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## **Standing Committee on Health**

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**EVIDENCE**

**Monday, May 28, 2007**

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**Chair**

**Mr. Rob Merrifield**

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## Standing Committee on Health

Monday, May 28, 2007

• (1530)

[English]

**The Chair (Mr. Rob Merrifield (Yellowhead, CPC)):** We will call the meeting to order.

Pursuant to Standing Order 108(2), we are here for a briefing on possible regulatory changes. We want to talk about some of the potential regulatory changes to some of the pesticides and hazardous products perhaps entering the country. We want to investigate that. It was a request by some of the members of the committee.

We're pleased to have with us, from the Pest Management Regulatory Agency, Mr. Richard Aucoin; from the Hazardous Materials Information Review Commission, Ms. Sharon Watts; and from the Canadian Food Inspection Agency, Ms. Debra Bryanton.

It's good to have you all here.

We'll actually start in a different order. The Pest Management Regulatory Agency will be first and the Canadian Food Inspection Agency will follow. They're on the same issue. After that, we'll talk about hazardous materials information.

With that, we'll open up the meeting and yield the floor to the Pest Management Regulatory Agency.

Richard, you have 10 minutes.

**Dr. Richard Aucoin (Chief Registrar and Director General, Registration Directorate, Pest Management Regulatory Agency):** Thank you, Mr. Chairman and honourable members of the committee.

I'm Dr. Richard Aucoin, chief registrar of the Pest Management Regulatory Agency of Health Canada. I'm very pleased to be here today with my colleague Dr. Peter Chan, director general of health evaluation at the PMRA.

[Translation]

As Chief Registrar, I am responsible for the processes Health Canada has in place to review pesticides. My goal is to ensure that we are using the latest and best science available to make regulatory decisions, and that we do so in the most effective and efficient way.

I appreciate that the public and members of the committee are concerned about the safety of pesticide residues on their food, especially given the media coverage on this topic a few weeks past. As such, Dr. Chan and I are pleased to be here today to provide committee members and Canadians with more information about international regulatory cooperation and pesticide residue limits on Canadian food.

In our comments today, we will briefly describe our mandate for pesticide regulation, how Health Canada scientists establish human health standards for pesticides on food and the current international context for pesticide regulation and how it benefits Canadians.

[English]

Health Canada takes seriously its responsibility to protect human health and the safety of Canada's food supply. Our mandate in pesticide regulation is to register only the products that meet the strict standards of human health and safety and the environment under the authority of the Pest Control Products Act.

My colleague Dr. Chan will now briefly provide some information on maximum residue limits for pesticides in Canada, and specifically how they're established.

• (1535)

[Translation]

**Mr. Peter Chan (Director General, Health Evaluation Directorate, Pest Management Regulatory Agency):** Mr. Chairman, the scientific approach we use to protect human health has two main components; one identifies potential health effects and the other identifies exposure, of specific interest today, through the ingestion of pesticide residues on food. Together these two components are used to identify potential risks to human health and what is required to protect people from those risks.

[English]

Pesticides are stringently regulated in Canada according to modern internationally recognized scientific risk assessment methods before they are approved for use or sale in Canada. The scientific methodology used to set maximum residue limits on food is well established internationally.

Maximum residue limits are set in Canada's food and drug regulations as the maximum level of pesticide residue permitted on domestic and imported food. Health Canada establishes maximum residue limits as part of the extensive assessments conducted on each pesticide product before it is registered for use in Canada. In fact, maximum residue limits are set for each pesticide and food crop combination.

Maximum residue limits represent the maximum residues expected to be left on food at harvest at the approved application rate. They are established only after a dietary risk assessment has confirmed that any pesticide residues likely to remain on food when it is eaten will not pose health concerns for anyone.

Health Canada pays special attention to ensure that people who are more sensitive, such as children, pregnant women, and seniors, are not at risk. In other words, the exposure to pesticide residues through consumption of food over a lifetime must be lower than the exposure that is determined to be acceptable.

It is important to note that maximum residue limits do not represent limits above which residues may be harmful to humans. The actual human health standard is the acceptable daily intake, which has already been determined as the amount of pesticide that can be consumed each day without risk for an entire lifetime.

On the other hand, maximum residue limits do act as a trigger for further evaluation if they are exceeded. If a food has a residue level higher than that of the established maximum residue limit, our colleagues, the Canadian Food Inspection Agency, would notify us if they felt there were any health concern.

Dr. Richard Aucoin will now discuss the international context for pesticide regulation.

Thank you.

**Dr. Richard Aucoin:** Mr. Chair, Health Canada has been working for more than ten years with its counterparts in other countries, such as the European Union, Australia, New Zealand, Japan, and the United States, toward greater cooperation in pesticide regulation.

By cooperating internationally, Canada and its partners can achieve many benefits. Most importantly, this cooperation allows regulators to stay abreast of advances in science and develop regulatory approaches to achieve the highest standards for protection of human health and the environment. It allows regulators to gain efficiencies from sharing the work in reviewing new pesticides and reassessing older ones. For the agricultural sector, benefits include reduced barriers to trade in food, greater access to newer and safer pesticides, and enhanced competitiveness.

Mr. Chair, I would like to emphasize that the protection of human health is the highest priority we have. However, while international cooperation in pesticide regulation has led to a convergence in regulatory approaches, it's important to emphasize that Canada makes its own independent regulatory decisions in accordance with domestic legislation and in full consultation with the Canadian public.

● (1540)

[*Translation*]

Over the years, some have expressed concerns that these efforts led to the lowering of national standards. This has not proven to be the case. Our efforts toward international regulatory cooperation have allowed Canada to adopt higher standards for pesticide regulation.

For example, when the US Food Quality Protection Act of 1996 was enacted, it required the US Environmental Protection Agency to evaluate the cumulative effects of pesticides with a common mode of action and to consider sensitive populations, such as children, pregnant women and seniors in human health risk assessments.

At that time, Health Canada worked closely with our counterparts in the US Environmental Protection Agency to employ this higher standard for protecting human health in Canada through policy changes. With the coming into force of the Pest Control Products Act last June, these standards are now law in Canada.

[*English*]

Another example of raising standards is found in Health Canada's current proposal to revoke the default maximum residue limit of 0.1 parts per million in favour of establishing specific maximum residue limits for domestic and imported food, as is done in the United States. The general maximum residue limit allowed food to cross the border if it had a pesticide residue of less than 0.1 parts per million, yet no specific maximum residue limit existed. By revoking the general maximum residue limit, all maximum residue limits in Canada will be set according to the scientific risk assessment process described earlier by my colleague. This means that the maximum residue limits specific to each pesticide will be more protected of human health.

With respect to Canadian maximum residue limits for pesticides on food, none have been changed to date. At this time, Canada is discussing the possibility of harmonizing maximum residue limits with its international partners. If Canada deems that changing a maximum residue limit is in its interest, it will be changed only if it meets strict health protection standards and only after consulting with Canadians. Health Canada's priorities are the health and safety of Canadians and their food supply. This is a guiding principle when regulating pesticide use in Canada.

In summary, Mr. Chair, the protection of the health of Canadians is paramount. International regulatory cooperation does offer benefits but not at the risk of Canadians' health. Our high standards and priorities for human protection will not change as a result of discussions regarding the possibility of enhanced cooperation.

Thank you.

**The Chair:** Thank you very much.

Now we'll move on to the Canadian Food Inspection Agency.

Debra Bryanton, the floor is yours.

**Ms. Debra Bryanton (Executive Director, Food Safety, Canadian Food Inspection Agency):** Thank you, Mr. Chairman, for the opportunity to appear before the committee. My comments will be very brief as we are here primarily to support our colleagues at the PMRA at this particular committee hearing.

I am the executive director of the Canadian Food Inspection Agency's food safety directorate. As the committee is aware, the CFIA is mandated to safeguard Canada's food supply and the plants and animals upon which safe, high-quality food depends. CFIA does verify compliance with 13 federal acts in the respective regulations, including the Food and Drugs Act. The agency works in partnership with other stakeholders to carry out this mandate. One of our most important partners, of course, is Health Canada. We do have a strong working relationship with various parts of Health Canada, including PMRA.

