









# OCCUPATIONAL HEALTH AND SAFETY IN NAIL SALONS

Nail Salon Workers Project — Toronto **Training and Workshop Guide** 







# This guide was created by the Parkdale Queen West Community Health Centre — Nail Salon Workers Project, 2018.



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# 1.0 Introduction

The health of nail technicians is of great concern: the industry is growing rapidly while health, safety and labour practices within these salons remain below Ontario's standards. This project is a result of increasing concern over these precarious workplaces and the emergence of questions and concerns about the negative health effects of nail salon work from nail technicians involved in our past research. In the Toronto context, we have learned that nail technicians in discount nail salons are predominantly immigrant women, many from either China or Vietnam. They work in small businesses where many experience precarious work, health and safety issues, and violations of labour laws. Issues of gender, language, income, and immigration status increase their vulnerability.

This Occupational Health and Safety (OHS) in Nail Salons project sits within a larger Nail Salon Workers Project (NSWP) at the Parkdale Queen West Community Health Centre and has been a collaboration with the Healthy Nail Salon Network (Toronto) and formerly with the National Network on Environments and Women's Health at York University. Our broader NSWP work includes:

- advocacy at Municipal, Provincial, and Federal levels to improve the working conditions in discount nail salons
- engaging nail technicians in advocating for better working conditions and to inform our work
- partnership building and supporting the Healthy Nail Salon Network; and
- supporting and conducting research on issues affecting nail technicians.

This OHS project builds on models of prevention and intervention used in Community Health Centres, and from specific nail salon health and safety work observed in in New York and California. These models include peer outreach and support, involving salon owners in the process of making their salons healthier environments, and collaborating with an interdisciplinary team of agencies to work together to address workplace health, safety, and employment standards concerns.

With funding from the Ontario Ministry of Labour, our project was able to hire Peer Health Educators, research and develop content for three pressing health issues (Ergonomics, Reproductive Health and Respiratory Health), deliver workshops on these three issues in nail salons, develop issue-specific resources for nail technicians, and conduct outreach to other Ontario cities where the work may be transferrable. We had financial and in-kind support from The Lung Association for our respiratory health module, and the Centre for Research Expertise in Occupational Disease (CREOD) funded and supported the development of an earlier Skin Health module (also included in this guide).

This guide provides an overview of our Occupational Health and Safety project carried out in salons. We summarize our content development and training processes and include the materials used to carry out the project.

This guide is intended to:

- Communicate our process and the tools we have created to improve the health of nail technicians
- Share the tools and resources with others who may find them useful, or want to build on the work



# 2.0 Overview of the Occupational Health and Safety Project

# **Content Development**

For each module, we called on a variety of project partners and external experts to contribute to or lead the content development. Key material would be consolidated into a "training module" used to train the peers, and to inform the development of an issue-specific resource (booklet or poster). These training modules are found in this guide, and links to the associated resources are provided. Please note that several of the handouts and appendices are available in English, Chinese and Vietnamese. We have identified when things are available in multiple languages with CH for Simplified Chinese, and WN for Vietnamese. Please email us at nailsalonproject@ctchc.com if you would like Chinese or Vietnamese versions of these files.

# **Peer Training**

We hired four peer educators to carry out a portion of the project: two from within the Vietnamese community and two from within the Chinese community (Mandarin-speaking). The focus on these two communities (and languages) was based on the most common representation among nail salon owners and technicians in Toronto at that time. Ideally the people we hired had nail salon experience, but this wasn't always possible, and in those cases we relied on their indepth understanding of the issues facing nail technicians (for example, they may have a family member working in a salon). You can find a copy of our job posting and job flyer in the *Appendices*. We circulated these through settlement agencies and to key partners engaged with Vietnamese and Chinese communities. We found that the more informal job flyer was much more successful in recruiting people.

The peer educators then participated in general facilitation training, and completed our issue-specific training, one module at a time. After completing a training module, the teams worked to develop their own thirty-minute workshop for nail technicians, in a style that suited them. The team then met and presented the workshops to each other and provided feedback as a group. We saw two different approaches that both worked well: 1) an informal presentation, using a conversational tone with some printed visuals, and 2) a simple PowerPoint that could be shown on a laptop screen or tablet. You can find examples of the printed visuals and the PowerPoint presentations in each of the Training and Workshop Content sections in this guide. Because we were delivering the majority of the workshops in salons, the choice of medium and logistics of the presentation materials was an important consideration. The workshops were often being carried out in the corner of a salon with a few chairs huddled around, while some technicians were still serving clients. We left these decisions up to the peer teams to choose which method of delivery they were most comfortable with.

The resources that we produced for each of the modules - Healthy Skin, Healthy Nail Technicians; Reducing Risks to Reproductive Health; STRETCH: Preventing Stress and Pain While You Work; and Reducing Risks to Respiratory Health (all CH). (NN) - can be a guide for what we think are the essential pieces to be covered when communicating this information to nail technicians in salons. We included more information in the trainings than what we expected peers to include in their workshops. We did this for their own learning and to facilitate more confidence when going out to teach the information.

# **The Outreach Process**

Once the training process was completed or near completion, the peers conducted outreach to salons. They would use a mix of personal contacts within salons and looking for pockets of salons in a geographic area to do some cold calling. We used outreach flyers ( $\boxed{\textbf{CH}}$ ,  $\boxed{\textbf{W}}$ ) (see the example in the *Appendices*) as something to leave behind with information about the workshops and how to contact the peers. Peers would follow-up by phone or in-person with salons they had visited and look to book appointments for workshops on their own schedule.

Outreach to salons can be taking place during the training phase or afterward, depending on the experience of the peers and their comfort level with talking about what the workshop will offer. The initial outreach to salons can take many visits to build the trust and interest of the owners. Along with the outreach flyers, peers can offer a small gift. For example, we handed out bags of 20 pairs of nitrile gloves. We have found that it can take a bit of convincing to explain that the project team members are not government inspectors or salespeople trying to sell something.

We included more information in the trainings than what we expected peers to include in their workshops. We did this for their own learning and to facilitate more confidence when going out to teach the information.

# **The Workshop Process**

The peers coordinated their own outreach times and booked workshop times directly with owners of salons. The workshops would be booked for an hour: ideally having thirty minutes for the presentation with time for chatting beforehand and answering questions afterward. The peers would often end up doing mini presentations to whoever was available at the time, and then repeat it for other technicians once they were done with clients. We chose to offer an incentive to owners and technicians for taking the time to host and participate in a workshop: \$60/owner and \$20/technician. This was to acknowledge the potential loss of business while technicians were participating in the workshop, instead of serving clients. Each salon would receive a framed certificate following each training completed. Samples of the certificates are included in the Handouts section of each module below. Two follow-up visits would be planned for each salon: one to conduct follow-up surveys (explained below), and one to distribute the issuespecific resources as they were created. We wanted these to happen simultaneously, but the timing of creating the resources often meant an additional visit.

Like many community development projects, the relationship building can take time. However, once a salon welcomed us for a workshop, they were always keen for the next one, and would often refer us to other friends/owners in other salons. Personal connections through the peers were very important in initially getting accepted into salons.

**Evaluation** 

At each of the workshops the peers would request that everyone complete an anonymous pre-survey. This was intended for our own evaluation process but was also a good way for the peers to gauge the knowledge level of the participants in advance of presenting. Peers would also go back to salons for a follow-up survey approximately one month after the workshop. Both pre and follow-up surveys are included for each workshop topic below, in the Handouts sections. We used these surveys to analyze reported changes in behaviours among participants, and to look for improvements that could be made to our work.

At the end of the project, after all of the workshops were completed, we conducted case studies in five salons to gain more in-depth information about the most significant changes that had happened as a result of the project. Peers identified salons that would be most interested in this process, and we sent information flyers with the peers, requesting an additional visit to carry out the case studies. The flyer ( $\boxed{\textbf{CH}}$   $\boxed{\textbf{WN}}$ ) can be found in *Appendices*.

An program evaluation consultant compiled and analyzed our data and produced a formal Evaluation Report. This report is available on our website (www.pqwchc.org/nails) and by request over email: nailsalonproject@ctchc.com.

Like many community development projects, the relationship building can take time. However, once a salon welcomed us for a workshop, they were always keen for the next one, and would often refer us to other friends and owners of other salons. Personal connections through the peers were very important in initially getting accepted into salons.



# **Training and Workshop Content** 3.0

The content provided in each of these sections was used to train the peer educators. The peers then created a shorter, simplified workshop to deliver in salons. In many cases the same handouts were used for both peer training and the workshops in salons. However, especially in the Reproductive Health module, far more information (including handouts) was provided in the training than we thought appropriate in the workshops. We have provided all the materials used in both training and workshops for you to pick and choose from, including a Materials Checklist used for each module. These checklists show what materials peers brought to each workshop, but obviously can be tailored to your budget and needs. At the end of each module, you will find a snapshot of the resource that we created for that issue, and a link to the online access to that resource (in English, Chinese and Vietnamese).



# Skin Health

# **Training Module and Sample Workshop**

• Skin Health - Training Module (Occupational Cancer Research Centre (OCRC))

## **Handouts**

- Skin Disease (Centre for Research Expertise in Occupational Disease (CREOD))
- Harmful Chemicals Chart (Alexandra Scranton and Women's Voices for the Earth)
- Correct Removal of Gloves (UK Health and Safety Executive)
- Hand Washing (Toronto Public Health) CH
- Safety Data Sheet Cuticle Away
- Recommended Products (St. Michael's Hospital)
- Sourcing Materials (CREOD and OCRC)
- Materials Checklist Skin Workshop
- Skin Health Workshop Certificate
- Skin Health Workshop Surveys CH VN

# **Skin Health Resource**

 Healthy Skin, Healthy Nail Technicians – A Resource for Toronto Nail Salon Workers CH VN



# **Ergonomic Health**

# **Training Module**

• Ergonomic Health – Training Module

# **Sample Workshop**

Ergonomic Health Sample Workshop | VN |

# **Handouts**

- Body Scan Activity
- Stretches for Nail Technicians CH VN
- Materials Checklist Ergonomics
- Ergonomic Health Workshop Certificate
- Ergonomic Health Workshop Surveys CH VN

## **Ergonomic Health Resource**

 STRETCH – Preventing Stress and Pain While you Work (for Nail Salon Technicians) CH VN



# **Reproductive Health**

## **Training Module**

• Reproductive Health - Training Module

# **Sample Workshop**

Reproductive Health Sample Workshop VN



## **Handouts**

- Reproductive System
- Fertility Cycle Diagram
- Comparative Summary of Available Birth Control Methods
- Reproductive Health Effects of Chemicals Used in Salons
- **Endocrine System and Endocrine-Disrupting Chemicals**
- Reducing Risks at Work
- Materials Checklist Reproductive Health
- Reproductive Health Workshop Certificate
- Reproductive Health Workshop Surveys | CH | VN |

# **Reproductive Health Resource**

• Reducing Risks to Reproductive Health -A Resource for Nail Technicians CH VN



# **Respiratory Health**

# **Training Module**

• Respiratory Health - Training Module

# **Sample Workshop**

Respiratory Health Sample Workshop 

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# **Handouts**

- Masks: Levels of Protection CH VN
- Work-Related Asthma Brochure CH VN
- Nail Polish Ratings Chart
- · Ventilation Fact Sheet
- What is a Healthy Salon?
- Materials Checklist Respiratory Health
- · Respiratory Health Workshop Certificate
- Respiratory Health Workshop Surveys CH VN

# **Respiratory Health Resource**

· Reducing Risks to Respiratory Health: A Resource for Nail Technicians CH VN



# **SKIN HEALTH**





# Training Module & Sample Workshop (CREOD funded pilot)

Created by Centre for Research Expertise in Occupational Disease (CREOD) and Occupational Cancer Research Centre (OCRC), based on CREOD/OCRC Skin Workshop (July 2014)

GOAL: 30-45 minute training on work-related skin disease and how to prevent it

#### Introduction

We are part of a group of nail technicians, health promoters and researchers who are working to improve the health of nail technicians. We are not employees of the Ministry of Labour or a Public Health Unit.

We're going to talk about our skin, things in nail salons that may be hazardous to our skin and ways we can protect and care for our skin

# Why is this important?

Many nail technicians have painful skin or itchy rashes. Many things in the nail salon can cause these problems with your skin, including chemicals, but also repeated contact with water when doing pedicures and washing your hands.

# What do you need to know?

There is a lot of information on health and nail salons, but we are going to focus on skin specifically, including: what things to avoid, what gloves to wear and how to wear them properly, as well as how to take care of your skin.

It's important to remember that many of the things that will help protect your skin will also make things safer for your clients.

Many people don't know what skin disease looks like, we have some images that show what skin disease looks like. Do your hands looks like any in the pictures? (see *Skin Disease* handout with pictures)

It is important to treat the skin disease when it looks "mild" because it is much harder to deal with when it becomes "severe"

# Possible questions trainers should be prepared to answer

What are you doing here? (have info sheet on hand)

Who do you work for?

If I have skin disease how do I get help? (primary care and Occupational Health Clinics for Ontario Workers (OHCOW) contact info – need to be referred to the St Mike's clinic)

# **Topic 1: Chemicals**

## Introduction

Many chemicals are present in nail salons. Some of these chemicals can cause skin disease. If you can, you want to try to avoid them and if you can't avoid them, there are ways to reduce the damage.

# Why is this important?

Chemicals can cause skin disease by damaging the skin. We're going to show you an example using acetone, a chemical used in nail salons regularly

# **Activity**

Acetone and styrofoam – take one styrofoam ball and pipette a small amount of acetone onto the Styrofoam. Watch the effect. This demonstrates the harmful effect that acetone can have on skin.

# What do you need to know?

There are many chemicals in our environment and in our workplace, some of these are hazardous. If you can, you want to remove them from the nail salon. If you cannot remove them from your workplace, then using personal protective equipment is the best option

# Possible questions trainers should be prepared to answer

What chemicals?

What products?

How do I know which products are harmful?

- Safety Data Sheets (SDS), which are produced by the
  manufacturers of products, explain the properties and risks
  associated with chemicals. Some products in nail salons have SDS
  available and you might be able to find them online. Generally
  speaking, SDS should be provided where chemicals are used and
  stored (ie. should be made available in salons by the owner), but
  rarely is this the case. Some products in nail salons are exempt
  from requiring owners to have SDS because they are purchased in
  personal use quantities. See the cuticle remover <u>Safety Data Sheet</u>
  example in the handout section.
- Also see the Harmful Chemicals Chart handout for more information about potentially harmful chemicals commonly found in salons. This chart is modified and taken from: https://www.womensvoices.org/wp-content/uploads/2014/11/ Beauty-and-lts-Beast.pdf

What types of problems do the chemicals cause? (see *Harmful Chemicals Chart*)

# **Topic 2: Personal Protective Equipment (PPE) – Gloves**

#### Introduction

If there are chemicals in your workplace that cannot be removed, you should use personal protective equipment (PPE) to protect yourself.

Gloves are a type of personal protective equipment (PPE). When using gloves you need to select the right glove for the chemicals you are using. You also need to make sure you take them off properly so that you don't spread chemicals on your skin and around your workplace. Wearing thin cotton gloves underneath your protective gloves can help to prevent skin disease; they can also help people who already have skin problems to feel more comfortable in gloves.

# Why is this important?

Gloves help protect you from chemicals and water, and they also protect your client.

When you remove gloves that are covered in chemical you can contaminate your skin. If you contaminate your skin you put yourself at risk of skin disease, but can also spread chemicals around the nail salon without realizing it.

The cotton liners are a soft layer between the skin and the nitrile gloves. They help to absorb some of the moisture that may build up under the nitrile gloves and will help keep your hands dry. They can also provide comfort for people who have skin problems, allowing for healing of the skin.

# **Activities**

Boxes of gloves – try different sizes and thicknesses. Which one is best?

Put glove liner under the nitrile gloves. How does it feel?

Fluorescent powder and black light – test yourself when removing the gloves:

 Once gloves are on, invite participants to apply Germ Glo powder and rub all over the gloves. Practice following the steps in the UK Health and Safety Executive's *Correct Removal of Gloves* handout. Then look at participants' hands and wrists under the black light to see where the powder spread. This can mimic the spread of germs and chemicals when removing gloves. When you remove gloves that are covered in chemical you can contaminate your skin. If you contaminate your skin you put yourself at risk of skin disease, but can also spread chemicals around the nail salon without realizing it.

# What do you need to know?

There is no good glove for protection against chemicals in the nail salon. The best choice is **nitrile gloves** in the correct size. You should change the nitrile gloves often, as frequently as every 20 minutes. Wearing cotton gloves underneath the nitrile gloves is also recommended. The cotton gloves are washable and can be reused. The nitrile gloves should never be reused.

Some workers may develop an allergy to latex gloves. Avoid the use of latex gloves if at all possible.

You also need to know how to take gloves off without contaminating your hand. (See *Correct Removal of Gloves* handout\_for visual instructions on properly taking off gloves.)

Limitations of PPE:

- Requires careful and informed selection
- Has to be put on, worn, taken off properly
- May limit the worker's mobility and/or ability to communicate
- Continued effectiveness will depend on proper maintenance, training and adherence to good working practices
- May cause skin problems

# Possible questions trainers should be prepared to answer

What type of gloves and cotton liners?

Where can I get them? (See *Sourcing Materials* handout for some suggestions.)

How much do they cost?

How do I know I'm taking my gloves off right?

Hand washing is critical in stopping the spread of infection and to remove chemicals from your hands. However, frequent hand washing also exposes your hands to excessive water - one of the biggest hazards to your skin.

# **Topic 3: Hand Creams**

#### Introduction

Hand creams are a very important part of skin care – both at work and home. They moisturize your skin and help keep it healthy.

# Why is this important?

Creams protect the skin and help to maintain the barrier between the body and the environment.

# **Activity**

Acetone, styrofoam and hand cream – comparing the effect of acetone on the styrofoam with and without hand cream on it.

Take two small styrofoam balls and put a layer of thick hand cream on one of them. Use a pipette to drop a few drops of acetone on each and watch the difference.

# What do you need to know?

Hand creams should be applied multiple times throughout the day, especially after work, before bed and after washing your hands.

When selecting a cream, you want to avoid fragrances, perfumes and dyes as well as alcohols.

Many people find that petroleum jelly is a good option, especially at night, and is relatively inexpensive. We used Cetaphil RestoraDerm as a sample cream and as gifts to participants.

# Possible questions trainers should be prepared to answer

What creams do I use? (see *Recommended Products* handout used at St. Michael's Hospital)

What brands?

Where can I get them?

How much do they cost?

# **Topic 4: Hand Washing**

## Introduction

Hand washing is critical in stopping the spread of infection and to remove chemicals from your hands. However, frequent hand washing also exposes your hands to excessive water - one of the biggest hazards to your skin.

## Why is this important?

You need to wash your hands for infection control, but you also need to care for your own skin. Too much water left on the skin is a hazard for your skin, so you need to take care to dry your skin thoroughly after washing to apply skin creams regularly.

## **Activity**

Fluorescent cream and a sink – testing how effective your hand washing is. (See *Toronto Public Health Hand Washing* CH handout for thorough hand washing instructions.)

Invite participants to take a small amount of Glo Germ cream and rub it on their hands, like a moisturizer. Then use soap and warm water to thoroughly wash hands. After washing hands, shine the black light on participants' hands, and you will see leftover spots from where the cream remains on skin and nails. This demonstrates where chemicals, germs, etc., may have been missed in the daily hand washing process.

# What do you need to know?

Hand washing is very important for keeping your hands free of chemicals and germs.

Because water is also a hazard for our skin, you need to ensure that you dry your hands completely and apply moisturizer regularly.

When washing your hands you can also take this moment to examine your own hands for any signs of redness or signs of skin disease.

# Possible questions trainers should be prepared to answer

What soaps should I use? (see *Recommended Products* handout from St. Michael's Hospital)

How do I dry my hands completely?

How often do I need to use hand creams?

# **What Does Skin Disease Look Like?**

















# **Harmful Chemicals Chart**

# **Harmful Chemicals to Avoid in Salon Products**

The chemicals on this list can be avoided by using currently available salon products containing safer alternatives.

Chemical Name	Found in These Products	Symptoms of Exposure	Potential Long Term Effects
Dibutyl Phthalate	Nail polish	Nausea, dizziness, eye and skin irritation	Reproductive toxin, birth defects
Formaldehyde or methylene glycol	Nail hardener, nail polish, keratin hair straighteners	Breathing problems, coughing, wheezing, skin rashes, eye, nose, throat irritation	Cancer, dermatitis
Toluene	Nail polish, nail glue, hair dye, wig glue/hairpiece bonding	Dizziness, headaches, skin rashes, eye, nose, throat irritation	Liver damage, kidney damage, birth defects, pregnancy loss
Methyl Methacrylate (MMA)	Artificial nails	Breathing problems, allergic reaction, dermatitis, chest tightness, eye, nose, throat irritation, headaches, confusion	Loss of smell, reproductive toxin, asthma, allergic reaction
Cyclopentasiloxane or cyclomethicone	Flat iron sprays, thermal protection sprays	Under the high heat of a flat iron, cyclopentasiloxane creates formaldehyde. Formaldehyde leads to breathing problems, coughing, wheezing, skin rashes, eye, nose, throat irritation	Formaldehyde exposure may cause cancer, dermatitis
Styrene	Hair extension glue, lace wig glue	Vision problems, trouble concentrating, tiredness	Cancer
Trichlorethylene	Hair extension glue, lace wig glue	Dizziness, headache, confusion, nausea, eye and skin irritation	Liver damage, kidney damage, dermatitis, double vision
1,4 Dioxane	Hair extension glue, lace wig glue	Eye and nose irritation	Cancer, liver damage, kidney damage
2-butoxyethanol or Ethylene glycol monobutyl ether	Disinfectants, cleaners	Headache, eye and nose irritation	Reproductive toxin

# **Be Mindful of These Harmful Chemicals**

The following chemicals are known to be harmful to health, but **may be difficult to avoid due** to a lack of safer available alternatives.

