

Resolution 06-04

Supporting Safer Chemicals Policies to Benefit Human and Environmental Health

- Whereas:** Harmful chemical exposures pose the greatest threat to children and women before and through reproductive age, impacting children's health, development, behavior and learning, with exposure to neurotoxic chemicals in critical child development periods linked to lifelong deficits in brain functionⁱ; and
- Whereas:** The 'chemical trespass' nature of toxic environmental exposures makes it difficult or impossible for persons to opt out of exposure on behalf of themselves or their children, necessitating societal measures to protect people, especially children, against exposure, since many of the chemicals are ubiquitous and personal action has limited ability to reduce exposure; and
- Whereas:** Persistent bioaccumulative toxic chemicals (PBTs) are linked to serious health effects including birth defects, learning and behavioral disorders in young children, cancers, and reproductive failureⁱⁱ; and
- Whereas:** PBTs persist in the environment, bioaccumulate and biomagnify in food chainsⁱⁱⁱ; and
- Whereas:** Studies have found high levels of PBTs, polychlorinated biphenyls (PCB)s, lead and polybrominated diphenyl ethers (PBDEs) as well as other hazardous chemicals such as pesticides and phthalates, in the bodies and homes of Washington residents^{iv}; and
- Whereas:** The risk evaluation of PBTs is commonly calculated on individual chemicals while children and the general population are exposed to multiple chemicals and the risks of these mixtures have not been assessed; and
- Whereas:** Recent scientific studies have documented rapidly rising levels of PBDEs in human breast milk, with levels in Puget Sound women documented at levels from 20 to 40 times higher than their European and Japanese counterparts^v; and
- Whereas:** The Centers for Disease Control (CDC) has conducted body burden testing through urine and blood samples, with study results finding significant levels of dioxins, heavy metals, pesticides and other chemicals^{vi}; and
- Whereas:** A small-scale body burden study has been conducted in Washington State, the Pollution in People report, showing the presence of at least 26 and as many as 39 toxic chemicals in 10 individuals^{vii}; and
- Whereas:** In addition to health impacts suffered by families, individuals, and children, significant economic costs are associated with illnesses linked to environmental exposures, with over \$2 billion per year in health care

costs tied to diseases and disabilities linked to environmental contaminants^{viii}; and

Whereas: More than half of the over 15,000 high-production-volume synthetic chemicals used widely in consumer products and dispersed into the environment, are untested for toxicity^{ix}; and

Whereas: Companies, once motivated to adopt alternative measures, have demonstrated the feasibility of using safer materials, chemicals and processes, and

Whereas: Phasing out the use of potentially toxic chemicals is an essential step in reducing these exposures in crucial fetal, infant and childhood stages of development, as well as reducing these exposures in general populations, through environmental, including fish, contamination^x; and

Whereas: The Washington State Department of Ecology has finalized its Regulation on Persistent Bioaccumulative Toxic Chemicals, addressing phase out of PBTs^{xi}; and

Whereas: **The Washington State Public Health Association supports the elimination of PBTs, in order to keep persistent toxic chemicals from entering the environment in order to prevent harmful exposures^{xii}, including elimination of PBDEs^{xiii};**

Therefore, Be It

Resolved, that: The Washington State Public Health Association (WSPHA) supports safer chemical policies to achieve the phase out of hazardous chemicals, including persistent bioaccumulative toxic chemicals; and, be it further

Resolved, that: The WSPHA encourages further development and use of safer, cost-effective alternative products and materials, including research and development of 'green chemistry', which encourages chemical technologies that reduce or eliminate the use or generation of hazardous substances in the design, manufacture, and use of chemical products^{xiv}; and, be it further

Resolved, that: The WSPHA urges that only the safest chemicals and materials be used to create consumer products and grow food, including that companies are required to provide full information on the health effects of all chemicals placed into the marketplace, with particular attention to potential effects in groups at life stages most harmed by chemical insults, e.g. young children and women who are pregnant or nursing.

Signed by: Rick Porso, WSPHA President 2005-2006

i Chemicals in the environment and developmental toxicity in children: A public health and policy perspective. *Environmental Health Perspective*, 108 (3), S443-S448; Goldman, L.R. and Koduru, S.H. (2000). <http://ehp.niehs.nih.gov/members/2003/6115/6115.html>

ii Environmental Protection Agency; Persistent Bioaccumulative Toxic Chemical Program; About PBTs

<http://www.epa.gov/opptintr/pbt/pubs/faq.htm>

iii Ibid.

iv Sick of Dust: New Report Finds Hazardous Chemicals in Household Dust; March, 2005.

