July 22, 2026

Government of Canada
engagement@pco-bcp.gc.ca

Re: Submission in response to public consultation on timely decision-making for major projects

As a partnership of organizations working collectively to advance children's environmental health protection, we, the Canadian Partnership for Children's Health and Environment (CPCHE), respectfully submit a statement of deep concern in response to the government's proposal to fast-track major projects by limiting the timeline for environmental impact assessments and consultation with Indigenous peoples and, in some instances, creating exemptions from or reducing the scope of established assessment and permitting procedures.

We wish to respond, in particular, to the second question posed in the public consultation document which asks, "What are your views/general impressions on these proposals to improve regulatory efficiency related to building major projects faster in Canada?"

Short-cutting the systems designed to protect environments and health threatens to short-change the future of our children and our nation

We are deeply concerned that a short-sighted view of the country's economic interests, with a "build it fast" mentality, will put into jeopardy the longer-term prospects of our nation. The goal of a vibrant and strong Canada cannot be separated from the imperative of protecting the health and well-being of our children, now and into the future. Children's developing bodies and brains are highly susceptible to harm from the risks posed by toxic chemicals, pollution, and climate-related impacts – risks that are inherent in the types of projects that the government proposes to fast-track. Failure to uphold the principles of precaution and the right to a healthy environment, both of which are enshrined in national law, will lead to degraded environments that will put children's health at heightened and preventable risk.

Robust protection of the health and well-being of children is an investment in a healthy and vibrant society. Conversely, exposure to toxic substances, pollutants and other hazards can have life-altering consequences for children and families, increase rates of chronic disease, and decrease the learning potential, mental and cognitive well-being, and productivity of present and future generations. Even low-level exposures to ubiquitous toxic chemicals contribute to adverse outcomes in children,[i] including disruption of children's cognitive and behavioural development.[ii,iii] Early-life exposures to toxic chemicals contribute to neurodevelopmental disabilities including autism, attention-deficit hyperactivity disorder (ADHD), dyslexia, and other cognitive impairments such as reduced IQ, inattentiveness, memory challenges, and anxiety.[iv] The long-term health implications of pre-conception, *in utero,* and childhood exposure to toxic substances include asthma and other respiratory disease,[v] metabolic dysfunction and Type 2 diabetes,[vi] impaired cognitive development,[vii] cardiovascular disease, Alzheimer's disease, and cancer.[viii,ix]

Arbitrary time-limits are not adequately justified nor acceptable

We are concerned about the seemingly arbitrary limit of one year for federal review and decision-making, a timeframe for which the government has not provided sufficient justification. What evidence has the government used to determine that one year is sufficient for the necessary assessments and to ensure respectful

and fulsome consultations with Indigenous peoples and other affected communities? We fear that this arbitrary time limit will lead to questionable short-cuts, decision-making driven by politics instead of evidence, and regrettable decisions that will have long-lasting repercussions for public health and the environment.

The fast-track proposal undermines evidence-informed decision-making and must be reconsidered

The fast-track proposal appear to be a major step backwards in the systems of evidence-based decision-making that have been painstakingly created over decades towards the protection of the environment and, by extension, the health of our children and communities. We urge the government to revise the proposed approach to:

- Prioritize population health and health equity, with a specific focus on the health and well-being of current and future generations of children. The well-being of our children is central to the economic well-being of our nation.
- Retain and strengthen the environmental and health assessment processes that are currently in place, while adopting efficiency measures, where feasible, that reduce siloed approaches and support integrated decision-making across relevant ministries, without undermining integrity.
- Avoid short-changing or time-limiting consultations with Indigenous peoples. Such constraints are inherently inconsistent with the principles of respect, reconciliation, and Indigenous sovereignty.

In summary, we call upon the government to retract its proposal to fast-track major projects in the manner outlined in the discussion paper. Children's environmental health protection is a cornerstone of our well-being as a society. We urge you to exercise your leadership and resist the allure of short-term economic gain in favour of long-term protection of all of Canada's peoples and our shared environments, now and into the future.

Sincerely,

Erica W. Phipps, MPH, PhD
Executive Director

Who We Are

The Canadian Partnership for Children's Health and Environment (CPCHE) is a national collaboration of organizations working together since 2001 to advance children's environmental health in Canada. CPCHE's 17 partners and affiliates have expertise in clinical and public health, environmental protection, law and policy, child care, education, disability advocacy, and health equity. CPCHE organizations work across disciplines to synthesize scientific evidence, mobilize knowledge, foster intersectoral solutions, and support informed decision-making.

www.healthy environment forkids.ca

[i] Birnbaum L, Jung P. (2011). From Endocrine Disruptors to Nanomaterials: Advancing Our Understanding Of Environmental Health To Protect Public Health. *Health Affairs*, 30: 814-22. doi.org/10.1377/hlthaff.2010.1225

[ii] Rauh VA & Margolis AE. (2016). Research Review: Environmental exposures, neurodevelopment, and child mental health – new paradigms for the study of brain and behavioral effects. *Journal of Child Psychology and Psychiatry*, 57; 7: 775-793. doi.org/10.1111/jcpp.12537

[iii] Grandjean P & Landrigan P. (2014). Neurobeahavioural effects of developmental toxicity. *The Lancet Neural*, *13*: 330-38. doi.org/10.1016/S1474-4422(13)70278-3

[iv] Ibid.

[v] 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

[vi] 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

[vii] 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

[viii] Cooper K, Marshall L, et al (2011) *Early Exposures to Hazardous Chemicals/Pollution and Associations with Chronic Disease: A Scoping Review*: Executive Summary.

[ix] 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