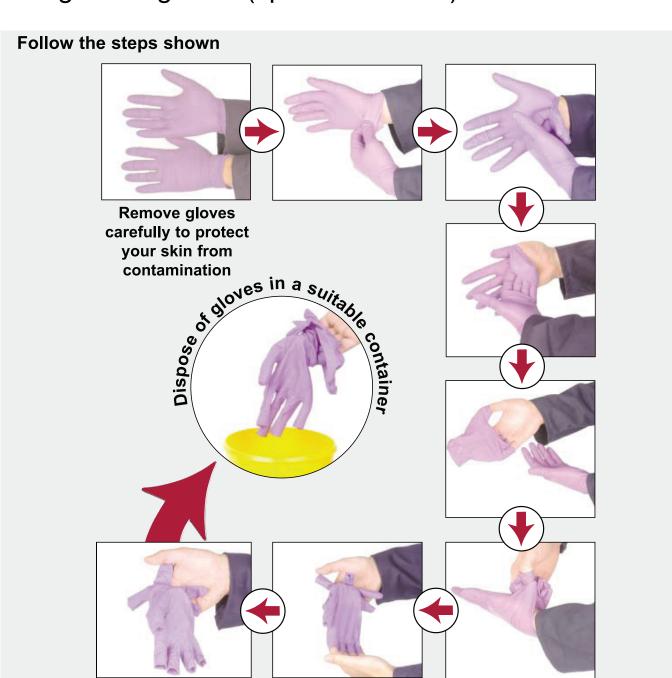
Chemical Name	Found in These Products	Symptoms of Exposure	Potential Long Term Effects
Quaternary Ammonium Compounds or "dimethyl benzyl ammonium chloride"	Disinfectants and cleaners	Skin, eye and nose irritation	Asthma
P-phenylenediamine	Hair dyes, black henna tattoos	Skin irritation	Dermatitis
Glyceryl thioglycolate	Permanent wave solutions, "acid perms"	Skin irritation	Dermatitis
Ammonium persulfate	Hair bleach	Eye, skin and nose irritation, coughing, shortness of breath	Asthma, dermatitis
Ethyl methacrylate	Artificial nails	Eye and skin irritation, rashes on eyelids, face or neck, difficulty concentrating, coughing, shortness of breath	Asthma
Acetone	Nail polish remover, hairspray	Eye, skin and throat irritation, dizziness	Eye, skin and throat irritation, dizziness
Acetonitrile	Nail glue remover	Eye, skin and throat irritation, face flush, chest tightness, nausea	Weakness, exhaustion
Butyl acetate, ethyl acetate or isopropyl acetate	Nail polish, nail polish remover, wig glue/ hairpiece bonding	Eye, skin and throat irritation, headaches, dizziness	Eye, skin and throat irritation, dermatitis
Methacrylic acid	Nail primer, eyelash glue	Skin burns, eye, nose and throat irritation	Kidney damage, dermatitis, reproductive toxin

Note: These lists are not exhaustive. More research is needed.

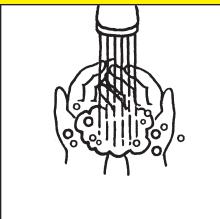


# **Correct removal of gloves**

Single use gloves (splash resistant)



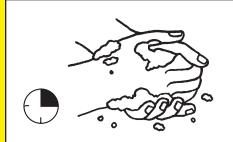
# Hand Washing



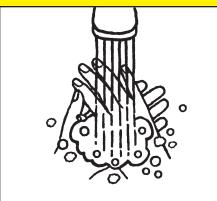
1. Wet hands.



2. Apply soap.



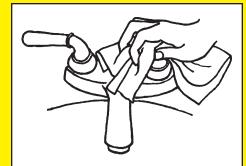
3. Lather for 15 seconds. Rub between fingers, back of hands, fingertips, under nails.



4. Rinse well under running water.



5. Dry hands well with paper towel or hot air hlower.



6. Turn taps off with paper towel, if available.

# Stop the Spread of Germs

# **Always Wash Your Hands**

# After you:

- Sneeze, cough or blow your nose
- Use the washroom or change diapers
- Handle garbage
- Play outdoors

# Before and after you:

- Prepare or eat food
- Touch a cut or open sore

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December 2012

# Stop the Spread of Germs: Keep Your Hands Clean

# Why is it important to keep hands clean?

Hands carry and spread germs. Touching your eyes, nose or mouth without first cleaning your hands may let germs into your body. Germs can also spread if a person sneezes or coughs into their hands and then touches an object such as a door handle, subway pole or telephone. The next person who touches these objects may pick up germs and get sick if they do not clean their hands before touching their eyes, nose or mouth.

# When should I clean my hands?

When hands are visibly dirty.

After:

- sneezing, coughing, blowing your nose
- using the washroom
- handling garbage
- changing diapers
- handling raw foods
- outdoor play

Before and after:

- preparing and eating food
- touching a cut or open sore
- touching eyes, nose or mouth

# What's the best way to wash hands with soap and water?

Wet hands with warm water and apply soap. Lather for 15 seconds. Scrub entire hand, including back of hands, between fingers and under nails. Rinse well under running water. Dry hands well with paper towel or hot air blower. Turn taps off with paper towel, if available.

# When can I use hand sanitizers instead of soap and water?

Hand sanitizers are very useful when soap and water are not available. If your hands are not visibly dirty, then alcohol-based (minimum 70%-90%) hand sanitizers, gels or rinses will reduce germs. **If hands are visibly dirty, wash with soap and water**. People who are preparing food should wash their hands using soap and water rather than using hand sanitizers.

# What's the best way to use hand sanitizer?

Choose a sanitizer containing at least 70% alcohol. Apply a small amount and rub hands together, spreading the sanitizer over the hands to include fingertips and under fingernails. Rub hands together for at least 15 seconds until dry.

# Is hand sanitizer safe for children?

Yes. Young children should be supervised to make sure the sanitizer is used properly.

# Should I use hand lotion after cleaning my hands?

Yes. Dry skin is not uncommon when you clean your hands often, especially during the winter. Dry skin can crack, which may provide an opening for germs to enter your body. To prevent dry skin, you may use soap or an alcohol-based hand sanitizer with lotion already added or use lotion (water-based is preferred) after cleaning your hands.

# Where can I get more information?

Call Toronto Health Connection: 416-338-7600; TTY: 416-392-0658 or visit our website at www.toronto.ca/health.



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Prepared to OSHA, ACC, ANSI, NOHSC, WHMIS & 2001/58 EC Standards MSDS Revision: 7.0 MSDS Revision Date: 04/01/2008 1. PRODUCT IDENTIFICATION Product Name: CUTICLE AWAY 1.2 Chemical Name: **DILUTE SODIUM HYDROXIDE SOLUTION** 1.3 Synonyms: **CUTICLE REMOVER, CUTICLE AWAY** 1.4 Trade Names: Cuticle Away – Cuticle Remover 1.5 Product Use: PROFESSIONAL USE ONLY 1.6 Distributor's Name: CREATIVE NAIL DESIGN, INC. 1.7 Distributor's Address: 1125 JOSHUA WAY, VISTA, CA 92081 USA 1.8 Emergency Phone: CHEMTREC: +1 (800) 424-9300 / +1 (703) 527-3887 1.9 **Business Phone:** (800) 833-NAIL (6245), (760) 599-2900 2. HAZARD IDENTIFICATION 21 Hazard Identification: This product is not classified as a HAZARDOUS SUBSTANCE or as DANGEROUS GOODS according to the classification criteria of NOHSC:1088 (2004) and ADG Code (Australia). 2.2 Routes of Entry: Inhalation: NO Absorption: YES YES Ingestion: 23 Effects of Exposure: Damage to the mouth, throat, and stomach are possible. Irritation and discomfort to the esophagus and stomach may INGESTION: continue for several weeks following ingestion of this product. EYES: Severe eye irritation. May cause blindness if left untreated. SKIN: This product is designed to remove skin around the nail plate area. Avoid prolonged or repeated skin contact. INHALATION: Unlikely. 2.4 Symptoms of Overexposure: INGESTION: Severe pain in the mouth, throat, esophagus and stomach; labored breathing because of swelling in the throat; rapid drop in blood pressure; severe abdominal pain and diarrhea. EYES: Intense burning sensation in eyes. SKIN: If skin is exposed to product for longer than directed by manufacturer, irritation and redness or swelling may appear. Acute Health Effects: INGESTION: Extensive damage to the mouth, skin, throat, esophagus and stomach following ingestion of the product. **EYES** Severe eye irritation. 2.6 Chronic Health Effects: No chronic health effects are known. 2.7 Target Organs: Eyes, skin. NA = Not Available; ND = Not Determined; NE = Not Established; NF = Not Found; C = Ceiling Limit; See Section 16 for Additional Definitions of Terms Used. Note: All WHMIS required information is included. It is located in appropriate sections based on the ANSI Z400.1-2004 format.



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Prepared to OSHA, ACC, ANSI, NOHSC, WHMIS & 2001/58 EC Standards MSDS Revision: 7.0 MSDS Revision Date: 04/01/2008 3. COMPOSITION & INGREDIENT INFORMATION EXPOSURE LIMITS IN AIR (mg/m³) **ACGIH NOHSC OTHER** ppm ppm ppm FS-FS-ES-% CHEMICAL NAME(S) CAS No. RTECS No. **EINECS No.** TLV **STEL TWA STEL PEAK** PEL **STEL IDLH** 231-791-2 WATER (AQUA) 7732-18-5 ZC0110000 > 85.0 NE NE NF NF NE NE NE **BUTYLENE GLYCOL** 110-63-4 EK0525000 203-786-5 ≤ 10.0 NE NE NF NF NF NE NE NE 9062-04-8 231-791-2 **CARBOMER** AT4683000 ≤ 3.0 NF NE NE NF NF NE NE NE SODIUM HYDROXIDE 1310-73-2 WB4900000 215-185-5 ≤ 2.0 (2) NF NF NE NE NE (2) (2) OTHER COMPONENTS PRESENT IN LESS THAN 1% CONCENTRATION THE REMAINING COMPONENTS DO NOT CONTRIBUTE ANY RΔI SIGNIFICANT ADDITIONAL HAZARDS 4. FIRST AID MEASURES 4.1 First Aid: INGESTION: If ingested, do not induce vomiting. Drink plenty of water or milk IMMEDIATELY. If the patient is vomiting, continue to offer plenty of water or milk. Never give water or milk to an unconscious person. Contact ChemTrec at +1 (703) 527-3887 or the nearest Poison Control Center or local emergency number. Provide an estimate of the time and amount of the substance that was swallowed. EYES: If product is in the eyes, flush with copious amounts of lukewarm water for at least 15 minutes. Open and close eyelid(s) to ensure thorough irrigation. Seek medical attention. SKIN: If redness, dryness or other signs of irritation to the skin develop, wash affected skin areas with plenty of warm water and soap. If irritation persists, consult a physician. If the product is spilled on clothing, remove affected articles and rinse in lukewarm water. Rinsing with a small amount of vinegar will help neutralize the alkali before regular wash cycle. Do not reapply article of clothing without thorough cleaning. INHALATION: Remove victim to fresh air at once. 4.2 Medical Conditions Aggravated by Exposure: None known. 5. FIREFIGHTING MEASURES 5.1 Flashpoint & Method: Non-flammable 5.2 Autoignition Temperature: 53 Flammability Limits: Upper Explosive Limit (UEL): Lower Explosive Limit (LEL): NA NA Fire & Explosion Hazards: 5 4 This product is not flammable. 5.5 Extinguishing Methods: NA 5.6 Firefighting Procedures: This product is not flammable. If involved in a fire, emergency responders should wear eye protection and SCBAs and other protective equipment. If possible, prevent runoff water from entering storm drains, waterways or environmentally-sensitive greas. Wash contaminated clothing and equipment with warm water and soap, followed by rinse before returning to service.



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Prepared to OSHA, ACC, ANSI, NOHSC, WHMIS & 2001/58 EC Standards MSDS Revision: 7.0 MSDS Revision Date: 04/01/2008 6. ACCIDENTAL RELEASE MEASURES Before cleaning any spill or leak, individuals involved in spill cleanup must wear appropriate Personal Protective Equipment. For small spills (e.g., < 1 gallon (3.785 liters)) wear appropriate personal protective equipment (e.g., goggles, gloves). Maximize ventilation (open doors and windows). Remove spilled material with absorbent material and place into appropriate closed container(s) for disposal. Dispose of properly in accordance with local, state and federal regulations. Wash all affected areas and outside of container with plenty of warm water and soap. Remove any contaminated clothing and wash thoroughly before reuse. For spills ≥ 1 gallon (3.785 liters), deny entry to all unprotected individuals. Dike and contain spill with inert material (e.g., sand or earth). Transfer liquid to containers for recovery or disposal and solid diking material to separate containers for proper disposal. Remove contaminated clothing promptly and wash affected skin areas with soap and water. Keep spills and cleaning runoffs out of municipal sewers and open bodies of water. 7. HANDLING & STORAGE INFORMATION 7.1 Work & Hygiene Practices: Use appropriate personal protective equipment, including eye protection and gloves, when handling bulk amounts of this product. Wash all exposed skin thoroughly with warm water and soap using this product. Do not eat, drink or smoke while handling this product. 7.2 Storage & Handling: Keep container closed when not in use. Keep away from incompatible materials listed in Section 10. Do not store in damaged or unmarked containers or storage devices. Empty containers may contain residual amounts of this product; therefore, empty containers should be handled with care. KEEP AWAY FROM CHILDREN AT ALL TIMES. 7.3 Special Precautions: Spilled material may present a slipping hazard if left unattended. Clean all spills promptly. 8. EXPOSURE CONTROLS & PERSONAL PROTECTION 8.1 Ventilation & Engineering Controls: General mechanical (e.g., fans) or natural ventilation is sufficient when this product is in use. 8.2 Respiratory Protection: None required. 8.3 Eye Protection: Wear protective eyewear at all times when handling or using this product. Protective eyewear should include a side-shield. 8 4 Hand Protection: Wash hands immediately after handling or using this product. Wear appropriate chemical protective gloves (e.g., latex) when handling or using this product (Large quantities e.g., > 1 gallon (3.785 liters)). 2 HEALTH When handling large quantities (i.e. > 1 gallon (3.785 liters)) of this product, a chemical-resistant apron is recommended. If clothing is contaminated, remove **FLAMMABILITY** 0 affected clothing and wash affected areas of the skin thoroughly with soap and water. REACTIVITY 0 See also Section 4.1. PROTECTIVE EQUIPMENT Α **EYES** 



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		9. PHYSICAL & CHEMICAL PROPERTIES			
	Density:	NA NA			
	Boiling Point:	NA NA			
	Melting Point:	NA NA			
	Evaporation Rate:	NA NA			
	Vapor Pressure:	NA NA			
,	Molecular Weight:	NA NA			
,	Appearance & Color:	Clear, viscous liquid with a slight medicinal odor.			
3	Odor Threshold:	ND			
,	Solubility:	Soluble in water			
0	рН	13.2			
11	Viscosity:				
12	Other Information:	5,000 cps			
_	Olliof Illionnation.	NA NA			
		10 CTADILITY O DEACTIVITY			
	0.1.177	10. STABILITY & REACTIVITY			
.1	Stability:				
.2	The product is stable.  Hazardous Decomposition Prod	ducts:			
	NA				
.3	Hazardous Polymerization:				
	Will not occur.				
.4	Conditions to Avoid:				
	Keep away from incom	patible substances.			
.5	Incompatible Substances:				
	Acids, flammable liquid	ls, halogenated solvents.			
		11. TOXICOLOGICAL INFORMATION			
1.1	Toxicity Data:				
	This product has not been tested on animals to obtain toxicological data. There are toxicology data for the components of				
	product, which are found in the scientific literature. These data have not been presented in this document.				
.2		id in the scientific ineratore. These data have not been presented in this document.			
.2		id in the scientific ineratore. These data have not been presented in this document.			
	Acute Toxicity: See section 2.5 Chronic Toxicity:	id in the scientific ineratore. These data have not been presented in this document.			
.3	Acute Toxicity: See section 2.5 Chronic Toxicity: See section 2.6	id in the scientific ineratore. These data have not been presented in this document.			
.3	Acute Toxicity: See section 2.5 Chronic Toxicity: See section 2.6 Suspected Carcinogen:	in the scientific ineratore. These data have not been presented in this document.			
.3	Acute Toxicity: See section 2.5 Chronic Toxicity: See section 2.6 Suspected Carcinogen: NE				
.3	Acute Toxicity: See section 2.5 Chronic Toxicity: See section 2.6 Suspected Carcinogen: NE Reproductive Toxicity:	This product is not reported to produce reproductive toxicity in humans.			
.3	Acute Toxicity: See section 2.5 Chronic Toxicity: See section 2.6 Suspected Carcinogen: NE Reproductive Toxicity: Mutagenicity:	This product is not reported to produce reproductive toxicity in humans.  This product is not reported to produce mutagenic effects in humans.			
.3	Acute Toxicity: See section 2.5 Chronic Toxicity: See section 2.6 Suspected Carcinogen: NE Reproductive Toxicity: Mutagenicity: Embryotoxicity:	This product is not reported to produce reproductive toxicity in humans.  This product is not reported to produce mutagenic effects in humans.  This product is not reported to produce embryotoxic effects in humans.			
.3	Acute Toxicity: See section 2.5 Chronic Toxicity: See section 2.6 Suspected Carcinogen: NE Reproductive Toxicity: Mutagenicity: Embryotoxicity: Teratogenicity:	This product is not reported to produce reproductive toxicity in humans.  This product is not reported to produce mutagenic effects in humans.  This product is not reported to produce embryotoxic effects in humans.  This product is not reported to produce teratogenic effects in humans.			
.4	Acute Toxicity: See section 2.5 Chronic Toxicity: See section 2.6 Suspected Carcinogen: NE Reproductive Toxicity: Mutagenicity: Embryotoxicity: Teratogenicity: Reproductive Toxicity:	This product is not reported to produce reproductive toxicity in humans.  This product is not reported to produce mutagenic effects in humans.  This product is not reported to produce embryotoxic effects in humans.			
.4	Acute Toxicity: See section 2.5 Chronic Toxicity: See section 2.6 Suspected Carcinogen: NE Reproductive Toxicity: Mutagenicity: Embryotoxicity: Teratogenicity: Reproductive Toxicity: Irritancy of Product:	This product is not reported to produce reproductive toxicity in humans.  This product is not reported to produce mutagenic effects in humans.  This product is not reported to produce embryotoxic effects in humans.  This product is not reported to produce teratogenic effects in humans.  This product is not reported to produce reproductive effects in humans.			
.3	Acute Toxicity: See section 2.5 Chronic Toxicity: See section 2.6 Suspected Carcinogen: NE Reproductive Toxicity: Mutagenicity: Embryotoxicity: Teratogenicity: Reproductive Toxicity:	This product is not reported to produce reproductive toxicity in humans.  This product is not reported to produce mutagenic effects in humans.  This product is not reported to produce embryotoxic effects in humans.  This product is not reported to produce teratogenic effects in humans.  This product is not reported to produce reproductive effects in humans.			
.3	Acute Toxicity: See section 2.5 Chronic Toxicity: See section 2.6 Suspected Carcinogen: NE Reproductive Toxicity: Mutagenicity: Embryotoxicity: Teratogenicity: Reproductive Toxicity: Irritancy of Product: May cause severe eye	This product is not reported to produce reproductive toxicity in humans.  This product is not reported to produce mutagenic effects in humans.  This product is not reported to produce embryotoxic effects in humans.  This product is not reported to produce teratogenic effects in humans.  This product is not reported to produce reproductive effects in humans.			
.3 .4 .5 .6 .7	Acute Toxicity: See section 2.5 Chronic Toxicity: See section 2.6 Suspected Carcinogen: NE Reproductive Toxicity: Mutagenicity: Embryotoxicity: Teratogenicity: Reproductive Toxicity: Irritancy of Product: May cause severe eye Biological Exposure Indices:	This product is not reported to produce reproductive toxicity in humans.  This product is not reported to produce mutagenic effects in humans.  This product is not reported to produce embryotoxic effects in humans.  This product is not reported to produce teratogenic effects in humans.  This product is not reported to produce reproductive effects in humans.			
.3 .4 .5 .6 .7	Acute Toxicity: See section 2.5 Chronic Toxicity: See section 2.6 Suspected Carcinogen: NE Reproductive Toxicity: Mutagenicity: Embryotoxicity: Teratogenicity: Reproductive Toxicity: Irritancy of Product: May cause severe eye Biological Exposure Indices: NE	This product is not reported to produce reproductive toxicity in humans.  This product is not reported to produce mutagenic effects in humans.  This product is not reported to produce embryotoxic effects in humans.  This product is not reported to produce teratogenic effects in humans.  This product is not reported to produce reproductive effects in humans.  irritation.			
.3 .4 .5 .6 .7	Acute Toxicity: See section 2.5 Chronic Toxicity: See section 2.6 Suspected Carcinogen: NE Reproductive Toxicity: Mutagenicity: Embryotoxicity: Teratogenicity: Reproductive Toxicity: Irritancy of Product: May cause severe eye Biological Exposure Indices: NE Physician Recommendations:	This product is not reported to produce reproductive toxicity in humans.  This product is not reported to produce mutagenic effects in humans.  This product is not reported to produce embryotoxic effects in humans.  This product is not reported to produce teratogenic effects in humans.  This product is not reported to produce reproductive effects in humans.  irritation.			
.3 .4 .5 .6 .7	Acute Toxicity: See section 2.5 Chronic Toxicity: See section 2.6 Suspected Carcinogen: NE Reproductive Toxicity: Mutagenicity: Embryotoxicity: Teratogenicity: Reproductive Toxicity: Irritancy of Product: May cause severe eye Biological Exposure Indices: NE Physician Recommendations:	This product is not reported to produce reproductive toxicity in humans.  This product is not reported to produce mutagenic effects in humans.  This product is not reported to produce embryotoxic effects in humans.  This product is not reported to produce teratogenic effects in humans.  This product is not reported to produce reproductive effects in humans.  irritation.			
.3 .4 .5 .6 .7 .8	Acute Toxicity: See section 2.5 Chronic Toxicity: See section 2.6 Suspected Carcinogen: NE Reproductive Toxicity: Mutagenicity: Embryotoxicity: Teratogenicity: Reproductive Toxicity: Irritancy of Product: May cause severe eye Biological Exposure Indices: NE Physician Recommendations:	This product is not reported to produce reproductive toxicity in humans.  This product is not reported to produce mutagenic effects in humans.  This product is not reported to produce embryotoxic effects in humans.  This product is not reported to produce teratogenic effects in humans.  This product is not reported to produce reproductive effects in humans.  irritation.			
.2   .3   .4   .5     .6     .7     .8	Acute Toxicity: See section 2.5 Chronic Toxicity: See section 2.6 Suspected Carcinogen: NE Reproductive Toxicity: Mutagenicity: Embryotoxicity: Teratogenicity: Reproductive Toxicity: Irritancy of Product: May cause severe eye Biological Exposure Indices: NE Physician Recommendations: Treat for sodium hydrox  Environmental Stability:	This product is not reported to produce reproductive toxicity in humans.  This product is not reported to produce mutagenic effects in humans.  This product is not reported to produce embryotoxic effects in humans.  This product is not reported to produce teratogenic effects in humans.  This product is not reported to produce reproductive effects in humans.  irritation.			
1.5	Acute Toxicity: See section 2.5 Chronic Toxicity: See section 2.6 Suspected Carcinogen: NE Reproductive Toxicity: Mutagenicity: Embryotoxicity: Teratogenicity: Reproductive Toxicity: Irritancy of Product: May cause severe eye Biological Exposure Indices: NE Physician Recommendations: Treat for sodium hydrox  Environmental Stability:	This product is not reported to produce reproductive toxicity in humans.  This product is not reported to produce mutagenic effects in humans.  This product is not reported to produce embryotoxic effects in humans.  This product is not reported to produce teratogenic effects in humans.  This product is not reported to produce reproductive effects in humans.  irritation.  12. ECOLOGICAL INFORMATION			
.3 .4 .5 .6 .7 .8	Acute Toxicity: See section 2.5 Chronic Toxicity: See section 2.6 Suspected Carcinogen: NE Reproductive Toxicity: Mutagenicity: Embryotoxicity: Teratogenicity: Reproductive Toxicity: Irritancy of Product: May cause severe eye Biological Exposure Indices: NE Physician Recommendations: Treat for sodium hydrox  Environmental Stability: This product will slowly verified to social section of the social section of the section of	This product is not reported to produce reproductive toxicity in humans.  This product is not reported to produce mutagenic effects in humans.  This product is not reported to produce embryotoxic effects in humans.  This product is not reported to produce teratogenic effects in humans.  This product is not reported to produce reproductive effects in humans.  irritation.  12. ECOLOGICAL INFORMATION			
.4   .5   .6   .7   .8   .8	Acute Toxicity: See section 2.5 Chronic Toxicity: See section 2.6 Suspected Carcinogen: NE Reproductive Toxicity: Mutagenicity: Embryotoxicity: Teratogenicity: Reproductive Toxicity: Irritancy of Product: May cause severe eye Biological Exposure Indices: NE Physician Recommendations: Treat for sodium hydrox  Environmental Stability: This product will slowly verified to social section of the social section of the section of	This product is not reported to produce reproductive toxicity in humans.  This product is not reported to produce mutagenic effects in humans.  This product is not reported to produce embryotoxic effects in humans.  This product is not reported to produce teratogenic effects in humans.  This product is not reported to produce reproductive effects in humans.  irritation.  irritation.  12. ECOLOGICAL INFORMATION  volatilize from soil. Components of this product will slowly decompose into organic compounds.			