<http://www.safer-products.org/downloads/Dust%20Report.pdf>; and

Flame Retardants in the Bodies of Northwest Residents; Northwest Environmental Watch, Sept. 2004

http://www.northwestwatch.org/toxics/PBDEs_in_NW.pdf

v Northwest Environmental Watch: Flame Retardants in Puget Sound Residents, First Round of Results from a Study on Toxic Body Burdens; February 2004: p. 2

<http://www.northwestwatch.org/pollution>

vi Centers for Disease Control and Prevention. (2005). *Third national report on human exposure to environmental chemicals*. Atlanta, GA

vii “Pollution in People: A Study of Toxic Chemicals in Washingtonians”; Schreder, Erika, Washington Toxics Coalition; May, 2006. <http://www.pollutioninpeople.org/>

viii “What We Know and What We Need to Know”, January, 2005 Davies, Kate, MA, DPhil;

<http://www.iceh.org/pdfs/CHE-WA/AntiochStudy1-05.pdf>

ix Children's Health and the Environment: A New Agenda for Prevention Research; Philip J. Landrigan,¹ Joy E. Carlson,² Cynthia F. Bearer; [Volume 106, Number S3, June 1998](#)

<http://ehp.niehs.nih.gov/docs/1998/Suppl-3/787-794landrigan/abstract.html>

x Madsen, Travis and et al. Growing Threats: Toxic Flame Retardants and Children's Health, 2003

<http://www.environmentalcalifornia.org/reports/GrowingThreats03.pdf> ; and

Schechter, Arnold, MD, Birnbaum, Linda, et.al. Polybrominated Ethers (PBDEs) in US Mothers' Milk

Environmental Health Perspectives Volume 111 Number 14 November 2003, p: 1723-1729

<http://ehp.niehs.nih.gov/members/2003/6466/6466.html>

xi Washington State Department of Ecology, Persistent Bioaccumulative Toxins Regulation; February, 2006

<http://www.ecy.wa.gov/programs/eap/pbt/pbtfaq.html>

xii Washington State Public Health Association, 2004 Support Letter for Phasing Out Persistent Bioaccumulative Toxic Chemicals

xiii; and Adopted Resolution #-04-03 : **Protecting Public Health by Phasing Out Polybrominated Diphenyl Ethers (PBDEs) - Toxic Flame Retardants** 2003-2004.

xiv US Environmental Protection Agency; Green Chemistry Mission Statement;

<http://www.epa.gov/greenchemistry/>; Green Chemistry: Making It Real in the World. Collaborative on Health and the Environment Partnership Call. June 19, 2006. Transcript and background resources available at

http://www.healthandenvironment.org/articles/call_resources/617

Individuals Endorsing Resolution “**Supporting Safer Chemicals Policies to Benefit Human and Environmental Health”:**

L.B. Sandy Rock, MD, MPH

Richard Grady, MD

Co-Chair, Environment & Human Health Committee

Washington Physicians for Social Responsibility

Therese M. Grant, PhD

Laura Hart, MD

J. David Heywood, MD

Sally Goodwin, MD

Charles E. Weems, MD

Katherine Davies M.A., D.Phil.

Janet Primomo, PhD, RN

Karen Bowman, MN, RN, COHN-S

Martin D. Fleck
Executive Director
Washington Physicians for Social Responsibility

Selected List of Organizations Supporting Phase out of PBTs, including PBDEs, through either resolution, or through letters presented to the Washington State legislature:

Washington State Public Health Association
Washington Chapter of the American Academy of Pediatrics
Washington State Medical Association
Washington Academy of Family Physicians
Washington State Nurses Association
Washington Physicians for Social Responsibility
Washington State Association of Occupational Health Nurses
Institute of Neurotoxicology & Neurological Disorders
Institute for Children's Environmental Health

Submitting Authors:

Submitting Primary Author:

Steven G. Gilbert, PhD, DABT – WSPHA Member - Yes
INND (Institute of Neurotoxicology & Neurological Disorders)
8232 14th Ave NE
Seattle, WA 98115
Ph: 206.527.0926
Fx: 206.525.5102
E-mail: sgilbert@innnd.org
Web: www.asmalldoseof.org

Co-Author:

Nancy Dickeman, MA – WSPHA Member – Yes
Toxics Coordinator
Washington Physicians for Social Responsibility
4554 – 12th Ave NE

Seattle WA 98105
Ph: (206) 547-2630 – main office
(206) 354-2170 – cell
nancyd@wpsr.org

Co-Author:

Margaret Shield, PhD – WSPHA Member - Yes
Coalition Coordinator, Toxic-Free Legacy Coalition
4649 Sunnyside Ave N, Ste. 540
Seattle WA 98103
Ph: 206-632-1545 ext 123
mshield@toxicfreelegacy.org
