to complete the testing. What this suggests is that for a sector in which staff are already stretched, providing them with information – and even providing them with DIY test devices—is not likely to be enough.

CPCHE has been putting significant effort into radon outreach over the past few years, including developing a plain language tip card for families³, and teaming up with Health Canada, the Lung Association, Parachute and the Canadian Association of Fire Chiefs in a campaign⁴ that links radon testing to the more familiar home safety messages about smoke and CO detector use. I've brought copies of these resources, which you are welcome to take with you.

We have prioritized radon as a focus of our collective work because of the well-established high level of risk posed by exposure to radon and because we firmly believe that protecting children is an investment in lifelong health. The harm from radon exposure is cumulative, which means that if we can ratchet down exposures during childhood – by promoting radon safety in homes **and** by zeroing in on the 6-8 hours that many children spend per day in child care or other learning environment – we can give Canada's kids a better start towards lifelong health, such that their generation and future generations are less likely to suffer from the devastation of lung cancer.

There is also an equity question here. Radon exposure is a prime example of a housing-related health risk that is beyond the ability of low-income people, especially tenants, to address on their own. Knowing about radon is not enough if you can't afford to buy a test kit, let alone pay for a remediation. It is just this sort of issue that we seeking to address in a new CPCHE-led initiative called RentSafe that will build service sector capacity to respond to health concerns in low-income housing. Reducing the financial barrier to radon mitigation should be a matter of priority if we are to achieve the goal of healthier housing for *all* Canadians.

Federal leadership to help families get action on avoidable health risks in their housing – including radon – would be a well-targeted investment in the health and well-being of the people of Canada.

In our toxics work within the CPCHE partnership, we frequently bump up against the complexities of scientific evidence, fraught with great debates about cause-and-effect and proof of harm. Radon, regrettably, is refreshingly simple. Radon causes lung cancer. Full stop. We know how to test for it. We know what to do if levels are high. We know that it amplifies the risk posed by the other big lung cancer culprit: tobacco smoke.

Now we need the courage and investment to ensure that the homes and buildings where we spend time – and especially where our children spend time – are not a source of this preventable lung cancer risk.

³ CPCHE's *Reduce Radon* tip card is available, in English and French, at: <http://www.healthyenvironmentforkids.ca/resources/reduce-radon>

⁴ *Home Safety for Your Kids' Sake: Check It Today* campaign online, with mini-poster available in English, French and 5 additional languages at: <http://www.healthyenvironmentforkids.ca/campaign/home-safety>