



# ANNEX 0

# OUTLINE FOR REPORT



Funded in part by the Government of Canada's Social Development Partnerships Program - Disability Component

**EMPOWERING  
COMMUNITY  
AND REMOVAL  
OF BARRIERS**



## **INTERIM REPORT: PROGRESS AND RESULTS ACHIEVED – PHASE 1**

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### **Annex 0**

### **Annex Outline for Report**

ASEQ-EHAQ  
November 2022 - July 2023



Annex Attachments

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# ANNEX 1

# SCHEDULE A

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## **INTERIM REPORT: PROGRESS AND RESULTS ACHIEVED – PHASE 1**

---

**Annex 1**

### **Schedule A**

ASEQ-EHAQ

November 2022 - July 2023



## **PROJECT DESCRIPTION (SCHEDULE “A”)**

**Program:** SDPP-D

**Name of Organization:** Association pour la santé environnementale du Québec -  
Environmental Health Association of Québec

**Project #:** 18737965

**Project Title:** Empowering Community and Removal of Barriers (ECRoB)

**Duration:** October 31, 2022 to October 30, 2024

Changes to Agreement, via email, dated November 29 2022, from Caroline Lanthier

### **OBJECTIVES**

The Association pour la santé environnementale du Québec - Environmental Health Association of Québec (ASEQ-EHAQ) will work with partners to remove barriers and improve accessibility for persons with Environmental Sensitivities/Multiple Chemical Sensitivity (ES/MCS).

The project will address the following objectives:

- Build capacity and inclusion by educating people with ES/MCS disabilities on their rights and increasing their access to legal support and other information to effectively manage their disabilities; and
- Develop transformative, multi-sectoral partnerships between disability, legal, healthcare and environmental organizations in order to remove barriers and provide innovative solutions towards accessibility, with a focus on sustainability.

### **PARTNERSHIPS**

ASEQ-EHAQ will work with the following partners to deliver project activities:

- ARCH Disability Law Centre;
- Spinal Cord Injury Canada;
- British Columbia Aboriginal Network on Disability Society;
- Canadian Network for Human Health and the Environment;
- New Brunswick Lung Association;
- Well Earth Collaborative Affiliate; and
- Santé Mobile A-1.

### **ACTIVITIES**

#### Ongoing

- Hold monthly steering committee meetings;



- Collect, analyse and share data with partners and experts; and
- Share knowledge, best practices and lessons learned with the broader disability community at ESDC-led knowledge mobilization events.

#### Months 1 to 3

- Hire a project manager, project coordinator, and administrative assistant;
- Create a disability advisory committee and a legal advisory committee with national representation;
- Launch a call for proposals (CFP) to select the company that will provide ASL and LSQ interpretation services;
- Conduct ES/MCS disability training for employees and partners;
- Develop a research plan and teaching tools and present to experts in the field and to all partnering organizations;
- Form a national legal and disability advisory committee with ARCH Disability Law Center and engage all partners;
- Research legal information including the Accessible Canada Act, human rights law and the duty to accommodate disability with ARCH Disability Law Center and the legal advisory committee;
- Recruit the trainers (15 people, one for each province and territory, two in Ontario and two in Quebec) that will facilitate workshops;
- Build content for website, communication materials, and social media to reach a wide range of intersectoral organizations; and
- Begin implementation of 1-800 helpline and training of employees and volunteers.

#### Month 4 to 6

- Develop surveys and polls to gather data for the project evaluation;
- Conduct research and develop legal resources for each province;
- Review research material and presentations to obtain feedback from leadership and the disability advisory committee;
- Consolidate research into accessible tools (PowerPoints, website, pamphlet, tip-sheets) to be used during workshops and on website;
- Host two pilot online workshops to focus groups in English and French;
- Conduct a 'train the trainer' session for the 15 selected trainers to be able to facilitate workshops;
- Launch 1-800 helpline number and email which will work in conjunction with legal advisory committee; and
- Promote upcoming workshops to organizations, institutions and general public through website, social media and partners.

#### Month 7 to 12



- Launch online workshop presentations to be completed both weekly and biweekly focused on providing awareness of ES/MCS and the legal rights of those living with the disability;
- Engage with partners to explore sustainability options;
- Create focus groups in both English and French to evaluate the effectiveness of the workshops;
- Administer surveys to workshop participants both before and after workshops as well as 1-800 helpline users;
- Develop and finalize project sustainability plan;
- Prepare and submit first interim report to ESDC;
- Implement polls on website to monitor effectiveness of website tools and resources; and
- Adapt workshop content according to feedback from surveys and polls;

#### Month 13 to 18

- Hold online Focus Group events in English and French to learn impact of project on people with ES/MCS – readjust presentations if required;
- Review the project sustainability plan with partners
- Prepare and submit second interim report to ESDC; and

#### Month 19 to 24

- Hold online Focus Group events in English and French separately to discuss the sustainability plan, feasibility and impact on people with ES/MCS;
- Share progress of sustainability plan implementation with partners;
- Complete a summary of the data collected and report on each stage of the project including shortfalls and successes;
- Meet with ESDC regarding project's progress, challenges and plans (including scale-up and sustainability plans);
- Complete and submit a final report on activities for scale-up and sustainability of the project to ESDC; and
- Submit final report to ESDC including the indicators as found in section 3.0 of the Schedule C.
- Submit a final scale-up and sustainability plan to ESDC
- Submit final report to ESDC

## **EXPECTED RESULTS**

Outputs:

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- Educational tools (powerpoints, website, tip-sheet and pamphlets) on the disability covering the biological, social and legal aspects of ES/MCS;
- Creation of national disability advisory committee and a national legal advisory committee;
- 4 ‘train the trainer’ sessions (two in English, two in French) provided to partners;
- 15 individuals trained as trainers;
- 95 online workshops conducted in English or in French;
- 2,000 people reached directly through workshops;
- 6,000 surveys administered;
- 2000 polls to measure the changes made for accessibility;
- 500 pamphlets to be posted via mail;
- Website updated with disability information, tip-sheets, newsletters;
- One million people received disability information through website;
- A 1-800 helpline to assist individuals with accessibility;
- 8,000 calls for assistance answered;
- 10,000 emails for support answered;
- A final report on project activities; and
- A final scale-up and sustainability plan.
- A final report to ESDC on project activities

Outcomes:

- Increased national awareness on ES/MCS which includes understanding needs and working together to provide accessibility;
- Partners and other groups educated and provided tools to provide accessibility beyond the project end date;
- Capacity within the disability community is increased to take action to remove barriers to accessibility and inclusion;
- Increased workplace, health care and essential services accessibility to reduce isolation and stigmatization;
- Increased knowledge of human rights, including the Accessible Canada Act, in every province for people experiencing ES/MCS; and
- Strengthened multi-sectoral and diverse partnerships between the disability community and other sectors, leading to innovations in accessibility.



# ANNEX 2

## BIOLOGICAL AND SOCIAL CONTENT REPORT

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**Canada** 

Funded in part by the Government of Canada's Social  
Development Partnerships Program - Disability Component

**EMPOWERING  
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**Biological and Social Content Report**

ASEQ-EHAQ

November 2022 - July 2023

# Content Development

## Summary

The biological, and social content development for the ECRoB project focused on building capacity and inclusion by educating people with MCS disabilities on the biological and social aspects of MCS, and providing other information to effectively manage their disability.

Methodological approach: Participatory action community-based research with an intersectional feminist disability justice lens.

The methodological approach adopted in this work is rooted in intersectional feminist disability justice, taking a participatory action community-based approach to this work in order to best adapt and cater to the needs of the community we serve.

The biological and social themed tools and resources developed from the project include:

- Tipsheets
- Videos
- Powerpoint
- Public poster notices (laundry, fragrance-free, etc)
- Pamphlets
- Policy papers: Eg., Perfluoroalkyl and Polyfluoroalkyl Substances PFAS, Flame retardants, Consumer Chemical Products in Canada, Cosmetic Ingredient Hotlist.

## Biological section

The main focus of the biological section is to give a comprehensive review of the current literature surrounding MCS, updating the previous literature and expanding upon it.

The final content outline for the biological section included:

- What is Multiple Chemical Sensitivities (MCS)?
- How Common is MCS? Prevalence of MCS and Disability in Canada
- Symptoms



- Diagnosis
- Comorbidities
- A Review of Current Theories and Emerging Research on the Development of MCS
- Pollution & Air Quality
- Illness Management: How to Adapt and Optimize Your Health When You Have MCS
- Call to Action for Canada: A Path to a Better Future
- Glossary
- Bibliography

Biological Tools:

- Tipsheet: What to Do When You Come Down With MCS
- Best Practices Tipsheet for Managing MCS
- 10 Tips for Exercising when you have MCS
- MCS Misconceptions Fact Sheet
- MCS Best Management Practices Tipsheet
- Activity and Symptom Tracking
- Symptoms of MCS Fact Sheet
- Checklist for Managing Your Health
- General Food Preparation Tipsheet for MCS
- PFAS Factsheets
- Video series:
  - What to do when you have MCS
  - How to prepare and best management practices
  - Creating an Oasis

To see the expanded content outline for the biological section created in collaboration with the Disability Advisory Committee and the membership of ASEQ-EHAQ with lived experience with MCS, [\[please click here. Link to annex extended outlines\]](#)

As per the needs of our community, we will be expanding on the sections that have been identified by community members as needing updates, additional resources or tools, or more information.



