



Celebrating Resilience 2025: A Note of Gratitude to our Funders

We are honoured to recognize the generous financial support of the Government of Canada, the Marilyn Brachman Hoffman Foundation, and the International Journal of Environmental Research and Public Health (IJERPH). We are thankful for the support from the Environmental Health Clinic, Women's College Hospital. Your unwavering commitment to advancing research and public understanding of Multiple Chemical Sensitivity (MCS) is sincerely appreciated and of immense value to the Environmental Health Association of Canada (EHAC-ASEC), the Environmental Health Association of Québec (ASEQ-EHAQ), and the broader MCS community. Your support has made this conference and its lasting impact possible.

Your dedication to environmental health, scientific integrity, and the well-being of people living with MCS continues to inspire meaningful and lasting change. Through your vision and leadership, we can strengthen the evidence base, promote safer environments, develop management techniques, and work toward a future where those affected by MCS are met with rightful recognition, dignity, and care.

Resilience: An International Conference on Multiple Chemical Sensitivity (MCS) was a trailblazing event which brought together nearly 900 attendees from around the world over 2 days. This was a truly diverse and accessible event attracting audiences from Canada, the USA, the UK, France, Australia, Germany, Ireland, Scotland, Israel, Japan, Spain, Italy, Switzerland, and Morocco. We are grateful to say that this magnificent event would not be possible without the support of our funders.



Partners

To promote the conference on social media and increase visibility for the target audience, we have also collaborated with various Canadian equity-seeking organizations. We have secured partnerships with ARCH Disability Law Centre, La Confédération des organismes de personnes handicapées du Québec (COPHAN), Spinal Cord Injury Canada, British Columbia Aboriginal Network on Disabilities, Prevent Cancer Now, Council of Canadians with Disabilities (CCD), RCR Legal Services, Ontario Tech University, Canadian Council on Rehabilitation and Work, Women's Healthy Environment Network, Réseau québécois pour l'inclusion sociale des personnes sourdes et malentendantes (REQIS), Autism Canada, NB Lung, Independent Living Canada, New Brunswick Coalition of Persons with Disabilities, Finautonome, MCS-Aware, CONFESQ, AMICA, SOS MCS, and Thunder Bay & District Injured Workers Support Group.

Steering Committee

An event of this magnitude requires an interdisciplinary committee to offer guidance in the planning, organizing and dissemination of the conference. Our steering committee included John Molot, MD, Caroline Barakat, PhD (Ontario Tech University), Domenica Tambasco, MD (Women's College Hospital), Robert Lattanzio, LLB (ARCH Disability Law Centre), Sharareh Saremi (Disability Alliance of British Columbia), Melissa Graham (Manitoba League of Persons with Disabilities), Melanie Langille (NB Lung), Rebecca Jaremko (Nunavummi Disabilities Makinnasuaqtiit Society), and Stephanie Robins. The Steering Committee was a critical part of the pre-event, including promotions, meetings with external stakeholders, and organizing the conference structure.

The Conference

Over two days, the conference gathered nearly 900 participants from around the world. The two-day conference was designed with a dual purpose. The first day focused on presenting the scientific foundation of Multiple Chemical Sensitivity (MCS), with an emphasis on its cellular-level effects. This approach aimed to deepen understanding of the condition and reinforce its legitimacy within a field where it remains largely overlooked by both the scientific community and the medical curriculum. Additionally, the first day called for advancements in diagnostic methods and therapeutic approaches to improve the management of MCS. The second day shifted focus to public awareness, exploring societal attitudes towards MCS, evaluating the effectiveness of scent-free policies, and incorporating qualitative and legal insights to advocate for the rights of individuals living with MCS. The objective was to inform both public and private stakeholders of their responsibility to ensure the rights of individuals with MCS are respected, paralleling those afforded to individuals with visible disabilities, and to advocate for the prompt removal of barriers that restrict access to essential resources.



Throughout the conference, the speakers shared their work, highlighting the veracity of MCS, and its corresponding tangible ramifications. The event was filled with research data, observations, qualitative testing, and insights from leading disability organizations demonstrating that MCS is a public health crisis. No longer should the accusations of this condition being “psychological” be tolerated. There must be actionable changes to existing policy, curricula, protocols, and social norms to protect the fundamental rights of all individuals affected by MCS. The presenters shared evidence, lived experience, and cross-sector insights that converged around a common message: the time for recognition, reform, and accountability is now. The discussions underscored that MCS is not just a medical issue; it is a matter of accessibility, gender equity, environmental justice, and human rights.

Home Page for [*Resilience: International Conference on Multiple Chemical Sensitivity*](#)

Day 1

Day 1 of the Resilience Conference powerfully validated Multiple Chemical Sensitivity (MCS) as a legitimate, biologically rooted condition, uniting global experts across disciplines to present compelling scientific, clinical, environmental, and genetic evidence. The day marked a critical shift toward broader recognition, affirming that MCS is not only real but urgently deserving of research, policy action, and medical inclusion. Together, the presentations dismantled long-standing misconceptions about MCS and affirmed its status as a legitimate, disabling, and environmentally-mediated condition. Researchers from the United States, Canada, Japan, and Italy have demonstrated that MCS has biological implications, and there may be innate differences between individuals with MCS and those without it. Thus, the condition is a physical, and physiological manifestation of debilitating symptoms caused by repeated exposure to ubiquitous chemicals.

