

March 27, 2023

The Honourable Mark Holland, P.C., M.P.  
Leader of the Government in the House of Commons  
House of Commons  
Ottawa, Ontario K1A 0A6  
[mark.holland@parl.gc.ca](mailto:mark.holland@parl.gc.ca)

**Re: Bill C-226, An Act respecting the development of a national strategy to assess, prevent and address environmental racism and to advance environmental justice**

Dear Mr. Holland:

We write today as the **Canadian Partnership for Children's Health and Environment (CPCHE)** to urge the Government of Canada to seize this unprecedented opportunity to prevent and address environmental racism and promote environmental justice by ensuring the timely passage of Bill C-226, rapidly initiating an implementation framework, and creating an Office for Environmental Justice.

Your leadership is essential to ensure that all children in Canada, irrespective of their Indigeneity, race or socio-economic status, are protected from exposures to environmental hazards that jeopardize their health, disrupt the normal development of their growing bodies and brains, increase the risk of developing chronic diseases later in life, and exacerbate health and social inequities. All children deserve to grow up in environments that support, rather than impede, their health and well-being.

CPCHE is a national collaboration of organizations with overlapping missions that have been working together for more than two decades to improve children's environmental health in Canada ([www.healthyenvironmentforkids.ca](http://www.healthyenvironmentforkids.ca)). Our aim is to increase awareness, mobilize knowledge and catalyze action on children's environmental health issues, with a specific focus on preventing/reducing exposures to toxic chemicals and pollutants during the vulnerable stages of fetal and child development. CPCHE's rigorous adherence to facts and scientific evidence has positioned it as a respected source of information on children's environmental health issues.

## **Environmental exposures are a key driver of child health outcomes**

An expanding body of scientific knowledge underscores the role of early-life environmental exposures in multiple chronic diseases and adverse developmental outcomes, including asthma, neurodevelopmental disorders, and cancer. Environmental exposures of concern include: air pollution, climate change threats (heat stress, wildfire smoke, vector-borne diseases, flooding), contaminants in food and water, and hazardous chemicals in products.

### **Children are more vulnerable to environmental toxicants and pollution**

Compared to adults, children are more vulnerable to the health effects of environmental exposures because of differences in size, intake, development, and behaviour. Per kilogram of body weight, children eat more, drink more, and breathe more than adults, leading to greater exposures to contaminants. Their behaviours, such as hand-to-mouth activity, also lead to greater exposures. Babies and children are more susceptible to harm because their immune and metabolic systems are immature,

and their brains and organ systems are undergoing dynamic development that opens up ‘windows of vulnerability’. Environmental exposures and vulnerability to harm are inequitably distributed: children experiencing poverty, racism, the effects of colonialism, and other forms marginalization are at greater risk.<sup>1,2</sup>

The health implications of *in utero* and childhood exposure to environmental exposures are wide ranging and include preterm birth,<sup>3</sup> respiratory disease (including asthma),<sup>4</sup> metabolic dysfunction and development of Type 2 diabetes,<sup>5</sup> impaired cognitive development<sup>6</sup> and the development of several chronic diseases into adulthood, such as cardiovascular disease, obesity, Alzheimer’s disease and cancer.<sup>7,8</sup> Preventing exposure to environmental risks across childhood development (including pre-conception and prenatally) is essential to promoting equitable health of all people in Canada.

**Environmental injustice results in disproportionate environmental exposures among Indigenous, Black and other racialized children, and children living in poverty**

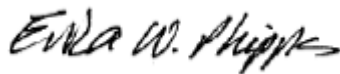
Some populations in Canada face inequitable environmental exposures,<sup>9</sup> such as Indigenous, Black and other racialized communities, people living in poverty, people living in unhealthy housing conditions, workers facing occupational exposures, and those whose diets and cultural practices may increase their exposures to toxicants (e.g., in country foods). Children in Indigenous communities continue to face water insecurity, including drinking water contamination and advisories on reserves,<sup>2,10,11</sup> disproportionate impacts of climate change,<sup>12</sup> and environmental injustice due to toxic contaminants.<sup>13,14</sup> African Nova Scotian communities have higher exposure to environmental hazards due to the siting of hazardous waste and industrial sites in established communities.<sup>9</sup> Racialized communities across Canada have higher exposures to fine particulate matter air pollution, which is associated with a greater risk of cardiovascular and respiratory mortality.<sup>15</sup> In Canada’s three largest cities (Toronto, Montreal and Vancouver), children in low-income households face the highest exposure to air traffic pollution (measured by NO<sub>2</sub> exposure), and in Vancouver lower income racialized children disproportionately experience higher exposure to air traffic pollution than white children in all household income quintiles.<sup>16</sup>

The effects of environmental racism (the disproportionate burden of toxic exposures and its health implications) are further compounded by other existing inequalities faced by Indigenous and other racialized groups, such as poverty, low-income, food insecurity and reduced access to healthcare.<sup>9</sup>

**Now is the time to act**

The alarming and ever-expanding scientific evidence of the harm caused to children’s developing bodies, brains and lifelong prospects by the plethora of toxic substances and pollutants, to which Indigenous, Black, other racialized and low-income communities are disproportionately exposed, demands urgent and decisive action. We urge you to exercise your leadership in ensuring the timely passage of Bill C-226 and the initiation of the strategies contained therein.