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Prep	pared to OSHA, ACC, ANSI, NOHSC, WHMIS & 2001/58 EC Standards MSDS Revision: 7.0 MSDS Re	evision Date: 04/01/2008	
13. DISPOSAL CONSIDERATIONS			
13.1	Waste Disposal:		
	Waste disposal must be in accordance with federal, state, and local regulations.		
13.2	Special Considerations:		
	NA NA		
	14. TRANSPORTATION INFORMATION		
The b	basic description (ID Number, proper shipping name, hazard class & division, packing group) is shown for ec	ach mode of transportation.	
Addi	litional descriptive information may be required by 49 CFR, IATA/ICAO, IMDG, SCT, ADGR and the CTDGR.		
14.1	49 CFR (GND):		
	NOT REGULATED		
14.2	IATA (AIR): NOT REGULATED		
14.3	IMDG (OCN):		
	NOT REGULATED		
14.4	TDGR (Canadian GND):		
	NOT REGULATED		
14.5	ADR/RID (EU):		
	NOT REGULATED		
14.6	SCT (MEXICO):		
	NOT REGULATED		
14.7	ADGR (AUS):		
	NOT REGULATED		
	NOT REGULATED		
	NOT REGULATED  15. REGULATORY INFORMATION		
15.1	NOT REGULATED  15. REGULATORY INFORMATION  U.S. EPA SARA Title III Reporting Requirements:		
	NOT REGULATED  15. REGULATORY INFORMATION  U.S. EPA SARA Title III Reporting Requirements:  SARA 304 (40 CFR Table 302.4): Sodium Hydroxide		
15.1	15. REGULATORY INFORMATION  U.S. EPA SARA Title III Reporting Requirements:  SARA 304 (40 CFR Table 302.4): Sodium Hydroxide  U.S. EPA SARA Title III Threshold Planning Quantity (TPQ):		
15.2	15. REGULATORY INFORMATION  U.S. EPA SARA Title III Reporting Requirements:  SARA 304 (40 CFR Table 302.4): Sodium Hydroxide  U.S. EPA SARA Title III Threshold Planning Quantity (TPQ):  NA		
	15. REGULATORY INFORMATION  U.S. EPA SARA Title III Reporting Requirements: SARA 304 (40 CFR Table 302.4): Sodium Hydroxide  U.S. EPA SARA Title III Threshold Planning Quantity (TPQ): NA  U.S. TSCA Inventory Status:		
15.2	15. REGULATORY INFORMATION  U.S. EPA SARA Title III Reporting Requirements: SARA 304 (40 CFR Table 302.4): Sodium Hydroxide  U.S. EPA SARA Title III Threshold Planning Quantity (TPQ): NA  U.S. TSCA Inventory Status: The components of this product are listed on the TSCA inventory.		
15.2	15. REGULATORY INFORMATION  U.S. EPA SARA Title III Reporting Requirements: SARA 304 (40 CFR Table 302.4): Sodium Hydroxide  U.S. EPA SARA Title III Threshold Planning Quantity (TPQ): NA  U.S. TSCA Inventory Status: The components of this product are listed on the TSCA inventory.  U.S. CERCLA Reportable Quantity (RQ):		
15.2 15.3 15.4	U.S. EPA SARA Title III Reporting Requirements: SARA 304 (40 CFR Table 302.4): Sodium Hydroxide  U.S. EPA SARA Title III Threshold Planning Quantity (TPQ): NA  U.S. TSCA Inventory Status: The components of this product are listed on the TSCA inventory.  U.S. CERCLA Reportable Quantity (RQ): Sodium Hydroxide: 1000 lbs.		
15.2	15. REGULATORY INFORMATION  U.S. EPA SARA Title III Reporting Requirements: SARA 304 (40 CFR Table 302.4): Sodium Hydroxide  U.S. EPA SARA Title III Threshold Planning Quantity (TPQ): NA  U.S. TSCA Inventory Status: The components of this product are listed on the TSCA inventory.  U.S. CERCLA Reportable Quantity (RQ): Sodium Hydroxide: 1000 lbs.  Other U.S. Federal Requirements:	oter G (Cosmetics).	
15.2 15.3 15.4	15. REGULATORY INFORMATION  U.S. EPA SARA Title III Reporting Requirements: SARA 304 (40 CFR Table 302.4): Sodium Hydroxide  U.S. EPA SARA Title III Threshold Planning Quantity (TPQ): NA  U.S. TSCA Inventory Status: The components of this product are listed on the TSCA inventory.  U.S. CERCLA Reportable Quantity (RQ): Sodium Hydroxide: 1000 lbs.  Other U.S. Federal Requirements: This product complies with the appropriate sections of the Food and Drug Administration's 21 CFR subchap	oter G (Cosmetics).	
15.2 15.3 15.4	15. REGULATORY INFORMATION  U.S. EPA SARA Title III Reporting Requirements: SARA 304 (40 CFR Table 302.4): Sodium Hydroxide  U.S. EPA SARA Title III Threshold Planning Quantity (TPQ): NA  U.S. TSCA Inventory Status: The components of this product are listed on the TSCA inventory.  U.S. CERCLA Reportable Quantity (RQ): Sodium Hydroxide: 1000 lbs.  Other U.S. Federal Requirements: This product complies with the appropriate sections of the Food and Drug Administration's 21 CFR subchap Other Canadian Regulations:	oter G (Cosmetics).	
15.2 15.3 15.4	15. REGULATORY INFORMATION  U.S. EPA SARA Title III Reporting Requirements: SARA 304 (40 CFR Table 302.4): Sodium Hydroxide  U.S. EPA SARA Title III Threshold Planning Quantity (TPQ): NA  U.S. TSCA Inventory Status: The components of this product are listed on the TSCA inventory.  U.S. CERCLA Reportable Quantity (RQ): Sodium Hydroxide: 1000 lbs.  Other U.S. Federal Requirements: This product complies with the appropriate sections of the Food and Drug Administration's 21 CFR subchap	oter G (Cosmetics).	
15.2 15.3 15.4	U.S. EPA SARA Title III Reporting Requirements: SARA 304 (40 CFR Table 302.4): Sodium Hydroxide  U.S. EPA SARA Title III Threshold Planning Quantity (TPQ): NA  U.S. TSCA Inventory Status: The components of this product are listed on the TSCA inventory.  U.S. CERCLA Reportable Quantity (RQ): Sodium Hydroxide: 1000 lbs.  Other U.S. Federal Requirements: This product complies with the appropriate sections of the Food and Drug Administration's 21 CFR subchap Other Canadian Regulations: This product has been classified according to the hazard criteria of the Controlled Product Regulations	oter G (Cosmetics).	
15.2 15.3 15.4	U.S. EPA SARA Title III Reporting Requirements:  SARA 304 (40 CFR Table 302.4): Sodium Hydroxide  U.S. EPA SARA Title III Threshold Planning Quantity (TPQ):  NA  U.S. TSCA Inventory Status:  The components of this product are listed on the TSCA inventory.  U.S. CERCLA Reportable Quantity (RQ):  Sodium Hydroxide: 1000 lbs.  Other U.S. Federal Requirements:  This product complies with the appropriate sections of the Food and Drug Administration's 21 CFR subchap Other Canadian Regulations:  (CPR) and the MSDS contains all of the information required by the CPR. The components of this product are listed on the Priorities Substances List.	oter G (Cosmetics).	
15.2 15.3 15.4	U.S. EPA SARA Title III Reporting Requirements: SARA 304 (40 CFR Table 302.4): Sodium Hydroxide U.S. EPA SARA Title III Threshold Planning Quantity (TPQ): NA U.S. TSCA Inventory Status: The components of this product are listed on the TSCA inventory. U.S. CERCLA Reportable Quantity (RQ): Sodium Hydroxide: 1000 lbs. Other U.S. Federal Requirements: This product complies with the appropriate sections of the Food and Drug Administration's 21 CFR subchap Other Canadian Regulations: This product has been classified according to the hazard criteria of the Controlled Product Regulations (CPR) and the MSDS contains all of the information required by the CPR. The components of this product are listed on the DSL/NDSL. None of the components of this product are listed on the Priorities Substances List.  U.S. State Regulatory Information:	Ţ	
15.2 15.3 15.4 15.5 15.6	U.S. EPA SARA Title III Reporting Requirements:  SARA 304 (40 CFR Table 302.4): Sodium Hydroxide  U.S. EPA SARA Title III Threshold Planning Quantity (TPQ):  NA  U.S. TSCA Inventory Status:  The components of this product are listed on the TSCA inventory.  U.S. CERCLA Reportable Quantity (RQ):  Sodium Hydroxide: 1000 lbs.  Other U.S. Federal Requirements:  This product complies with the appropriate sections of the Food and Drug Administration's 21 CFR subchap Other Canadian Regulations:  (CPR) and the MSDS contains all of the information required by the CPR. The components of this product are listed on the Priorities Substances List.	Ţ	
15.2 15.3 15.4 15.5 15.6	15. REGULATORY INFORMATION  U.S. EPA SARA Title III Reporting Requirements:  SARA 304 (40 CFR Table 302.4): Sodium Hydroxide  U.S. EPA SARA Title III Threshold Planning Quantity (IPQ):  NA  U.S. TSCA Inventory Status:  The components of this product are listed on the TSCA inventory.  U.S. CERCLA Reportable Quantity (RQ):  Sodium Hydroxide: 1000 lbs.  Other U.S. Federal Requirements:  This product complies with the appropriate sections of the Food and Drug Administration's 21 CFR subchap Other Canadian Regulations:  This product has been classified according to the hazard criteria of the Controlled Product Regulations (CPR) and the MSDS contains all of the information required by the CPR. The components of this product are listed on the DSL/NDSL. None of the components of this product are listed on the Priorities Substances List.  U.S. State Regulatory Information:  Sodium hydroxide is covered under specific state criteria. No components of this product are listed on the priorities.	Ţ	
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Prepared to OSHA, ACC, ANSI, NOHSC, WHMIS & 2001/58 EC Standards MSDS Revision: 7.0

MSDS Revision Date: 04/01/2008

# 16. OTHER INFORMATION

Other Information:

WARNING: Precisely follow directions and MSDS (available through your supplier) for use. Corrosive. Avoid eye contact. If contact occurs, flush eye thoroughly with running water for at least 15 minutes. Seek medial attention. Avoid skin contact. If irritation develops, discontinue use immediately and thoroughly rinse affected area. Do not ingest. If swallowed, do not induce vomiting; seek medical attention. Keep out of reach of children. FOR PROFESSIONAL USE ONLY.

Terms & Definitions: 16.2

See last page of this MSDS.

16.3 Disclaimer:

> This Material Safety Data Sheet is offered pursuant to OSHA's Hazard Communication Standard, 29 CFR §1910.1200. Other government regulations must be reviewed for applicability to this product. To the best of ShipMate's & Creative Nail Design's knowledge, the information contained herein is reliable and accurate as of this date; however, accuracy, suitability or completeness are not guaranteed and no warranties of any type, either expressed or implied, are provided. The information contained herein relates only to the specific product(s). If this product(s) is combined with other materials, all component properties must be considered. Data may be changed from time to time. Be sure to consult the latest edition.

Prepared for: 16.4

> Creative Nail Design, Inc. A Division of Colomer U.S.A., Inc. 1125 Joshua Way Vista, CA 92081 USA (800) 833-NAIL (6245) phone (760) 599-2900 (760) 599-4005 fax http://www.cnd.com/



Hands. Feet. Beauty.

16.5 Prepared by:

ShipMate, Inc. **PO Box 787** 

Sisters, OR 97759-0787 USA Phone: +1 (310) 370-3600 Fax: +1 (310) 370-5700

e-mail: shipmate@shipmate.com





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CND-N-007

Prepared to OSHA, ACC, ANSI, NOHSC, WHMIS & 2001/58 EC Standards MSDS Revision: 7.0

MSDS Revision Date: 04/01/2008

# **DEFINITION OF TERMS**

A large number of abbreviations and acronyms appear on a MSDS. Some of these that are commonly used include the following:

#### GENERAL INFORMATION:

CAS No. Chemical Abstract Service Number	

#### **EXPOSURE LIMITS IN AIR:**

ACGIH	American Conference on Governmental Industrial Hygienists
TLV Threshold Limit Value	
OSHA U.S. Occupational Safety and Health Administration	
PEL Permissible Exposure Limit	
IDLH Immediately Dangerous to Life and Health	

#### FIRST AID MEASURES.

CPR	Cardiopulmonary resuscitation - method in which a person whose heart has stopped receives manual chest compressions and breathing to circulate blood and provide oxygen to the

#### HAZARDOUS MATERIALS IDENTIFICATION SYSTEM: HMIS

## **HEALTH, FLAMMABILITY & REACTIVITY RATINGS:**

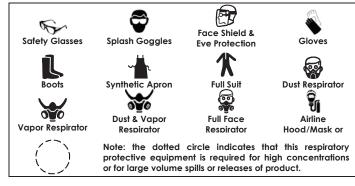
0	Minimal Hazard
1	Slight Hazard
2	Moderate Hazard
3	Severe Hazard
4	Extreme Hazard



#### PERSONAL PROTECTION RATINGS:

A	S			
В	S			
С	B	1	~	
D			~	
D E	<b>⊕</b>			





# FLAMMABILITY LIMITS IN AIR:

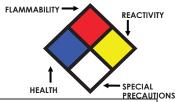
Autoignition Temperature	Minimum temperature required to initiate combustion in air with no other source of ignition
LEL	Lower Explosive Limit - lowest percent of vapor in air, by volume, that will explode or ignite in the presence of an ignition source
UEL	Upper Explosive Limit - highest percent of vapor in air, by volume, that will explode or ignite in the presence of an ignition source.

## OTHER STANDARD ABBREVIATIONS:

NA	Not Available
NR	No Results
NE	Not Established
ND	Not Determined
ML	Maximum Limit
SCBA	Self-Contained Breathing Apparatus

#### NATIONAL FIRE PROTECTION ASSOCIATION: NFPA **HAZARD RATINGS:**

Minimal Hazard
Slight Hazard
Moderate Hazard
Severe Hazard
Extreme Hazard
Acidic
Alkaline
Corrosive
Use No Water
Oxidizer



## TOXICOLOGICAL INFORMATION:

PRECAUL						
Lethal Dose (solids & liquids) which kills 50% of the exposed animals s						
Lethal concentration (gases) which kills 50% of the exposed animal						
Concentration expressed in parts of material per million parts						
Lowest dose to cause a symptom						
Lowest concentration to cause a symptom						
Lowest dose (or concentration) to cause lethal or toxic						
effects						
International Agency for Research on Cancer						
National Toxicology Program						
Registry of Toxic Effects of Chemical Substances						
Bioconcentration Factor						
Median threshold limit						
Coefficient of Oil/Water Distribution						

## REGULATORY INFORMATION:

WHMIS	Canadian Workplace Hazardous Material Information System
DOT	U.S. Department of Transportation
TC	Transport Canada
EPA	U.S. Environmental Protection Agency
DSL	Canadian Domestic Substance List
NDSL	Canadian Non-Domestic Substance List
PSL	Canadian Priority Substances List
TSCA	U.S. Toxic Substance Control Act
EU	European Union (European Union Directive 67/548/EEC)
CPR	Canada's Controlled Product Regulations

## EC INFORMATION:

		*	*		<b>&amp;</b>	X	X
С	Е	F	N	0	T+	Xi	Xn
Corrosive	Explosive	Flammable	Harmful	Oxidizing	Toxic	Irritant	Harmful

## WHMIS INFORMATION:

$\oslash$		(8)		(Ţ)	<b>®</b>		
Α	В	С	D1	D2	D3	E	F
Compressed	Flammable	Oxidizing	Toxic	Irritation	Infectious	Corrosive	Reactive

St. Micha Inspired Care Inspiring Scie

# **Recommended Products**

CATEGORY	OPTION(S)					
Facial Care	Cleanser	Moisturizer				
2000	Cetaphil Gentle Skin Cleanser	Cetaphil Daily Facial Moisturizer				
19	CeraVe Hydrating Cleanser	CeraVe Moisturizing Cream				
1.	Dove for Sensitive Skin (bar)	CeraVe Moisturizing Lotion				
	Cliniderm Gentle Cleanser	Cliniderm Soothing Cream				
	Spectro Derm Cleanser	Toleriane Soothing Protective Skin Cre				
Hand & Body Moisturizer	Cetaphil Moisturizing Cream					
•	Cetaphil Moisturizing Lotion					
	Cetaphil Restoraderm					
	Cliniderm Soothing Cream					
	Vaseline Creamy for Problem Skin					
	Lipikar Baume (La Roche Posay)					
	CeraVe Moisturizing Cream					
	CeraVe Moisturizing Lotion					
Soap	Dove for Sensitive Skin (bar)					
Hand Care	Prevex					
at a	Cetaphil Barrier Cream					
	Cetaphil Restoraderm					
	CeraVe Moisturizing Cream					
Shampoo & Conditioner	Cliniderm Gentle Shampoo					
	Cliniderm Gentle Conditioner					
Detergent	Tide "Free"					
	Cheer "Free"					
	Ivory Snow					
Fabric Softener	DO NOT add fabric softener to water					
	Bounce "Free" sheets for dryer					

# The products on this list are specific - NO substitutions.

Occupational Health Services, Department of Occupational & Environmental Health  $4^{\rm th}$  Floor, Shuter Wing, 30 Bond Street

TORONTO, Ontario M5B 1W8

(tel): 416 864 5074 (fax): 416 864 5421

V:\Derm Stream\Education Material\Recommended products.doc

# **CONTACT DERMATITIS CLINIC General Hand Care Instructions**



Skin protection is very important. Minor irritation can cause skin conditions to flare even after your skin has healed.

These are general suggestions only. Your health care practitioner may have specific instructions for the care of your skin.

1.	Wash hands with lukewarm water using unscented and irritant-free soap or hand cleanser. You may want to remove rings when washing hands as soap caught under rings can cause dermatitis to flare.
2.	Rinse hands thoroughly and pat hands dry. Apply fragrance-free, non-irritating moisturizing cream to hands after washing
3.	Avoid skin contact with detergents, strong cleaning agents, shampoos, various waxes and polishes, solvents and thinners.
4.	Don't apply hair lotion, cream, gels or dyes with bare hands.
5.	Avoid skin contact with vegetables and fruits, especially raw onions and garlic.
6.	Use cotton-lined vinyl, or rubber gloves. Use thin cotton liners inside gloves to absorb perspiration.
7.	When coming into contact with dusty or dirty work, protect hands with cotton gloves.
8.	Protect your hands against the cold. Wear warm mitts or gloves at all times when in the cold. Even one minute of unprotected cold exposure may dry out hands. Be sure to ears gloves/mitts when handling a cold steering wheel.
9.	Use protective creams around your nails both before and after washing hands.
10.	If you need to use corticosteroid or other medicated creams, apply as directed by physician.

# Remember...

- AVOID (irritants, allergens),
- PROTECT (cotton lining, the right gloves); and
- CARE FOR YOUR HANDS (mild soap, fragrance/irritant-free moisturizing creams).

The clinic team may also provide you with specific tips if you have a skin allergy
If you have any questions, please ask

# **Sourcing Materials (CREOD and OCRC)**

# **Gloves**

## **SensiCare MEDLINE Gloves:**

St. Michael's Hospital (SMH) stores

Powder-Free Nitrile Exam Disposable Gloves: Small, Medium, Large

#### **Cotton Liners:**

Shoppers Drug Mart

• Worn under the disposable Nitrile Gloves: Small, Medium, Large

# Sol-Vex by Ansell Edmont Re-usable Rubber Gloves:

SMH stores

• Small, Medium, Large

# **Protective Creams (Pharmacy)**

# **Cetaphil Barrier Cream:**

• Fragrance-free, non-greasy, 85g tube

# **Healthcare Plus White Petroleum Jelly USP Ointment:**

• Fragrance-free, 40ml tubes (SMH stores)

# **CeraVe Moisturizing Cream:**

• Fragrance-free, 56.7g tube

# Aveeno Active Naturals Skin Relief Healing Ointment Advance Therapy:

• Fragrance-free, Petroleum skin protectant; 85g tube

# **Styroform and Acetone**

# White Styroform balls, bag of 10:

Art supply store

• 6 cm diameter, cut in 2 halves

## Plastic knife / knife:

• To cut the Styrofoam balls in half

## **Black Marker:**

 To divide or draw square compartments on surface of halved Styrofoam balls

## Acetone:

SMH Lab

# **Pipettes:**

SMH stores

OR

# **Droppers:**

Pharmacy-Shoppers

# **Glow Germ Black Box and Contents:**

# GermWise order online

- Lotion based simulated germs
- Power simulated germs 40z
- all glow under UV light
- Black UV bulb
- extension cord with light socket and plug

Paper Towels/ towel, if needed to clean water spill.





