

20 October 2021

**Ms. Romy Bowers, CEO, Canada Mortgage and Housing Corporation**  
**The Honourable David Lametti, Minister of Justice and Attorney General of Canada**  
**The Honourable Carla Qualtrough, Minister of Employment, Workforce Development and Disability Inclusion**  
**The Right Honourable Justin Trudeau, Prime Minister of Canada**

**Re: Urgent Housing for Those Enduring Severe Environmental Sensitivities**

Dear Government Representatives:

You have received recent letters about our concern for the health and well-being of patients with severe Environmental Sensitivities (ES), including Multiple Chemical Sensitivities (MCS) and Electro-hypersensitivity (EHS) - (ES/MCS/EHS), which has been viewed by the Canadian Human Rights Commission ([The Medical Perspective on Environmental Sensitivities](#)) as a Human Rights-recognized Disability with a policy for accommodation ([www.chrc-ccdp.gc.ca/sites/default/files/policy\\_sensitivity\\_0.pdf](http://www.chrc-ccdp.gc.ca/sites/default/files/policy_sensitivity_0.pdf)).

We are writing you now because the situation has become even more dire. Because of her unrelieved suffering in Rent Geared to Income (RGI) housing, a patient (R.W.) has applied for and been found eligible for Medical Assistance in Dying, which she intends to follow through on before Christmas this year. We, her physicians, have suggested all sorts of solutions, from funding by family or churches or charitable organizations, and have written to all the federal, provincial, and municipal agencies for help, to no avail.

### **Case Criteria and Prevalence**

From the 1960's on, there were seven published case criteria, summarized by the 1999 Consensus on Multiple Chemical sensitivity - first proposed in 1989 by 89 experienced clinicians (Arch Envir Health, 1999; 54:147-149):

1. Symptoms are reproducible with [repeated] chemical exposure.
2. The condition is chronic.
3. Low levels of exposure [below those previously or commonly tolerated] result in the manifestation of symptoms.
4. Symptoms improve or disappear when inciting factors are removed.
5. Responses occur to multiple chemically unrelated substances.
6. The symptoms involve several organ systems.

Although the pattern of occurrence is the same, individual patients experience symptoms in different body systems, and there are no consistently abnormal laboratory tests. These clinical criteria were also confirmed by survey to distinguish between

practices most and least likely to have patients with MCS (McKeown-Eyssen et al, Multiple Chemical Sensitivity; Discriminant Validity of Case Definitions, Archives of Environmental Health, Sept.-Oct. 2001, Vol 54, no.5:406-413), and again by the Environmental Health Committee of the Ontario Ministry of Health and Long Term Care in Dec. 2018 -Care Now- An Action Plan to Improve Care for People with Myalgic Encephalomyelitis/Chronic Fatigue Syndrome (ME/CFS), Fibromyalgia (FM) and Environmental Sensitivities/Multiple Chemical Sensitivity (ES/MCS).  
[https://www.health.gov.on.ca/en/common/ministry/publications/reports/environmental\\_health\\_2018/default.aspx](https://www.health.gov.on.ca/en/common/ministry/publications/reports/environmental_health_2018/default.aspx).

Over one million Canadians have been medically diagnosed with MCS, according to Statistics Canada Canadian Community Health Survey, 2016, and the number is growing each year. Nearly 75% are women. Those in the aging population are doubly over-represented.

### **Suffering**

The majority of people with ES/MCS/EHS are forced to stop working within three years of the first onset of symptoms, through no fault of their own, and many struggle with a disability that makes it difficult to navigate the community and to attend to activities of daily living, particularly if they have no safe home. Because there has been poor education for health care professionals and the public about ES/MCS/EHS, some medical professionals, insurers, employers and landlords tend to disbelieve patients and minimize their symptoms.

Our patient struggled to get her family doctor's support to apply for ODSP, though once she applied, her application was approved. She had noted that her symptoms improved in cleaner air, and eventually had Human Rights Tribunal of Ontario-ordered renovations to make her apartment's indoor air quality safer. However, for unknown reasons, the renovations failed badly.

She has been getting sicker living in an unhealthy confined portion of an apartment, while being unable to address the poor air quality herself. As a result, she has weakened and deteriorated physically. Not only have her symptoms become worse, but she has experienced numerous severe heat and cold episodes. Her capacity to obtain fresh food is extremely limited, and she has become progressively more fatigued. She is no longer able to walk outdoors, which she did daily previously. Her suffering has been unbearable.

As our patient wrote to Prime Minister Trudeau on October 3, 2021, "You stated in your victory speech on September 20, '*We can only move forward if no one is left behind*'. You also stated in another press conference, '*We will stand up for you and work for you every single day*' ". She was asking him to stand up for her and other Canadians with Multiple Chemical Sensitivities, to not be left behind.

## Solutions

As we said, our patients and we have already tried most solutions that do not require government policies or funding.

One of our physicians recalled working with Canada Mortgage and Housing Corporation (CMHC) on a pilot environmental sensitivity house and policy to accommodate people with Environmental Sensitivity (Drerup O, Mattock C, Rouseau D, Salares V., 1990). We learned that a program called “Residential Rehabilitation Assistance Program for Persons with Disabilities” existed in 2009, but is no longer available. [http://www.cmhc-schl.gc.ca/en/co/prfinas\\_003.0](http://www.cmhc-schl.gc.ca/en/co/prfinas_003.0).

The physician contacted Mr. Geoff Beere, who would be willing to explore building tiny houses for people disabled with ES/MCS/EHS. He has given permission for his contact information to be given (BEERE BUILDING Corp., Geoff Beere, President, 588 Fiddlers Green Road, Ancaster, ON L9G 3L1. [geoff@beerebuilding.ca](mailto:geoff@beerebuilding.ca) Tel. 905-869-2189).

We physicians find it *unconscionable* that no other solution is proposed to this situation, other than Medical Assistance in Dying.

We urge you to do something and communicate with us as quickly as possible.

Sincerely,

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with input from R.W. (and, indirectly, many other patients referred to the Environmental Health Clinic)

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