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NICNAS Existing Chemicals Program Review  
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### **SUBMISSION:**

#### **Promoting Safer Chemical Use: Towards better regulation of chemicals in Australia.**

We are outraged by the lack of chemical assessments and serious impacts that chemicals are having on our lives, the planet and children - our future generations. Government has a moral and ethical responsibility to protect the public from exposure to hazardous chemicals that can cause diseases and disability. As the government owes a duty of care to the Australian population, the main priority for chemical regulation must be the protection of human health and safety with no risk to the environment. Human health and environment must not take second place to industry profits.

We are pleased that NICNAS is engaging the community on the very important issue of better regulation of chemicals. It is unacceptable that some 75% of all industrial chemicals traded globally lack adequate health, safety and environmental information as we live in a chemical soup and many individuals are suffering from the harmful impacts of chemical exposures. The full impact of chemical injury on human health is unknown as studies are not done to ascertain this. Some individuals have been sensitised by chemicals and live with disabling chemical sensitivity (MCS). Such individuals are seriously disadvantaged in the chemical regulation process and access to health and welfare services.

The issue of health and environmental impacts of chemicals is essentially a public health issue and as no data has been gathered in an effort to estimate the chemicals involved, the diseases they cause, the numbers injured, and the social cost of chemicals, this review is timely. I am aware that there is a clinical review of Multiple Chemical Sensitivity (MCS) currently underway by the Office of Chemical Safety and there is some cross-over between the two reviews.

NICNAS needs to recognise that chemical exposure and any resultant chemical sensitisation is not limited to the occupational environment. Toxic exposures also take place in the home, the school, the outdoor environment, recreational pursuits and from personal care products and pharmaceuticals. For the majority of those people, solvents, pesticides and fragrances represent the most common source of exposure. Products we bring into our homes are full of harmful chemicals.

While the basic International Human Right to Health is understood, it has never been legislated and therefore is not enforceable by Law. This needs to be rectified as a priority and complimented by the strategies in the World Health Organisation Bangkok Charter for Health Promotion.

Special attention now needs to be paid to chemical regulation and legislation to ensure a high level of protection from harm.

We commend NICNAS for the review and propose the following recommendations:

As health is a major determinant of socioeconomic and political development the Right to Health must be enshrined in legislation and enforceable by Law.

The legislated Right to Health must be accompanied by the adoption of the Bangkok Charter for Health Promotion making health a core responsibility for all of government and to ensure environmentally sustainable chemicals/products.

Legislation to establish a registration and assessment process for industrial chemicals in Australia is essential. All chemicals must undergo stringent registration and risk assessment and the new legislation should prohibit the marketing of any chemical for which such basic health and environmental safety data have not been provided.

Legislation must be enacted to empower NICNAS to ban, phase-out, restrict and acquire information about chemicals and products from manufacturers. Manufacturers who are not forthcoming with new safety data or information about adverse health and environmental impacts of their chemicals/products should be liable for heavy penalties or their products removed from the market. Prioritisation for chemical review should be as follows:

- known human allergens,
- sensitisers,
- neurotoxins
- lipid soluble and found to build up in the environment and biological fluids of humans

- carcinogens, mutagens and reproductive toxins
- persistent bioaccumulative toxic substances
- substances such as synthetic musk compounds that can damage detoxification processes.

A time frame must be set for review of all chemicals on the marketplace.

NICNAS must establish a national chemical surveillance system as a priority to gather data on the impacts of chemicals on health and the environment. The surveillance system should link to other monitoring systems e.g. birth defects, cancer. Regular body burden monitoring urgently needs to be established in Australia as per the US Center for Disease Control NHEXAS studies [www.cdc.gov/exposurereport](http://www.cdc.gov/exposurereport). The body burden studies should assist to prioritise chemicals in urgent need of review and fast track them from the market and ensure that the impacts of chemicals are being properly identified.

The UK Royal Commission on Environmental Pollution in their 24th Report in 2003 recommended substitution of hazardous substances with those of lower hazard and where synthetic chemicals are found in biological fluids such as breast milk and human tissue, they should be removed from the market immediately. Such legislation should be introduced in Australia as a priority.

Legislation also needs to encourage environmentally sustainable products and processes. NICNAS should adopt substitution of hazardous substances with others of lower hazard. This should be the central objective of chemicals policy as per the UK Royal Commission on Environmental Pollution 24th report Chemicals in Products (p.173 Substitution no.36). Green chemistry and reduced chemical usage should be encouraged and rewarded.

Better application of the precautionary principle than currently is the case.

Chemicals policy and programs must be proactive not reactive.

NICNAS must have the legislative power to engage in random tests as part of their enforcement policies with results made public.

Downstream users of chemicals must be identified and registered. NICNAS must be able to track chemical usage and disposal and engage with industry and the community for effective regulation and usage.

Legislate the polluter pays principle. The private sector has a responsibility to lessen health and environmental impacts. Manufacturers must take responsibility for their chemicals/products. They must be responsible for any clean ups that are required, take back products and dispose of them responsibly. Manufacturers must be able to do a chemical audit of their products at all times.

Australia must be able to make use of the powers of the WTO to restrict the marketing or use of dangerous substances or products containing them from being imported into Australia. We also must prohibit production of the same chemicals here.

According to the ACCC products should be safe. As most chemicals do not have adequate data to support safety, the onus of safety should be a corporate responsibility. The onus should never be on consumers to prove harm.