# **Skin Health Workshop: Materials Checklist**

Workshop Tracking Form	Sample cotton gloves
Pre-training surveys	Vasoline
Post-training feedback	Acetone
Sign-in sheet for honoraria	Barrier cream (tester)
Payment and envelopes	Styrofoam balls
Pens	Pipettes
Handout packages	Dish for Styrofoam
Laminated pages	Powder and gel
Glove kits (to give out)	Black light
Cream (to give out)	Extension cord
Bag of gloves for trainers (2 cotton pairs and 10 nitrile pairs)	





# Workshop: Protecting Your Hands at Work (Pre-training Survey) Implies the state of the state o

Please take a few minutes to complete this survey. Answering honestly will help us improve this workshop. *Your answers will be kept private and your name will not be used in any reports.* 

1. How long have you bee	en work	ing in a	nail salc	on in Cana	ada?	Thinking about the <i>last two weeks</i> of	
0-6 months		<b>3 3</b>		-			
☐ 6 months-1 year						5. How often did you wear protective gloves?	
☐ 1-2 years						Never	
2-5 years						☐ A few times	
5 years or more						☐ Most of the time	
						☐ All of the time	
2. Did you work in a nail	salon b	efore co	ming to	Canada?			
☐ Yes						6. What type of gloves did you use?	
□ No						Latex	
☐ If yes, for how many y	years?					☐ Nitrile	
						☐ Cotton	
3. How did you learn the	skills y	ou need	to be a r	nail techr	iician?	☐ I don't know	
(check all that apply)						☐ Not applicable (I didn't use gloves)	
☐ From my employer(s)	)						
☐ I took a course outsid	le of wor	k				7. How often did you wear cotton gloves under protective gloves?	
☐ I taught myself						protective gloves:	
Other:						Never	
						☐ A few times	
4. From your perspective	, how in	nportant	is to it t	o protect	your	☐ Most of the time	
skin using						☐ All of the time	
		Circ	e your a	nswer		☐ Not applicable (I didn't use protective gloves	
	Not at a	II importan		Very im	portant	8. How often did you wash your hands?	
Protective gloves	1	2	3	4	5	☐ Never	
						Once a day	
Cotton gloves under your protective gloves	1	2	3	4	5	2-5 times a day	
your protective gloves						5-10 times a day	
Hand cream	1	2	3	4	5	☐ 10 times a day or more	
						9. How often did you apply hand cream to your	
						☐ Never	
						Once a day	
						2-5 times a day	
						5-10 times a day	
						☐ 10 times a day or mor	



# Workshop: Protecting Your Hands at Work (Follow-up Survey) III W

Please take a few minutes to complete this survey. Answering honestly will help us improve this workshop. *Your answers will be kept private and your name will not be used in any reports.* 

<ol> <li>Since the peer train workshops or cours</li> </ol>	_		-		_	
Yes						
□ No						
If yes, for how many years?						
<ol><li>From your perspect skin using</li></ol>	From your perspective, how important is to it to protect your skin using					
		Cina				
	Not at al	Circ I importan	le your ar t	1swer Very im	portant	
Protective gloves	1	2	3	4	5	
Cotton gloves unde	r					
your protective glov	/	2	3	4	5	
Hand cream	1	2	3	4	5	
	I					
hinking about th	e <i>last tw</i> e	o week	<u>s</u> of wo	ork		
	wear protec	tive glov	ves?			
. How often did you v	•	_				
_						
Never						
☐ Never ☐ A few times						
☐ Never ☐ A few times ☐ Most of the time						
☐ Never ☐ A few times						
<ul><li>Never</li><li>A few times</li><li>Most of the time</li><li>All of the time</li></ul>	s did you us	e?				
☐ Never ☐ A few times ☐ Most of the time ☐ All of the time	s did you us	e?				
☐ Never ☐ A few times ☐ Most of the time ☐ All of the time ☐ What type of gloves	s did you us	e?				
<ul><li>Never</li><li>A few times</li><li>Most of the time</li><li>All of the time</li><li>What type of gloves</li><li>Latex</li></ul>	s did you us	e?				
A few times  Most of the time All of the time  H. What type of gloves  Latex Nitrile	s did you us	e?				



Please flip over >

9. Is	there anything that prevented you from using hand cream?
	It is not readily available
	It is too expensive
	It does not help protect my hands
	The customers don't like it
	It is uncomfortable (or painful)
	I don't have time
	None of the above
	Other (please specify):
Thir	nking about the training
10.	Because of the training, I have started to:
11.	Because of the training, I have stopped:
12.	It is difficult for me to apply what I learned at the training to my job because:
13.	Is there anything the health centre could do to make it easier for you to do these things?

Thank you for taking this survey!

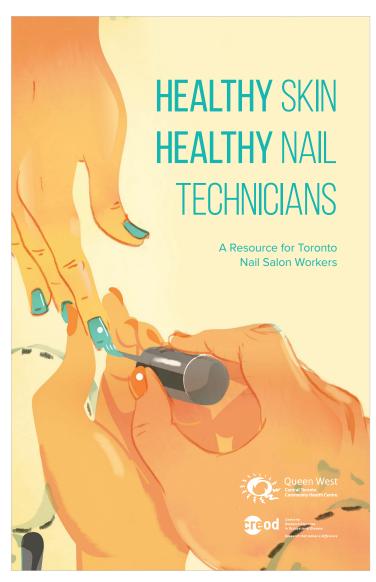


# Skin Health Resource CHIVI

# Healthy Skin Healthy Nail Technicians - A Resource for Toronto Nail Salon Workers

# This booklet (8 pages) is available online in English, Chinese and Vietnamese at www.pqwchc.org/nails

This booklet identifies ways that working in a nail salon can affect the health of someone's skin and ways to protect against these risks. The last page lists where to get more help and information.



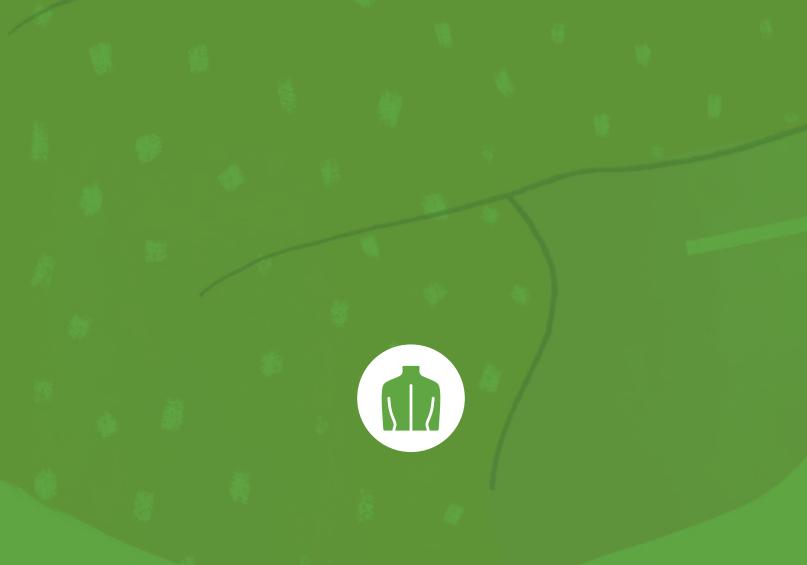






Selection from Healthy Skin Healthy Nail Technicians resource show







### **Ergonomic Health - Training Module**

# Problems Related to Physical Aches and Pains (also known as "Musculoskeletal")

Musculoskeletal = affecting the muscles, bones, ligaments and tendons in the body

How we work and move within our work influences our health and how we feel.

Begin workshop with a "body scan" exercise:

- outline of human body (see **Body Scan Activity** handout)
- ask participants to put red dots (stickers to be handed out) on the areas where they have experienced any problems/pain (clarify that this is about muscles, joints, not respiratory, skin, etc.)
- review the areas where there are clusters of dots as a way to prepare the group for what the workshop is about
- Sample questions:
  - Why do you think there are a lot of dots here? (e.g. neck)
  - What kinds of things do you do to deal with those aches and pains?
  - What other things do you do to keep yourself healthy?

Working as a nail technician can create a number of aches and pains in the body due to the repetitive nature of the work (buffing, filing, polishing, etc.) and also from having to lean or bend over your work area for long periods of time. Nail technicians may also experience pain from having to rest their hands, wrists, forearms and elbows on hard surfaces or edges of tables for long periods while working. They may feel the pain in the hands, wrists, arms, back, shoulders and neck.

There are a number of things nail technicians can do to lessen these problems, offered in the suggestions that follow. It is also important to know when someone needs to consult a doctor or other health professional if problems become too severe.

Sometimes, especially if we are young, we don't realize that small pains today can become injuries or chronic pain later and may prevent us from being able to work at all.

When we focus on **prevention**, we can avoid a future of chronic pain.

Possible question to the group:

- Why is it important to take care of our bones, muscles and ligaments?
  - improves sleep
  - job functioning
  - our daily tasks and the many responsibilities we have in life
  - treatment and early prevention is easier than treating an injury
  - risks associated with chronic pain (limited ability in other parts of life, strain on mental health, job loss)

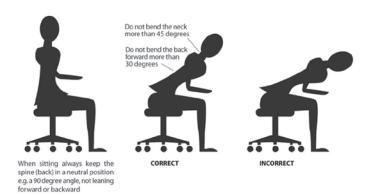
Whenever it is possible to work following these tips, there will be less strain and harm to the body. (Emphasize that not everyone can afford the time or have the resources to do all of these, but the more they can do, the better!)

1. **Use an adjustable chair with good back support.** Make sure your feet are flat on the floor; if your feet do not touch the floor, use a footrest. A back rest (e.g.Obusforme) can also be helpful if your chair provides little or no support.



(Activity: have one participant sit in the chair they use and brainstorm ways to make it better, point out some of the concerns and improvements)

2. While working, keep your head upright and your shoulders relaxed. Do not bend the neck more than 45 degrees and do not bend the back more than 30 degrees. In other words, try to keep your neck and your back upright as much as possible.



 ${\it Image taken from: files.nailsmag.com/Handouts/INTA\_NMC\_ErgonomicBasics.pdf}$ 

 Make sure there is enough space between the back of your knees and the front edge of your seat. This improves blood flow to the legs. Do not cross your legs or sit sideways in your chair.

- 4. Raise the client's hand or foot up to you (using a cushion underneath if necessary) so that you do not have to bend over as much. When lifting the client's foot, keep it as close to your body as possible. The further away the client's foot or hand is from you, the more this causes your muscles to strain. (Activity: try holding a heavy object with arms straight out, away from the body, vs. holding the heavy object close to your body. Notice the tension in the shoulders and back)
- 5. **Use good lighting** that you can adjust so that you do not have to strain your eyes or bend over to see well.
- 6. **Use safety glasses** to protect your eyes from dust from filings. Some have a built-in magnifier so that you do not need to strain or bend over to see well. Blink your eyes frequently to keep them moist or use moisturizing drops in your eyes to prevent eye fatigue and to flush them out. (You will receive safety glasses for each of the workshop participants. If salons want to purchase more of their own, a good variety of styles are available at Grand and Toy, Uline, Home Depot and Canadian Tire ~\$2.50/pair.)

If eyes are sore from strain, eye drops that add more tears to the eyes can be helpful. Many varieties are available at pharmacies: Visine, Natural Tears, Clear Eyes, etc. (Samples of eye drops will be provided to pass around during workshop, for looking only. These are NOT to be shared.)

- 7. Put a towel or foam pad on the edge of the table to soften the impact on your hands, wrists, forearms and elbows. Keep your hands and wrists as straight as possible while working, not bent or twisted sideways. (You will receive a small towel to use as a sample in your workshops and to give as a gift for each participant; practice making adjustments to a participant's position.)
- 8. **Use the tools that you find easiest to hold.** This may mean adding soft pads on handles to make them easier to hold. (If purchasing your own, these are often called "ergonomic nail technicians' tools". You can view some samples here: www. nailsmag.com/list/topic/ergonomic-products).
- 9. **Take frequent breaks.** When taking a break, practice "tense and release" exercises (e.g. shoulder shrugs), looking up, head side-to-side, shoulder rolls, shaking out hands and wrists. These can be done during your work and between customers.
- 10. Change your position often and move around to prevent cramping and pain. When you have to work fast, the body can tense up which can cause cramping and muscle pain. Be aware of these times and try to change your position often.
- 11. The vibration caused by electric files can contribute to injury when you use them repeatedly. Be sure to take rest breaks often when using electric files.

12. Always do stretching exercises between clients. See in <u>Stretches for Nail Technicians</u> CH W handout for some examples of stretches that are particularly important for nail technicians. (Let the workshop participants know that a poster with exercises is also available for their salon.)

You can also encourage workshop participants to give each other *gentle* neck massages when they have time between clients. Here's an example: www.youtube.com/watch?v=ZtunJBzLFcs

# How to know when you need to consult a doctor or other health professional.

Following the tips above will help to *prevent* on-going problems. A regular exercise routine that helps to build core strength will also help. But it is important not to ignore any on-going pain. Be sure to encourage nail technicians to consult a health professional (such as a doctor or a nurse practitioner) if they experience any of the following:

- 1. Continued pain that makes it difficult or impossible to work or sleep;
- 2. Any numbness or tingling, in any part of the body, that does not go away;
- 3. Weakness in any muscles or a change in sensation;
- 4. Regular headaches or eye pain.

Offer the connection to the Community Health Centre if participants need a health professional. The Intake worker is aware of this project and can help find the appropriate CHC or book an appointment to come in.

Everyone benefits when salon employees feel well and enjoy their work. A nail technician's work should not make them sick or cause pain. Salon employers should be actively engaged in making the salon environment healthy for employees.







# **Ergonomic Health Sample Workshop** w



• WHEN WE FOCUS ON PREVENTION, WE CAN AVOID A FUTURE OF CHRONIC PAIN. (NÉU CHÚNG TA PHÒNG BỆNH TỐT THÌ CHÚNG TA SẼ TRÁNH ĐƯỢC NHỮNG CƠN ĐAU MẪN TÍNH XẢY RA TRONG TƯƠNG LAI)

- WHAT KINDS OF THINGS DO YOU DO TO DEAL WITH THOSE ACHES AND PAINS? (BẠN LÀM GÌ KHI BỊ ĐAU NHỨC CƠ THỂ?)
- WHY IS IT IMPORTANT TO TAKE CARE OF OUR BONES, MUSCLES AND LIGAMENTS? (TẠI SAO CHÚNG TA PHẢI CHẮM SÓC TỐT CƠ, XƯƠNG, KHỚP HAY DÂY CHẮNG CỦA CHÚNG TA?)

### SOME HELPFUL TIPS (MỘT SỐ LỜI KHUYÊN HỮU ÍCH)



- 1. ABOUT THE CHAIR : ADJUSTABLE
  CHAIR WITH GOOD BACK SUPPORT
  (GHÉ PHẢI ĐIỀU CHỈNH ĐƯỢC VÀ
  CÓ LƯNG DỰA)
- ... MAKE SURE YOUR FEET ARE FLAT ON
  THE FLOOR (PHẢI ĐẢM BẢO
  CHÂN BẠN ĐƯỢC CHAM SÀN)



IMPROVE BLOOD FLOW TO THE LEG: ENOUGH SPACE BETWEEN THE BACK OF YOUR KNEES AND THE FRONT EDGE OF YOUR SEAT, DO NOT CROSS LEGS OR SIT SIDEWAYS ON THE CHAIR (ĐẢM BẢO SỰ LƯU THÔNG MÁU Ở CHÂN: CHỬA KHOẢNG CÁCH CHO MẶT SAU CỦA KHỚP GỐI VÀ GHẾ, KHÔNG BẮT CHÉO CHÂN HOẶC NGỖI LỆCH 1 BÊN GHẾ)

• POSITIONING WITH YOUR HANDS, WRISTS, FOREARMS AND ELBOWS: USE TOWEL OR FOAM PAD... KEEP STRAIGHT, DO NOT BEND OR TWIST SIDEWAYS (VỊ TRÍ CỦA TAY, CỔ TAY, CẢNH TAY VÀ CÙI CHỎ: CÓ THỂ DÙNG KHẮN LÔNG, ĐỆM... GIỮ THẮNG, KHÔNG BỂ GẬP HOẮC XOẮN QUỆO 1 BÊN)

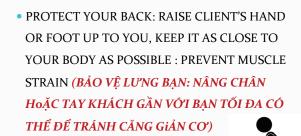
- USE TOOLS THAT YOU FIND EASIEST TO HOLD (DÙNG NHỮNG DỤNG CỤ DỄ CẦM)
- REST YOUR HANDS OFTEN WHEN USING ELECTRICAL FILES WHICH VIBRATE (THƯỜNG XUYÊN NGHĨ GIẢI LAO NẾU SỬ DỤNG NHỮNG THIẾT BỊ ĐIỆN NHƯ MÁY CÓ TẦN SỐ RUNG)



- PROTECT YOUR EYES: USE GOOD LIGHT, SAFETY GLASSES, EYES DROP (BẢO VỆ ĐÔI MẮT CỦA BẠN: DÙNG ÁNH SÁNG ĐÈN TỐT, KÍNH BẢO HỘ, THUỐC NHỎ MẮT)
- CHANGE YOUR POSITION OFTEN AND MOVE AROUND TO PREVENT CRAMPING AND PAIN (THƯ "ONG XUYÊN THAY ĐỔI TƯ THẾ HOẶC DI CHUYỂN XUNG QUANH ĐỂ TRÁNH TÌNH TRẠNG BỊ ĐAU VÀ CHUỘT RÚT)

WHEN DO YOU NEED TO SEE A DOCTOR OR HEALTH
PROFESSIONAL?(KHI NÀO THÌ CẦN ĐI ĐẾN GẶP BÁC SĨ?)

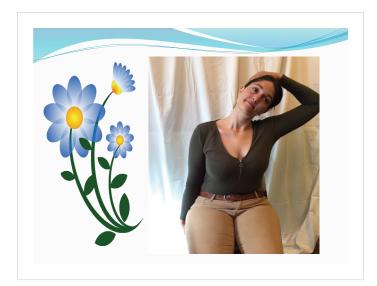
- ANY PAIN: THAT MAKES IT DIFFICULT TO WORK OR SLEEP (ĐAU LÀM KHÓ NGỦ HOẶC KHÔNG LÀM VIỆC ĐƯỢC)
- NUMBNESS OR TINGLING THAT DO NOT GC
   GIÁC TÊ KHÔNG HÉT)

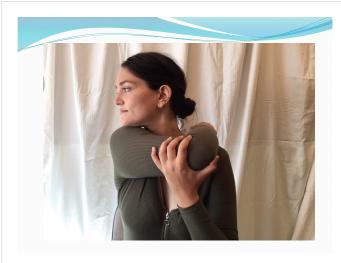


• POSITION OF HEAD AND SHOULDERS: KEEP
HEAD UPBRIGHT, SHOULDERS RELAXED. DO
NOT BEND THE NECK MORE THAN 45 DEGREES.
DO NOT BEND BACK MORE THAN 30 DEGREES (V!
TRÍ CỦA ĐẦU VÀ VAI : GIỮ ĐẦU THẮNG, VAI
THƯ GIẢN. KHÔNG GẬP CỔ HƠN 45 ĐỘ, KHÔNG
GẬP LƯNG HƠN 30 ĐỘ)

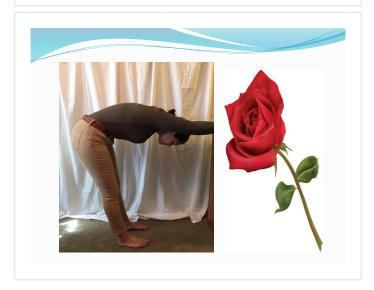
- WEAKNESS IN A MUSCLE OR GROUP OF MUSCLES (YÉU 1 CO' HoĂC 1 NHÓM CO')
- A DIFFERENCE IN SENSATION (CÂM GIÁC KHÁC BIÊT)
- REGULAR HEADACHES (NHÚ'C ĐẦU THƯỜNG XUYÊN)

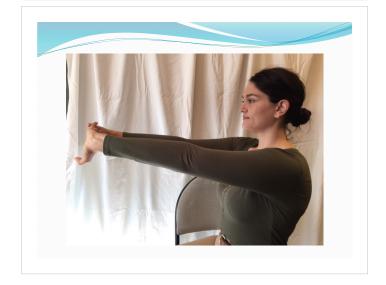
















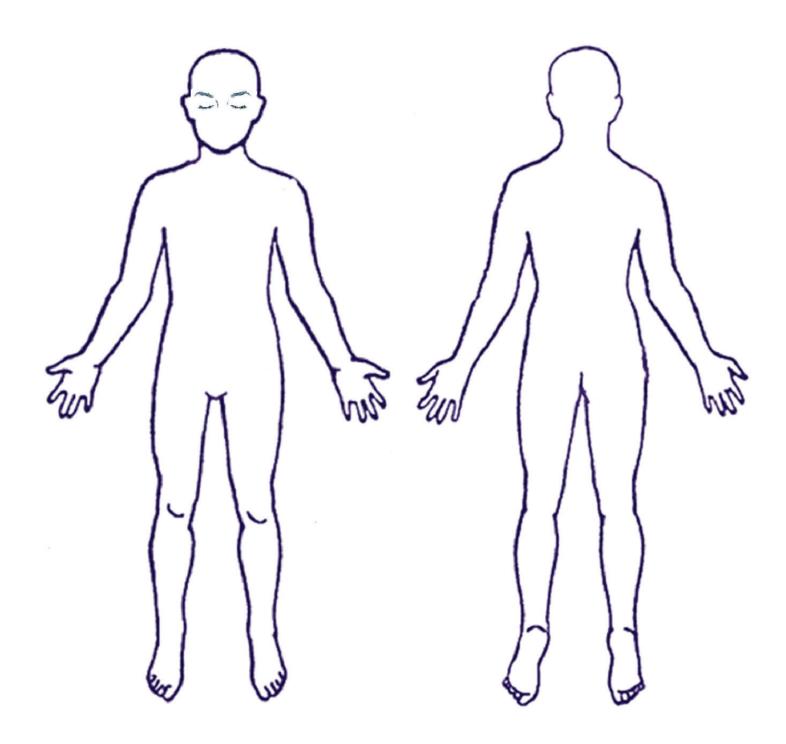








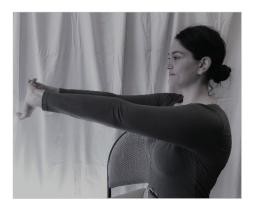
# **Body Scan Activity**





# **Stretches for Nail Technicians**

### For each exercise hold stretch for at least ten seconds and breathe slowly.



**Shoulders** 

Lace your fingers and stretch your arms with your palms facing out at shoulder height.



Wrists 1

With arm outstretched pull hand toward you, palm facing inward.



Wrists 2

With arm outstretched pull hand toward you, palm facing outward.