Social section:

The purpose of this section is to educate people on this disability, in order to do that, we felt it was necessary to situate the context people with MCS are operating within and consider the intersections of their identity and their experiences. These intersections include the effects of environmental racism, classism, and ableism in considering the impacts of climate change and pollution.

To foster inclusivity and respect, the content also emphasizes the significance of using appropriate terminology and employing an intersectional lens. Additionally, an understanding of Canada's economic history is crucial in comprehending the present circumstances. By tracing the country's economic development, we can gain insights into the contextual factors that shape the experiences and barriers faced by individuals with this disability in Canada.

The final content outline for the social section included:

- Background - Environmental Health in Canada: Understanding the Intersection of Policy, Industry, and Community
- Power of Words How the Naming of MCS Shapes Our Perception of Disability and Health
- Etymological Development of MCS: The History of the Word “Multiple Chemical Sensitivities”
- Multiple Chemical Sensitivity and Disability: Lived Experiences
- Living with Multiple Chemical Sensitivities
  - Product Choice (\*mention this in bio then link to this section, ECOlogos, etc.)
  - Ecological Logos and Certifications
  - Accessing Transportation
  - Accessing Community
  - Workplace
  - Home Cleaning
  - Emergency Preparations for MCS
  - Disability Accommodations
  - Home Renovations
- Community Exposure Reduction: Healthy Air is Good for Everyone
- The Impact of Fragrances on Multiple Chemical Sensitivities (MCS)



- The Importance of Being Fragrance-Free for People with Disabilities
- The Intersections of Climate Change and Pollution: Environmental Racism, Classism, and Ableism
- Environmental Violence: Inequity & Systemic Injustice
- Marketing & Advertising in a Consumerist Society
- Looking Forward - Accessibility for All: Advocating for Change on an Individual and Community Level

#### Social Tools

- Sample Disability Accommodations for MCS
- Cleaning When You Have MCS, Home Owner Seasonal Cleaning Schedule
- Cleaning When You Have MCS, Tenant (Rental) Seasonal Cleaning Schedule
- Creating a Safe Bedroom for People with MCS
- Tips for Cleaning Mould in Your Home
- MCS-friendly Emergency First Aid Kit
- Home Renovations: Creating a Healthy Low Exposure Environment
- Eating Organic on a Budget
- Designing, Implementing, and Monitoring Scent-Free Policies
- The Importance of Being Fragrance-Free
- How to be Fragrance-Free
- Inclusive Laundry Notice
- Attention: Laundry Facility Users



# ANNEX 3

# LEGAL REPORT

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**EMPOWERING  
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**Legal Report**

ASEQ-EHAQ

November 2022 - July 2023



**The legal advocacy and demands the MCS community faces are both immediate and extensive. Understanding the magnitude of this challenge and the efforts required, we acknowledge the vastness of the unmet needs. To address this, we integrate sustainability into our work and strive to upscale whenever feasible, ensuring a more robust and enduring impact in tackling the significant demands before us.**

In this section of the report, we summarize the accomplishments of the legal section of the ECRoB project. Namely, we will summarize the workshops we have given, our legal database, our overview of the Accessible Canada Act, our letters to the human rights commissions, our training guide, as well as our intro and disclaimer for our upcoming ECRoB website. We also detail many of our tools, such as, our document outlining the global landscape of MCS, our document outlining the duty to accommodate and undue hardship, as well as examples of appropriate accommodations and accommodation sample letters. Furthermore, this report outlines our document detailing the social model vs medical model of disability, some alternative dispute resolution methods, tips on scent/fragrance-free policies\*, including, fragrance-free terminology document, fragrance-free policy, fragrance-free educational poster, and our Pan-Canadian fragrance-free policy compilation. Lastly, we detail some of the meetings we have had to improve upon the legal section of the ECRoB project,

In this section of the report, we present a comprehensive summary of the Legal Section's accomplishments within the ECRoB project up until end June 2023. This includes an array of critical tasks we have accomplished, such as the provision of various workshops, the creation of a robust legal database, correspondence with the human rights commissions, and the production of an instructional training guide.

Namely, we detail the creation of our introductory legal content page and a carefully crafted disclaimer for the forthcoming ECRoB website. This section of the report also provides an in-depth description of several instrumental tools developed by our team. These include documents that delineate the global landscape of MCS, outline the duty to accommodate alongside the concept of undue hardship, and offer illustrative examples of suitable accommodations complemented by accommodation sample letters.

Further, we've drafted a document that compares the social and medical models of disability. We have also drafted a document that elaborates on a range of alternative dispute resolution methods we have identified. Additionally, we offer valuable suggestions regarding fragrance-free policies, underpinned by a comprehensive fragrance-free terminology document, a





well-structured fragrance-free policy, an informative fragrance-free educational poster, and a compilation of Pan-Canadian fragrance-free policies.

Lastly, we touch upon our series of meetings aimed at refining the Legal Section's contributions to the ECRoB project. In keeping with the principle of 'Nothing About Us Without Us,' we have conducted several meetings with the MCS community to ensure that our efforts are aligned with their needs.

Despite these accomplishments, there remains a vast amount of unmet legal needs for the MCS community. Thus, we bring sustainability and upscaling into our work whenever possible to have the best impact possible. These will be discussed in the upscaling part of this report.

Despite our numerous achievements, a significant amount of legal needs within the MCS community remain unfulfilled. Hence, we conscientiously plan out sustainability and upscaling into our work to maximize our long-term impact.

\*Note: It is presently being determined through discussions with stakeholders if we should label these policies as scent-free, or fragrance-free.

### **LEGAL WORKSHOPS**

#### **Overview**

##### ***19 legal workshops given***

November 24, 2022 - Workshop lived experience in English

November 25, 2022 - Workshop lived experience in French

December 16, 2022 - Human Rights overview of MCS in federal and provincial/territorial contexts

January 12 – Ibid.

January 17 – Ibid.

January 24 – Ibid.

February 16 – Train the trainer legal introduction

February 20 – Train the trainer legal introduction

March 25 – How to enforce a fragrance-free policy

April 3 – Medico-legal aspects of MCS

May 10 – Legal aspects of the MCS disability (x2 FR & EN)

May 12 – Legal aspects of having a MCS diagnosis

May 17 - Legal aspects of the MCS disability (x2 FR & EN)

May 24 - Legal aspects of the MCS disability (x2 FR & EN)



May 31 – Law Society of Ontario Accessibility Week Event

June 7 – Presentation of the legal aspects of MCS to Inclusion Canada

Note: The legal part of the workshops were given in 19 out of the 30 workshops in total.

### **Summary**

From November 2022 to June 2023, a series of workshops were held to provide information and training on various legal aspects of Multiple Chemical Sensitivity (MCS). On November 24th and 25th, the topic of lived experience was covered, December 16th, 2022, and in 2023: January 12th, 17th, and 24th, workshops were held to provide an overview of human rights related to MCS in federal and provincial/territorial contexts. On February 16th and 20th, “Train the Trainer” legal introduction workshops were held. On March 25th, a workshop was held on how to enforce a fragrance-free policy. On April 3rd, a workshop was held on the medico-legal aspects of MCS. On May 10th, 12th, 17th, 24th, and 31st, workshops were held on the legal aspects of MCS disability and having an MCS diagnosis. On May 31st, an event was held in collaboration with the Law Society of Ontario for Accessibility Week. Finally, on June 7th, a presentation was given on the legal aspects of MCS to Inclusion Canada.

### **Objective**

These workshops were designed with three primary objectives in mind:

- 1) Empowering the MCS population by educating them about their rights and entitlements.
- 2) Educating civil society about MCS and fostering greater awareness and understanding.
- 3) Conducting public legal education workshops to inform the MCS community about their legal rights and protections

Additionally, these workshops align with the broader objectives of the ECRoB project, which include fostering collaborations and partnerships with legal, medical, and community stakeholders.

Through these workshops, we aim to achieve comprehensive legal education, empowering individuals with MCS, and promoting a more inclusive and supportive environment for the community.

### **Outcome**

The attendance of these workshops varied greatly, up to over 1000 registrants for the event with ARCH Disability Law Center, and the Law Society of Ontario .



Through these workshops, we strengthen our legal partnerships with ARCH Disability Law, one of our main legal partners in the ECRoB project, by working closely with them to verify the veracity of our legal content for each of our presentations, and to have them directly working with us to build and deliver the Continuous Legal Education (CLE) event on May 31st. In this vein, we also strengthened ties with the Law Society of Ontario by working directly with them to deliver a successful event. If we were to ask them to permit us to deliver another workshop within their mandate, we feel confident that it would again be a success, due to this very successful first interaction with them. We also created ties with two Ontario lawyers during the event, who respectively are a disability law lawyer and a federal prosecutor. These ties will help us build a list of lawyers to whom we can refer individuals with MCS who experience legal issues such as: finding a lawyer that understands how to navigate the procedural challenges of a client with MCS as well as their medical needs, instituting a scent-free environment or alternative proper accommodations. For more information on this, please refer to our sustainability and scalability plan (Phase 1).

