

TO: House Committee on Human Services
FROM: Office of Racial Equity
DATE: March 27, 2024
RE: Office of Racial Equity testimony and research on S.25, An act relating to regulating cosmetic and menstrual products containing certain chemicals and chemical classes and textiles and athletic turf fields containing perfluoroalkyl and polyfluoroalkyl substances

Dear Chair Woods and members of the House Committee on Health and Human Services,

Thank you for the opportunity to provide comments on S.25, An act relating to regulating cosmetic and menstrual products containing certain chemicals and chemical classes and textiles and athletic turf fields containing perfluoroalkyl and polyfluoroalkyl substances. In its testimony today, the Office communicated the need to be cautious when making sweeping regulations that ban certain products or components of products. These bans may have the effect of changing who can access these products rather than truly protecting the public, with wealthier individuals often retaining access to statutorily banned products. The Office further explained the history of products being additionally scrutinized or banned because of their rising popularity in communities of color and the overall concern with government paternalism exemplified in product bans.

On the subject of the Community Outreach Plan, our Office recommended that the Committee consider the following:

1. Whether the requirement to develop and execute the community outreach plan will impose excessive burdens on the staff capacity of the Vermont Department of Health;
2. Whether it is appropriate to use the phrase “Black, Indigenous, and Persons of Color,” or whether to substitute it for a broader reference to historically oppressed and marginalized populations.¹ **Note that the Office still recommends that the Community Outreach Plan mentions an explicit focus on equity and discusses specific outreach to historically oppressed and marginalized populations.**
3. Whether there will be enough time between the December 1, 2024 submission of the community outreach plan and the beginning of the 2025 Legislative Session to ensure adequate resourcing of any ensuing project. The Office communicated that the community outreach process needs to be adequately resourced, including but not limited to:
 - a. Funding for translation of outreach materials and surveys.
 - b. Funding for interpretation services at community meetings.
 - c. Funds sufficient to reserve community meeting spaces.

¹ Grady C. Why the term “BIPOC” is so complicated, explained by linguists. Vox.com. Published June 30, 2020. Accessed July 29, 2022. <https://www.vox.com/2020/6/30/21300294/bipoc-what-does-it-mean-critical-race-linguistics-jonathan-rosa-deandra-miles-hercules> and Daniel K. Why BIPOC Is An Inadequate Acronym. Chatelaine.com. Published November 12, 2020. Accessed November 18, 2022. <https://www.chatelaine.com/opinion/what-is-bipoc/>. Note that the Office does not speak on behalf of all people of color or organizations representing people of color in Vermont in choosing not to use “BIPOC”.

- d. Funds sufficient to compensate participants for their time and emotional labor in sharing personal details of their hygiene routines with State government researchers. Participant compensation may include providing childcare, food, participation stipends, and/or goods or gift cards in exchange for the completion of surveys.

The following resources and associated summary notes informed our Office's testimony today.

Zota AR, Shamasunder B. **The environmental injustice of beauty: framing chemical exposures from beauty products as a health disparities concern.** American Journal of Obstetrics & Gynecology. 2017;217(4):418.e1-418.e6. doi:10.1016/j.ajog.2017.07.020. [https://www.ajog.org/article/S0002-9378\(17\)30862-1/fulltext](https://www.ajog.org/article/S0002-9378(17)30862-1/fulltext)

"Mass distribution of images that idealize Whiteness can influence sales of hair straighteners, skin lighteners, and odor masking products.^{34, 35} Racial discrimination based on European beauty norms can lead to internalized racism, body shame, and skin tone dissatisfaction, factors that can influence product use to achieve straighter hair or lighter skin. Thus, beauty product use may be one way that structural discrimination becomes biologically embedded.^{36, 37}"

Johnson PI, Calderon NM, Clark PY, et al. **Differences in personal care product use by race/ethnicity among women in California: implications for chemical exposures.** J Expo Sci Environ Epidemiol. 2023;33(2):292-300. doi:10.1038/s41370-021-00404-7. <https://www.nature.com/articles/s41370-021-00404-7>