Proper labelling of products is essential as these can be hidden sources of chemical exposure which can cause harm (including medical emergencies). All ingredients must be listed on the label in descending order of toxicity. Non-English speaking people must be able to access information about ingredients in terms and language they understand. Consumers must have access to full information, especially when there is a need to know.

Legislated Community Right to Know must replace commercial confidentiality which allows hidden sources of chemicals. Commercial secrets are unacceptable to consumers - especially those in 'at risk' populations. Legislative protection is essential to allow at risk groups to avoid unwanted exposures and adverse health consequences. It is reprehensible for products to contain hidden ingredients that can harm human health.

New chemicals legislation should take into account consumer access to information about chemicals used in public buildings or products purchased. Currently a consumer has no right to know which chemicals have been used e.g. name of chemical used in recent pesticide treatment. Details of the names of products/chemicals must be available to consumers on a need to know basis and MSDS readily available e.g. pesticide sensitive individual. The current legislation only allows a medical practitioner to acquire such information and GP's are not trained in chemical injury and sensitisation therefore patients and consumers have been unable to access this info.

Legislation for chemicals should include emission ratings. Low emission products must be mandatory especially for the built environment. This should include building products, furnishings, soft furnishings, cleaning products and personal care products. Strong fragrances can add significantly to VOC levels indoors.

As a priority, an investigation needs to be held into the toxicity of fragrances and problems associated with fragrance exposure in the community. Fragrances are mixtures of chemicals, mostly solvents. They can contain known human allergens, sensitising agents, carcinogens, neurotoxins, endocrine disruptors. Urgent legislation is essential to ensure that the strength of the odours/fumes and the life of the fragrance is reduced. Fragrances should not be discernable any more than one meter away from the wearer or point of application e.g. detergents,

disinfectants, laundry products etc and should degrade in a short space of time. The use of fragrances in personal care products is of concern as the chemistry of mixtures is not well understood and such products are usually applied to the skin several times per day. They represent a major health threat.

An enquiry must be initiated, as a priority, to investigate the problems caused by allergens and chemicals in personal care products. The effects of these on at risk groups, in particular the foetus, infants, children and adolescents needs to be ascertained. Children at various stages of development must be protected from chemicals that can affect their development and future health.

Childrens products must be screened for sensitisers, neurotoxins, lipophilic substances, CMRs, PBTs, and chemicals such as synthetic musk compounds that damage detoxification mechanisms. Adolescents in the workplace also require special protection from some exposures.

At risk groups must be afforded a higher level of protection from chemical exposures than normal individuals. The new regulatory structure for chemicals must address the issues of those in at risk groups in the community, in particular pregnant women, children, those with allergy, respiratory disease and those with MCS. Some data urgently needs to be gathered to establish a baseline of such special need as a reference point.

Public education about the hazards of chemical exposure and the health problems that can arise is urgently needed. High profile media campaigns such as 'quit' need to be initiated. Special attention needs to be paid to the more serious impacts of chemicals on 'at risk' groups such as chemically sensitive individuals, asthmatics, infants and the foetus. Educational material should be aimed at encouraging individuals to recognise adverse reactions as they occur and to reduce their usage of chemicals in favor of less toxic options.

Consultation with relevant bodies, professional organisations, community groups and sufferers is required to produce appropriate information sheets on MCS.

NICNAS needs to be a one-stop-shop for complaints and information. The shop front should gather and analyse all complaints as a quality assurance measure to show that NICNAS assessments and regulatory processes are adequate. Consumers should be encouraged to make complaints. Currently inconsistencies exist between state/federal govt public hospitals use of pesticides. Monthly spraying of CARBAMATES is a grave concern in a QLD hospital

Greater sensitivity to consumers is needed. NICNAS needs to have built-in processes for regular engagement with the community on chemical issues. Addressing consumer issues is vital to ensure that chemical regulation reflects our concerns and ensures public health and safety.

Chemicals cause avoidable disease and health care costs. Health problems caused by chemicals are not investigated and therefore unknown. Some people develop MCS which is currently unrecognised and virtually untreatable, individuals with MCS must be widely consulted by government who should:

1. investigate the level of disease and disability,
2. offer education about MCS to the victim and family,
3. assist with management strategies
4. offer treatment where possible
5. ensure access to essential health and allied care including nursing home access and other supportive care,
6. provide an adequate level of disability service,
7. ensure an adequate level of welfare support to deal with special needs
8. establish legislated clean zones for MCS sufferers to assist with chemical free living which is the cornerstone of dealing with MCS
9. provide chemical free housing
10. give every assistance to ameliorate the problems of social isolation
11. establish individual need and provide any other considerations necessary.

A commitment must be given by Federal Health for an adequate level of funding to establish an ongoing program of research into MCS, that includes:

- Monitoring MCS prevalence,
- Analyzing the social problems that MCS causes and
- The cost to the community of MCS and diseases associated with chemical exposures
- To assist with the research programs MCS should be declared a notifiable disease in Australia

Investigate current guidelines for chemical usage to establish a public health policy on chemical management. The aim of the policy should be to use less harmful chemicals in order to minimise adverse health impacts on individuals who suffer from allergy, asthma other respiratory disorders and those who are sensitive to chemicals.

Some effort needs to be made to research the full range of diseases that are triggered or caused by chemical exposures, and the cost of these to the community in terms of health, allied care and other welfare services. Only in this context can we understand the full impact of chemical disease. Some individuals will be born already damaged by chemical exposure and will experience cradle to grave disability and ill health.

Thank you for the opportunity to input the review.

Signed