Regarding the community partnerships, we have had several disability and indigenous groups attend our workshops. Not only were we able to educate them on the fact that the MCS disability is recognized in statutory human rights law, such as the Canadian Human Rights Act, but we were also able to convey to them the fact that individuals with MCS are owed accommodations and to teach them how to accommodate the disability of MCS appropriately within their membership or the communities they serve.

Regarding the medical partnerships, we worked on these workshops with Dr. John Molot, Dr. Ellie Stein, Dr. Domenica Tambasco, and perhaps most importantly, we have formed an important partnership with the International Federation of Medical Students Associations (IFMSA), McGill's Project Green Healthcare's (CFMS HEART) and McGill's Medical Student Society. These partnerships in the medical field will continue to help us advocate for better considerations of MCS, and ASEQ-EHAQ intends to continue training certified and future health professionals about medico-legal considerations when dealing with the MCS disability.

One of the strongest ties we have strengthened is with the MCS population itself. Our last public education sessions go back to a few years back, during our project accomplished in partnership with UQAM and TELUQ, and they solely focused on Québec. This time, our workshops focus across Canada. Although we tailor our workshops so that it applies to all of Canada, we have created and will be disseminating province-specific content.



Although these workshops have allowed the MCS population to learn about their human rights, we are laying the groundwork to cover a great need for legal education for other areas of the law, such as worker’s compensation and tenancy law. For more information in this matter, please refer to the upscaling plan at “[long-term sustainability](#)”.

### **Phase 1**

During the remaining period of this phase of the ECRoB project, we will continue conducting workshops tailored to our three to four primary audiences, which include:

1. Workshops aimed at educating civil society about MCS, providing a general presentation suitable for civil society organizations that operate nationwide. These workshops have the potential to reach many disciplines, but we cannot cover all of them during Phase 1. However, we have laid the groundwork to widen the scope of the outreach in a sustainable manner to reach many more disciplines that directly impact the daily lives of Canadians, and who need to learn about accessibility, equity, and inclusion for the disability of MCS.
2. Public legal education workshops intended to inform the MCS community about their accommodation needs, how to request them, and their rights and legal protections. These workshops will be customized for each territory and province to account for the unique laws, institutions, and procedures related to human rights and disability law in each jurisdiction. What applies in one province, such as Québec, may not apply in another province like Nova Scotia. Part of this training is to share knowledge about the accommodations required for accessibility, and to teach the MCS community how to request for accommodations, and steps to take to ensure that their human rights are respected, and that accessibility is provided to them.
3. Continuous legal education workshops targeted at the legal community, focusing on educating legal professionals about MCS and its intersection with human rights law. Currently, these workshops have been conducted only in Ontario. However, we have communicated with our community, indicating that the Maritime provinces will be the next focus. We are actively reaching out to relevant organizations and legal professionals to facilitate this process. It is in the plan to reach every province, but this could be a sustainable practice to repeat it alongside legal professionals in each province, and to complete training in the remaining provinces that could not be covered in Phase 1.
4. There is interest from medical professionals to learn the up-to-date science on the disability of MCS, including patient needs for disability accommodation for accessibility, and how to provide a medico-legal to support patients. Through our partner NB Lung, we have access to 3000 health professionals in the Maritimes who would be interested in



workshops or training. An effort will be made to have Continuing Medical Education points for health professionals. Discussions have started to do the same for Ontario. It is estimated that this upscaling of the project may not be completed for all Provinces, and would need another Phase to complete. Accessibility measures can be easily supported through health professionals, and we view this ability to upscale as being vital towards equity, inclusion and accessibility.

In order to effectively contribute to 2 and 3 above, it was necessary to upscale, research and analyze the jurisprudence on MCS across Canada. The results have revealed that we need to address workman's compensation issues related to MCS. We know from lived experience stories reported, that tenancy is an important unaddressed issue. Since we have identified this, it is evident that a sustainable action for this community would be to include these two areas in future upscaling plans to meaningfully help this disability access necessary spaces for inclusion and to meet basic needs.

The initial plan for the Legal Advisory Committee (LAC) was not to invite the legal community to join, but to have long-term participation because they understood the issue and wanted to join. We planned to go this through workshops tailored just for the legal community. This would make the LAC more sustainable, and would ensure its existence beyond Phase 1. While our legal partner ARCH Disability Law Center is fully committed to this project and this cause, we have observed that legal professionals are currently overwhelmed and are slow to participate, however, we are still hopeful that in the coming workshops across provinces, that we will be able to have a sustainable, effective LAC. Consequently, we invite workshop attendees to join the LAC, after educating on the disability, the urgent needs and the gaps in care and access. Additionally, we are in the process of ensuring that the time invested in this committee can be recognized as pro bono hours, as many bar associations require lawyers to contribute a certain number of hours each year for this purpose. Letters of invitation have already been drafted and will be sent at the conclusion of each workshop designed for legal professionals. This is not only sustainable, but also an upscaling action.

We appreciate the ongoing support and engagement of our partners, as they play a vital role in advancing the goals of the ECRoB project and promoting accessibility and inclusivity for individuals with MCS.

### **TOOLS**

#### **Pan-Canadian fragrance-free policy compilation**

##### **Overview**

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A comprehensive compilation of all scent-free and fragrance-free policies throughout Canada.

### **Summary**

In this detailed document spanning over 60 pages, we have exhaustively cataloged the multitude of organizations, businesses, health institutions, and other diverse built environments across Canada that have instituted scent-free policies. These policies either (a) impose a ban or restrictions on the use of fragrances, or (b) advocate for the avoidance of such products. We've made sure to distinguish between these two fundamentally different approaches. Furthermore, the document is thoughtfully organized by policy type, built environment category, and the jurisdiction it falls under, be it federal, provincial, or territorial.

### **Objective**

The aim of this document is multifaceted. Firstly, it is critical to evaluate the number of built environments that recognize the potential hazards fragrances can pose to the general public and chemically vulnerable groups, such as the Multiple Chemical Sensitivity (MCS) community. Secondly, it serves to create a roster of locations that can readily transition from recommended to mandatory fragrance-free policies, or ensure adherence to their existing policies if not currently doing so.

Thirdly, this document will provide a directory of safe environments for people with MCS, reducing their risk of encountering harmful chemical exposure. The process of requesting accommodations can be challenging, especially in situations where there is little understanding of the dangers posed by fragrances. Furthermore, due to social stigmas, it could be more comfortable for individuals with MCS to visit places that are aware of the potential hazards of fragrances and are thus more accommodating to their needs. The difficulties in locating fragrance-free environments are a frequent concern for our community, and this list aims to alleviate that issue.

This resource is intended to be iterative, which implies a commitment to ongoing enhancements as we continue to discover and validate new suitable locations.

### **Outcomes**

This list has resulted in a lengthy list of places where individuals can expect to visit without having to encounter a fragranced environment. This list touches various built environments, such as hospitals, clinics, dentists offices, psychologists, government buildings, and is divided by such categories.



These policies also represent a large database of the templates and wording used. They have helped us create a comprehensive fragrance-free policy, or a boilerplate for a fragrance-free policy, where individuals and organizations implementing or revising a fragrance-free policy can seek inspiration from. This template can also be used by individuals with MCS or other conditions that are vulnerable to fragrances to give to their employers or any place they may find relevant, such as their local clinic or city hall.

This comprehensive directory offers an extensive selection of locations where individuals can anticipate a fragrance-free environment, eliminating the exposures at fragranced spaces. It encompasses a diverse range of built environments including hospitals, clinics, dental offices, psychological practices, and government buildings, with each category neatly segregated for convenience.

### **Phase 1 - until October 2024**

We will be publishing this directory on our website and will actively encourage visitors to contribute any missing entries. This initiative is part of our ongoing effort to ensure the list remains as exhaustive and accurate as possible.

### **Fragrance terminology**

#### **Overview**

This document provides clear distinctions among the terms 'fragrance-free', 'scent-free', and 'unscented', for both products and policies.

#### **Summary**

This guide delineates the implications of terms like 'fragrance-free', 'scent-free', and 'unscented' when used in the context of products, and similarly differentiates between 'fragrance-free' and 'scent-free' policies.

#### **Objective**

The creation of this document was spurred by the identified need to clarify the differences among 'fragrance-free', 'scent-free', and 'unscented' products. Often, consumers purchase unscented or scent-free products, unaware that these items may still contain ingredients that act as triggers for chemically sensitive populations, such as those with Multiple Chemical Sensitivity (MCS).

#### **Outcomes**



This resource can be used to educate others about their product choices, particularly when it comes to making appropriate accommodations for individuals with MCS, as 'unscented' and 'scent-free' products may still contain fragrances designed to mask unpleasant odors.