We are committed to serving Canadians by providing protection from preventable health risks and by delivering a fair and effective regulatory regime, sustaining the plant and animal resource base, and promoting security of Canada's food supply. As there is a particular interest in pesticide residues, we would note that Health Canada establishes maximum residue limits and CFIA is responsible for monitoring and enforcing these limits. For pesticide residues, these limits are set by PMRA, as our colleagues have noted. Our monitoring program demonstrates that pesticide residues on fresh fruits and vegetables grown and imported into Canada are very low. Recent results show that 96.7% of imported produce and 99.1% of Canadian produce tested below the Canadian maximum residue limits. Of that, 86% of imported product and 88% of Canadian fresh fruits and vegetables had non-detectable pesticide residues.

The CFIA uses maximum residue limits as triggers. If a food has a residue level that is higher than the established limit, where we do feel there could be a health concern, we notify Health Canada, which then undertakes a dietary risk assessment to determine whether these residues do actually pose a health concern. In recent years there have not been residue levels that posed a health concern, but should such an event occur, CFIA would undertake immediate action, which may include food recall.

In conclusion, let me underline that food safety is CFIA's top priority and central to everything we do.

I'd be pleased to respond to any questions you may have later.

• (1545)

**The Chair:** Thank you very much.

Now we'll move on to the Hazardous Materials Information Review Commission.

Sharon Watts, the floor is now yours.

**Ms. Sharon Watts (Vice-President, Corporate Services and Adjudication Branch, Hazardous Materials Information Review Commission):** Thank you.

I would like to thank the committee for the opportunity to speak to regulatory changes being contemplated by the Hazardous Materials Information Review Commission. In fact, the commission has recently finalized draft amendments, two regulations that are consequential to what is now known as chapter 7 of the Statutes of Canada, 2007, formally known and presented to this committee in January as Bill S-2.

As vice-president of corporate services and adjudication of the Hazardous Materials Information Review Commission, I have the responsibility for the development of both regulatory and legislative policy.

[*Translation*]

I would like to provide you with a brief overview of the Commission and the proposed regulatory amendments, after which we will be happy to take your questions.

[*English*]

I will give a brief overview of the role of the commission—you may recall I spoke of this earlier. It is to manage the trade secret component of the workplace hazardous materials information system, commonly known as WHMIS, or SIMDUT. WHMIS is a federal, provincial, and territorial hazard communication system established in the late 1980s through a consensus of industry, organized labour, and the federal, provincial, and territorial governments.

Among other things, WHMIS requires that product labels and safety documentation fully disclose the identity of hazardous ingredients within a product, the specific hazards posed by the product, the precautions to be taken in handling the product, and first aid measures to be applied in the event of exposure. The goal of WHMIS is to ensure that workers using hazardous materials have the information they need to minimize the risk of illness and injury.

HMIRC operates as a quasi-judicial independent agency with a mandate to grant exemptions from the full disclosure requirements of WHMIS while ensuring that the documentation on the safe use of the products is provided to Canadian workers and is accurate and complete.

[*Translation*]

The Commission's role is a dual one as it ensures a balance between workers' right to know what is in the products they work with and their hazards, and the industry's right to protect its trade secrets. The activities of the Commission can be broken down into three key components of our mandate.

[English]

First, we conduct an economic analysis to determine whether the claimant's information is truly a trade secret and whether disclosure will have economic consequences. Second, we conduct a scientific analysis to ensure that the health and safety information being supplied to employers and workers about the product is accurate and complete. The third part of our mandate is the administration of an appeals process. When a claimant or any affected party, such as a worker representative, challenges a decision of our commission, an independent appeal board is appointed to hear that challenge.

The governance of our commission is unique in the sense that the oversight of this three-part mandate is provided by a council of governors. On this 18-member council there are two representatives of workers, one representative of employers, another representative of the suppliers who supply the materials into the workplaces, and every province and territory has a member on this council, including a representative of the federal minister responsible for occupational health and safety.

Under our act the council has the statutory mandate to make recommendations to the minister on procedures for reviewing claims, appeal procedures, changes in fees and other related matters, and regulatory changes. The regulatory amendments we are currently proposing were developed under the aegis of this council as the means to deliver on commitments made to stakeholders as provided for in chapter 7. As did Bill S-2, the regulatory proposals have the unanimous support of our stakeholders as represented on our council of governors.

• (1550)

[Translation]

I would now like to turn to the issue that brings us here today, the proposed regulatory amendments consequential to Chapter 7 of the Statutes of Canada 2007.

The last time I had the pleasure of addressing this committee was regarding the legislative amendments to the Hazardous Materials Information Review Act set out in Bill S-2. The Bill received the unanimous support of this Committee and was reported back to the House of Commons for Third Reading where it received the unanimous support of all parties and received Royal Assent on March 29, 2007. At this point, the Bill became law as Chapter 7 of the Statutes of Canada 2007.

[English]

I would like to briefly review the legislative amendments, because there is a strong link between the legislative amendments and the regulatory amendments: one, allow a claimant to make a declaration that the information for which protection from disclosure is sought is a trade secret and that substantiating information is available upon request; two, allow a claimant to enter into an undertaking with the commission to voluntarily correct the health and safety information without a formal order; and three, allow the commission to provide factual information to appeal boards upon request.

These amendments, you may recall, were designed to reduce the administrative burden both on the claimants that come to the commission and on the commission staff itself, to speed up the correction of information that is required to get to workers

concerning the health and safety information, and to expedite the appeals process.

[Translation]

However, in order for these changes to be fully implemented certain regulatory amendments are also required. The proposed regulatory amendments touch each of the Commission's three area of activity.

[English]

In terms of the first regulatory amendment regarding the information required to substantiate a claim—we're talking about the economic analysis side of our commission—under the declaration approach introduced by chapter 7, claimants declare that the information for which they are seeking exemption, the trade secret, is in fact a trade secret, and they provide a summary of the supporting documentation. However, the commission will require full documentation in support of a claim in the following instances: one, when an affected party challenges or makes a submission to the commission; two, when the claimant's declaration has been selected as part of a verification scheme; or three, when the screening officer within the commission has reason to believe the information may not be accurate.

The regulatory amendment outlines the basic information that will be required in a claim for exemption using this declaration approach, in addition to the detailed information that some claimants will be required to provide when their claim is selected for verification.

So the regulations spell out, one, that there's a basic new claim for exemption using a declaration approach, and two, that there's a second claim for exemption approach that requires full documentation.

[Translation]

Under this verification process, Screening Officers will be able to verify that the information provided by claimants with their declaration is accurate, and ensure there are no frivolous or false claims.

I will not outline the amendments related to the Commission's review of health and safety information provided by claimants.

You will recall that the second amendment to the Act allowed for the voluntary correction of safety documentation by claimants. Allowing corrections to be made voluntarily will expedite the process of getting complete and accurate information into the hands of workers, because the corrected information will be available immediately upon correction, rather than having to wait until after the publication of orders and subsequent appeal period expires at which point the correction orders become binding.

•(1555)

[English]

To ensure the transparency and openness of this process, we're proposing two regulatory amendments. The first, in the interests of transparency, proposes to publish the content of these compliance undertakings in the *Gazette* with a link from our website. This way the workers will know exactly what information has already been corrected, and in this way it provides them access to the corrected information and allows them to verify that this corrected information is actually available in the workplace.

The second amendment allows for the appeal of these compliance undertakings by affected parties to allow for recourse if the affected parties challenge the undertaking.

It's important to note here, and it was mentioned again when we talked about Bill S-2, that a formal correction order will always be issued if the claimant chooses not to make the corrections or if the undertaking has not been made to the satisfaction of the screening officer; in other words, full compliance will be realized in any case.

Turning to the appeals process, again, chapter 7 allows for the commission to provide factual clarification of the record of the screening officer to appeal boards when it's needed to facilitate the process.

[Translation]

Appeals are heard by independent boards with three members drawn from industry, labour and the chair of the appeal board, representing government. Most, if not all, appeals heard to date by the Commission's appeal boards would have benefited from additional explanatory information from the Commission, but this was not permitted under previous legislation.

[English]

The proposed regulatory amendments regarding the appeals process outline the process by which a party to an appeal may make a request for such clarification from the commission. This request requires unanimous support from the appeal board, and, if supported, the commission will be required to provide the appeal board with a written response.

