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Canada: Manitoba To Join Most Other Provinces With Cosmetic Pesticide Ban

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[Manitoba has announced](#) that it will join most other provinces and 170 Canadian municipalities in banning most synthetic chemical lawn pesticides with legislation this fall. The ban follows three notable warnings this year about the risk of synthetic chemical pesticides.

For example, a [technical report](#) for the [American Academy of Pediatrics](#) strongly recommended that "Children's exposures to pesticides should be limited as much as possible." The Academy then adopted a [formal policy calling for increased regulation of pesticides](#). They note that "epidemiologic evidence demonstrates associations between early life exposure to pesticides and pediatric cancers, decreased cognitive function and behavioural problems."

Conservation and Water Stewardship Minister Gord Mackintosh announced the ban, with the support of Dr. Elise Weiss, deputy chief provincial health officer. "From a risk versus benefit perspective, the health benefits of reducing unnecessary use of cosmetic pesticides outweigh the risks," she said. "It is prudent to reduce the risk of pesticide exposure to pregnant women and children." Some children's health groups also [support the ban](#), despite opposition from the lawn care industry.

Most provinces already have restrictions on the sale or use of cosmetic pesticides:

- Quebec (2003) - Ontario (2008)
- Alberta (2008) - New Brunswick (2009)
- Prince Edward Island (2009) - Nova Scotia (2010)
- Newfoundland and Labrador (2012)

British Columbia is currently considering restricting cosmetic pesticides province-wide.

The Manitoba legislation will allow only federally approved bio-pesticides for sale and use on lawns, driveways, sidewalks and patios as well as school grounds, playing fields and playgrounds used predominantly by children and on health-care institution and child-care centre grounds. The legislation would become effective in December 2014 with a one-year grace period for homeowners and would exempt agricultural lands and gardens, golf courses, sod farms, and addressing high-risk noxious weeds and poisonous or invasive species. (Exemptions for sod farms mean that purchases of sod may come with an unexpected dose of pesticides.)

The minister said the four points of the provincial strategy to reduce pesticide exposure will be informed by further consultation and will include:

1. strengthened noxious weed management to protect agricultural lands for production,

2. a strict integrated pest management program for all government pesticide applications beginning December 2013,
3. consumer and applicator awareness about effective lawn bio-pesticides and organic practices, and
4. consultation with the education and child-care centre sectors to significantly reduce indoor pesticide exposure.

The minister said the proposed legislation would be phased in to allow homeowners to become familiar with replacement products and practices, and to allow retailers and the lawn care sector to adapt. He plans to consult with the lawn-care industry and other stakeholders on the detailed regulations, including which insecticides would be included.

The consultation document is available [online](#). Federal government information on pesticides is available at www.healthykanadians.gc.ca/environment-environnement/pesticides/index-eng.php.

The Academy of Pediatric's Recommendations to Government

1. "Marketing: ensure that pesticide products as marketed are not attractive to children.
2. Labeling: include chemical ingredient identity on the label and/or the manufacturer's Web site for all product constituents, including inert ingredients, carriers, and solvents. Include a label section specific to "Risks to children," which informs users whether there is evidence that the active or inert ingredients have any known chronic or developmental health concerns for children. Enforce labeling practices that ensure users have adequate information on product contents, acute and chronic toxicity potential, and emergency information. Consider printing or making available labels in Spanish in addition to English.
3. Exposure reduction: **set goal to reduce exposure overall**. Promote application methods and practices that minimize children's exposure, such as using bait stations and gels, advising against overuse of pediculicides. Promote education regarding proper storage of product.
4. Reporting: make pesticide-related suspected poisoning universally reportable and support a systematic central repository of such incidents to optimize national surveillance.
5. Exportation: aid in identification of least toxic alternatives to pesticide use internationally, and unless safer alternatives are not available or are impossible to implement, ban export of products that are banned or restricted for toxicity concerns in the United States.
6. Safety: continue to evaluate pesticide safety. **Enforce community right-to-know procedures when pesticide spraying occurs in public areas**. Develop, strengthen, and enforce standards of removal of concerning products for home or child product use. Require development of a human biomarker, such as a urinary or blood measure, that can be used to identify exposure and/or early health implications with new pesticide chemical registration or reregistration of existing products. Developmental toxicity, including endocrine disruption, should be a priority when evaluating new chemicals for licensing or reregistration of existing products.
7. Advance less toxic pesticide alternatives: **increase economic incentives for growers who adopt IPM**, including less toxic pesticides. Support research to expand and improve IPM in agriculture and nonagricultural pest control.
8. Research: support toxicologic and epidemiologic research to better identify and understand health risks associated with children's exposure to pesticides. Consider supporting another national study of pesticide use in the home and garden setting of US households as a targeted initiative or through cooperation with existing research opportunities (eg, National Children's Study, NHANES).
9. Health provider education and support: support educational efforts to increase the capacity of pediatric health care providers to diagnose and manage acute pesticide poisoning and reduce pesticide exposure and potential chronic pesticide effects in children. Provide support to systems such as Poison Control Centers to provide timely, expert advice on exposures. Require the development of diagnostic tests to assist providers with diagnosing (and ruling out) pesticide poisoning."

The content of this article is intended to provide a general guide to the subject matter. Specialist advice should be sought about your specific circumstances.