The day underscored that, while gaps remain in public awareness and policy, the scientific foundation for recognizing MCS is solid and continues to grow. Across continents and disciplines, experts called for urgent investment in research, policy reform, and clinical education to address the needs of those living with MCS. Allocating more resources and increasing awareness of MCS is likely to improve current diagnostic measures, thereby enhancing patient outcomes and reducing any stigma. The Day 1 presentations sent a clear message: science exists, and now is the time to act.

The Panel discussion, which concluded the first day, was also instrumental in amplifying the message. The discussion centred on topics such as scientific and research barriers, concerns with the built environment, current standards, education and awareness, and strategic action. The classification of MCS has consistently faced attitudinal and structural barriers. As the condition lacks a clear-cut identifier, the public and private sectors lack a comprehensive understanding. Consequently, corporations and academia alike do not invest significant resources in studying the condition. This further compounds the misunderstanding of MCS, and



results in many individuals (including physicians) treating it as a psychological issue. This is a feedback cycle which fuels stigma and undermines the patient's symptoms. In essence, Education was identified as both a root problem and a critical solution. Most healthcare providers, educators, and policymakers remain unaware of MCS as a legitimate health issue. The panellists called for the integration of MCS education into multiple levels of schooling, from elementary classrooms to medical schools. Notably, MCS must be a key component of the medical school curriculum, while future doctors and nurses must be trained to recognize and appropriately respond to MCS.

Policy reform emerged as a central theme in the discussion, particularly regarding the establishment of universal accessibility standards that take into account MCS. The panellists advocated for global guidelines and regulatory frameworks that recognize individuals with MCS. These would provide clarity to governments, standard developers, employers, and healthcare providers. One of the most proactive discussions focused on building a global consortium of MCS researchers, clinicians, advocates, and people with lived experience. The panellists acknowledged that while isolated organizations are doing important work, there is a need for a more cohesive international network that can consolidate findings, share data, and coordinate strategic actions. This proposed coalition would work toward common goals, such as informing the WHO to formally recognize MCS, advocating for funding streams from international bodies, and lobbying for harmonized standards across borders. Such strategies would lead to an improvement in discovering diagnostic and therapeutic methods of MCS, further contributing to its legitimacy.

The [Videos and Summaries from Day 1](#) are available on the website.

Day 2

Day 2 of the Resilience International Conference on Multiple Chemical Sensitivity (MCS) focused on the lived realities of individuals with MCS and the systemic changes necessary to ensure they are recognized, protected, and included in all aspects of society. The day brought together researchers, legal advocates, healthcare professionals, and community leaders to examine the intersection of environmental health, disability justice, and policy development.

The highlight of the day was a video presenting our interviews with international MCS groups. The aim of the video was to highlight the organizations, their work, present the global status of MCS, and develop a consortium to provide hope and protect individuals with MCS. The main themes of the video were a lack of official recognition of MCS in medical, legal, and social systems, widespread stigma, housing and employment barriers, inaccessible healthcare and an urgent need for policy change, including the adoption of fragrance-free protocols and clearer disability protections.



The day highlighted the extensive research being conducted by EHAQ, funded by Accessibility Standards Canada (ASC). The organization measured air quality in establishments with scent-free policies, and explored attitudes towards MCS while also studying the lived experiences to shape policy recommendations. Air quality assessments showed that workplaces with scent-free policies had up to 70% fewer total volatile organic compounds (TVOCs), including a significant reduction in the elimination of certain toxicants. The research also emphasized the profound relief experienced when harmful products were removed from the environment and replaced with safer, fragrance-free alternatives. A leading researcher in environmental health emphasized that raising awareness among healthcare providers, housing authorities, and the public is crucial to dismantling misconceptions and normalizing accessibility practices, such as fragrance-free environments. Our collaboration with ARCH Disability Law Centre also enabled us to portray a unique legal lens on MCS. Despite being recognized as a disability under Canadian and international law, people with MCS are frequently dismissed, disbelieved, or required to meet unreasonably high standards of proof to access accommodations. A national review of over 700 legal cases highlighted consistent patterns of bias, evidentiary barriers, and a lack of procedural accommodations.

The panel discussion centered around disability inclusion, housing environment, standards development, systemic change, inter-organizational change, and presented a gender-based perspective on MCS. Panellists unanimously affirmed that MCS is biologically and environmentally based, not psychological, and called for integrated research strategies that include TRP receptor sensitization, genetic predispositions, and toxicology. They emphasized the need for greater awareness in both clinical and academic settings, as well as the inclusion of MCS in national health and accessibility standards. The panel highlighted the urgent need for formal recognition of MCS as a disability, emphasizing that individuals with MCS are often excluded from traditional health frameworks and denied basic access. Speakers underscored the importance of centering lived experiences—particularly those of women, who are disproportionately affected and frequently misdiagnosed—within healthcare and policy. The discussion called for policy updates, including gender-based analysis in research, MCS-safe housing, scent-free environments, and integration of MCS into national accessibility standards. Organization collaboration, comprehensive education, and community-led research were presented as essential strategies to drive cultural, legal, and structural change.