In addition, the proposed amendments also allow for an appearance by the commission. In this case, it would be where the commission's written response already provided requires further clarification or, due to the urgency of the matter, if an appearance by a commission official would better aid the resolution of these issues.

None of this will interfere with the statutory independence of these independent appeal boards, as this is absolutely essential for the acceptance of appeal board decisions.

There are other housekeeping amendments.

[Translation]

There are additional proposed amendments to the regulations that are not related to Chapter 7. Among these amendments are wording updates, including those required to comply with the Bill to Modernize the Statutes of Canada, provisions to permit the

electronic filing of claims, and minor amendments to streamline the appeal process.

[English]

In conclusion, I'd like to re-emphasize that the commission's regulatory changes have been developed in the same manner as Bill S-2, through extensive consultation with our stakeholders, consultations that commenced several years ago at the time the legislative amendments were being developed. Unanimous support for these regulatory amendments was most recently received from the commission's council of governors, literally last Friday at our annual council of governors meeting. Again, council of governors represent all of our stakeholders—labour, industry, employers, and each province and territory, as well as the federal government. At that meeting, our stakeholders' message was quite clear: these regulatory amendments are an extension of Bill S-2, which received unanimous support from our stakeholders and unanimous support from this committee and from all parties.

These amendments do not compromise worker health and safety. They will reduce the time to review economic information in support of claims; they will allow efficiency gains to be reinvested into the health and safety side of our business; and, when implemented, they will speed up the correction of health and safety information that needs to get into the hands of workers.

We feel these changes are a positive step forward for workplace health and safety in Canada. Thank you very much.

**The Chair:** Thank you very much.

We'll now move to the question and answer portion.

We'll start with Ms. Susan Kadis. The floor is yours.

**Mrs. Susan Kadis (Thornhill, Lib.):** Thank you, Mr. Chair.

Thank you for your presentations today.

I think, Mr. Aucoin, you mentioned that you are considering changes, as per the media story—I'm assuming increasing limits as opposed to lowering them. You could confirm that for us today.

I guess my question would be, why would we do this? This is food that Canadians are going to be consuming. What is the relationship between this and the security and prosperity partnership? Is this related to a way to address a trade barrier with the United States? My overall concern, if this is in fact accurate, is whether there is any potential for raising these limits to in any way have trade efficiency or convenience trump the health of Canadians.

•(1600)

**Mr. Richard Aucoin:** Thank you for the question.

On the subject of the residue limits themselves, whether we're raising or lowering the limits, I do need to emphasize that there have been no decisions made with respect to raising or lowering limits. This is part of an international discussion that's happening in terms of where those limits are set, how they're set, and the potential issues they may have for international trade.

That really speaks to the second part of your question as to why we would even consider raising or lowering or changing these limits. It is in part due to the concerns of exporters and agricultural producers, manufacturers, and other countries around the world that the maximum residue limits can create trade issues.

On the third part of your question, just to be clear, it is trade driving some of these discussions, but I do want to be clear that health is the priority, and it's health that will determine the decisions that are made at the end of the day.

**Mrs. Susan Kadis:** Not long ago, I believe it was MMT—you're probably familiar with that; it was something that was related to NAFTA, if I'm not mistaken. That was something that was imported in our gasoline, I believe, and I think it still exists today.

I guess that's the concern I'm having. That's my line of questioning today, to find out, to ensure, I guess, to confirm that these trade issues, although obviously something we negotiate and work on, will not in any way compromise the safety of Canadians going forward.

**Mr. Richard Aucoin:** I can't speak specifically to MMT, but I am familiar with that gasoline additive issue.

I can only emphasize that Canada will make its own decisions, and we will not do anything that compromises or changes our current high human health standards.

**Mrs. Susan Kadis:** Okay.

If I have a little more time, Mr. Chair, there is this issue of the security and prosperity partnership. What groups, levels, or departments have direct input into and work with this partnership? And can you tell us a little more about it and how it relates to the potential consideration of any changes?

**Mr. Richard Aucoin:** I'm not really a spokesperson for the security and prosperity partnership. I don't know if my colleagues are able to shed any light on it.

**Mrs. Susan Kadis:** Well, if someone has information about this security partnership, I think it was one of the focal points of our questions today.

**The Chair:** Just as a clarification, you want to know whether the decisions being made here have anything to do with the security and prosperity partnership?

**Mrs. Susan Kadis:** Exactly—and a little bit more about how it's comprised and which agencies have input into it. I want to know a little more about that body and if there's a relationship with any potential changes to our limits.

**The Chair:** I'm interpreting the last answer, which was that health would rule the day, not trade. I think that is what you were suggesting, too. I'm not trying to put words into anybody's mouth, but I think that's what I heard.

**Mr. Richard Aucoin:** Certainly, in the context of pesticide regulation, health does rule the day—not trade.

**Mrs. Susan Kadis:** So if we can't ascertain that today, Mr. Chair, could we have more information about the partnership later? I think it's very relevant. It's certainly something we discussed prior to today's meeting.

I think it's important that the information be relayed to us, if we can't obtain it today.

**The Chair:** Okay, and exactly what are you looking for on that?

**Mrs. Susan Kadis:** Well, we have a question, for example, regarding this partnership. I think it's our first question. There have been allegations that the group—

**The Chair:** Who would you like to bring forward?

**Mrs. Susan Kadis:** Well, let's have whoever are the appropriate individuals or departments talk about the potential harmonization of Canadian regulations, if that is occurring, and in what way, and if it has any relationship—

**The Chair:** Does the CFIA have anything to say on this?

**Ms. Debra Bryanton:** Similar to my colleague, I'm not the spokesperson on the SPP initiative. However, I believe all of our departments are participating in some initiatives; so it may be of interest to have the official spokespersons come to the committee.

**The Chair:** Who would that be?

**Ms. Debra Bryanton:** Well, there are various departments involved. As it relates to—

**The Chair:** That's what I realized, and that's why I'm saying—

**Ms. Debra Bryanton:** —food and food safety, both Health Canada and the Canadian Food Inspection Agency are involved, as is our foreign affairs department.

**The Chair:** So it would be somebody else from your department?

Do you have a name?

• (1605)

**Ms. Debra Bryanton:** In our international affairs directorate, the executive director is Emmy Verdun.

**Mrs. Susan Kadis:** Thank you, Mr. Chair. I appreciate that.

I think it's very relevant as well, because there's also a question pertaining to our upcoming deliberations this week on the Quarantine Act, which is whether or not this SPP was involved in the decision to omit land conveyances from section 34. It's also something we're dealing with imminently, so I think it's very important that we get the information prior to, or at, that meeting.

**The Chair:** That's business of the committee and we'll discuss it afterwards, rather than doing it right now and taking time away from the witnesses here.



You still have more time, but are you done? Okay.

Madam Brown will continue.

**Ms. Bonnie Brown (Oakville, Lib.):** Thank you, Mr. Chair.

I'll ask Mr. Aucoin if the proposal to revoke the general maximum residue limit of 0.1 parts per million was made only within Health Canada or through the aegis of one of these international meetings.

**Mr. Richard Aucoin:** This specific proposal has been, and is being, consulted on broadly within Canada. We have shared that proposal with our colleagues in the United States. We've also shared it with our colleagues around the world, in OECD countries in particular.

**Ms. Bonnie Brown:** Do you ever meet with your counterpart in the United States?

**Mr. Richard Aucoin:** Yes, we meet frequently.

**Ms. Bonnie Brown:** And would this revoking of 0.1 parts per million be one of the things you have recommended because of those meetings?

**Mr. Richard Aucoin:** This is an initiative that Canada embarked on by itself after a lot of consultation with stakeholders; this was something we really needed to do.

**Ms. Bonnie Brown:** Okay.

So as you get more specific and try to have a maximum residue limit for each pesticide—

**Dr. Richard Aucoin:** Correct.

**Ms. Bonnie Brown:** —will those limits be higher or lower than 0.1 parts per million?

**Mr. Richard Aucoin:** It's impossible to say what the final limits will be. They'll be case by case, based on a risk assessment specific to that pesticide and that crop.