In the near future, we aim to advocate for the standardization of this terminology across organizations and industries, emphasizing the adoption of appropriate wording.

### **GLOBAL MCS LANDSCAPE**

#### **Overview**

This document provides a detailed account of the awareness, advocacy, and research efforts related to Multiple Chemical Sensitivity (MCS) undertaken globally.

#### **Summary**

The document is organized by country, focusing on regions where pertinent material is available. Each country's section is divided into four categories:

1. Support Groups
2. Scientific/Opinion Articles
3. Governmental/University/Agency Recognition
4. Policy Guidelines/Legal Aspects

Every group and article we have discovered on MCS worldwide is cataloged in this document.

#### **Objective**

The purpose of this document is to maintain awareness of global MCS groups and initiatives. It offers an overview of strategies employed elsewhere, identifies novel initiatives that may be of interest, and aids in compiling a comprehensive list of global groups for potential future engagement.

#### **Outcomes**

We have identified 19 countries, mostly developed nations, that have implemented policies concerning MCS. Our research indicates that Australia's efforts are commensurate with those of Canada, both countries leading the global charge in addressing MCS. Additionally, we have noted instances where other countries reference Canada's initiatives in their respective strategies.

### **Legal Database**

#### **Overview**

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This extensive Excel-based database offers a comprehensive review of all jurisprudence related to Multiple Chemical Sensitivity (MCS) across Canadian jurisdictions.

### **Summary**

The database specifically pertains to Canadian jurisdictions, each separated into its own sheet (Federal, Provinces, and Territories). We've incorporated both tribunal and court cases. Each case entry includes pertinent information such as year, forum (specific court or tribunal), the centrality of MCS to the case, its final or appeal status, outcome, associated medical conditions (such as fibromyalgia, allergies, etc.), and other relevant categories. If a doctor was involved, a section for their name and specialty is included.

### **Objective**

The aim of this resource is to assist both the MCS community and legal professionals in understanding the current state of MCS-related jurisprudence. Given the jurisdiction-specific legal frameworks, it was essential to organize them accordingly.

This project expands on a similar one completed up until 2017 by ASEQ-EHAQ and UQAM, which was focused solely on Quebec and certain legal areas. Our current project encompasses all jurisdictions and legal fields. The inclusion criteria are that the case falls after the year 2000 and addresses MCS, irrespective of the forum or issue type.

Understanding MCS can be a significant time investment for legal professionals; our legal workshops aim to reduce this barrier. Nonetheless, this database is designed to streamline the case-building process and allow for insights from successful cases in other jurisdictions with similar facts or issues.

For the MCS community, this database offers invaluable insight into MCS-related jurisprudence. While we strongly recommend seeking legal assistance, though the higher poverty rates within the MCS community and limited legal aid coverage make self-representation a potential necessity. The database offers a valuable resource to study both successful and unsuccessful cases and glean insights on successful strategies and necessary evidence for a winning case.

### **Outcomes**

We've identified over 500 cases across all Canadian jurisdictions that meet our inclusion criteria. Some provinces, like Ontario, Alberta, British Columbia, and Quebec, have extensive records of MCS-related cases, while others, such as the territories and Manitoba, have significantly fewer publicly available cases.



Though a fair number of cases have been successful, the majority have been unsuccessful, with cases more commonly appearing under the Worker's Compensation Tribunal rather than the human rights tribunal. We've also identified several doctors who have diagnosed MCS through this research.

We intend to create case briefs for each identified case, beginning with successful ones and progressing to unsuccessful ones. Through these briefs, we will delve deeper into each case. Once all briefs are completed, we will conduct a 'mega-analysis' to identify trends and patterns in successful and unsuccessful MCS cases, allowing us to develop best practice guidelines for future MCS-related legal cases.

### **TRAINING GUIDE**

#### **Overview**

The following document serves as a training guide for businesses and organizations, with the goal of educating them on the following topics:

1. General
  - 1.1. Introduction
  - 1.2. Decision trees
    - 1.2.1. Legal avenues for MCS issues
2. Legal principles
  - 2.1. Disability
  - 2.2. Duty to accommodate
    - 2.2.1. Undue hardship
    - 2.2.2. Examples of MCS appropriate accommodations
3. Alternative Dispute Resolution (ADR)
  - 3.1. Introduction
  - 3.2. Negotiation
  - 3.3. Mediation
  - 3.4. Arbitration
  - 3.5. Finality of ADR
  - 3.6. Breach of ADR agreement
  - 3.7. Conclusion
4. Federal legal disputes
  - 4.1. Applicable context
  - 4.2. Applicable laws





- 4.2.1. Canadian Human Rights Act
  - 4.2.1.1. Policy on Environmental Sensitivities
  - 4.2.1.2. Canada Transportation Act
  - 4.2.1.3. Accessible Canada Act
- 4.3. Applicable commissions and tribunals
- 4.4. Applicable jurisprudence
- 5. Provincial and territorial legal disputes
  - 5.1. Applicable context
  - 5.2. Applicable commissions, tribunals, laws, and prescriptions per jurisdiction
    - 5.2.1. Alberta
    - 5.2.2. British Columbia
    - 5.2.3. Manitoba
    - 5.2.4. New Brunswick
    - 5.2.5. Newfoundland and Labrador
    - 5.2.6. Northwest Territories
    - 5.2.7. Nova Scotia
    - 5.2.8. Nunavut
    - 5.2.9. Ontario
    - 5.2.10. Prince Edward Island
    - 5.2.11. Québec
    - 5.2.12. Saskatchewan
    - 5.2.13. Yukon
      - 5.2.13.1. Applicable jurisprudence
- 6. Specific legal context
  - 6.1. Employment
    - 6.1.1. Unionized-work
    - 6.1.2. Non-unionized work
- 7. Legal toolkit
- 8. Conclusion
- 9. References and further readings

## **Summary**

This document serves as a foundational resource for educating businesses and organizations about Multiple Chemical Sensitivity (MCS), specifically focusing on how to accommodate individuals with MCS.



This master document will form the basis for all training materials. Each will be customized according to their specific legal context. For instance, an organization operating solely within Québec will be educated on legalities exclusive to Québec, obviating the need to delve into the legal contexts of other provinces.

This comprehensive guide will collate all necessary information, with various segments repurposed for different contexts.

### **Objective**

The primary goal of this document is to educate businesses and organizations about MCS. Given the broad range of information contained within, it can also be repurposed for other contexts, such as legal workshops tailored for people with MCS in each province.

This guide aims to cover as many legal aspects of MCS as possible.

### **Outcomes**

We have developed information resources and tools touching on all the areas mentioned in the overview.

We will finish the remainder of the document, which entails:

10. Federal legal disputes
  - 10.1. Applicable context
  - 10.2. Applicable laws
    - 10.2.1. Canadian Human Rights Act
      - 10.2.1.1. Policy on Environmental Sensitivities
      - 10.2.1.2. Canada Transportation Act
      - 10.2.1.3. Accessible Canada Act
  - 10.3. Applicable commissions and tribunals
  - 10.4. Applicable jurisprudence
11. Provincial and territorial legal disputes
  - 11.1. Applicable context
  - 11.2. Applicable commissions, tribunals, laws, and prescriptions per jurisdiction
    - 11.2.1. Alberta
    - 11.2.2. British Columbia
    - 11.2.3. Manitoba
    - 11.2.4. New Brunswick
    - 11.2.5. Newfoundland and Labrador



- 11.2.6. Northwest Territories
- 11.2.7. Nova Scotia
- 11.2.8. Nunavut
- 11.2.9. Ontario
- 11.2.10. Prince Edward Island
- 11.2.11. Québec
- 11.2.12. Saskatchewan
- 11.2.13. Yukon
- 11.2.13.1. Applicable jurisprudence
- 12. Specific legal context
  - 12.1. Employment
    - 12.1.1. Unionized-work
    - 12.1.2. Non-unionized work
- 13. Legal toolkit
- 14. Conclusion
- 15. References and further readings

This document will be repurposed into several electronic booklets tailored for attendees of our forthcoming training sessions.

## **LETTERS TO HUMAN RIGHTS COMMISSION**

### **Overview**

At the moment, only four human rights commission have explicitly recognized MCS:

- Québec
- Ontario
- Newfoundland and Labrador
- Federal

Our aim is to persuade the remaining Canadian jurisdictions to adopt a similar stance, namely:

- Alberta
- British Columbia
- Manitoba
- New Brunswick
- Northwest Territories
- Nova Scotia
- Nunavut
- Prince Edward Island
- Saskatchewan



- Yukon

### **Summary**

In these advocacy letters, we provide a detailed overview of the current state of MCS. We elucidate the medical aspects of the condition, outline relevant Canadian jurisprudence on MCS, share examples from jurisdictions that have already taken positive action (including internationally, such as Australia), and underscore the importance of explicit acknowledgment of MCS by their respective human rights commissions. We urge them to take action and offer our assistance in any capacity they may require.

### **Objective**

The primary objective of these letters is to secure explicit acknowledgment of MCS by as many human rights commissions across the country as possible. Such acknowledgment would represent a significant milestone for people with MCS, as it would ensure explicit recognition of their disability.