- The study includes a relatively small sample size of women in each race/ethnicity category, but benefits from very thorough survey, robust community engagement, and use of translated surveys in Spanish and Vietnamese.
- Black/African American women were found to be more likely to be exposed to chemicals of concern through feminine hygiene products (wipes, washes, douches) than White women. This study of California residents differs from previous national study with regards to how often Latina and Vietnamese women used feminine washes.
- Latina and Vietnamese women in this study were more likely to use products with labels not in English. These products are less likely to be regulated by the US Food and Drug Administration; people who use products without English labels may experience increased exposure to chemicals of concern. The study notes that these products without English labels included skin lightening products, which may contain lead or mercury.

Johnson PI, Favela K, Jarin J, et al. Chemicals of concern in personal care products used by women of color in three communities of California. J Expo Sci Environ Epidemiol. 2022;32(6):864-876. doi:10.1038/s41370-022-00485-y. <https://www.nature.com/articles/s41370-022-00485-y>

- In the surveys in California and in previous national research, Black/African American women were found to be more likely to be exposed to chemicals of concern in chemical-based hair straighteners and chemical-based hair relaxers. The difference in hair product use may contribute to racial disparities in exposure to chemicals of concern, possibly contributing to disparities in health outcomes for Black/African American woman.
- In California and nationally, Vietnamese women may be more likely to work at nail salons and experience occupational exposure to chemicals of concern.

Many factors contribute to racialized health disparities, including structural discrimination in housing and education, systemic and institutional racism in medical institutions, and the day-to-day chronic

stress of interpersonal and internalized racism.² The Health Equity Advisory Commission's reports contain specific recommendations for addressing racialized health disparities in Vermont and may be accessed at <https://aoa.vermont.gov/content/heac-information-center>.

Concerns with 36 VSA §1772 (a)(11) banning the use of aluminum salts in cosmetic products in Vermont (page 3 of [S.25 As Passed by the Senate](#)):

- According to the American Cancer Society, "There are no strong epidemiologic studies (studies in people) that link breast cancer risk and antiperspirant use, and very little scientific evidence to support this claim...At this point, there is no clear link between antiperspirants containing aluminum and breast cancer."³
- This ban will have negative impacts on people with hyperhidrosis (excessive sweating). Topical antiperspirants containing aluminum salts are the first line of treatment for hyperhidrosis.⁴
- The aluminum salts used in antiperspirants, like aluminum chloride, are not listed on California's list of reportable chemicals for their California Safe Cosmetics Program, which is the most robust cosmetic chemical reporting program in the US.⁵

² Braveman PA, Arkin E, Proctor D, Kauh T, Holm N. Systemic And Structural Racism: Definitions, Examples, Health Damages, And Approaches To Dismantling. *Health Affairs*. 2022;41(2):171-178. doi:10.1377/hlthaff.2021.01394. <https://www.healthaffairs.org/doi/10.1377/hlthaff.2021.01394>

³ American Cancer Society. Antiperspirants and Breast Cancer Risk. American Cancer Society. Published October 19, 2022. Accessed March 20, 2024. <https://www.cancer.org/cancer/risk-prevention/chemicals/antiperspirants-and-breast-cancer-risk.html>

⁴ McConaghy JR, Fosselman D. Hyperhidrosis: Management Options. *American Family Physician*. 2018;97(11). <https://www.aafp.org/pubs/afp/issues/2018/0601/p729.pdf>

⁵ California Safe Cosmetics Program. Accessed March 20, 2024. <https://www.cdph.ca.gov/Programs/CCDPHP/DEODC/OHB/CSCP/Pages/CSCP.aspx#> (for list of reportable chemicals, see "Reportable Ingredients List" at https://view.officeapps.live.com/op/view.aspx?src=https%3A%2F%2Fcdphsubmit.cdph.ca.gov%2Fsubmission%2Fassets%2Ffiles%2FReportable_Ingredients_List.xlsx&wdOrigin=BROWSELINK).