**Ms. Bonnie Brown:** How will you conduct a risk assessment for each and every pesticide?

**Mr. Richard Aucoin:** These limits are normally established in the context of manufacturers applying to us for registration of that pesticide for use in Canada. That entails a full environmental and human health risk assessment. One of the outcomes of that risk assessment is the establishment of a residue limit for all the uses of that pesticide on the crops for which they're going to use it.

**Ms. Bonnie Brown:** But what about the pesticides that are already licensed and approved at 0.1 parts per million? Are all those people going to come back and apply for something else?

**Mr. Richard Aucoin:** Part of the proposal is that we would look at the current U.S. MRLs or tolerances for just specifically those ones that are below 0.1 parts per million. The proposal is that we would adopt those lower tolerances in the United States for those very specific pesticide and crop combinations.

**Ms. Bonnie Brown:** What about if they're higher?

**Mr. Richard Aucoin:** There's no proposal to do that.

**Ms. Bonnie Brown:** Okay.

If you're talking risk assessment on each and every pesticide on the market, it would seem to me that the 0.1 parts per million could

be interpreted as using the precautionary principle, because it's a pretty stringent standard, is it not?

**Mr. Richard Aucoin:** The 0.1 parts per million was originally or historically established, I believe, based on the kinds of detection limits analytical equipment was capable of. So it would basically be able to detect any pesticide residues at all.

**Ms. Bonnie Brown:** When you're talking about risk assessment, does this mean we're not using the precautionary principle, we're using risk assessment on everything?

**Mr. Richard Aucoin:** Our risk assessment approach essentially is the precautionary approach. It's inherent in everything we do. We do an extensive risk assessment—

**Ms. Bonnie Brown:** I thought risk assessment and precautionary principle were sort of two different modes of operation.

**Mr. Richard Aucoin:** The risk assessment approach we take is essentially the precautionary approach. It's inherent in how we assess a pesticide, pre-market, before it's allowed for use or sale in Canada. It takes into account all the potential hazards that pesticide might pose, the kind of exposure that people might have, the environment, etc.

● (1610)

**The Chair:** Thank you.

Madame Gagnon, five minutes.

[*Translation*]

**Ms. Christiane Gagnon (Québec, BQ):** I would like to follow up on the issue of tolerance with respect to pesticide regulation.

On May 9 last, I directed two questions to the minister. According to his response, his government had not had any discussions of this nature and no change had occurred. I have here the minister's response to the effect that no agreement had been reached either with the US or with other countries and that the health of Canadians would be protected.

The minister's response threw us off a little. We were not too clear about what he was trying to say. You claim that some discussions did in fact take place further to NAFTA and that these talks are continuing. Some groups in Quebec and in Canada are very concerned, most notably the Coalition for Alternatives to Pesticides.

People ingest pesticides on fruits and vegetables. Apparently some residues pose a health risk. People often wonder what causes certain cancers, but what we ingest could also be responsible for the rapid rise in cancer rates.

Why consider allowing higher pesticide residue limits on certain fruits and vegetables? You are opening a door by saying that you plan to do a risk assessment. Canada and the US have a different climate. Why not close the door immediately? Otherwise, we will have to say yes to the US because of trade considerations. Since we already know that people's health could be at risk, why not adopt a zero tolerance policy?

[English]

**Mr. Richard Aucoin:** Thank you.

On your first point, with respect to what we've been saying about discussions within NAFTA, what we were saying is very consistent with what the minister has said. These things are under discussion. There have been no decisions reached yet, and there is in fact an international discussion, not just a discussion with the Americans. There are OECD countries and countries around the world that are discussing the potential trade issues caused by differences in pesticide maximum residue limits between countries and whether there is a possibility of harmonizing those pesticide residue limits or not.

We will absolutely not propose to do that if there is any chance of compromising human health on that issue, and we've been very clear on that. We're simply indicating that it is an international discussion; there are significant trade issues that are being discussed because of these residue limits. And we are asking if there is an opportunity or possibility to harmonize residue limits without compromising human health.

The goal, as you've said, should be to not increase pesticide residues on food. I absolutely support that. Health Canada supports that, and in everything we do we've been very clear that we actually support reduced pesticide use where possible. What we're discussing here are the actual residue limits on food and not the amount of pesticides that farmers are using. I think it's clear that there is a trend for farmers across the country and around the world to use less pesticide rather than more.

[Translation]

**Ms. Christiane Gagnon:** You maintain that for economic reasons, you are looking at ways of harmonizing maximum pesticide residue limits. We would like to see these limits lowered. Judging from what you are saying, harmonization will occur provided that limits are similar to ours or to the levels that we would like to see, that is the lowest possible. If you fail to come to an agreement because of the potential risk to human health, how would this decision affect the economy? Realistically, how would this affect exports of certain products?

[English]

**Mr. Richard Aucoin:** First of all, these discussions are still in pretty early stages. We started them a while ago, but there's still a lot of information we need in terms of the extent of those trade issues caused by differences in residue limits. At the end of the day, the health of Canadians is what is paramount to us, and we won't be changing our human health standards to accommodate changes in maximum residue limits of other countries. We do need to talk with these other countries, though, to understand the issue, and we'll certainly not be making any changes without the benefit of good science and without the benefit of consulting with Canadians first.

• (1615)

**The Chair:** Thank you very much.

Mrs. Davidson.

**Mrs. Patricia Davidson (Sarnia—Lambton, CPC):** My first question is to Ms. Watts.

In your presentation to us you talked about the commission's requiring a claimant to submit full documentation in support of the claim. You outlined three instances: when the affected party makes a submission to the commission; when the claimant's declaration has been selected for verification as part of the commission's verification process; or, thirdly, when the screening officer has reason to believe that the information may not be accurate. Could you elaborate a little more on that last instance, please, when you're talking about information that may not be accurate? What would lead the screening officer to believe there may be reason to think it wasn't accurate, and what process would lead up to this?

**Ms. Sharon Watts:** Thank you for the question.

We can go back to the elements within the act that allow for verification. We spoke about the need to verify this declaration approach. We have to remember that the declaration approach is not just declaring that what they have in front of the commission is in fact a trade secret or confidential business information; they are also declaring that they have the substantiating information to back up the claim that it is confidential business information.

Whether it's an affected party, as you mentioned, or whether it's part of our random sampling scheme to verify, or whether it's the third element that you're specifically questioning, there is the need for a screening officer when they make a decision. The screening officer is the person within the commission who makes that quasi-judicial decision that, yes, this is a valid trade secret, and the screening officers need to know that they have the information before them on which to make an informed decision.

In some cases they may look at the declaration that a claimant has brought forward, and just by virtue of the number—the value that is being suggested as the economic loss they would suffer, the economic consequences they would suffer by virtue of this having to be fully disclosed rather than being protected—they will know through their experience, either with that industry sector or with that particular company, since most of the companies we have as claimants are the large multinational global companies, that the number can't possibly be accurate on the face of it, so they'll need to go behind the number. They'll say they need to have that substantiating information—your economic analysis—to tell me how you arrived at that number.

It's only in doing so that a screening officer can make an informed decision and then be able to say whether this claim is valid or not.

**Mrs. Patricia Davidson:** Thank you.

Ms. Bryanton, on the second page in your statement you talk about the maximum residue limits as triggers; if they have a residue level significantly higher than the limit, you notify Health Canada, and then they would conduct a dietary risk assessment.

Can you tell me a little bit more about this dietary risk assessment? What's involved with it? Is it a lengthy process? Is it something that's going to be determined quickly, or are we looking at a long, drawn-out process before something is done?

**Ms. Debra Bryanton:** Thank you.

It may be that my colleague would like to elaborate on the health risk assessment process; I can talk a little bit about our monitoring programs, if you wouldn't mind, Mr. Chair.

The Canadian Food Inspection Agency has in place a monitoring program to determine the general levels in the food supply. It's not targeted at the level in a specific shipment of food, but it provides us with a picture of what levels are in the overall food supply. That's called our monitoring program. We publish our plan and its results every year. It's our national chemical residue monitoring program.

When we find a positive as a result of that program, we will first look at it to determine if it is in any way likely to pose a health risk. "Significantly" is probably the wrong word here; when we say significantly higher, anything that looks like it's higher than the MRL we will refer to Health Canada.