Currently, legislation pertaining to MCS is fragmented and evolving across various jurisdictions. We aim to bring those provinces where it is deficient up to standard with the rest.

As MCS is recognized as a disability under the Canadian Human Rights Act, we also want to motivate provinces to be proactive, considering the impending trickle-down effect of the Canada Accessible Act. Instead of delaying the work and risking overwhelm, we hope to offer them a head-start by emphasizing that MCS is a disability requiring their explicit recognition and action.

Our objective is not necessarily to prompt them to adopt an explicit policy like the Policy on Environmental Sensitivities (although that would be ideal), but rather to have them acknowledge in writing, even if it's simply a response to our letter, that MCS can indeed be recognized as a disability under their provincial or territorial human rights legislation.

### **Outcomes**

Pending.

An acknowledgment of MCS by the human rights commissions would represent a substantial advancement in terms of accessibility and human rights concerning the condition of MCS.



Should we receive a response or if a policy is drafted as a consequence, we will share it with all our partners and make it readily accessible on our website.

### **FRAGRANCE-FREE EDUCATIONAL POSTER**

#### **Overview**

This fragrance-free poster is designed to educate the public about the necessity and significance of fragrance-free policies.

#### **Summary**

Available in four variations:

- English, color
- English, black and white
- French, color
- French, black and white

This one-page, point-form educational poster presents important facts and arguments, each substantiated by a scientific article or governmental statistic referenced at the bottom of the page.

The poster covers topics such as:

- The number of synthetic chemicals used in fragrances
- The concept of fragrances being trade secrets
- The presence of volatile organic compounds in fragrance ingredients
- The conditions affected by fragrances
- The physical effects fragrances can have on all individuals
- The types of products that can contain fragrances
- And more.

#### **Objective**

While legal interventions can lead to appropriate accommodations, education plays a key role in preempting lengthy, costly, and energy-draining legal battles. Hence, we have created a poster intended to be displayed in fragrance-free facilities to enhance public understanding of fragrance/multiple chemical sensitivities.

We've listed not only the MCS community but also those with conditions like asthma, COPD, autism, and migraines as vulnerable populations. This approach underscores the importance of



fragrance-free spaces and the need for adherence to these policies for a significant segment of the population.

To ensure this poster can be universally applied without any political or provincial affiliations, we've refrained from adding our logo, thereby maximizing its versatility.

### **Outcomes**

Members of our community have expressed appreciation for this poster, reporting its use in their workplaces and other facilities with fragrance-free policies.

This resource is now accessible on our website and is routinely shared at the conclusion of our workshops and presentations. Given its lack of proprietary logos, any organization or individual can freely use this poster in both languages.

Upon requests from our members for specific-purpose posters, such as those addressing laundry products for use in shared laundry spaces, we plan to create and distribute these additional educational materials shortly.

## **DUTY TO ACCOMMODATE AND UNDUE HARDSHIP**

### **Overview**

This educational tool/page elaborates on the following concepts:

- The duty to accommodate
  - The rights and obligations associated with it
- The concept of undue hardship

### **Summary**

This informational page is designed to elucidate the principles of the duty to accommodate and undue hardship. On one side, it outlines the rights of the individual seeking accommodation, and the responsibilities of the party providing the accommodation. On the other side, it explains the boundaries of the duty to accommodate, represented by the concept of undue hardship.

### **Objective**

Given that many legal issues concerning MCS revolve around appropriate accommodations, it's critical for both individuals with MCS and those from whom they seek accommodations (like their employers) to fully comprehend the duty to accommodate and the concept of undue hardship.





Therefore, we have developed this public legal education tool to be published on our website, empowering all individuals to understand their rights and obligations in this context. As we cater to the MCS community, this page is tailored to address MCS specifically.

### **Outcomes**

By exploring this page, readers will gain a thorough understanding of their rights and obligations regarding accommodations, be it in their workplace, places they frequent, or their housing facilities.

### **EXAMPLES OF APPROPRIATE ACCOMMODATIONS**

#### **Overview**

This document provides a compilation of suitable accommodations for individuals with MCS, and specifies accommodations that are not appropriate.

#### **Summary**

In this resource, we distinguish between appropriate and inappropriate accommodations and give examples of each. Furthermore, we elucidate the difference between 'reasonable accommodation' and 'appropriate accommodation.' These two terms represent different obligations: reasonable accommodation refers to the obligation of employers and service providers to take reasonable measures to accommodate individuals with disabilities, whereas appropriate accommodation entails a duty to ensure that individuals with disabilities receive the necessary support to achieve specific outcomes.

#### **Objective**

This tool serves as a supplement to the previous tool on "the duty to accommodate and undue hardship." Once individuals understand their rights and obligations, we aim to provide them with examples of appropriate accommodations that should not lead to undue hardship. The goal is to aid all parties in comprehending what can be done most effectively. There are instances where individuals or institutions wish to provide suitable accommodation for a person with MCS but lack the knowledge of where to start or what to do. This tool is designed to assist in such scenarios.

Additionally, some well-intentioned accommodations can miss the mark. For instance, suggesting reduced use of fragrances fails to address the issue as the harmful chemicals are still present. This is analogous to advising people to limit their peanut consumption around someone with a peanut allergy. We provide examples of such unhelpful accommodations and explain why they are inappropriate.



For product recommendations, we provide a link to our [EcoLivingGuide.ca](http://EcoLivingGuide.ca)

### **Outcomes**

This tool aims to eliminate confusion around accommodations, whether they're needed in the workplace, for services, in housing, and more.

We briefly clarify the distinction between 'scent-free' and 'fragrance-free' and provide a link to our terminology guide for further understanding (see section X).

### **ACCOMMODATION SAMPLE LETTERS**

#### **Overview**

This resource provides a sample accommodation request letter that can be utilized by anyone within the MCS community.

#### **Summary**

This section presents a template for an accommodation request letter that can be adapted for different contexts, such as the workplace, facilities that must be visited (e.g., a clinic), or residential situations. While much of the letter is pre-written, certain sections must be personalized by each individual, such as details of the requested accommodation and personal information.

#### **Objective**

Asking for help can be challenging, especially when such assistance necessitates environmental adjustments. To ease this process, we've drafted a sample accommodation request letter that can be used by any member of the MCS community.

This resource complements the section on 'Examples of Appropriate Accommodations for MCS' (see section X). Links to this section, as well as 'Duty to Accommodate and Undue Hardship' (see section X), will be provided for reference.

### **Outcomes**

This resource aims to streamline the accommodation process, particularly for those experiencing MCS symptoms during the process. By providing a comprehensive, well-structured template, we can increase the likelihood of individuals obtaining necessary accommodations. At present, we only have one template, but our plan is to create a variety of samples tailored to a broader range of situations, thereby providing more specific guidance for different scenarios.



## **SOCIAL MODEL VS MEDICAL MODEL OF DISABILITY**

### **Overview**

This resource elucidates the differences between the social and medical models of disability.

### **Summary**

This document delineates the disparities between the social and medical models of disability. The medical model perceives disability as a defect or abnormality within an individual that requires curing, fixing, or eliminating via medical intervention. In stark contrast, the social model considers disability as a difference, advocating for the adaptation of social and physical environments to accommodate individuals with a variety of functional abilities. This adjustment not only enhances the quality of life and opportunities for people with impairments but also for those without. The social model attributes disability to societal organization rather than an individual's impairment or difference. It distinguishes between disabilities, which are societal-imposed restrictions, and impairments, which are the effects of a particular condition. The solution, per this model, lies in societal transformation rather than correcting the individual.

While MCS is a medical condition, ASEQ's stance is that the issue lies not with people with MCS but with their environment. Instead of attempting to "correct" individuals with MCS, the focus should be on modifying the environment to make it healthier for everyone. Consequently, ASEQ advocates for the social model of disability for all disabilities.

The document offers a brief summary of MCS as a disability within each model's context.

### **Objective**

Understanding this distinction is crucial as the evidence and reasoning fundamentally differ between the two models. Although the medical model of disability is currently predominant in the legal realm, recent legislative advancements, such as the Canada Accessible Act, have emphasized the social model.

This tool's aim is to educate people on the differences between the two models. When heading to court, individuals can prepare arguments based on both models. Though the social model might not be sufficient on its own, it can supplement the medical model and strengthen one's case.

### **Outcomes**



This tool fosters awareness about the nature of disabilities and solutions applicable to all disability types. It also guides the MCS community to prepare for the prevalent medical model in court if they wish to succeed in their case.

### **INTRO AND DISCLAIMER**

#### **Overview**

This section serves as the introduction and disclaimer to the legal portion of our ECRoB website.

#### **Summary**

This segment provides readers an overview of the legal section of the ECRoB website, explaining the various components it encompasses. Included is a disclaimer, cautioning readers that the information provided should not be interpreted as legal advice. We strongly recommend seeking professional legal counsel. Furthermore, we disclaim any responsibility for inaccuracies or outdated information that may inadvertently occur.

#### **Objective**

The primary aim of this segment is to assist website visitors in effectively navigating our legal ECRoB page. We intend to provide a clear understanding of the content they can anticipate and where they can locate it.