The day concluded with powerful closing remarks from Paul-Claude Bérubé, LLB, the first CEO of Accessibility Standards Canada, who framed clean air as a human right and reiterated the agency's commitment to embedding scent-free and lowest-emission principles into enforceable accessibility standards. He credited the progress of the conference to the courage and resilience of the MCS community and called for policymakers to act with urgency and accountability.

Day 2 ultimately made clear that the challenges facing people with MCS are not due to a lack of evidence, but to a lack of recognition and will. By centering lived experience, embracing policy



updates, and aligning legal and health policy with disability justice principles, meaningful change is not only possible, but imminent.

The [Videos and Summaries from Day 2](#) are available on the website.

Audience Response

Since the conference concluded, we have received tremendous support and positive feedback regarding the format, content, and contributors. Certain groups from Germany and Japan have reached out to collaborate to publish the takeaways from the conference. We have also received requests to highlight the least toxic product and scent-free policies in Japan, as there has been a lack of policy reform. We have received glowing reviews from all the speakers, and collaborating partners who look forward to seeing the various projects and learning modules which will be created from the presentations in the conference (highlighted under the “Post-Conference” section).

Some of the responses we have received are below:

“Several statistics from Mr. Zuppa's presentation slides would be very useful to me in convincing some people in my organization who are very hesitant!” (Translated from French)

“I'm just listening to Day 2. This is fantastic, BUT: unfortunately, I had to miss Day 1 due to a last-minute health issue. Is there any way I can have access to Day 1? I tried to sign in to Day 1 today, but that is not possible. I'm a member of MACI, and so glad they let us know about this conference. Thank you. “

“Hi. Thank you so much for organizing and presenting this exceptional event. It is absolutely excellent!!! “

“Thank you for the interesting presentations so far”

“Dear Resilience 2025. This meeting is fantastic!”

“I thank you for organising the conference, which has been an excellent initiative, and I have been very inspired.”

“I am attending the conference on Multiple Chemical Sensitivities and enjoying these presentations. There is valuable information in them that I would like to share with my team. Will we have access to these presentation slides or a recording of the presentation for dissemination?”



“Many thanks to EHAC and its partners in organizing this tremendously important and hopeful event. It seems to signal the opening of a new era, one of possibility, for MCS people in this country.”

“Thank you so much! The presentations from around the world are amazing. It's very comforting and supportive to someone with MCS. A huge thanks to Aseq-Ehaq.”

“This is not a question, but a THANK YOU to you all. 🙏 As a female, I have lived with MCS for 46 years (diagnosed 34 years), and did not realize, until your conference, that my endometriosis, labile BP (dysautonomia), allergic shiners, and dermatographia are all potentially inter-related. I really appreciate the insight...there is still so much still to learn!”

“So glad to have had the opportunity to attend. Thank you all so much for all you do!”

“Heartfelt thanks to everyone for this amazing conference!”

“Thank you so much, inspiring and powerful!”

Conclusion

As equity-seeking organizations, both ASEQ-EHAQ and EHAC-ASEC aim to challenge the status quo. We challenge the narrow-minded frameworks of industry, and science. There is significant bias in science that overlooks the real and legitimate effects of MCS. Though there are millions of individuals affected by this condition across the world, very few scientists and governments are willing to listen and initiate accommodating changes. Our work directly opposes the aims of major enterprises such as companies involved in the production of pesticides, petrochemicals, scented products, fragrances, and other chemicals. We have no vested interest in these industries and occasionally receive backlash from individuals affiliated with such companies. In these circumstances, it is especially difficult to gain support from prospective sponsors. Thus, we are extremely grateful to our principal funders for their support throughout the project. At the initial stages, we had massive goals for the conference, and to achieve them, we required many resources. We were only able to supersede our goals and expectations due to the support from our sponsors and partnering organizations.

To conclude, while this conference may mark the culmination of an immense effort, it is truly only the end of one chapter, and the beginning of the next. This chapter would not have been possible without the generous support of our funders: the Government of Canada, the Marilyn Brachman Hoffman Foundation, and the *International Journal of Environmental Research and Public Health*, along with the support of the Environmental Health Clinic at Women's College Hospital.

We are deeply grateful to all our partners, collaborators, contributors, speakers, and attendees. Your commitment and engagement have made this milestone possible.



The next chapter now calls. EHAC-ASEC and ASEQ-EHAQ look forward to future projects, workshops, and conferences. We remain steadfast in our mission to improve the lives of all those affected by multiple chemical sensitivity (MCS), and, through that work, to help create a healthier world for all.

Thank you for your contribution to this important step forward. We hope you will join us again as we continue the journey.