When a risk assessment is done and determines that it's not a health concern, it is still nonetheless a regulatory violation, so we institute follow-up action so that subsequent shipments from that particular supplier are tested and must be demonstrated to be within the residue limit. When something looks as though it may be a health concern, we submit information on that to Health Canada; in this case it would be PMRA.

• (1620)

**Mr. Peter Chan:** Thank you for the question. This gives me the opportunity to try to explain something in a more condensed manner. It is a very complicated issue, so I will try to explain that quickly.

In doing a dietary risk assessment, as I mentioned in my presentation, there are usually two main areas we look at. One is the exposure. In this case we are talking about the residue that remains on the food. When we do the exposure assessment, we include all the populations—including children, seniors, pregnant women—according to their dietary intake: what their dietary behaviour will be, what types of foods they will be taking, and so on and so forth, in doing the exposure assessment for the rarest age group. So that's one part of the risk assessment.

The other part of the risk assessment, as I mentioned, is to look at the potential toxicity studies to identify if there is any potential health concern of somebody being exposed to that particular pesticide product. Once we identify from the toxicology database, we will look at what is considered to be an acceptable daily intake, which in layman's language is that when somebody is ingesting or consuming certain products that contain that residue for the whole duration of their lifetime, it is considered to be acceptable or doesn't pose any health concern. So in that sense, we're looking at the hazard associated or the potential health concern, if any, for somebody exposed to that chemical versus the exposure from the residues that are from the food or from the crops, whatever the people are ingesting.

So when we compare the two, we look at what are the differences, what are the comfort levels, if that's the right word. If we determine that at a certain level there's no health concern, and then the exposure scenario is well below that, then we would say that is an acceptable residue in the food consumption.

So tying it back to the questions that PMRA would identify if there is any health concern or not, when they refer that to us, we immediately look at doing the dietary assessment of that particular reference. Depending on how much data we have on hand, it could be a process that's very quick, because we already have all the information and we can do the assessment and so on, or it could be a

longer process. If we don't have all the data, we'll have to gather all the data information to look at comparing the exposure from this particular residue versus what we consider the acceptable daily intake for that chemical or pesticide.

So when we compare the two, if it's considered acceptable, there will be no health concern for that.

**Mrs. Patricia Davidson:** Thank you.

**The Chair:** Thank you very much.

We'll now go on to Mrs. Priddy. The floor is yours.

**Ms. Penny Priddy (Surrey North, NDP):** Thank you, Mr. Chair.

So I can focus my question in the right direction, let me try to be clear on my understanding of this. You're stating that this is an initiative that came about because of Health Canada's work with countries around the world, including the U.K., the EU, etc. I assume then, according to the Minister of Health, that this has absolutely nothing whatsoever to do with SPP.

Anybody? A short answer, like yes or no, will help me, because then I can focus my other questions.

• (1625)

**Mr. Richard Aucoin:** Our discussions are part of a broader international regulatory cooperation with major OECD countries.

**Ms. Penny Priddy:** Okay. Does it have anything to do with SPP? Is this going to have an impact on SPP?

**The Chair:** I don't see anyone jumping to answer that, so we will

**Ms. Penny Priddy:** I'll bet.

**The Chair:** —have some other witnesses. That I think was addressed earlier.

**Ms. Penny Priddy:** All right, thank you.

It seems to me that there are several overarching issues that occur to me as I read through this. One of them is that these are discussions that are going on, and there's no particular agreement with anybody. There certainly is no signed agreement around SPP. This is a much broader discussion with a number of countries around harmonizing the chemicals, what are potentially dangerous chemicals.

I don't mean this to be a simple question, and I'd like just a yes or a no. Will raising pesticide residue limits make Canadians safer and healthier?

**Mr. Richard Aucoin:** As I indicated before, there's no decision to raise pesticide residue limits. There is discussion about the current implications of different residue limits around the world and what the implications would be if there were changes to those limits.

**Ms. Penny Priddy:** I guess we can ask the SPP people, but the story that emerged in the paper was a fairly extensive one, I would suggest. I don't know whether somebody has developed an urban myth or if this has come from somewhere else, but I will ask about it when the SPP people come.

I think I heard you say you've done consultations within other federal government departments.

**Mr. Richard Aucoin:** It depends in which context. In the context of our proposal to revoke the 0.1 ppm general maximum residue limit, we obviously had discussions within our department and with CFIA to make a number of departments aware of what we were proposing before going out for fuller consultation with the Canadian public.

**Ms. Penny Priddy:** Can you define Canadian public for me, please? Maybe this is where Ms. Kadis was going. Is it really the public or is it stakeholders? Secondly, is that consultation available for us to see?

**Mr. Richard Aucoin:** We consult the Canadian public by using as many means as we can. We publish these proposals. Certainly regulatory proposals have to go through the normal Canadian gazetting process to reach as many people as possible. We also have our own website, where we make it clear what these proposals are.

We have specific stakeholder groups that we know will be affected by these proposals, and we make extra-special efforts to reach various stakeholder groups. We've also presented this to a number of multi-stakeholder advisory committees and kept them informed—for example, the Pest Management Advisory Committee.

**Ms. Penny Priddy:** So for the Canadian “public” to comment on this, they would have to either be aware of Canadian gazetting or look at your website. They'd have to be informed enough to do that. In order for my next-door neighbours to be able to comment, they'd have to be aware of those processes.

Is that information in writing?

**Mr. Richard Aucoin:** Yes, it is.

**Ms. Penny Priddy:** May we have it?

**Mr. Richard Aucoin:** Certainly all the information we have published on our proposal to revoke the 0.1 ppm general MRL is available on our website and in other ways. We'll certainly be happy to provide that information.

**Ms. Penny Priddy:** In the way the information is designed, does it say what's come from the general public, what's come from stakeholders, what's come from wherever?

**Mr. Richard Aucoin:** When we put these proposals forward we summarize all the responses we get, where they came from, and the nature of them. We publish that so people can see the nature of the responses.

• (1630)

**Ms. Penny Priddy:** Okay. Thank you.

Did I just run out of time?

**The Chair:** Yes. You have five seconds, and that's not enough time to ask a question.

**Ms. Penny Priddy:** It's always enough for me, but I'll save it and add it to the next one.

**The Chair:** You did very well and got a lot of questions in there, so congratulations.

Now we'll move on to Mr. Patrick Brown.

**Mr. Patrick Brown (Barrie, CPC):** Thank you, Mr. Chairman.

I have two questions on the hazardous materials area, Ms. Watts.

Realizing that the goal is to balance the need for proprietary rights for trade secrets with health and safety, could you delve into that a bit more and share with the committee some international examples? We've heard the reference to the United States, but how does the balance we have right now in Canada compare with other industrialized countries?

**Ms. Sharon Watts:** Thank you for the question.

Right now, interestingly, there is an initiative called GHS, globally harmonized system, which is an initiative to look at harmonizing chemical classification and labelling. In that respect, the United Nations has sponsored this event and this initiative. The country that is participating in that would be the United States.

If we look at the United States' system in comparison to ours, in terms of trade secret protection and disclosure of ingredients on products, they have a system that is not comparable at all in the sense that their system for trade secret protection relies on a challenge basis. In other words, if you're a supplier in the U.S. market and you believe you have a trade secret, you claim that you do, and you only have to prove it upon a challenge by an affected party, usually in the courts.

In Australia, another country that has an ingredient disclosure system, you cannot claim trade secrecy for certain types of hazards, like carcinogenicity, but there is no systemic review of safety documentation as there is in the Canadian system.

In the EC countries right now there's a new initiative called REACH, which is also looking at some sort of a trade secret mechanism. Again, it's not quite as stringent as the Canadian model. It's looking at certain kinds of hazards that one cannot claim exemption from, but, again, there's no systemic review of all of the safety documentation that goes with a claim for exemption, such as in our case.

What has happened under GHS is that they've looked at the trade secret mechanisms around the world. The Canadian contingent very strongly supports the Canadian model. In fact, the labour representatives on our council who we met with last week were at those meetings in Geneva and spoke to the Canadian system as being an international model.

They have very clearly established broad principles to which all countries must conform, but which allow the Canadian system to remain as stringent as it is, and in fact unique.