#### **Outcomes**

This introduction promotes better comprehension of the content contained in the ECRoB legal page. It helps visitors orient themselves on our website and clarifies the purpose and nature of our resources. Importantly, it also dispels any misunderstanding about the information being interpreted as legal advice.

As we continue to expand and enrich the content of the ECRoB legal page, we will ensure the introduction is updated correspondingly.

### **ALTERNATIVE DISPUTE RESOLUTION (ADR)**

#### **Overview**

This section provides a comprehensive overview of the alternatives to traditional legal methods.

#### **Summary**

In this part, we cover the following topics:



- Introduction
- Negotiation
- Mediation
- Arbitration
- Finality of ADR
- Breach of Alternative Dispute Resolution agreement
- Conclusion and further readings

We explain the concepts of negotiation, mediation, and arbitration, distinguishing among them and illustrating the contexts in which each can be deployed effectively.

The segment on arbitration is especially important as it is often the prescribed method for addressing legal issues within unionized workplaces. Therefore, we elucidate this process to answer any queries the MCS community might have regarding it.

### **Objective**

The main objective of this section is to inform the reader about alternative routes to filing a complaint with a human rights commission or resorting to court action. In certain scenarios, these alternatives may prove more advantageous as they are typically faster, less formal, and less costly than court proceedings. Furthermore, they can aid in preserving relationships between the parties involved.

### **Outcomes**

By familiarizing our audience with these Alternative Dispute Resolution strategies, we may be able to prevent some cases from escalating to court proceedings, offering a more efficient resolution through one of the aforementioned ADR techniques.

## **SCENT/FRAGRANCE-FREE POLICY (thereafter referred to as ‘fragrance-free policy’)**

### **Overview**

This resource is divided into three key segments:

- How to implement a fragrance-free policy
  - Fragrance-free policy sample
- How to enforce and monitor a fragrance-free policy

### **Summary**

In this section, we clarify what a fragrance-free policy entails, guide readers on how to establish one, offer a sample policy, and deliver advice on how to ensure the policy is monitored and



adhered to effectively. The enforcement section offers strategies for both visitors to an establishment and for individuals working in an environment with a fragrance-free policy, as each would require different approaches.

For a deeper understanding of a proper fragrance-free policy and to prioritize fragrance-free over scent-free, a link to our fragrance-free lingo tool will be included on this page. Additionally, we provide a link to the EcoLivingGuide.ca to assist with product recommendations and selection.

### **Objective**

This segment aims to support individuals with MCS in either implementing, monitoring, or enforcing a fragrance-free policy. Recognizing that such a policy is one of the most effective measures to eliminate barriers and enhance accessibility for people with MCS, we've created this section to help them comprehend what a fragrance-free policy is, how to implement one by providing a sample, and how to monitor and enforce an existing policy effectively.

### **Outcomes**

The intended outcome of this resource is an increased prevalence of fragrance-free policies and an enhancement in their compliance.

We plan to offer more context-specific samples, such as for workplaces, clinics and hospitals, businesses, housing, and so on, rather than a general one.

We are also in the process of defining whether the terminology of scent-free or fragrance-free is more appropriate for accessibility and inclusion.

## **ACCESSIBLE CANADA ACT**

### **Overview**

This document provides a concise summary of the Accessible Canada Act.

### **Summary**

The summary aims to illuminate the reader's understanding of the Accessible Canada Act, its applicability in various scenarios, and how one might leverage its protections effectively.

### **Objective**

The primary objective of this tool is to empower the reader with a comprehensive understanding of this critical piece of federal legislation concerning disability and accessibility. Specifically, it's





essential that readers comprehend the fact that this law is exclusively applicable in federal contexts to ensure its optimal utilization.

### **Outcomes**

The desired outcome is to furnish the MCS community with a precise comprehension of the Accessible Canada Act's purpose and its appropriate usage. This will help prevent misapplication in irrelevant contexts, saving time and energy, and instilling confidence in members when they deploy it correctly, as they will be well-equipped with accurate information.

We intend to compile a list and provide a summary of analogous laws for each province and territory. In instances where a disability act is absent, we will denote this, strive to identify alternative applicable laws, and remain vigilant in tracking the development of the respective provincial/territorial act. Upon its introduction, we will augment our list with a summary of the new act and notify our community accordingly.

### **MISCELLANEOUS (meetings, etc.)**

#### **Overview**

Key collaborative sessions that contributed to the evolution of the legal aspect of the ECRoB project.

#### **Summary**

We've organized several meetings with members of ARCH Disability Law, our members, and La Confédération des organismes de personnes handicapées du Québec (COPHAN) to gain comprehensive insights into disability law and human rights law concerning MCS. This involved collecting narratives about accommodations, access, and legal obstacles.

#### **Objective**

Our goal is to garner feedback, perspectives, information, and enhanced understanding. Engaging in meetings with partners and the MCS community is essential to the successful fruition of the ECRoB project.

#### **Outcomes**

Several meetings have resulted in fresh insights, a richer data pool, and innovative ideas for different tools, among other things.

We plan to continue holding these beneficial meetings in the future.



## **SCHEDULE A REPORTING - Related to legal only**

### **Outcome (1): Capacity within the disability community is increased to take action to remove barriers to accessibility and inclusion. This includes:**

- Increased participation by diverse groups within the disability community in initiatives related to the implementation of the Accessible Canada Act and its regulations.
- Increased participation of the MCS community in human rights-related workshops..
- Increased participation from legal professionals in workshops, focusing on the implications of human rights in the MCS context.
- Increased capacity of the MCS community through the development of various educational resources. These include the Accessible Canada Act page, a fragrance-free poster, sample accommodation letters, examples of MCS-appropriate accommodations that should not result in undue hardship, a glossary of fragrance terminology, and a compilation of fragrance-free policies from across Canada.

### **Indicators (1):**

- o Several groups have been engaged through the scope of the project. Key among these are the MCS community, civil society organizations, legal professionals, and medical professionals.
  - i. Legal professionals: Approximately 1000 individuals from the legal profession registered for our workshop held in collaboration with the Law Society of Ontario. Although we don't have comprehensive data to ascertain the specifics of their practice areas or the populations they serve, we can reasonably infer that their clientele might include those dealing with legal issues, potentially encompassing human rights, disability law, and hence MCS. These professionals were reached via our website, social media, newsletter, ARCH Disability Law Center's website, and the Law Society of Ontario's platform.
  - ii. Medical students: Medical students attended our medico-legal event. As future physicians, they will inevitably encounter patients with health issues, including disabilities and potentially MCS. The majority of these students hailed from Quebec universities, with a substantial attendance from McGill University. McGill's Project Green Healthcare (CFMS HEART) and McGill's Medical Student Society were instrumental in promoting the event among their student population. Our own promotion channels, including our social media, newsletter, and website, also contributed to attracting these students.

- iii. MCS Community: Individuals from the MCS community have attended our legal workshops. We targeted them through our communication channels, including our social media, newsletter, and website.
- iv. Civil Society Organization: Civil society groups have partaken in our legal workshops. We targeted these groups through our channels, including our social media, newsletter, and website.
- o Numerous actions have been undertaken to empower and foster active participation within diverse groups in the disability community, specifically concerning initiatives related to the implementation of the Accessible Canada Act and its regulations. These initiatives include:
  - i. The creation of a training guide focused on MCS and human rights, designed for delivery in upcoming workshops for various civil society organizations.
    - 1. We have used email communications to identify groups and invite them to our upcoming training sessions. (Ask Tyra for more details).
  - ii. The organization and delivery of multiple workshops aimed at informing the MCS community about their rights and protections under human rights law, be it at provincial, territorial, or federal levels.
    - 1. We have used email communications to identify groups and invite them to our upcoming training sessions. (Ask Tyra for more details).
  - iii. The tenure of several meetings with civil society organizations, legal professionals, and the MCS community.
    - 1. We have used email communications to identify groups and invite them to our upcoming training sessions. (Ask Tyra for more details).
  - iv. The development of several educational tools aimed at the MCS community, including a fragrance-free poster, sample accommodation letters, examples of MCS-appropriate accommodations that should not result in undue hardship, a compilation of fragrance terminology, our Pan-Canadian fragrance-free policy, and information pages dedicated to the Accessible Canada Act.
    - 1. We have used email communications to identify groups and invite them to our upcoming training sessions. (Ask Tyra for more details).
  - v. Our project has consistently involved the participation of various stakeholders, including the MCS community, legal and medical professionals, civil society, and government organizations.

**Outcome (2): Strengthen multi-sectoral and diverse partnerships between the disability community and other sectors, leading to innovations in accessibility. This includes:**

- Increased partnerships have been formed with multiple stakeholders including the MCS community, legal professionals, law societies, medical students and practitioners, as well as civil society and government organizations across federal and provincial jurisdictions.
- Long-term innovative solutions and activities were undertaken for the MCS community by ASEQ-EHAQ in partnership with legal professionals. These include legal workshops designed for legal professionals, the MCS community, and civil society organizations, and the development of a comprehensive legal database.