**Shoulders and Upper Back** 

Keeping your shoulders down and relaxed, put one hand on your opposite shoulder and look the other way. Pull your elbow in and up with the other hand. Repeat on other side.



**Lower Back and Hips** 

Lean forward keeping your neck relaxed and your head down.



### For each exercise hold stretch for at least ten seconds and breathe slowly.



Neck 1
Hold on to the side of the chair with one hand. Put the other hand over your head onto the opposite ear. Bend your head sideways, bringing your ear

towards your shoulder.



Neck 2
Keeping your arms and shoulders loose and your head facing straight forward, tuck your chin.



**Back of Legs**Place your hands shoulder width apart on a wall or table. With legs straight but not locked, keep hips directly above your feet and lower head between arms.



Fingers 1
Stretch your fingers apart, hold for 10 seconds and then relax.



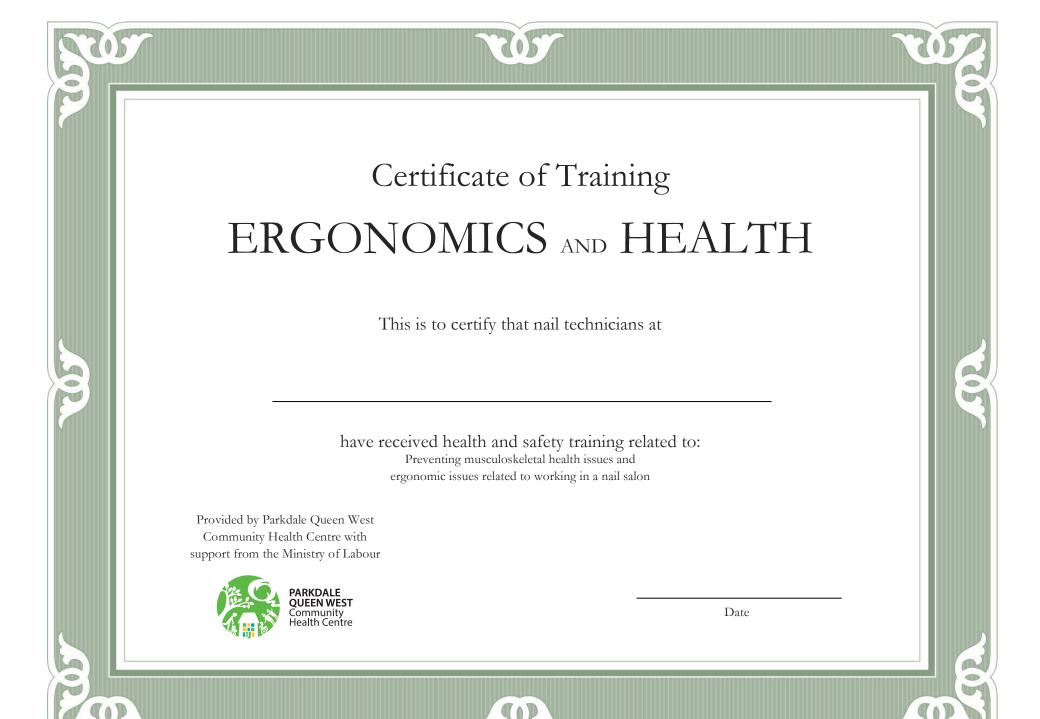
Fingers 2
Make a claw with your hands and fingers, hold for 10 seconds then relax.



# **Ergonomics Health Workshop: Materials Checklist**

Pre-training surveys	Towels
Workshop Tracking Form	Eye drops samples
Certificate + frame	Body Scan Activity page
Peer sign-off honoraria	Red stickers
Sign-in sheet for honoraria	Stretch handout
Honoraria + envelopes	Back rest and posture images
Pens	Resources list handout
Safety glasses	PQWCHC intake cards





# Workshop: Physical Aches and Pains (Pre-training Survey) III

We want to know whether or not these workshops help nail technicians make positive changes at work. This survey asks questions about how you work. In one month, we will ask you to complete this survey again to see if there were any changes. There are no right or wrong answers, so please answer as honestly as possible. **Your answers will be kept private and confidential.** These surveys will help us to improve the workshops.

An owner of the nail salon?					
☐ A nail technician?					
☐ Both?					
Under, please specify:					
This question asks you about your workplace practices. Thinking about the $\underline{\textit{last}}$	2 weeks of	work:			
How often did you:	Ciı	rcle the a	nswer that	applies to	you
Perform stretching exercises between clients?	1 Never	2 Abo	3 out half the	4 time	5 Always
Make sure to shift positions to release muscle tension when working with each client?	1 Never	2 Abo	3 out half the	4 time	5 Always
Use a towel or foam pad on the edge of the table to soften the impact on your hands, wrists, forearms and elbows?	1 Never	2 Abo	3 out half the	4 time	5 Always
Use safety glasses to protect your eyes while filing nails?	1 Never	2 Abo	3 out half the	4 time	5 Always
Have you ever thought about how working in the nail salon might affect your join	nts or muscle	es?			
☐ No, it's not really a concern for me					
☐ No, but I'm interested in learning more					
☐ Yes, but I have not acted on my concerns					
Yes, and I've taken action to reduce risks					
☐ I don't know					
Please explain:					



# Workshop: Physical Aches and Pains (Follow-up Survey) @ W

We want to know if these workshops help nail technicians make positive changes at work. This survey asks questions about how you work before and after the workshop. There are no right or wrong answers, so please answer as honestly as possible. **Your answers will be kept private and confidential.** These surveys will help us improve the workshops.

1.	Please tell us about your current position at the nail salon. Are you:
	☐ An owner of the nail salon?
	☐ A nail technician?
	□ Both?
	Other, please specify:

2. This question asks you about your workplace practices before and after the workshop.

_	about the <u>2 weeks before</u> the workshop le the answer that applies to you	How often did you	Thinking about the <i>last 2 weeks of work</i> , circle the answer that applies to you		
1 Never	2 3 4 5 About half the time Always	Perform stretching exercises between clients?	1 2 3 4 5 Never About half the time Always		
1 Never	2 3 4 5 About half the time Always	Make sure to shift positions to release muscle tension when working with each client?	1 2 3 4 5  Never About half the time Always		
1 Never	2 3 4 5 About half the time Always	Use a towel or foam pad on the edge of the table to soften the impact on your hands, wrists, forearms and elbows?	1 2 3 4 5 Never About half the time Always		
1 Never	2 3 4 5 About half the time Always	Use safety glasses to protect your eyes while filing nails?	1 2 3 4 5 Never About half the time Always		

3.	Since the	workshop, l	have	become	more	aware of	f my	posture	at work	۲.
----	-----------	-------------	------	--------	------	----------	------	---------	---------	----

☐ Somewhat
☐ No, not really

Please flip over >



4.	Since the workshop, I have taken steps to improve my posture at work.
	☐ Yes
	□ No
	Please explain:
5.	What's the most important thing you learned from the workshop?
6.	What's the most important change you've made because of participating in the workshop?
7.	Did the workshop change the way you think about your muscle or joint health?
	☐ Yes
	□ No
	Please explain:

Thank you for taking this survey!

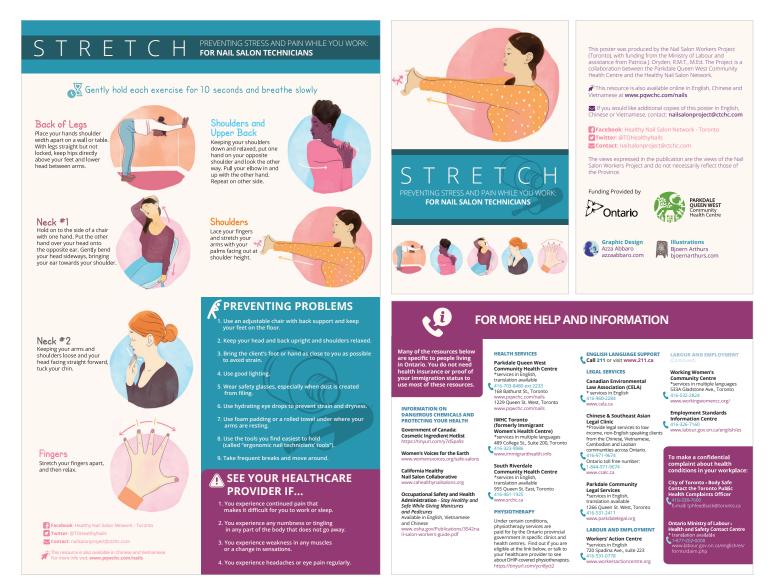


# **Ergonomic Health Resource CH W**

### STRETCH - Preventing Stress and Pain While You Work: For Nail Salon Technicians

#### This poster (unfolds to 11x17) is available online in English, Chinese and Vietnamese at www.pqwchc.org/nails

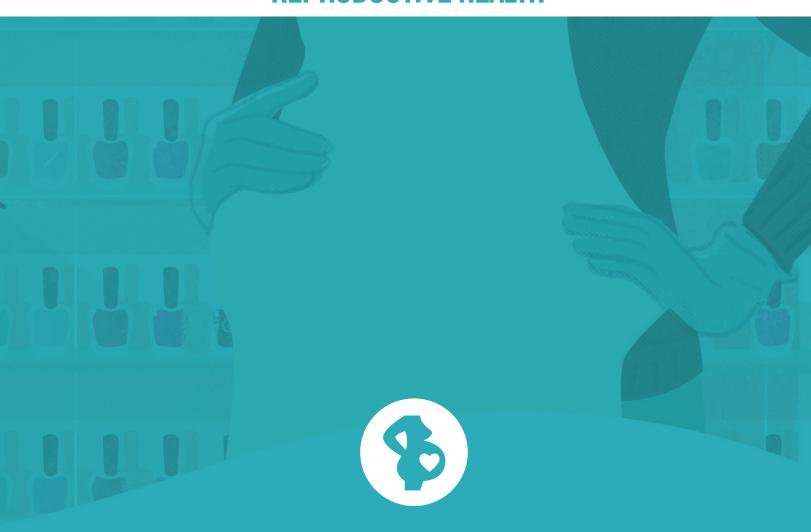
This poster illustrates some stretching exercises specifically for nail technicians. It explains simple ways to help prevent ergonomic problems from occurring. The reverse side provides information about where to get help and more information.



Stretch - Preventing Stress and Pain While You Work: For Nail Salon Technicians



# **REPRODUCTIVE HEALTH**





### **Reproductive Health – Training Module**

#### **Reproductive Health**

This module included more sensitive information than the others. As a result, we hired a sexual health educator to create the content and deliver in-depth the training to peers. The peers had multiple sessions of training with this educator. We realize that it may not be possible to replicate this, and have therefore attempted to consolidate the key pieces into this training module for others to use without the external supports. You will see that the module content continues to be broken down into multiple sessions. Thank you to Lyba Spring for your contributions to this training module.

Reproductive health is an important aspect of health promotion training for nail technicians because there are problems from prolonged exposure to the chemicals in nail salons both pre and post-conception. These include: spontaneous abortions, low birth-weight babies, and postpartum hemorrhage<sup>1</sup>. In newborn babies the risks include: higher rates of birth defects, male genital malformations, and poor neuro-cognitive function<sup>2</sup>.

### **Session I Understanding Sexual Health**

#### Sexual Health

Why is sexual health training relevant for this work?

- Talking about reproductive health is tied to our broader beliefs and understanding of sexual health. This can be a sensitive topic, and there may be a range of comfort levels and beliefs/values within the group being trained and the groups of nail technicians that will receive the workshops. It's important to approach this work with the understanding that these differences exist (eg. using birth control, abortion).
- As part of taking care of our reproductive health, a key understanding is for people to know that they can make decisions about their own sexual health, and their own reproduction.
- This training provides some basic information about anatomy, fertility, pregnancy, birth control, and abortion as they relate to our reproductive health.

#### Getting to know each other

Given the sensitive nature of this topic, it may be helpful to put some time into knowing more about where each person is coming from. These are some examples of questions and activities to generate discussion and understanding:

• What is your personal interest in doing this peer education?

- How many of you...
  - were told by your family where babies come from
  - learned about sexuality at school
  - are raising or have raised children
  - feel strongly that people have a right to know how their bodies work
- In the family you grew up in...
  - What names were used for your body parts?
  - What was the attitude toward nudity? sexual orientation? gender roles?
  - Debrief:
    - i. Names of parts: we will need to use dictionary terms but peers may not have learned these terms in their language
    - ii. Nudity: health care providers need to examine their patients; can be embarrassing and intrusive; this is part of a preventative care model and routine health care in Ontario
    - iii. Orientation and gender roles: nail salon workers will have a variety of sexual orientations and gender identities; need to use inclusive language and demonstrate acceptance of a variety of orientations and genders
- What is a sexually healthy person? (Brainstorm)
  - WHO definition: Sexual health is a state of physical, mental and social well-being in relation to sexuality. It requires a positive and respectful approach to sexuality and sexual relationships, as well as the possibility of having pleasurable and safe sexual experiences, free of coercion, discrimination and violence.

# Session II Reproductive Health: Fertility, Pregnancy, and Birth Control

#### **Anatomy, Fertility and Conception**

In order to talk about reproductive health, we need to understand a bit about reproduction. We include a very brief section on our reproductive organs, fertility, and conception.

Pregnancy can be a very sensitive topic and it's important to consider the feelings that may come up during this content. Some people in the group may have had experiences trying to get pregnant or losing a pregnancy that make this a difficult issue to talk about. One idea is to give people the option of sharing or writing down a feeling or concern before beginning the session. Acknowledging that this is a sensitive topic may also be enough, and giving everyone permission to participate however best suits them.

<sup>&</sup>lt;sup>1</sup> Herdt-Losavio ML, Lin S, Druschel CM, Hwang SA, Mauer MP, Carlson GA. (2009). The risk of having a low birth weight or preterm infant among cosmetologists in New York State. *Maternal Child Health Journal*, 13(1): 90-97.

<sup>&</sup>lt;sup>2</sup> Garlantezec R., Monfort C., Rouget F., Cordier S. (2009). Maternal occupational exposure to solvents and congenital malformations: A prospective study in the general population. *Occupational and Environmental Medicine*, 66: 456-463.

- Anatomy: to start, have everyone look at and label very basic anatomy diagrams. The facilitator can do a basic sketch or there are diagrams in the *Reproductive Organs* handout.
- Fertility, in very basic terms:
  - The menstrual cycle affects a person's fertility. Look at a diagram
    of the menstrual cycle (example given in <u>Fertility Cycle Diagram</u>
    handout) and discuss the cycle in terms of fertility, looking at
    changes in cervical mucus and ovulation.
  - In a 21-day cycle, the most fertile days are 2 10; 28-day cycle, most fertile days are 9 17; 36-day cycle, most fertile days are 17 25;).
  - People can find fertility calculators online that can be tailored based on length of their menstrual cycle and have more detailed information about finding their most fertile days. The key point here is that there are times in a menstrual cycle that a person is more or less fertile, and this is important to know when trying or trying not to get pregnant.
  - There are many reasons why some people have difficulty getting pregnant. Factors include, but are not limited to:
    - ovulation
    - fallopian tube and uterus functioning
    - sperm quality
    - overall health and behaviour (diet, exercise, smoking, alcohol, drugs)
    - environmental and workplace exposures we don't fully know the impact of some chemicals, but there are some that are of concern (addressed in Section III: Toxins, potential risks, and reducing the risks at work section below.
- Conception and implantation, in very basic terms:
  - If someone wants to get pregnant, they will have unprotected intercourse during the time an ovum ("egg") is present (ie. when you are fertile).
  - When one ovary releases an ovum (this process is called "ovulation") the fringed ends of the fallopian tube on that side draw the ovum inside the tube.
  - Fertile mucus produced by the cervix allows sperm to live in it up to five days. After ejaculation of semen in the vagina, some sperm will die immediately. The mucus helps other sperm to swim through the cervix into the uterus. Some swim to the tube where there is no ovum. Those sperm will die. Some sperm reach the ovum in the other tube. The ovum accepts one sperm.
  - The nucleus of the sperm unites with the nucleus of the ovum. This is conception. The fertilized cell now divides into two identical cells, then four, eight, sixteen etc. all the while moving in the direction of the uterus. A lining of blood and tissue has been building up in the uterus. If this group of cells is able to attach to the lining, the person is now pregnant.

Planning a healthy pregnancy

Begin with a discussion about what people already know about planning a healthy pregnancy. For example, "What kinds of things might you want to consider before getting pregnant to increase the chance of a healthy pregnancy and healthy baby?"

For someone looking to get pregnant:

- Adapt healthy behaviours if you haven't already: prenatal vitamins, no smoking, no alcohol, no other substances, no new Sexually Transmitted Infections
- see your health care provider
- review current medications, supplements, etc. with your health care provider
- avoiding toxins in the workplace

#### For healthy sperm:

- better chance with healthy weight, not smoking, no exposure to workplace toxins, limiting their alcohol and caffeine intake and reviewing medications
- keep testicles cool: heat can damage sperm production;
   e.g., reduce laptops use on their laps, wear boxer shorts
- avoid toxins in the workplace

#### General:

- Speak with your health care provider if you are planning to get pregnant
- pregnancy does not necessarily happen on the first few tries
- if pregnancy does not happen after a year of trying, consult fertility specialist
- See fertility resources at the back of the <u>Reducing Risks to</u> <u>Reproductive Health</u> booklet CH VN
- General information of importance about pregnancy and birth
  - If you are pregnant or think you are pregnant, schedule a visit with your health care provider. You have options for your care during pregnancy: your regular health care provider (e.g. family physician or general practitioner, an obstetrician (specialized health care for pregnancy and birth), a midwife (specialized health care for pregnancy and birth); these are all insured services in Ontario.
  - Regular prenatal care is important; your health care provider does tests to check for good maternal/fetal health; you may also want to take prenatal classes organized by public health units, community health centres, midwifery practices, hospitals.
  - The fetus is at its most vulnerable period for development in the first three months of pregnancy because new growth is happening at such a rapid rate. This is the time when the fetus is most susceptible to damage from chemical exposures, smoking, alcohol, and certain illnesses.

One in five pregnancies ends in miscarriage. Sometimes it is because the fetus is not growing as it should. People often blame themselves, or feel shame, not realizing how common this loss can be and need to take time to grieve and heal before deciding if they want to try again. Talking about your feelings with a trained person after a miscarriage can be helpful.

NOTE: in tackling these huge topics in a very superficial way, it's important to remind the peers about what the goal is for the training and the workshops. In the end, we are seeking to provide suggestions to nail technicians about reducing their risk in the workplace. Peers are not expected to be counsellors and should NOT give medical or fertility advice to participants. This is really just background knowledge for their own understanding and to be able to explain some of the basics. Peers should be encouraged to always refer to a trained health care provider when presented with questions of a medical nature.

#### **Birth Control and Contraception**

People have access to various birth control methods, and we have a right to choose whether we want to become pregnant, and whether we want to continue a pregnancy.

Choosing a birth control method is beyond the scope of the workshops in nail salons, but it could be useful for the peers to have a basic understanding of the variety of methods that are available and some of the pros and cons that exist. People should be encouraged to speak with their health care provider or a sexual health clinic about choosing the birth control method that is right for them (see resources in the back of the *Reducing Risks to Reproductive Health* booklet [CH] [W].

Handout – Comparative Summary of Available Birth
Control Methods

There are various birth control method summaries online. We chose this one because it is relatively comprehensive and we like the chart layout. It doesn't explain the effectiveness rate of optimal vs. typical use. The effectiveness rate that is listed is based on typical use.

People have access to various birth control methods, and we have a right to choose whether we want to become pregnant, and whether we want to continue a pregnancy.



- There are considerations to be made for each method:
  - statistics about optimal vs. typical use
  - advantages and disadvantages
  - side effects and risks
  - suitability for individual people (medical and lifestyle)
  - availability and cost issues
  - risks/protection vs. STIs
- Understanding fertility (discussed above) can help in planning a pregnancy
- Abortion can be a difficult topic for people. Regardless of individuals' views, here are the key messages we believe to be an important part of a discussion about birth control and contraception:
  - Abortion is legal in Canada
  - It is a medical procedure
  - The person can be encouraged to access non-judgmental counselling, or talk to their health care provider
  - It is safe and accessible in Ontario municipalities

Connecting people with resources included in the *Reducing Risks to Reproductive Health* booklet **CH W** is one of the ways that we can support people in making the decision that is best for them.

- · Optional discussion questions could include:
  - Is abortion available in your home country? Do people talk about it? What kinds of attitudes do they have towards abortion? What kinds of reasons do you think people have for choosing abortion?

### Session III Toxins, potential risks, and reducing the risks at work

#### **Toxins and Risk**

Scientists are trying to better understand how chemicals used in nail salons affect people's health. Some of the chemicals are known to be harmful, and others are suspected to pose risks, but we are continually learning in this area of research. Because of the known and potential risks to human health, it is important that people are aware of these risks and have access to information about how to protect themselves.

- What do you know/have you learned about the possible effects of the products you work with on your health? Let's pool our information.
- · Human exposure to chemicals occurs via:
  - ingestion of food, dust and water
  - inhalation of gases and particles in the air
  - through the skin
  - toxins from chemicals can also be transferred from the pregnant woman to the developing fetus or child through the placenta and breast milk

Many products do not include ingredients on the label. Sometimes it may be necessary to look on the internet to find out what is included in a product.

Here are some of the chemicals found in nail salon products that may be harmful:

#### **TOLUENE**

A solvent used in nail polish, polish remover and fingernail glue.

#### **DIBUTYLPHTHALATES**

"Plasticizers" used in nail polish.

#### **FORMALDEHYDE**

Used in nail polish as a hardener.

#### **PARABENS**

Used in nail polish as a preservative.

#### **ACRYLAMIDES**

Used to strengthen nails in the topcoat of some polishes.

#### TRIPHENYL PHOSPHATE (TPP or TPHP)

A "plasticizer" used in some nail polishes

There is a more comprehensive list of chemicals, where they
are found and their potential risks included in the handouts:
 Reproductive Health Effects of Chemicals Used in Salons
 (including references).

# Endocrine System and Endocrine-Disrupting Chemicals (EDCs) (see handout)

- **Endocrine system** a very brief description from LiveScience.com:
  - "...is made of eight major glands, each of which secretes different types of hormones that regulate metabolism, growth and development, tissue function, sexual function, reproduction, sleep and mood, among other things."
- Endocrine disrupting chemicals (EDCs) and potential EDCs are mostly human-made; they are in various materials; suspected to be associated with:
  - changed reproductive function in males and females
  - increased incidence of breast cancer (higher numbers)
  - abnormal growth patterns and neurodevelopmental delays (growth and development of the brain) in children; e.g., slower learning
  - changes in immune function. (references included in the handout)

Scientists are trying to better understand how chemicals used in nail salons affect people's health. Some of the chemicals are known to be harmful, and others are suspected to pose risks, but we are continually learning in this area of research. Because of the known and potential risks to human health, it is important that people are aware of these risks and have access to information about how to protect themselves.