So in terms of harmonization, there is actually no effort to harmonize the trade secret mechanisms.

**Mr. Patrick Brown:** In terms of the loosening of the disclosure requirements, where's that routed from? How was that initiated, and what groups were pushing that? Are we seeing that in other jurisdictions as well?

**Ms. Sharon Watts:** That was initiated probably back in the late nineties, when we were doing our consultations on renewing the commission. It was a proposal that was supported by, interestingly, both industry and labour, in the sense that we had come forward with reports on the progress with which industry has complied with our regulations, on the economic side, and our data was quite surprising. Only four claims out of almost 3,000 to date for which we have rendered decisions were actually deemed to be invalid. In other words, industry's track record, in terms of substantiating their claim for trade secrecy, has been excellent, while not so good on the health and safety side. But that's where we remain quite vigilant.

So in this case the suggestion to go to a declaration approach as opposed to requiring substantiation in every instance was put forward jointly by labour and industry. Labour was interested in it because, from their perspective, any sort of efficiency gains that can be gleaned on the economic side should be reinvested into the health and safety evaluation side of our operations, and that's a commitment we made.

• (1635)

**Mr. Patrick Brown:** Thank you.

**The Chair:** Thank you for that. Thank you very much.

We'll now move onto Dr. Carolyn Bennett.

**Hon. Carolyn Bennett (St. Paul's, Lib.):** I'm concerned, as lots of people are, about where this fits with the precautionary principle. Showing something is not dangerous yet doesn't necessarily mean it's safe. Canadians are worried about this, and I'd like to know a little more about the science with which you determine 0.1 or 0.01—how you actually sort this out. Maybe you should just start with that.

I've always had concerns with experiments done on rats, because rats live their lives in sewers and spend their lives detoxifying themselves, and maybe their livers are a bit better than human livers. How do we assume that something that's okay for a rat is okay for a human?

**Mr. Richard Aucoin:** I think I'll ask my colleague, Dr. Chan, to respond to your question.

**Mr. Peter Chan:** Thank you for the question.

When we use the animal models, in a lot of cases, to do what we call hazard identification, it's basically an internationally recognized standard, as I mentioned earlier. There are specific guidelines and interpretations that are internationally recognized by all the various countries, including the EU, Australia, and so on.

When we expose animals to certain chemicals and ask how is that going to be related to humans—and I agree with you—what we do is take the precautionary approach, and we actually apply what we call the uncertainty factor, or safety factors, which means we are not sure; therefore, we build in a certain margin of error or margin of translation from animal to human. So that builds in that so-called uncertainty in linking it from animal data, then, to the human environment. That is usually a factor of about 100 times, just to build in that uncertainty or that precautionary approach that we take.

Secondly, when we look at the risk assessment or the hazard identification, we also look at the end point or the level at which there is a certain effect being observed in animals or in rats. Also, as

I mentioned, it's not only dealing with just one species. We look at more than one species. For example, we could do it in rats; we could do it in mice, or sometimes in dogs. So we look at the variability among the various species as well in the pre-market scenario.

From that we look at whether there is any concern about the age variation within the lifetime of the animals. Is there something that's more sensitive or obvious for the older animals? Is there anything of concern when they are reaching the later stage of their lifetime, or for pregnant women, and so on and so forth? When we identify those potential health concerns, we tack on another uncertainty factor of margin of safety, which is the margin where we say, okay, in order to be protective—that is, applying the precautionary approach again—we tack another uncertainty factor onto that.

By accumulating all this uncertainty, or the safety margin, if we want to call it that, including what we call the entire species in the sense that animal to human may be different, and when we talk about intra-species, within a population, let's say within the human populations, because of the various ages, races, and all that sort of stuff, there may be variability, so we apply that protective factor in addition to that.

By doing all this, we actually build in enough of what we call the margin of safety, but you can call it a margin of uncertainty, taking the precautionary approach to build in that comfort zone in order to develop what we call the acceptable daily intake.

• (1640)

**Hon. Carolyn Bennett:** Are we doing population health models as well? We have concerns that people who live near a golf course or people who've been eating certain imported things because of cultural....

What kind of ability do you have to do GIS mapping of these kinds of things or the kind of actual, serious population health approach? I'm still not so sure about this individual toxic stuff. I think that's what's bugging people.

I guess the second part of this question is, how good are we at checking the stuff that's coming into this country anyway? I guess the question is, is it just that less is better? Are we figuring out now whether we have the capacity to even enforce whatever we're doing, in terms of the huge amounts of imports coming from other countries now?

With the FDA saying it can only check 1% of the drugs coming into their country, how are we doing on food?

**The Chair:** She's a little bit over time. I'll allow a very short answer to that.

**Mr. Peter Chan:** In response to your first question about the monitoring in the human exposure scenario, Health Canada does participate in the biomonitoring and surveillance studies. As a matter of fact, the governmental initiative on the chemical management plan does allow us to do that biomonitoring.

**Hon. Carolyn Bennett:** Are you doing breast milk? This is very important. You can't even sell breast milk in a grocery store because of all the garbage in it, right?

**The Chair:** I'm sorry, time has gone. We're going to move on to the next questioner. She'll have a chance maybe after, but we're going to move on.

Mr. Fletcher, it's your five minutes.

**Mr. Steven Fletcher (Charleswood—St. James—Assiniboia, CPC):** Thank you, Mr. Chairman.

My question deals with the issue around international harmonization. Are there any plans to harmonize the protection mechanisms with any other countries?

Could you also explain how Canada's trade secret mechanisms compare with, say, those of the United States or other countries?

**Mr. Richard Aucoin:** I can certainly speak to the first question. In terms of harmonizing the protection mechanisms, we do an extensive amount of work in international regulatory cooperation with other countries around the world, specifically to learn best practices, to understand their systems, to see if there are areas where we could or should harmonize our efforts.

It's important to note that in most of these discussions there's not as much of a need to harmonize actual regulations and regulatory approaches as much as the basic processes that we use internally, in terms of regularly assessing pesticides. So it's a really important part of what we do internationally, to share best practices and to gain from their experience and gain access to the scientific expertise, and share our scientific expertise, frankly, because I would like to point out that Health Canada and the pest management regulatory agency have some of the best scientists and the best expertise around in terms of pesticide risk assessment.

**Mr. Steven Fletcher:** My impression from just hearing the discussion this afternoon is that everyone on each side of the table is looking for assurance that health of Canadians is paramount. Can you provide that assurance to this committee and explain why this committee should have confidence in that assurance?

**Mr. Richard Aucoin:** I think the record of what we've done...I guess I could start with the recent Pest Control Products Act, which parliamentarians supported very recently putting into force in 2006 and which strengthened very substantially the human health protection and environmental health protection components of the old legislation. That was a major accomplishment and I think a major strengthening of health protection in Canada.

**Mr. Steven Fletcher:** That's the gist of my questions. Thank you very much.

**The Chair:** We will now move on to Mr. Malo.

• (1645)

[Translation]

**Mr. Luc Malo (Verchères—Les Patriotes, BQ):** Thank you, Mr. Chairman.

I would like to discuss with the Canadian Food Inspection Agency the circumstances of a number of small businesses in several areas of Quebec and, I would imagine, of small businesses throughout Canada.

By year's end, labelling regulations will apply to all manufactured products, including cottage industry products made using non

standardized recipes. The regulations will mean a number of fairly costly adjustments for very small businesses that are strapped for cash and that have low sales volumes.

Has the agency received any complaints from these kinds of businesses about new product labelling requirements? Have you given these businesses some tools to help them overcome the problems associated with the new regulations? Has the agency allowed for some exemptions in certain specific cases?

[English]

**Ms. Debra Bryanton:** Thank you for that question.

As the committee is aware, nutrition labelling regulations did come into force for larger companies almost two years ago. They are due to come into force for small manufacturers—those are manufacturers, I believe, under \$1 million a year—at the end of this year, in December of this year.

Many of the smaller companies have already assessed their products and have nutrition labelling, because they supply larger retailers or manufacturers. As a result, there are quite a large number of small manufacturers who have already worked to include nutrition labelling on their labels.