**Indicators (2):**

- o In addition to our long-standing partnership with ARCH Disability Law Center, integral to the inception of the ECRoB project, ASEQ-EHAQ has forged significant partnerships as follows:
  - i. The Law Society of Ontario: his partnership was established through direct collaboration on a highly successful event. Given the productive nature of our initial interaction, we are confident that any future workshops within their mandate would similarly be successful.
  - ii. Connections with Ontario lawyer: As a disability law lawyer and federal prosecutor respectively, both attorneys were active participants in our Ontario workshop held in association with the Law Society of Ontario. Given their positive involvement, we are confident of their valuable contributions to future legal workshops in Ontario.
  - iii. Collaboration with medical professionals Dr. John Molot, Dr. Ellie Stein, and Dr. Domenica Tambasco: Their expertise and influence in the medical field is invaluable.
  - iv. Partnerships with The International Federation of Medical Students Associations (IFMSA), McGill's Project Green Healthcare (CFMS HEART), and McGill's Medical Student Society: These affiliations within the medical community will continually aid our advocacy for improved recognition and accommodation of MCS. ASEQ-EHAQ is committed to ongoing education of both certified and future health professionals about the medico-legal considerations crucial in handling MCS-related disabilities.
- o Law Society of Ontario: Our partnership with this esteemed organization was forged through the help of ARCH during our legal workshop for legal professionals in Ontario. The nature of this partnership differs from others, as they offered their platform for our virtual event, provided credibility, and facilitated accreditation for Continuing Legal Education hours. Their involvement with the

- ECRoB project, while highly beneficial, was primarily a one-time occurrence rather than a recurring collaboration.
- o Two legal professionals became our partners through an invitation to participate in our Ontario workshop, facilitated by ARCH. Their contributions to the workshop brought invaluable expertise and added depth to the event. Similar to the Law Society, their involvement with the ECRoB project was primarily a singular event, but the possibility of recurring collaboration in future legal workshops remains open.
  - o The International Federation of Medical Students Associations (IFMSA), McGill's Project Green Healthcare's (CFMS HEART) and McGill's Medical Student Society.
  - o The accessibility tools we have developed are as follows:
    - i. Accessible Canada Act: Promoting inclusivity and accessibility, this tool provides visitors, particularly the MCS and disability communities, with comprehensive understanding of the Accessible Canada Act. It delineates the Act's purpose, applicability, and means through which it can be harnessed for protections.
    - ii. Fragrance-free poster: This tool fosters inclusive, accessible workspaces by informing visitors about the fragrance-free environment. Its educational aspect underscores the risks of fragranced products, thereby bolstering the likelihood of adherence to the fragrance-free policy.
    - iii. Accommodation letters samples: Increasing accessibility, these samples guide individuals with MCS in formulating respectful, appropriate accommodation requests
    - iv. Examples of MCS appropriate accommodations that should not incur undue hardship: This tool enhances accessibility by proposing appropriate accommodation options for employers and employees. It also underscores the inappropriateness of certain accommodations for individuals with MCS, such as the use of scent-free products
    - v. Fragrance terminology: By delineating the differences between 'unscented', 'scent-free', and 'fragrance-free', this tool promotes accessibility. It emphasizes that only 'fragrance-free' options are suitable for individuals with MCS, as these do not contain any fragrance ingredients.
    - vi. Pan-Canadian fragrance-free policy compilation: This tool bolsters accessibility by providing individuals with MCS a directory of Canadian built environments with scent-free policies. This allows them to navigate spaces without fear of exposure. Furthermore, it promotes accessibility and inclusivity by providing MCS with a directory of Canadian built environments with scent-free recommendations, as it might be easier for these spaces to fully accommodate individuals with MCS upon request.

- vii. Social model VS medical model of disability: This tool fosters accessibility, inclusivity, and awareness by shifting the focus from individual impairment (medical model) to the societal structures and practices that restrict them (social model).
  - viii. Duty to accommodate and undue hardship: Enhancing accessibility and inclusivity, this tool elucidates the rights and obligations of all parties concerning accommodation and undue hardship.
  - ix. Alternative Dispute Resolution: This tool augments accessibility by presenting people with MCS with legal avenues alternative to the traditional justice system, which they may not always have the resources or energy to navigate.
- o Training Guide: This long-term activity and initiative is undertaken in collaboration with various civil society organizations, both within and outside federal regulations. All these organizations are engaged in disability work, and their mission is to identify, eliminate, and prevent barriers within their respective communities. Their role in this activity will be as learners, participating in our training sessions to gain an understanding of MCS and how to prevent and mitigate MCS-related barriers in their line of work.
  - o Legal workshops: This long-term activity is coordinated with ARCH Disability Law Center, assisting us in organizing and delivering these workshops. As the project progresses, it will involve a multitude of entities operating within and outside federal regulations, all working towards identifying, removing, and preventing obstacles to accessibility and inclusion, particularly concerning legal issues. These partners will either attend or actively participate in our workshops. They will be spread across all provinces and territories, operating within both federal and provincial/territorial jurisdictions. The barriers we address pertain to human rights, especially in relation to MCS. We aim to eradicate and forestall barriers related to the duty to accommodate and undue hardship, and to deal with complaints made to a human rights commission and tribunal. In our workshops conducted in the Maritime provinces, the New Brunswick Lung Association will play a pivotal role by assisting us in identifying potential participants and attendees.
  - o Development of tools: A multitude of tools has been developed to assist the MCS community. These tools not only identify numerous issues but also endeavor to prevent and eliminate barriers to accessibility and inclusion in unique ways. These tools encompass the following:
    - i. Accessible Canada Act: Promoting inclusivity and accessibility, this tool provides visitors, particularly the MCS and disability communities, with comprehensive understanding of the Accessible Canada Act. It delineates the Act's purpose, applicability, and means through which it can be harnessed for protections.



- ii. Fragrance-free poster: This tool fosters inclusive, accessible workspaces by informing visitors about the fragrance-free environment. Its educational aspect underscores the risks of fragranced products, thereby bolstering the likelihood of adherence to the fragrance-free policy.
  - iii. Accommodation letters samples: Increasing accessibility, these samples guide individuals with MCS in formulating respectful, appropriate accommodation requests
  - iv. Examples of MCS appropriate accommodations that should not incur undue hardship: This tool enhances accessibility by proposing appropriate accommodation options for employers and employees. It also underscores the inappropriateness of certain accommodations for individuals with MCS, such as the use of scent-free products
  - v. Fragrance terminology: By delineating the differences between 'unscented', 'scent-free', and 'fragrance-free', this tool promotes accessibility. It emphasizes that only 'fragrance-free' options are suitable for individuals with MCS, as these do not contain any fragrance ingredients.
  - vi. Pan-Canadian fragrance-free policy compilation: This tool bolsters accessibility by providing individuals with MCS a directory of Canadian built environments with scent-free policies. This allows them to navigate spaces without fear of exposure. Furthermore, it promotes accessibility and inclusivity by providing MCS with a directory of Canadian built environments with scent-free recommendations, as it might be easier for these spaces to fully accommodate individuals with MCS upon request.
  - vii. Social model VS medical model of disability: This tool fosters accessibility, inclusivity, and awareness by shifting the focus from individual impairment (medical model) to the societal structures and practices that restrict them (social model).
  - viii. Duty to accommodate and undue hardship: Enhancing accessibility and inclusivity, this tool elucidates the rights and obligations of all parties concerning accommodation and undue hardship.
  - ix. Alternative Dispute Resolution: This tool augments accessibility by presenting people with MCS with legal avenues alternative to the traditional justice system, which they may not always have the resources or energy to navigate.
- These tools were collaboratively developed with the valued input of both the ARCH Disability Law Center and the MCS community.
  - o Legal database: This long-term activity is undertaken in partnership with ARCH Disability Law Center, who have guided us with the methodology and provided a summer intern to contribute to this effort. Through this project, we have identified a significant barrier to justice within the MCS community. In response, to facilitate better access to justice for the MCS population, we have streamlined the work of



their lawyers, or even the individuals themselves, by constructing a comprehensive database. This database comprises all MCS-related cases, categorized by various indicators such as the type of legal forum, the jurisdiction, and the case outcome.

### **Legal: Sustainable Upscaling**

Please refer to the What has been done document to learn more on the following:

#### **LEGAL WORKSHOPS**

During the remaining period of this phase of the ECRoB project, we will continue conducting workshops tailored to our three primary audiences, which include:

1. Workshops aimed at educating civil society about MCS, providing a general presentation suitable for civil society organizations that operate nationwide.
2. Public legal education workshops intended to inform the MCS community about their rights and legal protections. These workshops will be customized for each territory and province to account for the unique laws, institutions, and procedures related to human rights and disability law in each jurisdiction. What applies in one province, such as Québec, may not apply in another province like Nova Scotia.
3. Continuous legal education workshops targeted at the legal community, focusing on educating legal professionals about MCS and its intersection with human rights law. Currently, these workshops have been conducted only in Ontario. However, we have communicated with our community, indicating that the Maritime provinces will be the next focus. We are actively reaching out to relevant organizations and legal professionals to facilitate this process.