#### **Key Points/The Short Version:**

- There are many chemicals of concern being used in nail salons.
- Nail technicians are exposed to several of these toxins daily.
- The combined effects of these chemicals (with each other and over time) is not known (research is underway but not completed).
- Workers carry these substances home with them (in clothes, in lungs and body, on skin).
- Childhood, along with pregnancy (especially the first trimester) are times of high potential harms from toxic exposures.
- Effects from EDCs can be experienced even at very low doses.

#### Reducing Risks at Work (see handout)

Go through the list of options, using demonstrations where possible.

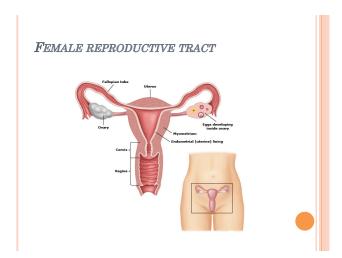
What are some ways to reduce the risk to women's reproductive health? (Brainstorm)

Discussion question: how many of these suggestions are possible in your place of work?



# Reproductive Health Sample Workshop Im



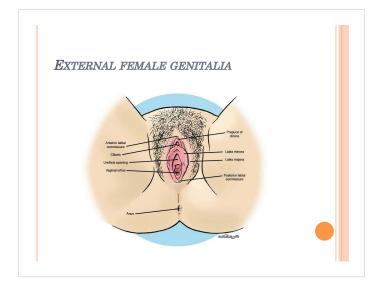


# CÁC BIỆN PHÁP TRÁNH THAI (BIRTH CONTROL METHODS) Khi sử dụng các biện pháp tránh thai c'ân phải cân

nhắc các vấn đ ề sau:

( NEED TO CONSIDER)

- 1. Tuổi (age)
- 2. Số lượng bạn tình ( the number of partners)
- Sức khỏe hiện tại và ti `en sử bịnh ( current health and medical history )
- 4. Hiệu quả của phương pháp tránh thai (how effective the method needs to be )







#### HÓA CHẤT TRONG NGÀNH MÓNG TAY ẢNH HƯỞNG SỰC KHỎE RA SAO?

- o Ung thư (Carcinogen):
  - o Sinh con nhẹ cân
  - o Giảm số lượng tinh trùng
  - Giảm tỷ lệ thụ tinh gây hiếm muộn
- o Gây rối loạn hệ nội tiết: (Endocrine disruptor)
  - o Thai nhi bị dị tật bẩm sinh
  - Chậm phát triển
  - Chậm khả năng trí tuệ
  - o Giảm tỷ lệ thụ tinh
  - o Sây thai tự nhiên
  - o Hệ sinh dục nam bị chậm phát triển
  - o Phát triển hệ thống th ăn kinh trung ương rồi loạn
- Độc tố cho hệ sinh sản: gây viêm tử cung làm bào thai kém nhất triển hoặc nhẹ cân

### PHÒNG TRÁNH RỦI RO NGHỀ NGHIỆP

#### o Giảm tiếp xúc hóa chất:

Không khí thoáng mát



- Giờ giải lao nên đi ra ngoài
- Tăng lưu thông khí trong tiệm: hút khí từ trong tiệm ra ngoài trời, máy lọc khí phải được thay đ'ài lọc thường xuyên
- o Giảm tiếp xúc với hóa chất bay hơi
  - Đóng nắp
  - Thùng rác có nắp đậy
  - Vứt bỏ bông gòn sau khi dung xong
  - V

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### PHÒNG TRÁNH RỦI RO NGH È NGHIỆP

#### o Bảo vệ tay khi làm việc

- o Mang găng tay Nitrile, ko phải latex
- Thay gang do thường xuyên
- o Rửa tay sau mỗi l'ân thay gang
- o Dùng kem thoa tay
- Kiểm tra tay thường xuyên phát hiện sớm nứt da, đỏ da, ngứa da



#### o Dùng những hóa chất ít độc hại

- Nước sơn không chứa "Bộ Ba độc hại-Toxic Trio" (toluene, formaldehyde, dibutyl phthalates)
- Không dùng sản phẩm chứa chất MMA \*methyl mathacrylate): đã cấm tại Canada và Mỹ nhưng vẫn được sử dụng ở một số tiệm làm móng.

#### PHÒNG TRÁNH RỦI RO NGHỀ NGHIỆP

#### o Bàn làm việc riêng biệt

- o Đừng nên ăn uống g`ân nơi làm việc
- o Đây nắp thức ăn: hóa chất có thể thấm vào đ<br/> ồăn và chúng ta ăn vào trong cơ thể
- Thay qu'àn áo ngay khi v'ênhà, và giặt chúng riêng (nếu có thể)



#### PHÒNG TRÁNH RỦI RO NGHỀ NGHIỆP

#### o Chăm sóc tốt cho bản thân

- Ăn uống đủ chất và uống nước
- Tự theo dõi sức khỏe và phát hiện sớm các triệu chứng: đặc biệt khi có thai vì thai có thể bị ảnh hưởng



- Nhức đ`âu
- Ho
- Ngứa
- Mang khẩu trang khi làm việc để ngừa bụi hóa chất. Chỉ có loại chuyên dành cho bệnh phối mới thật sự ngăn bụi tốt nhất.
- o Dùng hoác chất ít độc hại và thông khí khi có thể
- Nếu bạn có thai: chăm sóc thai kỳ cần thận: bác sĩ hay nữ hộ sinh (được bảo hiểm OHIP miễn phí)
- o Goi 311 hay chương trình Toronto Public Health's Healthiest Baby Possible

#### o Chuẩn bị tốt trước khi mang thai:

o nên ngừa thai khi đang làm việc trong tiệm móng





### THANK YOU FOR YOUR TIME



# **Reproductive System**

## Label the following:

### **Internal Reproductive Organs**

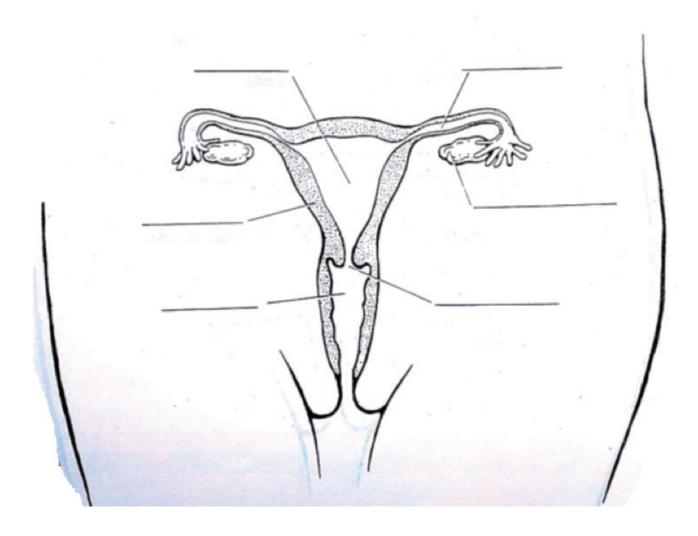
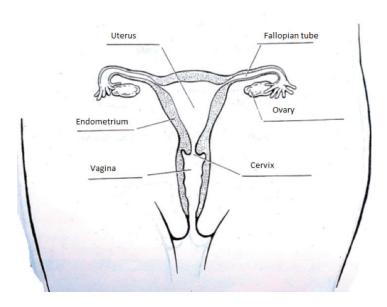


Diagram image taken from the *Changes in You and Me!* Workbook printed by Toronto Public Health in 1998. The illustrations were originally done in 1994 by Michael Emberley in the book, "It's Perfectly Normal" reproduced by permission of the publisher, Candlewick Press, Cambridge MA.



### **Internal Reproductive Organs – Answers**

### **External Reproductive Structures (Genitalia)**



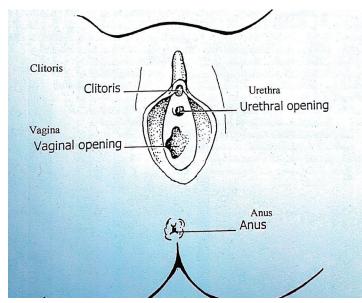
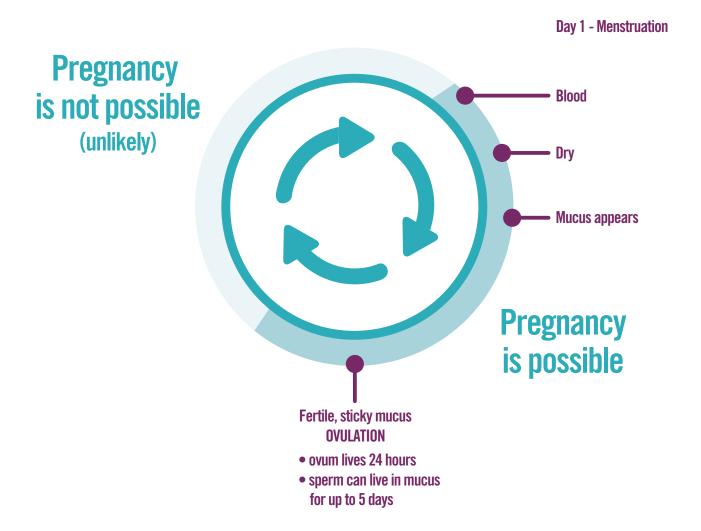


Diagram image taken from the *Changes in You and Me!* Workbook printed by Toronto Public Health in 1998. The illustrations were originally done in 1994 by Michael Emberley in the book, "It's Perfectly Normal" reproduced by permission of the publisher, Candlewick Press, Cambridge MA.

Are there other parts that you have questions about?



# **Fertility Cycle Diagram**



Fertility in women works in cycles, often referred to as the menstrual cycle. This diagram explains changes in cervical mucus and ovulation. In a 21-day cycle, most fertile days are 2-10; 28-day cycle, most fertile days 9-17; 36-day cycle, most fertile days 17-25.

People can find fertility calculators online that can be tailored based on length of cycle, and have more detailed information about finding your most fertile days.

The main point here is that there are times in a menstrual cycle that people are more or less fertile, and this is important to know when trying or trying not to get pregnant.



# **Comparative Summary of Available Birth Control Methods**

### Perfect Use vs. Typical Use

Perfect use refers to when a method is used exactly as directed. Typical use refers to how effective a method will be if used by the average person who may not always use a method consistently and correctly.

#### **Hormonal Methods**

Combined hormonal methods (synthetic estrogen and progestin) all have similar side effects and risks. Before using these methods, it is important to have a full medical history, including a history of migraines and circulatory problems and to take blood pressure as well. **Women who have migraine with visual disturbance should not use hormonal contraception.** 

Hormonal contraception does not offer protection against sexually transmitted infections.

#### Side effects may include:

- spotting
- headaches
- nausea and vomiting
- bloating
- mood changes

Typically, if there are side effects, they tend to disappear within three months - usually sooner.

#### Risks include:

- blood clot (deep vein thrombosis)
- stroke
- some increase in breast cancer risk

# There are also non-contraceptive benefits, including:

- some protection against ovarian and endometrial cancer
- some protection against ectopic pregnancy and ovarian cysts

Method	Туре	Perfect use	Typical use	Advantages	Disadvantages	Side effects (see hormonal methods above)	Risks (see hormonal methods above)	
<b>Hormonal Methods</b>	formonal Methods							
Oral	Combined	0.3% (99.7%	9% (91%	very effective	need prescription			
contraceptives -	hormonal	effectiveness)	effectiveness)	<ul> <li>reduces bleeding</li> </ul>	must be taken every day			
the Pill				may reduce cramps	• some women cannot tolerate side effects			
Transdermal	Combined	0.3% (99.7%	9% (91%	no daily pill to take	need prescription	increased risk of venous		
	hormonal effective)	effective)	discreet	contains more estrogen than oral contraceptives	thromboembolism (VTE) due to higher dose of estrogen			
					potential skin irritation			
					patch can fall off			
Vaginal ring	Combined	0.3% (99.7%	9% (91%	no daily pill to take	need prescription	may cause vaginal irritation	because of type of progestin	
	hormonal	effective)	effective)	• discreet	male partner may feel ring		used, increased risk of VTE	
					some women do not want to use fingers to insert			



Method	Туре	Perfect use	Typical use	Advantages	Disadvantages	Side effects (see hormonal methods above)	Risks (see hormonal methods above)
Hormonal Methods	(continued)						
Levonorgestrel- releasing Intra Uterine System (IUS)	Single hormone - progestin	0.2% (99.8%)	0.2 (99.8%)	<ul> <li>once inserted, no maintenance</li> <li>as effective as sterilization</li> <li>reversible</li> <li>for women with dysfunctional bleeding, reduces bleeding</li> </ul>	need prescription and health care provider to insert     may take several months before any side effects are eliminated	<ul> <li>amenorrhea (no period)</li> <li>bleeding and spotting between period</li> <li>abdominal/pelvic pain</li> <li>ovarian cysts</li> <li>headache/migraine</li> <li>acne</li> <li>depressed/altered mood</li> <li>nausea/vomiting</li> <li>bloating</li> <li>expulsion</li> </ul>	<ul> <li>pregnancy rate is low, but pregnancy with IUS has higher risk of being ectopic</li> <li>perforation of uterus during insertion</li> <li>ovarian cysts</li> </ul>
Depo Provera	Single hormone - progestin	0.2% (98% effective)	6% (94% effective)	<ul> <li>contraceptive effects last for three months</li> <li>for women with heavy bleeding, may stop bleeding in first year of use</li> </ul>	need prescription and health care provider to inject     side effects may last months after last injection     may take up to 18 months to regain fertility	<ul> <li>spotting</li> <li>headaches</li> <li>weight gain</li> <li>depression</li> <li>acne</li> <li>no period</li> <li>increased body hair</li> </ul>	<ul><li>loss of bone mineral density</li><li>blood clots</li></ul>
Copper Intra- uterine Device (IUD)	Intra-uterine	0.6% (99.4% effective)	0.8% (99.2% effective)	<ul> <li>can stay in the uterus up to 10 years</li> <li>inexpensive</li> <li>no hormones</li> </ul>	need prescription and health care provider to insert     heavier bleeding/increased cramps     chance of expulsion     need to periodically check strings	heavier bleeding than normal/stronger cramps than normal     pain on insertion     short-term spotting or possible spotting between periods	small risk of perforation during insertion     pregnancy rate is low, but pregnancy with IUD has higher risk of being ectopic     potential for Pelvic Inflammatory Disease (PID) if women gets STI during IUD use
Emergency Contraceptive Pills (ECP also known as the Morning After Pill)	Post-coital hormonal	Effectiveness: Reduces pregnance Effectiveness increa 12 hours (up to 95' decreases every da after that. There is reduced et women weighing 16 (75-80 kg), and are women over 176 po	ased if taken in first %). Effectiveness y ffectiveness in 55 to 176 pounds e not effective in	available over the counter in pharmacies     may prevent pregnancy if no method used or in case of sexual assault	• none	<ul> <li>nausea/vomiting</li> <li>spotting</li> <li>fatigue</li> <li>next period may look different, come early or be delayed</li> </ul>	• none

Method	Туре	Perfect use	Typical use	Advantages	Disadvantages	Side effects	Risks
Non-Hormonal Me	thods						
Male condom	Barrier method	2% (98% effective)	18% (82% effective)	<ul><li>widely available</li><li>no hormones</li><li>STI protection</li></ul>	people with latex sensitivity/ allergy must use non-latex condoms     must use from start to finish every time     needs to be incorporated into sexual activity     some men have difficulty maintaining erection when unrolling condom onto penis     decreased sensation with latex condoms	none (except for people with latex sensitivity/allergy	• none
Female (inside) condom	Barrier method	5% (95% effectiveness)	21% (79% effectiveness)	<ul> <li>available over the counter</li> <li>no hormones</li> <li>female controlled</li> <li>better heat conduction than latex</li> </ul>	noisy     may be difficult to maintain in place when changing sexual position	• none	bladder infection
Fertility Awareness Methods (FAM)	Cycle monitoring	Standard Days: 5% (95% effective) Ovulation method: 3% (97% effective) Symptothermal method: 0.4% (99.6% effective)	24% (76% effective)	<ul> <li>no prescription required</li> <li>no hormones</li> <li>couple co-operation</li> <li>can be combined with other methods to increase efficacy</li> </ul>	requires commitment and training	• none	• none
Withdrawal	Mechanical	4% (96% effectiveness)	22% (78% effectiveness)	no hormones     useful when no other method is available	man must be very aware of     "point of no return" and be     able to withdraw in time     interrupts sexual activity     for partner	• none	• none
Copper IUD as emergency contraception (see IUD above)	Post-coital			ve days after unprotected sex. It wo here is no time for testing for STIs.	orks the same way as it does when	inserted as a contraceptive meth	od.

Method	Туре	Perfect use	Typical use	Advantages	Disadvantages	Side effects	Risks
Non-Hormonal Me	thods (continued)						
Spermicide	Chemical	Sponge For women who have already given birth - 20% (80% effective). For women who have never given birth – 9% (91% effective).	For women who have already given birth - 24% (76% effective). For women who have never given birth - 12% (82% effective) When spermicides are consistently used together with a condom, the combined effectiveness is 95% or greater.	available over the counter     sponge may be used for several acts of intercourse	can be messy     foam and film have to be reinserted for each act of intercourse	• irritation to vagina or penis	may irritate vaginal mucosa allowing the entry of viruses     not recommended for frequent use (more than once a day) for women at high risk of HIV
Sterilization for men and women	Permanent surgical	Effectiveness: Female sterilization – 0.5% (99.5% effective) Male sterilization – 0.15% (99.85% effective) Perfect use – 0.10% (99.90% effective)		end concern about pregnancy	surgery     difficult to reverse     slight chance of failure	Men – pain and swelling     must wait about 12 weeks until the vas is cleared of sperm	There is always some risk with surgery.
Lactational Amenorrhea Method (LAM)	Ovulation suppression	Effectiveness: 98.5 – 99.5% effect	tive	<ul><li>no prescription necessary</li><li>no hormones</li></ul>	need to follow guidelines	• none	• none
Abortion	Surgical or medical						



# **Reproductive Health Effects of Chemicals Used in Nail Salons**

Chemical	Use	Concern for Reproductive Health (see references below)
Formaldehyde	used in nail polish and nail hardeners	CARCINOGEN; associated with low birth weight in several studies (OCC MED); reduced fertility (FORMA)
Toluene	used as a solvent (aromatic hydrocarbon) in nail polish, polish remover and fingernail glue	ENDOCRINE DISRUPTOR; breathing high levels in pregnancy can cause birth defects, slow growth and retard mental abilities of offspring (PUB CHEM); incr. risk of reduced fertility and spontaneous abortion (OCC MED)
Dibutyl Phthalate	used as preservative in cosmetics	ENDOCRINE DISRUPTOR (OCC MED); female reproductive toxicity in mice research (birth defects and reduced birth weight) (NTP); problems in male genital development (STATE); can have permanent effects on development of central nervous system (ED-CHILD-WHO)
Parabens	used as preservative in cosmetics	ENDOCRINE DISRUPTOR (REV CHEM) diminished fertility in animal studies (STATE)
Acrylamides	used as nail strengthener, topcoat	CARCINOGEN decreased sperm count in male rats (ACRYL)
Methanol	• used in "non-acetone" polish removers	REPRODUCTIVE TOXIN; adverse effects on developing fetus (REV CHEM)
Particulate Matter	a bi-product of filing (unpolished nails, polished nails, acrylic nails)	shown to cause Intrauterine Inflammation which can increase the risk of being born pre-term or underweight (EHP)

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# The Endocrine System and Endocrine-Disrupting Chemicals (EDCs)

### The Endocrine System is:

- a sensitively balanced system of glands and hormones
- hormones, such as insulin, thyroxin, estrogen, and testosterone, interact with – or target - specific cells (see diagram below, taken from www.LiveScience.com)

### **Hormones egulate:**

- body growth
- · response to stress
- sexual development
- production and use of insulin
- · rate of metabolism and more

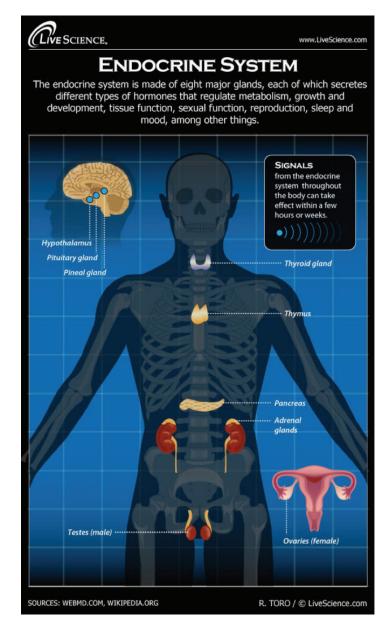
### What is the problem?

#### **Synthetic chemicals**

- More and more synthetic chemicals are used to produce the things we buy or parts of them. For example:
  - cosmetics
  - cleaning products
  - baby and children's toys
  - food storage containers
  - furniture and carpets
  - computers, phones, appliances
- They are in:
  - plastics and resins used in cars, trucks, planes, trains, sporting goods, outdoor equipment, medical equipment, dental sealants, and pharmaceuticals
  - plastics and resins are used to build homes, offices, factories, schools, and other buildings instead of steel and wood
- We are exposed to these synthetic chemicals regularly and don't know exactly what this constant, everyday low-dose exposure means for our health.
- Synthetic chemicals can interfere with endocrine functions in the body.
- They can imitate hormones:
  - they act as though they were the "keys" to the receptor "locks"
  - they trick cells into thinking that they are real hormones

- They can bind to proteins:
  - these proteins carry hormones or other proteins that signal jobs both inside cells and between cells
- They can affect enzymes:
  - they either stop them from working or start them working
    - this interferes with how cells take in minerals like iron, for example
    - it can change the way cells read genes

Exposures to chemicals that are *endocrine disruptors* (EDCs) can affect a variety of tissues and organs, particularly in developing infants and children. Effects can occur even at very low doses.





# **Reducing Risks at Work**

#### Fresh air

- · Open windows and doors as much as possible.
- Take breaks outside when possible.
- Ventilation
  - must pull air out of the building or away from technician
  - air purifiers need to have filters changed regularly.

# Reduce exposure to volatizing chemicals (chemicals that cause liquids to evaporate)

- Close lids on nail products.
- Have trash cans that shut.
- Throw away used cotton balls.
- Take out the trash multiple times a day.

### **Protect your hands**

- · Wear nitrile gloves and throw used ones away regularly.
- Wash your hands regularly.
- Use a barrier cream.
- Inspect your hands regularly for cracks, redness or irritation.