That being said, the approach we are using with this sector is similar to that of the large sector. In the beginning, our approach is more educational in nature. Following December, we will be looking to see which companies have not been in the position to include nutrition labelling on their labels and to work with them on how they could include this information on labels.

There are tools available to them. There are tools on our website, as well as on Health Canada's website, on building labels. We do include our inspector's tool kit. It's also available for industry.

We have an open invitation to meet with industry groups, should they wish to learn more about how to design nutrition labels or what kind of information is required to support the labels that are on products.

[Translation]

**Mr. Luc Malo:** If small businesses that only sell to small retailers are not in a financial position to comply with the new labelling regulations by the end of the year, you are not about to force them out of business simply because they cannot comply, given the relatively high costs associated with the regulatory regime.

Have I understood you correctly?

[English]

**Ms. Debra Bryanton:** We would continue to work with these manufacturers.

Now, there are some further exemptions. The exemptions are set by Health Canada when they publish the nutrition labelling regulations. And there are some further exemptions for very, very small companies.

That being said, our objective is to use a persuasive rather than a punitive approach. Our interest is in working with these companies so that they can apply the nutrition labels, rather than coming in with great enforcement action because they aren't.

But we are committed to continuing to work with them, because nutrition information, of course, is important to consumers and their decision-making as it relates to their health.

• (1650)

**The Chair:** Okay, thank you very much.

Now we'll move to our second round. We have Madam Brown, who would like to further some discussion.

The floor is yours.

**Ms. Bonnie Brown:** Okay, good. Thank you, Mr. Chair.

Some things have been said today that are a little conflicting.

We're dealing with all these other countries and internationally exploring ways to harmonize, and yet, Dr. Aucoin, you said we have the best scientists and the best methods and standards. Well, if ours are the best, why would we consider harmonizing with anybody?

Mr. Chair, if I may, I'll get these questions out, and then hopefully there will be enough time for them to answer.

The other thing Dr. Aucoin admitted was that this whole process is driven by trade. So my second question for him is this. Is he convinced that these differing standards that countries have really do interfere with trade?

**The Chair:** I'll just stop you there. I didn't hear him say that. Maybe I'll just allow him to correct that just to make sure there's no misunderstanding.

**Ms. Bonnie Brown:** I think he implied it two or three times.

**The Chair:** Let's allow him to react to that.

**Mr. Richard Aucoin:** What I indicated was that the discussions they're having internationally are being driven by trade concerns, but it is health that is going to drive those decisions.

**Ms. Bonnie Brown:** I was going to get to that. But the process is being driven by trade concerns.

**Mr. Richard Aucoin:** Discussion....

**Ms. Bonnie Brown:** Okay.

Are you looking for proof, then, that differing standards do have a negative effect on trade? Or do you just accept that as a given if someone claims it?

I'd like to go on to Mr. Chan. Does your evaluation of these pesticide residues include extrapolating outwards about 40 or 60 years as to accumulation in the body? Does it also include evaluation of the interaction of the pesticide in question with other pesticides that might be accumulating in the body or other toxins from other sources?

On this whole thing about citizen engagement, on this whole thing about informing the public, most of us laugh whenever officials tell us that things will be put in the *Canada Gazette*, because we know that our constituents don't even know what the *Canada Gazette* is, much less ever read it. That's like saying we put it on a piece of paper in our pocket, to us. Only those people up on government processes check the *Canada Gazette*.

So I'm going to ask all of you, do you have any plans to enhance or improve citizen engagement with changes that are upcoming in any form?

I guess that's it.

**The Chair:** It's all you have left on the clock.

Go ahead.

**Mr. Richard Aucoin:** I'm wondering where to begin.

On your first question on why to consider harmonization, international cooperation and harmonization is potentially a smart way to do business and to gain access to all the best knowledge and best practices around the world. We have to do it.

I would say we have an incredibly high level of scientific expertise in Canada. We're very well respected for the quality of the work we do and the quality of the decisions we make. It's why we're at the table, with countries around the world, having these kinds of discussions. They respect our opinions and our perspectives on this.

On potential trade issues, the maximum residue limits occasionally result in trade issues at borders because one or the other country is concerned there are residues above a limit on imported foods. The question is this. Are those concerns always based on a health concern, or is it simply because there is an administrative difference or a very small difference in the numbers that is causing a trade issue?

It's right to say we need to do a lot more research and information gathering on the extent to which these trade issues are substantial and important. We've said human health is our primary importance and trade won't trump human health.

In terms of citizen engagement, I want to mention that in our agency we certainly recognize that we all have to do more collectively to engage our constituents and our stakeholders in what we're doing. About six months ago we set up a specific stakeholder engagement section within the agency. Its specific purpose is to make sure we do enough outreach to engage stakeholders, to inform them as much as possible on some of the proposed changes, and to be as open and transparent as we can be within the kinds of discussions we're having.

• (1655)

**Ms. Bonnie Brown:** You said stakeholders. What about average citizens or the lady next door, as somebody pointed out?

**Mr. Richard Aucoin:** To the extent that we can, we make our work public and transparent. Our consultation documents are in plain language and are as readable as we can make them. We strive to make those widely available.

**The Chair:** Is there anything further?

Go ahead.

**Mr. Peter Chan:** In response to your question about extrapolating or doing a cumulative assessment on interactions with other chemicals, and so on, this is certainly why we sometimes need to talk to our colleagues in the agency. It's a field that is very complicated.

But one other thing we do, in part of the assessment, is look at the metabolism, the behaviour of the chemical in our bodies. For example, it's one of the approaches we take for all the organophosphates, when we know their activities and the behaviour is similar. In that case, it would allow us to do the cumulative exposure assessment.

When doing the human risk assessment for residues, we look at the total diet. For example, it means we look at somebody ingesting a tomato that may contain a certain minimal level of residues, versus lettuce that contains other residues, and so on. When we do the overall assessment, we take all that into consideration on the total diet. It's how we look at the various potential interactions or the cumulation of the various chemicals, and so on.

I must say the science, at this point in time, is to look at the total complex mixture. I always look at my stomach as a chemical reactor. It is very difficult to identify every one of those things to see how it behaves.

In the pre-assessment, we look at the individual, and we look at the mechanisms or the action of activities in the body to figure out how it will behave. We then take that into consideration when we do the risk assessment.

**The Chair:** Okay.

Madam Gagnon, go ahead.

[*Translation*]

**Ms. Christiane Gagnon:** I would like to talk to you about breast implants. These devices are now back on the market in the United States and Canada has also lifted the ban on silicone gel breast implants. In the opinion of the Bloc Québécois, there have not been enough independent studies done on the side effects of silicone gel breast implants. There is considerable talk at this time of possible harmonization, in the context of ever stronger continental integration.

Were Canada and the US cooperating while the two agencies, namely the Food and Drug Administration and Health Canada, were studying this matter? I do not quite understand. Studies have shown that these implants pose a health risk for women. We were fairly disappointed with the people who came before the committee...

[*English*]

**The Chair:** I think your question might be best addressed by Health Canada, but no one here is from Health Canada.

[*Translation*]

**Ms. Christiane Gagnon:** The issue of one of quality control and the safety of the products on the market. I think the question can be put to one of our witnesses.

[*English*]

**The Chair:** That part of it perhaps.

[*Translation*]

**Ms. Christiane Gagnon:** What can you tell us about the studies that have been done? Have there been any independent studies into the effects of this type of breast implant? We asked several questions of Health Canada representatives, but we did not get any answers. We were rather disappointed.

[*English*]

**The Chair:** Let's give it a try and see if there's anyone who wants to answer.

**Mr. Richard Aucoin:** I would just confirm, of course, that the Pest Management Regulatory Agency's mandate truly is pest control products and pesticides only. I can't speak to specifics around the breast implant issue.

**The Chair:** That's what I thought.

[*Translation*]

**Ms. Christiane Gagnon:** What do the research analysts think? Can our witnesses answer this question?

• (1700)

[*English*]

**Mr. Richard Aucoin:** To clarify, our researchers and scientists are a very separate group of scientists and researchers from the regulatory scientists who would have been looking at that question.

**The Chair:** Very good question, Madame Gagnon; it's just to the wrong people, I believe. That's the problem.

[*Translation*]

**Ms. Christiane Gagnon:** We are discussing continental integration and the harmonization of certain standards. Was an agreement negotiated to allow this type of product into the country? I thought that in this context, they might be able to relate to the question.

