



Association pour la santé environnementale du Québec  
Environmental Health Association of Québec



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Environmental Health Association of Canada  
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## Socioeconomic Impact of MCS in Quebec

Between 2010 and 2020, the percentage of Quebecers medically diagnosed with MCS increased from 2.5% to 3.4% of the population, amounting to more than one-quarter of a million people affected. Around 72% of the cases were women, with a significant number being over 55 years of age (CCHS, 2020).

The following statistics are derived from the 2015-2016 cycle of the Canadian Community Health Survey (CCHS), a population health survey conducted by Statistics Canada.

### Employment

- Approximately 43% of Quebecers with MCS did not work, compared with around 26% of the general population in Quebec.
- **This would equate to around 108,000 Quebecers (CCHS, 2020), who could have otherwise earned an average annual personal income in Quebec of around \$53,000 (Statistics Canada, 2022), resulting in lost earned income of over 5.7 billion dollars.** This does not include costs associated with lost tax revenue, disability payments, and loss of productivity through decreased attendance rates, poor job performance, etc.
- Almost half of the women with MCS and not working in Quebec have a post-secondary diploma or university degree.

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## Income

- Almost 71% of Quebecers with MCS earned an annual personal income of less than \$40,000, compared with around 59% of the general population in Quebec.
- Around 43% of Quebecers with MCS lived below the poverty line (earning an annual personal income of less than \$20,000), compared with around 31% of the general population.

## Food Insecurity

- Quebecers with MCS are more likely to be moderately or severely food insecure compared to the general Quebec population.
- Quebecers with MCS are more likely to often not be able to afford to eat balanced meals compared to the general Quebec population.

## Housing Insecurity

- Due to a significant percentage of Quebecers with MCS living in poverty, they have little choice but to opt for low-income housing options known to exacerbate MCS symptoms as they commonly have poor ventilation, oil-based paints, etc.
- It is not uncommon for Quebecers with MCS to move frequently in search of suitable housing for their condition.
- Many continue to live in unsafe conditions or are forced to spend a significant portion of their life savings on renovations such as the installation of air purifiers, removal of mold, etc.

## Healthcare Access

- Quebecers with MCS are around three times more likely to have poor health and unmet healthcare needs compared to the general population.
- Unavailability of healthcare services in their area, high treatment costs, and no regular healthcare provider were the top reasons provided by Quebecers suffering from MCS for not being able to address their healthcare needs.
- People with MCS find it hard to access health care due to a lack of accommodation such as scent-free policies.
- Over 75% of Quebecers diagnosed with MCS have at least one other additional chronic condition compared with just under 45% of the general population (CCHS, 2020).



## Social Costs

- **Inability to lead a normal life:** Quebecers with MCS are around three times more likely to have difficulties with daily activities such as preparing meals, attending medical appointments, running errands, and performing household tasks compared to the general population.
- **Strained marriages and relationships:** Due to a lack of awareness and recognition, individuals closest to those with MCS may display skepticism and/or be less willing to accommodate their needs. Most Quebecers with MCS have little to no family support due to a refusal to recognize the disability and often live alone or only with their spouse/partner, unlike general population who can rely on a social circle for support.
- **Isolation:** Quebecers with MCS hence experience social isolation and exclusion, often forced to avoid places and activities they love, to prevent the onset of their symptoms. This ongoing social isolation leads to mental distress, and loss of interest in life. As such, the mental health of Quebecers with MCS is generally significantly worse and is exacerbated by a lack of access to healthcare, safe housing, and to basic services. In recent years, several individuals have committed or seriously contemplated suicide or MAiD. Current statistics reveal that they are indeed more likely to contemplate suicide compared to the general population.
- **Disintegration of rights:** Despite MCS being recognized as a disability by the Canadian and Québec Human Rights Commissions, many individuals with MCS contend with grave inequalities, and injustices in their everyday lives (CHRC, 2007). They are often treated with discrimination when requiring accessible workplaces, accommodations, and public facilities.
- **Decreased quality of life:** Quebecers diagnosed with MCS have less satisfaction with life in general and a worse sense of emotional security and well-being.

## Recommendations

- **Additional independent research and reliable, consistent data collection are needed to better understand the prevalence, causes and impacts of MCS.**
- **Improved diagnosis and research on treatment methods, by developing standardized protocols for diagnosing MCS and exploring innovative treatment options.**
- **Education for medical professionals, including incorporating environmental medicine into medical school curricula.**
- **Creating safe and healthy (fragrance-free and lowest to no-emission) workplaces and housing environments, along with access to non-toxic, environmentally safe products at a reasonable cost.**



- **Social Marketing / Education Campaigns to raise awareness and support for individuals with MCS.**