### Try to use products that are less toxic

- Favour nail products that are "toxic trio"-free (no toluene, formaldehyde or dibutyl phthalates).
- Do not use products that contain MMA (methyl methacrylate)
  - They are banned in Canada and USA, but still in use.

### Keep work space separate

- Don't eat or drink near your workstation.
- Keep a lid on your food (chemicals can get into the food and then be eaten).
- Change your clothes and wash them when you get home.

### Take care of yourself

- · Eat well and drink water often.
- Monitor yourself for symptoms like headaches, coughs or irritations.
  - If you are pregnant and you have these symptoms, your baby may be affected too.
- Wear a mask when filing nails to protect yourself from dust.
- Dust masks and N95 masks DO NOT protect against chemicals.
- If you are pregnant, get prenatal care.
  - You can choose a doctor or a midwife.
  - Midwives are part of Ontario health care and paid for with your Health Card
  - Call 311 and ask for help from Toronto Public Health's Healthiest Baby Possible program.



# **Reproductive Health Workshop: Materials Checklist**

Pre-training surveys	Pens
Workshop Tracking Form	Handouts
Certificate + frame	Glove kits (to give out)
Peer sign-off honoraria	Bag of gloves for trainers
Sign-in sheet for honoraria	(cotton and nitrile pairs)
Honoraria + envelopes	Condoms





This is to certify that nail technicians at

### have received health and safety training related to:

Potential risks to the reproductive system related to working in a nail salon
Planning a healthy pregnancy
Prevention and protection at work

Provided by Parkdale Queen West Community Health Centre with support from the Ministry of Labour



Date



# Workshop: Protecting Your Reproductive Health (Pre-training Survey) @ W

We want to know whether or not these workshops help nail technicians make positive changes at work. This survey asks questions about your current workplace practices. In one month, we will ask you to complete this survey again to see if there were any changes. There are no right or wrong answers, so please answer as honestly as possible. **Your answers will be kept private and confidential.** These surveys will help us make improvements to the workshops.

1.	Please tell us about your current position at the nail salon. Are you:									
	☐ An owner of the nail salon?									
	☐ A nail technician?									
	☐ Both?									
	Other, please specify:									
2. This question asks you about your workplace practices. Thinking about the <u>last 2 weeks of work</u> :										
	How often did you:	Circle the answer that applies to you								
	Wear protective gloves when working with salon products?	1 Never	2	3 About half t	the tim	4 e	5 Always			
	Wear a mask when working with salon products?	1 Never	2	3 About half t	the tim	4 e	5 Always			
	Eat at your work station or near where chemicals are kept?	1 Never	2	3 About half t	the tim	4 e	5 Always			
	Change your clothes as soon as you get home?	1 Never	2	3 About half t	the tim	4 e	5 Always			
	Apply hand cream after washing your hands?	1 Never	2	3 About half t	the tim	4 e	5 Always			
3.	Have you ever thought about how working in the nail salon might affect your repro	ductive he	alth?	•						
	☐ No, it's not really a concern for me									
	☐ No, but I'm interested in learning more									
	Yes, but I have not acted on my concerns									
	Yes, and I've taken action to reduce risks									
	☐ I don't know									
	Please explain:									



## Workshop: Protecting Your Reproductive Health (Follow-up Survey) III

We want to know if these workshops help nail technicians make positive changes at work. This survey asks questions about your workplace practices before and after workshop. There are no right or wrong answers, so please answer as honestly as possible. **Your answers will be kept private and confidential.** These surveys will help us make improvements to the workshops.

1.	Please tell us about your current position at the nail salon. Are you:
	☐ An owner of the nail salon?
	☐ A nail technician?
	□ Both?
	Other, please specify:

2. This question asks you about your workplace practices before and after the workshop.

_	about the <u>2 weeks before</u> the cle the answer that applies to	• 1	How often did you	Thinking about the <u>last 2 weeks of we</u> circle the answer that applies to you			
1	2 3 4	5	Wear protective gloves when working with salon products?	1	2 3 4	5	
Never	About half the time	Always		Never	About half the time	Always	
1	2 3 4	5	Wear a mask when working with salon products?	1	2 3 4	5	
Never	About half the time	Always		Never	About half the time	Always	
1	2 3 4	5	Eat at your work station or near where chemicals are kept?	1	2 3 4	5	
Never	About half the time	Always		Never	About half the time	Always	
1	2 3 4	5	Change your clothes as soon as you get home?	1	2 3 4	5	
Never	About half the time	Always		Never	About half the time	Always	
1	2 3 4	5	Apply hand cream after washing your hands?	1	2 3 4	5	
Never	About half the time	Always		Never	About half the time	Always	

Please flip over >



3.	What's the most important thing you learned from the workshop?							
4.	What's the most important change you've made because of participating in the workshop?							
5.	Did the workshop change the way you think about your reproductive health?							
	☐ Yes							
	□ No							
	Please explain:							

Thank you for taking this survey!

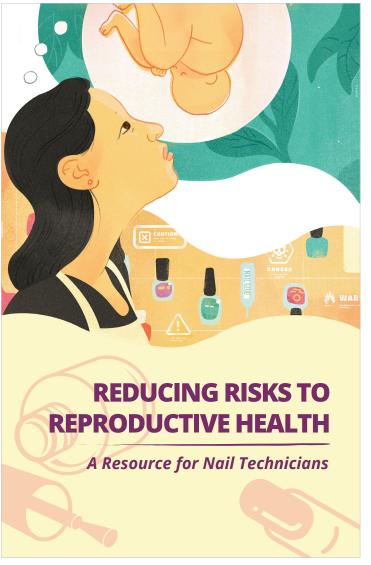


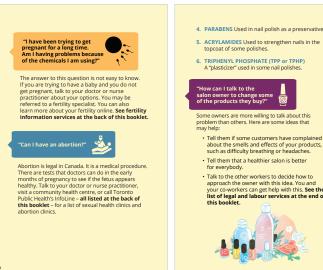
### Reproductive Health Resource © W

#### Reducing Risks to Reproductive Health – A Resource for Nail Technicians

#### This booklet (12 pages) is available online in English, Chinese and Vietnamese at www.pqwchc.org/nails

This booklet explains how working in a nail salon may affect someone's reproductive health. It provides information about lowering some of the risks and answers some questions people may have. The last pages provide information about where to get help and more information.









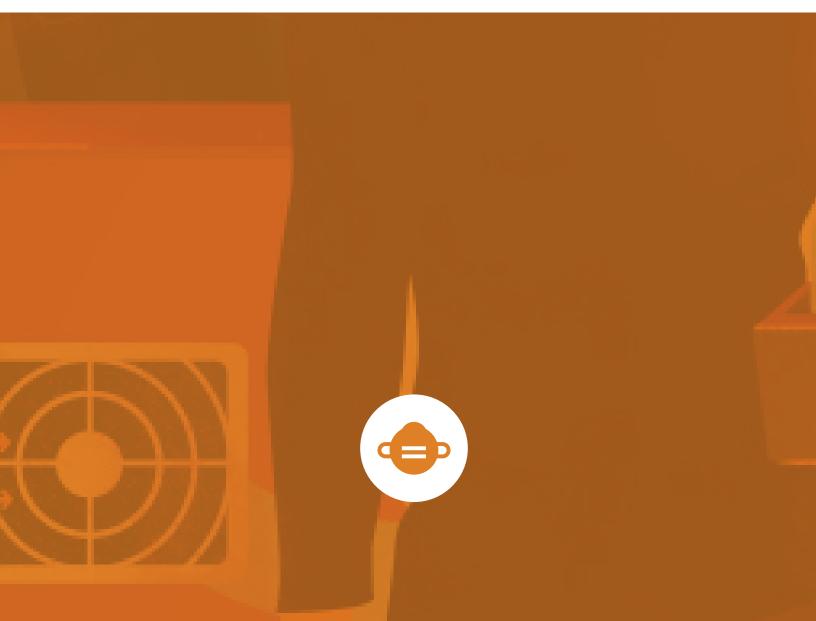


When possible, don't bring babies or children into the salon

Reducing Risks to Reproductive Health – A Resource for Nail Technicians



# **RESPIRATORY HEALTH**





#### **Respiratory Health – Training Module**

#### Introduction

Some possible introductory activities to do with the group:

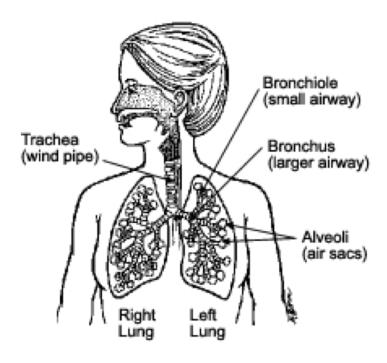
- Suggest people name the parts in the chart above in their first language and/or learn English names.
- Ask the group to talk about "what is good respiratory health"? If everything is going well, what does that look/sound like?
- "When I take a deep breath", describe what you feel in your lungs, throat, nose.

There is a lot of information about health in nail salons but here we are just going to talk about things that relate to breathing, air quality and your lungs. We call this **respiratory health**.

When air is clean and lungs are healthy, the body takes the air into the lungs by way of the trachea (windpipes) and the bronchus and bronchiole. Oxygen from the inhaled air enters the blood, and carbon dioxide, a waste gas from this process, leaves the blood. In healthy bodies, and where the air is clean, this process is smooth and painless. But when the air contains contaminants (e.g. in outdoor air pollution or indoor vapours or dust particles) or we have illness in our respiratory system, problems can arise.

People who work in nail salons can develop problems with their lungs that can make breathing difficult. In this workshop we will talk about some of those problems, what might be the causes of them, and ways that we can protect our respiratory health. We will not be looking at all respiratory diseases that someone might get; just those that researchers think may be more common in people who work in nail salons. There may be other health problems related to breathing and the lungs in nail salon workers, but if they have not been fully researched, we will not be covering them here.

People who work in nail salons can develop problems with their lungs that can make breathing difficult. In this workshop we will talk about some of those problems, what might be the causes of them, and ways that we can protect our respiratory health.



Why might people who work in nail salons have more respiratory health problems?

1) The products used in nail salons contain chemicals that can cause harm to the airways and the lungs, particularly when someone is exposed to the chemicals repeatedly. Some of these chemicals are "volatile", meaning that they evaporate into the air at room temperature, and then can be inhaled by nail salon workers and customers. They are often referred to as volatile organic compounds or VOCs. Some of the main VOCs found in nail salons are:

(Activity – could have participants try to guess VOCs in nail salons before revealing the list)  $\,$ 

- a. Toluene (in nail polish, nail hardeners and polish removers)
- b. Acetone (in nail polish remover)
- c. Acetonitrile (artificial nail remover)
- d. Camphor (nail polish) (USFDA)
- 2) A lot of dust is produced when artificial nails are filed and this can be inhaled by staff and customers if it remains in the air and is not sucked away by a close-by ventilation system.
- 3) The salons do not always have good ventilation to prevent chemicals and dust from circulating freely.
- 4) Procedures that nail technicians perform often require that their nose is close to these same products that may harm the nose, the airways and the lungs.
- 5) Latex gloves used by some nail technicians can lead to latex allergies which can lead to asthma.

A person working in a nail salon can develop respiratory problems that did not exist before they started working there, or problems they had before working in a nail salon can be made worse. Not everyone who works in a nail salon will develop respiratory problems.

#### **Respiratory Health Problems**

#### Symptoms of respiratory health problems

- hoarseness
- coughing
- runny nose
- chest tightness and
- shortness of breath. (TURI)

The services that are provided and the products that are used when applying artificial nails are an especially big problem for respiratory health. The chemicals used to create artificial nails such as acrylates and many solvents can irritate the nose, throat and lungs. (HNSRP)

#### **Asthma**

Asthma is the respiratory problem of greatest concern for people who work in nail salons. Asthma is a lung disease that makes it difficult to breathe. The symptoms of asthma can include coughing, wheezing, shortness of breath and a feeling of tightness in the chest. Air normally flows smoothly through our airways into our lungs but with asthma, the passage or flow into and out of the lungs is restricted. (TLA)

A common symptom of asthma is a chronic non-productive cough (non-productive means that it is a dry cough which does not expel phlegm or mucous). The cough is the result of an irritant causing inflammation that forces the bronchial tubes to constrict or spasm.

Occupational or workplace asthma is asthma that is caused, or made worse, by exposure to certain substances in the workplace. It can take months or years to appear as a result of exposure to chemical vapours, dust particles, or other substances that can irritate the lungs. For people who already have asthma, they may feel a reaction in their lungs after a very short time in a nail salon.

Many people in Canada are diagnosed with asthma, approximately 8% of the population (STATSCAN). More women than men are diagnosed with asthma (STATSCAN).

See the <u>Work-Related Asthma</u> brochure <u>CH</u> <u>VN</u> from The Lung Association for additional information about asthma. If you think you might have asthma, it's important that you see a health care provider.

#### **Rhinitis**

In addition to the lungs, the nose is also a vulnerable area for people who work in nail salons. A condition called rhinitis has been found to be more common in nail salon workers (Park, 2014). Rhinitis is an inflammation of the lining of the nose. It can be caused by a viral infection, like a cold, or by exposure to a chemical, such as acrylates found in nail products.

If a nail salon employee has any of the conditions mentioned here, it is important to check in with a doctor or other health care provider.

See a list of resources and supports at the back of the *Reducing Risks* to *Respiratory Health* booklet **CH WN**.

What you can do to protect the respiratory health of those who work in nail salons?

#### 1. Switch to safer products

The main source of health problems in nail salons are the chemicals found in many of the products used. Working with the salon owner and suppliers, to eliminate the products that cause problems will have the biggest impact on the health and safety of people who work in, and who visit, nail salons.

The Healthy Nail Salon Network of Toronto, and a number of other environmental and health organizations in Canada and elsewhere are working with government regulators and with cosmetics manufacturers to urge them to replace toxic products with less toxic or non-toxic ones.

Until we have achieved the ultimate goal of less toxic environments in nail salons, the following two measures are also important ways to improve the health of nail technicians.

See the *Nail Polish Rating Chart* handout (adapted from an article in NOW magazine) for information about different polishes available.

#### 2. Ventilation

Ventilation is the availability and circulation of air in a building. Ventilation can be natural, where air is brought in from outdoors through opening doors and windows, or mechanical which involves installing fans, ducts and other equipment to draw air in and out of a room and evenly distribute air throughout the space. Many nail salons do not have access to outdoor air through windows and doors. Natural ventilation may also not be an option if the weather is too hot or too cold. Even when natural ventilation is available, mechanical ventilation is also important since it can provide more consistent and controlled air flow. (TURI)

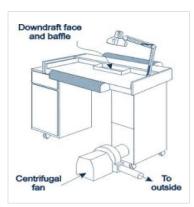
One of the most important things that can be done to protect or improve the respiratory health of people who work in nail salons is to provide the best ventilation possible.

Both clients and salon workers benefit from any changes that are made to improve the air quality in a salon.

Using proper ventilation systems and opening doors and windows to help air circulation in the salon can reduce chemical exposure for staff and for clients.

Ceiling-mounted or wall-mounted **general** exhaust fans (venting outdoors) are an important requirement in any nail salon. However, although they will help to dilute the concentration of chemicals in the air, they do not remove them as effectively as local exhaust systems.

**Local** exhaust ventilation (also called "bench ventilation" or "source capture") is the best form of ventilation to protect your health and that of the clients (TURI). This is a system where the fumes and dust particles are pulled away at the source of your work, preventing it from getting into the air and then into your lungs.





This is one example of local exhaust ventilation. It is important that the exhaust is close to your work and that the air vents to the outdoors through a duct system. Using local exhaust ventilation is helpful whenever filing is happening and products with chemicals are being used, particularly when applying artificial nails.

To adequately protect nail salon workers and clients, the best situation is where both general exhaust and local exhaust systems are installed.

In the state of New York, they felt it was so important to improve ventilation in nail salon for the health and safety of clients and people who work there that in 2015, a law was passed requiring all nail salons

to meet a certain level of standard in their ventilation (https://www.dos. ny.gov/licensing/appearance/proposedreg.html. It requires the salons to have general ventilation that provides enough outdoor air to remove vapours and dust from the salon, as well as specific exhaust systems at all manicure and pedicure work stations.

#### 3. Personal Protective Equipment

If hazardous chemicals continue to exist in the workplace (e.g. polishes that contain the "toxic trio"- formaldehyde, toluene and phthalates), and if it is not possible or practical to improve the ventilation at this time, using personal protective equipment is the next line of defence.

We know that many people who work in nail salons wear dust masks. There are things these masks can do and things they cannot do. See the table below for more information. It is vitally important, if masks are going to be used, that they be masks that fit (this means having professional "fit testing" done; contact Workplace Safety and Prevention Services for fitting options contact 1-877-494-9777).

See *Masks: Levels of Protection* handout CH VN to discuss the health benefits, risks and considerations of surgical/dust masks and N95 masks. A key limitation to note is that neither of these commonly used masks protects against chemical exposure. This is a commonly held misunderstanding that we continually witness within nail salons.

See the *What is a Healthy Nail Salon?* handout for California's criteria to qualify as a "Healthy Nail Salon". This information can be passed along to owners and technicians looking for ways to improve the health of their salon.

#### Other ways to protect respiratory health:

- Talk with your salon owner about switching to products which do not contain hazardous chemicals, (eg. the Toxic Trio). Salon owners can also talk about this with suppliers or find new suppliers who can provide less toxic substitutes. (See the <u>Nail Polish Rating</u> <u>Chart</u> for a list of suggestions for products and suppliers that contain fewer toxic chemicals.)
- 2. Use dispenser bottles (e.g. nail polish, polish remover, etc.) that have small openings, only large enough for the application brush to enter. Smaller openings lead to less evaporation of the liquid and this will cut down on exposure to chemicals in the air. When bottles with liquid are not in use, make sure they are closed.
- 3. Put cotton balls with liquid nail products on them in sealed bags before putting them in the trash.
- 4. Empty trash cans regularly and change trash can liners daily. Use trash cans with lids and keep lids closed.
- 5. Pour only the amount of liquid nail product that you need into the dispenser/bottle. When transferring any product that contains toxic chemicals, only do it in a well-ventilated area.

- Use nitrile gloves. Sometimes, people with respiratory problems have an allergic reaction to latex, and regular exposure to latex can also lead to skin and/or respiratory problems in people who previously did not have problems.
- 7. Take breaks whenever possible, particularly when doing long procedures like applying artificial nails. Move to where the air is fresher.

It is very important to treat any respiratory problems as soon as they are noticed. If you experience any of the following, seek the help of a health care provider:

- hoarseness
- coughing
- runny nose
- · chest tightness or
- shortness of breath

The longer one waits to treat a problem, the longer it may take to heal.

Provide connection to an accessible health centre when possible for those who may not have a primary care provider. Parkdale Queen West Community Health Centre will see nail technicians experiencing health concerns, or help connect the person to the appropriate CHC near them.

The Lung Association and Occupational Health Clinics for Ontario Workers can help to connect salon owners with an occupational hygienist who can advise on the best ways to improve air quality in the salon.



#### **References and Abbreviations**

#### **CCOHS – Canadian Centre for Occupational Health and Safety**

1. Fact Sheet: Respirators – Respirator Selection https://www.ccohs.ca/oshanswers/prevention/ppe/respslct.html

#### **TLA - The Lung Association**

 Worker Related Asthma Asthma Action Plan. (Hair, Nail and Beauty Salons). https://lung.healthdiary.ca/Guest/Product. aspx?IDS=S5K6e3UxFDJFM0PJsS02SQ%3d%3d

#### STATSCAN - Statistics Canada

- 1. Asthma by sex, provinces and territories http://www.statcan.gc.ca/tables-tableaux/sum-som/l01/cst01/ health50a-eng.htm
- 2. Asthma, 2014 https://www.statcan.gc.ca/pub/82-625-x/2015001/article/ 14179-eng.htm

# HNSRP – Healthy Nail Salon Recognition Program, State of California, Environmental Protection Agency, Department of Toxics Substances Control

1. Healthy Nail Salon Recognition Program Draft Guidelines (currently only available in draft form as a Word document but will be posted on line in January 2018)

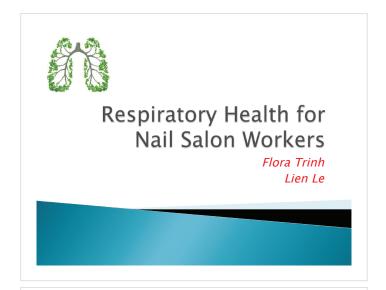
#### TURI - Toxics Use Reduction Institute of Massachusetts

- 1. Ventilation in Nail Salons Sept 2016 https://www.turi.org/Our\_Work/Business/Small\_Businesses/Nail\_and\_Hair\_Salons/Nail\_Salons/Fact-Sheets/Ventilation-in-Nail-Salons
- Artificial Fingernails and Indoor Air Quality https://www.turi.org/Our\_Work/Business/Small\_Businesses/Nail\_ and\_Hair\_Salons/Nail\_Salons/Fact-Sheets/Artificial-Fingernails-and-Indoor-Air-Quality

#### **USFDA** – United States Food and Drug Administration

Nail Care Products
 https://www.fda.gov/Cosmetics/ProductsIngredients/Products/
 ucm127068.htm

## **Respiratory Health Sample Workshop M**





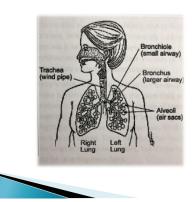


# VOLATILE ORGANIC COMPOUNDS (VOCs)

- Toluene (in nail polish, nail hardeners and polish removers)
- Acetone (in nail polish remover)
- Acetonitrile (artificial nail remover)
- Camphor (nail polish)



#### INTRODUCTION



- 1. CHEMICALS (VOCs)
- 2. DUST
- 3. VENTILATION
- 4. PROCEDURES
- 5. LATEX GLOVES



# SYMPTOMS OF RESPIRATORY HEALTH PROBLEMS

- HOARSENESS + SORE THROAT
- COUGHING
- RUNNY NOSE
- CHEST TIGHTNESS
- SHORTNESS OF BREATH



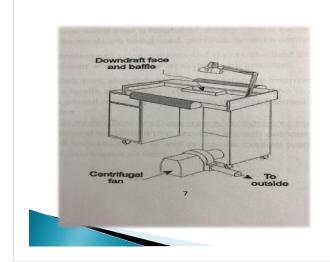
#### **ASTHMA**

- Is the lung disease that makes it difficult to breathe
- Symptoms: coughing, wheezing, shortness of breath, feeling of tightness in the chest



IF A NAIL SALON EMPLOYEE HAS ANY OF THE CONDITIONS MENTIONED ABOVE, IT IS IMPORTANT TO CHECK IN WITH A DOCTOR OR OTHER HEALTH CARE PROVIDER





#### **RHINITIS**

- More common in nail salon workers
- An inflammation of the lining of the nose
- Can be caused by virus, cold or exposure to chemicals (acrylates in nail products)



#### WHAT CAN YOU DO TO PROTECT THE RESPIRATORY HEALTH OF THOSE WHO WORK IN NAIL SALONS?

- 1. SWITCH TO SAFER PRODUCTS
- 2. IMPROVE VENTILATION
- 3. PERSONAL PROTECTIVE EQUIPMENT





# OTHER WAYS TO PROTECT RESPIRATORY HEALTH

- TALK WITH YOUR NAIL SALON OWNER
- USE DISPENSER BOTTLES THAT HAVE SMALL OPENINGS
- PUT COTTON BALLS WITH LIQUID NAIL PRODUCTS ON THEM IN SEALED BAGS BEFORE PUTTING THEM IN THE TRASH



- USE NITRILE GLOVES ( SOME PEOPLE WITH RESPIRATORY PROBLEMS HAVE AN ALLERGIC REACTION TO LATEX)
- TAKE BREAKS WHENEVER POSSIBLE, PARTICULARLY WHEN DOING LONG PROCEDURES LIKE APPLYING ARTIFICIAL NAILS.