[*English*]

**The Chair:** We have two more questioners.

We'll go to Ms. Priddy, then back to Ms. Kadis.

**Ms. Penny Priddy:** Thank you, Mr. Chair.

I was very pleased to hear people say, as I would have expected, that health is paramount. If there were some kind of a trade agreement or protocol—I will ask this of SPP, but I want to raise it here as well—who gets to be the queen of the hill and say trade will override health or health will override trade? Do you have the right to say that if we find this is unacceptable, raising them, which I think I've heard people say, would not be acceptable? Do you get to be the final arbiter, or would somebody else be able to overrule your decision and say they have this other agreement and it's been called a trade irritant? I think that's the phrase I read in the paper. It would seem more like a fetal irritant than a trade irritant. But would you, as Health, which should be primary, have the right to override the decision of someone else who had a trade decision they wanted to put forward? That's the first question.

Secondly, if I were to go to your website—and I will, and I thank you for letting me know that this information around public consultation is on it—have you any idea how much information I would find from Aunt Millie? Aunt Millie is the example I always use about, if you will, next-door neighbours and ordinary citizens. Of all the consultation information that's on it, how much might come from, if you will, Aunt Millie?

Dr. Aucoin, I think those are probably for you.



My third one is for Ms. Watts. When the pesticide folks say to you, it's a trade secret, and they provide a summary of supporting documentation, how do you judge whether indeed it does qualify as a trade secret and that the public should not have access to it?

**Mr. Richard Aucoin:** I'll start with your first question.

As I indicated in my earlier comments, our mandate under the Pest Control Products Act is essentially to make sure that pesticides sold or used in Canada do not pose unacceptable environmental or human health risks. Also in that process is the establishment of maximum residue limits that are protective of health. That is what we do, and that is where our responsibility ends, if you will.

This is what's necessary to protect human health. All major decisions the agency makes with respect to new pesticides are consulted on publicly. The current process and future processes for setting maximum residue limits are also consulted on, and they're based on the latest human health science.

**Ms. Penny Priddy:** Would you get to trump another ministry on this one? Are you it?

**Mr. Richard Aucoin:** We're the Pest Management Regulatory Agency, and we make our decisions based on the best available science.

**Ms. Penny Priddy:** I guess that's the only answer you can give. I still worry about who gets to hold trump in the end.

The second part of my question is this. How much would I find was actually from the public?

**Mr. Richard Aucoin:** How much is from the public? I think you'll judge that for yourself when you see the responses to the consultation document—

**Ms. Penny Priddy:** I will, but can you give me your best guess?

**Mr. Richard Aucoin:** My guess is that you will not see a lot from Aunt Millie, but you will see some.

**Ms. Penny Priddy:** Thank you.

My last question is about how you decide when it really is a trade secret. Everybody would like it to be a trade secret. We go through the same discussion with drugs. Somebody says to you that this is their documentation, but it's a trade secret.

● (1705)

**Ms. Sharon Watts:** Thank you.

I just want to clarify. I think you mentioned pesticides. We don't handle the trade secret claims for pesticides; they have their own trade secret mechanism. We do handle trade secret claims for hazardous chemicals under the Hazardous Products Act.

**Ms. Penny Priddy:** I'm sorry. It's the same question, different product.

**Ms. Sharon Watts:** When someone comes to us and says they have a trade secret, and they give us a summary of their information, the question is how we verify that.

**Ms. Penny Priddy:** Why don't we all just say it's a trade secret?

**Ms. Sharon Watts:** They have to come back to us with the substantiating information. We say to them, yes, it's a trade secret, but have they taken measures? What kinds of measures have they taken to protect the confidentiality of this product? What security

measures are in place? What types of confidentiality agreements are there and with whom? What is the value of this trade secret to them in terms of economic loss or economic gain to the competition should it be disclosed? They have to provide us with all the data to substantiate that particular figure.

**Ms. Penny Priddy:** In the experience you've had, how often has somebody said it's a trade secret and you have not agreed?

**Ms. Sharon Watts:** Ninety-nine percent of the time.

**Ms. Penny Priddy:** Is that when you agree or disagree?

**Ms. Sharon Watts:** We agree that it's a trade secret and that their substantiating information does in fact support that claim.

**Ms. Penny Priddy:** Thank you.

**The Chair:** Ms. Kadis, you'll have the last question.

**Mrs. Susan Kadis:** Thank you, Mr. Chair.

You stated that when changes to the pesticide residue limits were proposed, they would be put on the website. What I'm interested to know is twofold. In terms of the process, at what stage would they be put there? Would it be right before a decision or after being gazetted, or is there a longer-period process for people to be notified and aware of it? Also, what form would it take? Would it very specifically outline the proposed changes to limits, or would it be in a summary fashion?

**Mr. Richard Aucoin:** As an example, for the proposal to revoke the 0.1 ppm general maximum residue limit, there was a series of consultation documents for stakeholders, publicly, through websites and various fora, to inform stakeholders of what we were going through. The actual change to that regulation, of course, would then have to go through the regular gazetting process to actually effect that change in the regulations. It is a very extensive consultation process.

**Mrs. Susan Kadis:** I'm talking more specifically about the Canadian public. I know that the stakeholders are also the Canadian public. I think that's been referred to a few times today. Would the outline of the proposed changes be on the website? What form would it take? How would these proposed changes be relayed or communicated if they do in fact come forward to the Canadian public, per se?

**Mr. Richard Aucoin:** I have to emphasize, once more, that no changes are currently being proposed to those maximum residue limits. If there were any changes proposed, we would have to develop a consultation strategy with stakeholder groups and the public to make sure they're informed. The current process for proposing, for example, new maximum residue limits is to go through the normal regulatory gazetting process.

**Mrs. Susan Kadis:** I understand that this would not include coming to Parliament. In other words, it would be orders in council or gazetting, as you said, but it wouldn't necessarily necessitate a vote, legislation, or amendments to legislation. It wouldn't be done through Parliament.

**Mr. Richard Aucoin:** That's correct, as I understand it.

**Mrs. Susan Kadis:** My concern, Mr. Chair, is that the public, inclusive of us and everyone who is in a position to help protect the health of Canadians—that being everyone's goal—would be well aware of these proposed changes. Now that we are somewhat aware of them, we should be able to follow and monitor the next stage in the process. I think it's incumbent upon us, as a committee, to be informed of that. I would ask you to ensure that this does take place and that it is done not at the end of the process or line but early on enough for us to adequately inform our constituents.

**The Chair:** Thanks very much, and thank you to the witnesses for coming in and certainly contributing to the discussion and to the interest of the committee on this issue. I want to thank you for that.

I believe the only thing we need to do before I call the meeting to a close is just to clear with the committee that we want to bring Health Canada back. I would suggest that we try to get them on June 4, when Dr. David Butler-Jones is here, which is just before we finish on Bill C-42.

• (1710)

**Ms. Bonnie Brown:** I don't know what you're talking about. Bring them back for what?

**The Chair:** SPP. I believe that's who you're asking for. That's what I heard.

So we will try to do it on June 4, and if not, we'll do it on June 11. How's that?

**Mrs. Susan Kadis:** Mr. Chair, I appreciate that.

The only concern I do have, again, and it was encompassed in one of our questions today—and unfortunately we didn't have the right people here today, by no one's fault—is that we could address the issue regarding the potential changes, amendments, to the Quarantine Act, which is very serious legislation, and it has potential serious ramifications for Canadians.

If we did not have an opportunity to meet with anybody directly from SPP, and we are contemplating doing that, which I appreciate, my concern is that we won't be able to ask that question of those individuals or an individual this Wednesday. I believe this Wednesday it's before us? I guess I would make the request that we try to have someone here representing that body so that could be clarified. I think it's extremely paramount, because this is very important legislation going forward.

**The Chair:** We'll try for Wednesday, and if not Wednesday, we can deal with Bill C-42 in the first part of the meeting on June 4, which is next Monday, and if not then, we'll put it to June 11, and we'll try to get it done at that time.

I want to thank both the witnesses and the questioners for their participation in the meeting. With that, we'll adjourn.

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