While our initial plan aimed to establish a national legal advisory committee from the outset, we have observed that legal professionals are currently overwhelmed, including those we are acquainted with. Consequently, we have adapted our approach and are now inviting workshop attendees to join our legal advisory committee on a voluntary basis. Additionally, we are in the process of ensuring that the time invested in this committee can be recognized as pro bono hours, as many bar associations require lawyers to contribute a certain number of hours each year for this purpose. Letters of invitation have already been drafted and will be sent at the conclusion of each workshop designed for legal professionals.

We appreciate the ongoing support and engagement of our participants, as they play a vital role in advancing the goals of the ECRoB project and promoting accessibility and inclusivity for individuals with MCS.



### **Pan-Canadian fragrance-free policy compilation**

We will be publishing this directory on our website and actively encourage visitors to contribute any missing entries. This initiative is part of our ongoing effort to ensure the list remains as exhaustive and accurate as possible.

### **Fragrance Terminology**

In the near future, we aim to advocate for the standardization of this terminology across organizations and industries, emphasizing the adoption of 'fragrance-free' wording and preferences for products and policies over 'scent-free' and 'unscented' options.

### **GLOBAL MCS LANDSCAPE**

In the future, we could consider reaching out to these organizations for potential collaborations on mutual projects.

### **Legal Database**

We intend to create case briefs for each identified case, beginning with successful ones and progressing to unsuccessful ones. Through these briefs, we will delve deeper into each case. Once all briefs are completed, we will conduct a 'mega-analysis' to identify trends and patterns in successful and unsuccessful MCS cases, allowing us to develop best practice guidelines for future MCS-related legal cases.

### **TRAINING GUIDE**

We will finish the remainder of the document, which entails:

1. Federal legal disputes
  - 1.1. Applicable context
  - 1.2. Applicable laws
    - 1.2.1. Canadian Human Rights Act
      - 1.2.1.1. Policy on Environmental Sensitivities
      - 1.2.1.2. Canada Transportation Act
      - 1.2.1.3. Accessible Canada Act
  - 1.3. Applicable commissions and tribunals
  - 1.4. Applicable jurisprudence
2. Provincial and territorial legal disputes
  - 2.1. Applicable context
  - 2.2. Applicable commissions, tribunals, laws, and prescriptions per jurisdiction
    - 2.2.1. Alberta



- 2.2.2. British Columbia
- 2.2.3. Manitoba
- 2.2.4. New Brunswick
- 2.2.5. Newfoundland and Labrador
- 2.2.6. Northwest Territories
- 2.2.7. Nova Scotia
- 2.2.8. Nunavut
- 2.2.9. Ontario
- 2.2.10. Prince Edward Island
- 2.2.11. Québec
- 2.2.12. Saskatchewan
- 2.2.13. Yukon
  - 2.2.13.1. Applicable jurisprudence
- 3. Specific legal context
  - 3.1. Employment
    - 3.1.1. Unionized-work
    - 3.1.2. Non-unionized work
- 4. Legal toolkit
- 5. Conclusion
- 6. References and further readings

This document will be repurposed into several electronic booklets tailored for attendees of our forthcoming training sessions.

### **LETTERS TO HUMAN RIGHTS COMMISSION**

Should we receive a response or if a policy is drafted as a consequence, we will share it with all our partners and make it readily accessible on our website.

### **FRAGRANCE-FREE EDUCATIONAL POSTER**

Upon requests from our members for specific-purpose posters, such as those addressing laundry products for use in shared laundry spaces, we plan to create and distribute these additional educational materials shortly.

### **ACCOMMODATION SAMPLE LETTERS**

At present, we only have one template, but our plan is to create a variety of samples tailored to a broader range of situations, thereby providing more specific guidance for different scenarios.



### **INTRO AND DISCLAIMER**

As we continue to expand and enrich the content of the ECRoB legal page, we will ensure the introduction is updated correspondingly.

### **FRAGRANCE-FREE POLICY**

We plan to offer more context-specific samples, such as for workplaces, clinics and hospitals, businesses, housing, and so on, rather than a general one.

### **MISCELLANEOUS (meetings and stuff)**

We plan to continue holding these beneficial meetings in the future

### **Additional Upscaling Efforts:**

#### **VIDEOS:**

In Phase 1 of the project, we aim to generate video content encompassing various legal subjects, as outlined in this report. Topics such as the Accessible Canada Act, the duty to accommodate and undue hardship, MCS appropriate accommodations, applicable laws and forums for each jurisdiction, etc. While these elements will also be provided in written format, we endeavor to elucidate these subjects through video content as well, to enhance accessibility for individuals with diverse disabilities, including visual impairments. This multimedia approach will bolster comprehension for all audiences.

#### **LEGAL ADVISORY COMMITTEE:**

Our initial plan of establishing a National Legal Advisory Group at the onset of the project has been revised based on advice from our partner, the ARCH Disability Law Center. Given the workload many legal professionals shoulder, they suggested we postpone forming this group until we've conducted province-specific legal workshops. The rationale is to present this opportunity once participants have a clear understanding of the Multiple Chemical Sensitivity (MCS) condition, the project's objectives, and the partner organizations involved. We believe this approach could yield more fruitful engagement than an invitation at the very beginning of the project.

The goal of this legal advisory committee is to have at least one representative per Canadian jurisdiction. Together, we would conduct research into legal information, encompassing the Accessible Canada Act, human rights law, and the duty to accommodate disabilities. Additionally, we will develop content for our website, communication materials, and social media to reach a broad range of intersectoral organizations.



This legal advisory committee would also help in regard to upscaling (phase 2). For example, they would advise on how to enhance and expand the legal side of the ECRoB project. They would also provide guidance on designing compelling, efficient content, and fine-tuning the delivery methods for our future workshops.

### Upscaling (for ECRoB Phase 2):

Our focus on human rights has been of paramount importance, and yet, throughout this project, we've discerned that there exist gaps and obstacles within the legal field that transcend the scope of Human Rights. Despite our considerable accomplishments and accumulated knowledge, there exists a substantial disparity in addressing the legal needs of the MCS community and our understanding of how best to assist them. Consequently, we aim to extend our reach beyond the realm of Human Rights, cultivating a broader spectrum of support.

In the course of developing our database, it became apparent that there is a significant demand related to workers' compensation. Most MCS cases, in fact, tend to be lodged through the workers' compensation commission rather than the human rights commission. Numerous workplaces lack fragrance-free or least toxic product policies and some even subject workers to daily exposure to harsh chemicals due to the nature of their work - such as in mines, manufacturing plants, or warehouses. Consistent exposure, even at low doses, can lead to irreversible chemical sensitization, leading workers to lodge complaints against their employers at their local workers' compensation commission/tribunal, arguing that their conditions were workplace-induced. In many of these instances, fragrance-free or least toxic policies, or even safer practices for handling chemicals such as personal protective equipment, prove insufficient due to the nature of the work. Consequently, workers seek compensation instead of accommodation, as any accommodation required would likely constitute undue hardship under their circumstances. In a future mandate, ASEQ-EHAQ is eager to explore this aspect more thoroughly and educate legal professionals, workplaces, the MCS community, and potentially other individuals and groups about the legal implications of workers' compensation in the MCS context.

Moreover, while we haven't identified any cases specific to housing, feedback from our community meetings consistently highlights an urgent need for legal assistance in this area. These issues frequently pertain to shared buildings, such as apartments and condos, and occasionally to houses. For instance, some members residing in houses have reported disturbance due to their neighbors' product choices, whether for lawn maintenance or chemicals emanating from dryer vents. Therefore, our next step would be to review these documents





across all Canadian jurisdictions. We would apply a similar methodology as we've used for our current legal database, encompassing identification, case brief, and analysis. This would enable us to discern patterns in successful and unsuccessful cases, and provide insightful advice to the MCS community on the optimal strategies to attain their objectives. Should there be another mandate for the ECRoB project, we would like to expand on tenancy law regarding MCS.

Dr. John Molot, a key contributor to the ECRoB project, and a medical advisor to ASEQ-EHAQ, has highlighted a significant concern he has frequently observed in court proceedings. The central issue revolves around the perceived equivalence of all expert testimonies, regardless of their specific knowledge or expertise. This poses a significant problem because not all experts possess the same level of understanding or specialization. For instance, in matters related to MCS, Dr. Molot is a recognized leader in the field. Yet, his expert testimony holds the same weight as a doctor without a background in environmental medicine. This situation could be compared to seeking opinions on a dental condition from both a dentist and a podiatrist, and valuing both opinions equally. It is clear that this is an area requiring attention. As such, we aim to address this issue during the second phase of the ECRoB project.

In conclusion, our current work for the ECRoB project has made it evident that a broader legal landscape must be considered to adequately address the needs of those affected by MCS. Namely, the realm of workers' compensation, tenancy and expert testimonies have emerged as themes demanding further investigation and intervention. Thus, in the next phase of the ECRoB project, we plan to address these issues to further improve accessibility, inclusivity and justice for the MCS community.