Yours sincerely,



Erica W. Phipps, MPH, PhD  
Executive Director

*Signed on behalf of:*

## Canadian Partnership for Children’s Health and Environment (CPCHE) – Partner Organizations\*



## Canadian Partnership for Children’s Health and Environment (CPCHE) – Affiliate Organizations\*



*NB: CPCHE’s views and recommendations on Bill C-226 have also been shared with: the Right Honourable Justin Trudeau, P.C., M.P., Prime Minister of Canada; the Honourable Pierre Poilievre, M.P., Leader of the Conservative Party of Canada; Mr. Yves-François Blanchet, M.P., Leader of the Bloc Québécois; Mr. Jagmeet Singh, M.P., Leader of the New Democratic Party; Ms. Elizabeth May, M.P., Leader of the Green Party (and Sponsor of Bill C-226); The Honourable Jean-Yves Duclos, P.C., M.P., Minister of Health; the Honourable Steven Guilbeault, P.C., M.P., Minister of Environment and Climate Change; Hon. Andrew Scheer, P.C., M.P., House Leader of the Official Opposition; M. Alain Thérien, M.P., House Leader of the Bloc Québécois; Mr. Peter Julian, M.P., House Leader of the New Democratic Party; the Members of the House of Commons Standing Committee on Health (HESA); and, the Members of the House of Commons Standing Committee on Environment and Sustainable Development (ENVI)*

*\*For more on CPCHE including the full list of CPCHE organizations, please visit: [www.healthyenvironmentforkids.ca](http://www.healthyenvironmentforkids.ca)*

## References

1. Raphael, D., Bryant, T., et al. (2020). *Social Determinants of Health: The Canadian Facts*. <http://www.thecanadianfacts.org>
2. UNICEF Canada (2022). *UNICEF Report Card 17*. <http://unicef.ca/irc17>
3. Bátiz, L.F., Illanes, S.E. (2022). Climate change and preterm birth: A narrative review. *Environmental Advances*, 10(100316). <https://doi.org/10.1016/j.envadv.2022.100316>
4. Dick S, Friend A, et al. (2014). A systematic review of associations between environmental exposures and development of asthma in children aged up to 9 years. *BMJ Open*, 4: e006554. [doi.org/10.1136/bmjopen-2014-006554](https://doi.org/10.1136/bmjopen-2014-006554)
5. Alderete TL, Chen Z, et al. (2018). Ambient and traffic-related air pollution exposures as novel risk factors for metabolic dysfunction and type 2 diabetes. *Curr Epidemiol Rep*, 5: 79–91. [doi.org/10.1007/s40471-018-0140-5](https://doi.org/10.1007/s40471-018-0140-5)
6. Rock, K.D., Patisaul, H.B. (2018). Environmental Mechanisms of Neurodevelopmental Toxicity. *Current Environmental Health Reports*, 5(1):145-157. <https://doi.org/10.1007/s40572-018-0185-0>
7. Cooper K, Marshall L, et al. (2011). *Early Exposures to Hazardous Chemicals/Pollution and Associations with Chronic Disease: A Scoping Review: Executive Summary*. A report from the Canadian Environmental Law Association, the Ontario College of Family Physicians and the Environmental Health Institute of Canada. [https://healthyenvironmentforkids.ca/2011/06/25/ee-and-cd-execsumm\\_en/](https://healthyenvironmentforkids.ca/2011/06/25/ee-and-cd-execsumm_en/)
8. Vrijheid, M, Casas M, et al. (2016). Environmental pollutants and child health – A review of recent concerns. *International Journal of Hygiene and Environmental Health*; 219(4-5): 331-342. <https://doi.org/10.1016/j.ijheh.2016.05.001>
9. Waldron, I. (2020). “Environmental Racism in Canada”. *The Canadian Commission for UNESCO’s IdeaLab*. <https://en.ccunesco.ca/-/media/Files/Unesco/Resources/2020/07/EnvironmentalRacismCanada.pdf>
10. Lane K, Trueman BF, et al. (2020). Inorganic contaminants in Canadian First Nation community water systems. *Journal of Water and Health*. 18(5):728-740. <https://doi.org/10.2166/wh.2020.185>
11. Sarkar, Hanrahan, M., & Hudson, A. (2015). Water insecurity in Canadian Indigenous communities: some inconvenient truths. *Rural and Remote Health*, 15(4), 3354–3354. <https://doi.org/10.22605/RRH3354>
12. Health Canada (2022). Climate Change and Health (accessed October 11, 2022) <https://www.canada.ca/en/health-canada/services/climate-change-health.html>
13. Larsen K, Black P, et al. (2022). Screening-level assessment of cancer risk associated with ambient air exposure in Aamjiwnaang First Nation. *International Journal of Environmental Health Research*. 32(5):1055-1066 <https://doi.org/10.1080/09603123.2020.1827226>
14. Phillbert, A., Fillion, M., et al (2022). Past mercury exposure and current symptoms of nervous system dysfunction in adults of a First Nation community (Canada). *Environmental Health*; 21(34) <https://doi.org/10.1186/s12940-022-00838-y>
15. Pinault, L., et al (2017). Exposure to fine particulate matter air pollution in Canada. *Statistics Canada Health Reports*, 28(3): 9-16. <https://www150.statcan.gc.ca/n1/pub/82-003-x/2017003/article/14781-eng.pdf>
16. Pinault L, Crouse D, Jerret M, Brauer M, Tjepkema M. (2016). Socioeconomic Differences in Nitrogen Dioxide Ambient Air Pollution Exposure Among Children in the Three Largest Canadian Cities. *Statistics Canada Health Reports*, 27(7): 3-9. <https://www150.statcan.gc.ca/n1/pub/82-003-x/2016007/article/14644-eng.pdf>