MOVE TO WHERE THE AIR IS FRESHER



- EMPTY TRASH CANS REGULARLY AND CHANGE TRASH CAN LINERS DAILY, USE TRASH CANS WITH LIDS AND KEEP LIDS CLOSED
- POUR ONLY THE AMOUNT OF LIQUID NAIL PRODUCT THAT YOU NEED INTO THE BOTTLE.
- WHEN TRANSFERRING ANY PRODUCT THAT CONTAINS TOXIC CHEMICALS, ONLY DO IT IN WELL- VENTILATED AREA





### Masks: Levels of Protection CH WI

#### Fresh air first!

The best ways to protect the health of nail salon workers is to reduce toxic chemicals and have good ventilation in salons. Masks provide some protection if these options are not available, but they must fit properly and it is important to know what they can and cannot do.

#### Surgical masks



#### **Health Benefits**

- may reduce exposure to large particles (e.g. from filing)
- reduces the spread of germs that come in the form of large droplets

#### **Risks and Considerations**

- does not protect against chemical exposures or small dust particles
- needs to be replaced often
- may lead to skin irritation

#### **N95** respirator





without valve

with valve

#### **Health Benefits**

- reduces exposure to particles only (both large & small particles)
- reduces the spread of germs that come in the form of large droplets

#### **Risks and Considerations**

- does not protect against exposure to chemicals
- must fit to create a seal in order to work properly (needs professional "fit testing")
- 3. needs to be replaced often
- 4. may lead to skin irritation



In addition to things your employer may do, there are things you can do at work to protect yourself (Table 2)

- tell your supervisor
- · complete an employee incident report (as applicable) and
- notify the JHSC (Joint Health and Safety Committee) or health and safety representative, and/or union representative if you have one.

#### **TABLE 2**

#### Nail and Hair Do's and Don'ts

### Use a ventilated downdraft table

- Use dispenser bottles with small openings only large enough for an application brush to enter.
- Use pressure sensitive (spring-loaded) stoppers to decrease the amount of evaporation of nail liquid

# Applying artificial fingernails

- Close product containers immediately after use.
- Clean dirty brushes on a paper towel or gauze pad; dispose immediately in a sealed waste bin.
- Remove waste from bin several times a day to minimize exposure to vapours.
- Wear dust masks when filing acrylic or natural nails for protection against dust. Note that dust masks provide NO protection against vapours.

#### Hairdressing

- Mix chemicals in a separately vented room if possible (bleaches, perm solutions, dyes).
- Clean up all spills promptly.



### For more information, contact:

Occupational Health Clinics for Ontario Workers www.ohcow.on.ca or 1-877-817-0336

Workplace Safety & Prevention Services A Health & Safety Ontario Partner www.wsps.ca or 1-877-494-WSPS (9777)

The Lung Association Asthma Action Helpline www.on.lung.ca or 1-888-344-LUNG (5864)

Workplace Safety and Insurance Board www.wsib.on.ca or 1-800-465-5606

Ministry of Labour health and safety information: www.labour.gov.on.ca or 1-877-202-0008

Contact The Lung Association, OHCOW or WSPS for the companion booklet, Work-related Asthma: Preventing Work-related Asthma in Hairdressing and Nail Salons, which accompanies this fact sheet.

For these, and other resources, visit www.olapep.ca/wra/resources.

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Funded by the Government of Ontario



### Hair, Nail + Beauty Salons

# Work-Related Asthma and You

**FACTS FOR WORKERS AND EMPLOYERS** 









Did you know that if you work in a hairdressing, nail or beauty salon, you may be at risk for developing asthma, as a result of your work? Or if you already have asthma, some of the chemicals in your workplace may make it worse?

#### What is Asthma?

Asthma is a serious long-term lung disease that makes it difficult to breathe. People who have asthma have increased sensitivity in the airways. The airways become irritated and inflamed when substances that cause or provoke asthma are inhaled. Symptoms include coughing, wheezing, shortness of breath and tight chest.

#### What is Work-Related Asthma?

Asthma is work-related when it is caused (occupational asthma) or made worse (work-exacerbated asthma) by a substance that a person comes in contact with at work.

Who is at Risk for Work-Related Asthma in Hair and Nail Salons?

Anyone working in a beauty, hair or nail salon may be at risk for work-related asthma, depending on what chemicals are used in the workplace. Some of the tasks and chemicals that are found in hair and nail salons are listed in Table 1 and on our website www.olapep.ca/wra/resources.



#### Chemicals that May Cause Work-Related Asthma in the Hairdressing and Nail Salons

TASK	ASTHMAGENIC CHEMICAL
Washing hair	Shampoos and Conditioners (Sericin)
Bleaching hair	<ul><li>Ammonium, potassium, sodium persulfate (Persulfates)</li><li>Natural rubber latex in gloves</li></ul>
Colouring hair	<ul> <li>Permanent hair dyes containing ethylenediamine, monoethanolamine</li> <li>Henna</li> <li>Natural rubber latex in gloves</li> </ul>
Curling hair (perms)	<ul><li>Permanent wave solutions containing ammonia</li><li>Natural rubber latex in gloves</li></ul>
Styling hair	<ul> <li>Hair sprays         (Polyvinylpyrrolidone, Sericin)</li> <li>Hair straighteners         (Formaldehyde, methylene glycol)</li> </ul>
Applying artificial nails	<ul> <li>Methyl methacrylate (MMA)</li> <li>Ethyl methacrylate (EMA)</li> <li>Cyanoacrylate</li> <li>Formaldehyde</li> <li>Natural rubber latex in gloves</li> </ul>
Manicuring, general	<ul><li>Human nail dust (respiratory irritation)</li><li>Nail polish (Formaldehyde)</li></ul>



#### How to Recognize WRA Assess risk

To help find out whether you may have work-related asthma, you can ask yourself the following questions:

1	Do I have symptoms of asthma (cough, chest tightness, wheeze and/or shortness of breath)?	□Y	□N
2	Did my symptoms of asthma first start, or become worse, after I began to work in the job or field of work?	□Y	□N
3	Do my symptoms get worse as the workday or work week goes on?	□Ү	□N
4	Do my symptoms decrease on holidays and/or when I am away from work?	□Y	□N
5	Do I work with any asthma-causing agents listed in Table 1 or any other known asthma-causing agent?	□Y	□N
6	Was there an unusual exposure at work (such as a chemical spill) within 24 hours before my symptoms started?	□Y	□N
7	Do my co-workers have symptoms of asthma?	□Y	□N
	If you answered "yes" to questions 1 and	2,	

#### Get a Diagnosis From a Doctor

The diagnosis of occupational asthma requires special tests, such as breathing tests done at work and away from work.

you need to be assessed by a doctor.

MAKE AN APPOINTMENT WITH YOUR DOCTOR



# Nail Polish Comparison Chart (not a complete list)

Score	Brands	Problem Chemicals	Comments
4/4	Suncoat	Water-based, but contains some plastics	Best to apply 3 coats and clear topcoat; best performing of the water-based options
3/4	Pacifica Gabriel Pure Anada	Free of Toxic 3 (toluene, formaldehyde and DBP), Toxic 7 and Triphenyl phosphate (TPhP), but contains Benzophenone (endocrine-disruptor)	Best option for a polish that is not water-based
2/4	Zoya Lacc Beauty without Cruelty Spa Ritual	Contains TPhP, but Toxic 3 free	Promoted as vegan and cruelty-free
1/4	Revlon Essie OPI Maybelline	Claim to be free of Toxic 3 but testing has found traces of these chemicals in some of these brands.  Also contain Benzophenone (endocrine-disruptor)	OPI uses formaldehyde in nail strengtheners
1/4	Sally Hansen Miracle Gel	Contains TPhP and Propyl paraben (possible endocrine-disruptor)	Does not require lengthy soak in acetone-based polish remover

Taken from "Ecoholic: How toxic is your manicure?", NOW magazine. Adria Vasil. June 22, 2016 Additional information provided by Think Dirty app (www.thinkdirty.com)

















### **Better Ventilation in Nail Salons: A Fact Sheet**

#### From the Nail Salon Workers Project, Toronto

- Ventilation is the supply and circulation of air in a building.
- Services carried out in nail salons produce levels of dust and toxic fumes that can be harmful to human health.
- When it is possible, opening doors and windows in a nail salon to draw in fresh air is helpful, but it is not enough.

General ceiling mount ventilation is important for diluting dust and fumes in a nail salon setting, however, it does not sufficiently remove them. A proper exhaust ventilation system draws in outside air and must be appropriate for the size of the space. The minimum recommended amount of outside air is 25 cubic feet per minute (cfm) per occupant.



The best way to draw out fumes that are produced from polishing, polish removal and gel and acrylic applications is a "source capture" system which is installed at a workstation (pictured above).

This system prevents toxic chemicals from reaching the breathing zone of both nail technicians and customers. They must be installed to vent contaminated air outside the shop.

To adequately protect nail salon workers and clients, the best situation is where both general exhaust and local exhaust systems are installed. Room air purifiers using HEPA filters can also be useful in capturing salon chemical vapours and odours.

- One of the most important changes nail salons can make to protect the health of both staff and customers is to install a good ventilation system.
- Proper ventilation involves installing fans, ducts and other equipment to draw air in and out of a room and evenly distribute air throughout the space.

The installation of a proper ventilation system does involve significant financial costs. It is important to consider the value of these systems to the health of owners, staff and customers.

#### Resources

**Workplace Safety and Prevention Services** can help with on-site consultation to determine your ventilation needs and solutions www.wsps.ca • 1-877-494-9777

One company (U.S.) that specializes in ventilation systems for nail salons is **Aerovex, Ltd.** https://aerovexsystems.com/product-category/nail-salon-air-purifiers/nail-salon-source-capture-system/



### What is a Healthy Nail Salon?

California's Healthy Nail Salon Program (HNSRP) recognizes nail salons that have prioritized worker health and adopted best workplace practices.

#### A certified Healthy Nail Salon has adopted the following practices:

- 1. Uses nail polishes without the toxic-trio: dibutyl phthalate (DBP), toluene, and formaldehyde
- 2. Uses safer nail polish removers without ethyl or butyl acetate
- 3. Avoids using nail polish thinners, but if necessary, uses those without toluene and methyl ethyl ketone
- 4. Ensures that all nail salon staff wear nitrile gloves when using nail products
- 5. Ventilates the salon. Designates a specific area for artificial nail services
- 6. Installs a mechanical ventilation unit within one year of entering the program
- 7. Trains all nail salon staff (payroll & on contract) on best health and safety practices
- 8. Commits to adopting safer nail products
- 9. Does not allow customers to bring in products unless the products meet program criteria

This list is taken from the website of the California Healthy Nail Salon Collaborative whose state passed the Healthy Nail Salon Act in 2016. https://cahealthynailsalons.org/what-is-a-healthy-salon-1/



# **Respiratory Health Workshop: Materials Checklist**

Pre-training surveys	Nitrile gloves
Workshop Tracking Form	Mask samples (1 N95, 2 kinds dust masks)
Certificate + frame	Work Related Asthma brochures
Peer sign-off honoraria	Nail polish comparison chart
Sign-in sheet for honoraria	What is a Healthy Salon? handout
Honoraria + envelopes	Tokens
Pens	PQWCHC intake cards
Healthier nail polish samples (Pure Anada)	Health Promoter business cards





## Workshop: Protecting Your Respiratory Health (Pre-training Survey) @ w

We want to know whether or not these workshops help nail technicians make positive changes at work. This survey asks questions about your current workplace practices. In one month, we will ask you to complete this survey again to see if there were any changes. There are no right or wrong answers, so please answer as honestly as possible. **Your answers will be kept private and confidential.** These surveys will help us make improvements to the workshops.

1.	Please tell us about your current position at the nail salon. Are you:					
	☐ An owner of the nail salon?					
	☐ A nail technician?					
	☐ Both?					
	Other, please specify:					
2.	This question asks you about your workplace practices. Thinking about the <u>last 2</u>	weeks of	work:			
	How often did you:	Cir	cle the a	nswer that a	applies to	you
	Wear protective gloves when working with salon products?	1 Never	2 Abo	3 out half the ti	4 ime	5 Always
	Wear a mask when working with salon products?	1 Never	2 Abo	3 out half the ti	4 ime	5 Always
	Put trash a sealed container or bag?	1 Never	2 Abo	3 out half the ti	4 ime	5 Always
3.	If you wear protective gloves, what kind are they?					
	Latex					
	☐ Nitrile					
	□ Not sure					
	☐ I don't wear gloves					
4.	Have you ever thought about how working in the nail salon might affect your respi	ratory heal	th?			
	☐ No, it's not really a concern for me					
	☐ No, but I'm interested in learning more					
	☐ Yes, but I have not acted on my concerns					
	Yes, and I've taken action to reduce risks					
	☐ I don't know					
	Please explain:					



# Workshop: Protecting Your Respiratory Health (Follow-up Survey) @ W

We want to know if these workshops help nail technicians make positive changes at work. This survey asks questions about your workplace practices before and after workshop. There are no right or wrong answers, so please answer as honestly as possible. **Your answers will be kept private and confidential.** These surveys will help us make improvements to the workshops.

1.	Please tell us about your current position at the nail salon. Are you:
	☐ An owner of the nail salon?
	☐ A nail technician?
	☐ Both?
	☐ Other, please specify:

2. This question asks you about your workplace practices before and after the workshop.

_	Thinking about the <u>2 weeks before</u> the workshop, circle the answer that applies to you			How offen did voll				Thinking about the <u>last 2 weeks of work,</u> circle the answer that applies to you				
1	2	3	4	5	Wear protective gloves when working with salon products?	1	2	3	4	5		
Never	Abo	ut half the i	time	Always		Never	Abo	out half the i	time	Always		
1	2	3	4	5	Wear a mask when working with salon products?	1	2	3	4	5		
Never	Abo	ut half the i	time	Always		Never	Abo	out half the i	time	Always		
1	2	3	4	5	Put trash a sealed container or bag?	1	2	3	4	5		
Never	Abo	ut half the i	time	Always		Never	Abo	out half the i	time	Always		

3.	What's the most important thing you learned from the workshop?

Please flip over >



4.	From your perspective, could improvements to be made to the ventilation (availability and circulation of air) in the salon?
	☐ Yes
	□ No
	☐ Not sure
5.	From your perspective, could the safety of the nail products used at the salon be improved?
	☐ Yes
	□ No
lf	you answered yes to questions 4 and 5
6.	From your perspective, what prevents you (or the salon owner) from making improvements to the ventilation and products in the nail salon? (check all that apply)
	□ Cost
	☐ Customers' preferences for certain products
	☐ Unfamiliar with alternative options
	☐ Not applicable
	☐ Other (please explain)
7.	What's the most important change you've made because of participating in the workshop?
8.	Did the workshop change the way you think about your respiratory health?
	☐ Yes
	□ No
	☐ Not sure
	Please explain:

Thank you for taking this survey!



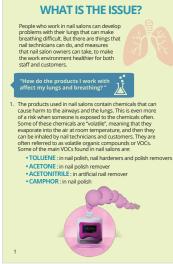
### Respiratory Health Resource © W

#### Reducing Risks to Respiratory Health – A Resource for Nail Technicians

#### This booklet (12 pages) is available online in English, Chinese and Vietnamese at www.pqwchc.org/nails

This booklet explains how nail salon work may affect someone's respiratory health. It gives information about lowering some of the risks and answers some questions people may have. The back pages provide information about where to get help and more information.









2. Improve ventilation Ventilation is the process by which air is purposely delivered to, and removed from, a space. Natural ventilation is when air is brought in from outdoors through opening doors and windows. Mechanical ventilation involves installing fans, ducts and other equipment to draw air in and out of a room and sevely distribute air throughout the space. Even when natural ventilation is available, mechanical ventilation is also important since it can provide more consistent and controlled air flow.

Using proper ventilation systems and opening doors an windows to help air circulation in the salon can reduce chemical and dust exposure for everyone in the salon.

5

#### OTHER WAYS TO REDUCE YOUR CHEMICAL EXPOSURE IN THE SALON

- Use dispenser bottles (e.g., for nail polish, polish remover, etc.) that have small openings. When
- 2. Put cotton balls with liquid nail products on them
- 3. Use trash cans with lids. Empty trash cans regularly
- Transfer liquid nail products from large to sma dispensing bottles in a well-ventilated area.
- Take breaks whenever possible and move to where the air is fresher, particularly when doing long procedures like applying artificial nails.

The Lung Association and Occupational Health Clinics for Ontario Workers can help to connect salon owners with an occupational hygienist who can advise on the best ways to improve air quality in the salon.

8

Reducing Risks to Respiratory Health – A Resource for Nail Technicians

# **APPENDICES**



### Peer Workers Job Flyer CH W

# Have you worked at a nail salon? Do you speak English and Vietnamese or Mandarin?

### We'd like to hire you!

We are looking for someone to visit nail salons, talk to nail technicians, and give information about staying healthy at work. You will work as a team with another Mandarin-speaking person. 6 hours per week, \$18/hr.

If you are interested, please email or call Cate: cahrens@ctchc.com 416-703-8482 ext.2233



### Peer Workers Job Posting CH WI

# Nail Salon Workers Project: Health and Safety Outreach Peers

#### (Chinese and Vietnamese Speaking)

Parkdale Queen West Community Health Centre (PQWCHC) is a non-profit, community-based health organization committed to improving the health of community members, particularly those at risk due to poverty and discrimination. Our multi-disciplinary team approach includes the provisions of primary health/dental care, counselling, harm reduction, community development, advocacy, and innovative partnerships with other organizations. PQWCHC is a leader in the development of inner-city health services focusing on the needs of homeless and street-involved youth, adults, and families. PQWCHC is a pro-choice and LGBTTQ and 2-Spirit positive organization committed to employment equity and anti-discrimination. PQWCHC is committed to a harm reduction and health promotion framework across our services.

#### **Project Overview**

The "Delivering Workplace Health and Safety Education in Nail Salons" project will outreach to nail salon workers and owners in Toronto to deliver educational workshops on a series of topics related to the health of salon workers. Peer workers will receive training in workshop material and will deliver workshops in salons across the GTA.

#### Responsibilities:

- · Outreach to nail salon owners and workers in the GTA
- Help plan and organize workshops
- Participate in workshop training
- Support nail salon worker participants with information and referrals
- Carry out administrative tasks as needed
- Collaborate with nail salon workers and project coordinators in carrying out the research project

#### **Qualifications:**

- Experience as a nail salon worker in Toronto within the past 5 years
- Able to write and speak in English and Chinese or Vietnamese
- Ability to use computers and social media
- A good understanding of the challenges facing new immigrants and nail salon workers
- Ability to travel in the city (no car needed)

Salary: \$18/hr

Hours: Hours will vary, average 4-10 hours per week. Some flexibility required.

Please forward to resume to Cate Ahrens at cahrens@ctchc.com





# Health Workshops for Nail Technicians

The Nail Salon Workers Project delivers workshops in nail salons that help you learn how to reduce risks to your health at work. Workshops are delivered by peer educators who have been trained at Parkdale Queen West Community Health Centre

#### Workshops include:

- Skin protection
- Reproductive health (Pregnancy and Fertility)
- · Breathing and lung health
- Back/neck/shoulder care
   And more!





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# If you have concerns about your health or want to attend a workshop, contact us!

If you have concerns about your health or want to attend a workshop, contact us!

#### **English and Mandarin**

Jackie: ###-###-### Li: ###-###-####

### **English and Mandarin**

Jackie: ###-###-### Li: ###-###-####

**English and Vietnamese** 

Lien: ###-###-####

Flora: ###-####

#### **English and Vietnamese**

Lien: ###-###-#### Flora: ###-###-####

nailsalonworkers@gmail.com

nailsalonworkers@gmail.com

Facebook: Healthy Nail Salon Network - Toronto

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# Outreach Tracking Form CH VN

Date:
Staff:
Peers:
Description of Activities:
Salons visited: (language, # of staff, what info given, contact names, BodySafe?)
Notes/Comments:



# Workshop Tracking Form CH VN

Date:	Phone #:
Salon:	Location:
Owner:	Language:
Attendance #:	Follow-up date:
Staff:	Completed:
Peers:	
What went well?	
What didn't go well?	
Any interesting notes or conversations?	



### Case Study Invitation — Nail Salon Workers Project CH W

We want to talk to select nail salons that participated in peer-led workshops as part of the Nail Salon Workers Project.

#### What is the Healthy Nail Technicians Project?

Through peer-led workshops, the Nail Salon Workers Project connects nail technicians and owners with important health information about how to prevent respiratory illnesses, ergonomic hazards and reproductive health issues in the workplace.

The project is led by the Parkdale Queen West Community Health Centre.

#### What are we looking for?

We are looking for nail salons that participated in one or more peer-led workshops to talk to us about what they learned, what they liked and some of the changes they made.

Your salon will be featured in our end-of-project report to community partners and to funders. Salons may also be featured on the Parkdale Queen West CHC website or other promotional materials.

#### What do I need to do?

Talk to the peer educators about setting up a time for us to visit your salon. The Project Coordinator and Peer Educators will come to your salon at a time that is convenient for you.

During the visit we will talk to salon owners and technicians about changes that happened as a result of participating in the peer-led workshops.

We will also talk about what parts of the project worked well, and not so well – so that we can learn about how to improve the program.

If you are willing, we could take pictures or videos to help showcase the changes.

#### Are there any risks in participating?

We do not foresee any risks to salons who participate in this process.

We will take notes during the site visits. The notes will only be shared with our project team for the purposes of writing the end-of-project report and developing promotional materials.

We will ask your permission before we take any pictures or videos and ask you to sign a media release form.

If you have any questions about the Nail Salon Workers Project or about talking to us for this interview, you can contact:

Cate Ahrens, Health Promoter

Telephone: (416) 703.8482 ext. 2233

Fax: (416) 703.7832 Email: cahrens@ctchc.com















