Executive Summary for CTCHC's Healthy Nail Salon Workers Project

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1. Statement of Problem/Topic

Nail salon workers in Toronto are typically female immigrants from either China or Vietnam. They work in a profession where throughout the workday they are regularly exposed to chemicals known to cause cancer, respiratory illnesses and reproductive problems. As immigrants, issues such as gender, language, income, past trauma, and immigration status create increased vulnerabilities. The occupational health of nail salon workers is critical and has not been substantially investigated in Canada. Research in the United States found that salon workers are exposed to volatile solvents like toluene and phthalates but there are gaps in regulatory standards to address these exposures. Nail salon workers suffer from a variety of respiratory, skin and musculo-skeletal problems that they attribute to their chemical exposures and working conditions. The vulnerability felt by these workers, as illustrated by a 2012 article in the Globe and Mail which found that nail salon workers refused to be interviewed due to fear of reprisal, increases the importance of adding the voices and experiences of Toronto nail technicians to the work and research that is being done.

2. Description of Research Conducted

Central Toronto Community Health Centres (CTCHC) was well positioned to do this research as its programs have created a strong connection with the Chinese community and it has Chinese-speaking staff. Although there are other immigrant groups who work in the nail salon industry, primarily Vietnamese, the CTCHC focused on Chinese immigrants as they are a priority population being served at the CTCHC. The research project consisted of the following:

1) Three peer facilitators who spoke Chinese (Mandarin and Cantonese) and/or had experience as a nail salon worker were hired to assist in recruitment, program planning, and delivery. The peer facilitators then recruited nail technicians to the project through a combination of salon-to-salon outreach, snowball sampling, and convenience sampling. Nail technicians were recruited from more than twenty different salons. The sample group was made up of female Chinese immigrants who were currently working as nail technicians and one owner who is also a nail technician.

2) A focus group with nail technicians (N=7) was then conducted on May 26, 2014 to ascertain the barriers faced in mitigating their exposure to hazardous chemicals. An interpreter was hired to facilitate the participation of those who felt more comfortable answering in Chinese. The questions focused primarily on two social determinants of health: education, in the form of training, and employment conditions.

3) Four educational workshops were held for nail technicians to address concerns raised in the focus group (Overview of nail technicians and health with Dr. Thu Quach from California, How to protect your hands with Victoria Arrandale from CREOD, Employment Standards Act with Yiman Ng from CTCHC, Exposures to chemicals and reproduction with Caryn Thompson from CPCE and South Riverdale CHC and Linor David from CTCHC). Participant numbers in workshops ranged from seven to twenty-five.

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2 Rochen Ford, Anne. "Overexposed, Underinformed: Nail Salon Workers and Hazards to Their Health / A Literature Review". National Network on Environments and Women’s Health.


6 Balkissoon, Denise. "Your Manicure Looks Good but the Health Effects Are Ugly." The Globe and Mail 14 July 2012:

7 Centre for Research Expertise in Occupational Disease, a collaborative program of the University of Toronto and St Michael's Hospital. www.creod.on.ca.

8 Canadian Partnership for Children's Health & Environment. www.healthyenvironmentforkids.ca.
4) A collaborative **art piece** was created as an exploration of the nail technicians’ experiences working in nail salons: their hopes, challenges, and journeys. An art educator, Linda Naccarato, was hired to facilitate this project. Nail technicians presented this art piece and the meaning behind it at the multi-stakeholder roundtable.

5) A multi-stakeholder **roundtable** was convened on September 30, 2014 with the research team, peer facilitators, nail technicians and a variety of non-profit organizations, academics, and public health professionals. The main objectives of the roundtable were to: a) learn from each other’s experience and knowledge of the environmental health risks of working in nail salons; and b) identify key interest areas and opportunities for future work. Interpreters were hired to translate the discussion into Chinese and English.

6) Two **videos** were created from the project. The first video is an overview of the project and the second provides a summary of various perspectives on the issue and opportunities for future work. The second video will be distributed to settlement workers, health service providers, public health units and other community health centres; the video will also be posted as a link on CTCHC’s website as a way to share information about the project and a place to direct nail salon workers who might be interested in learning about the project and hearing directly from their peers on the issues.

7) A **final report** has been distributed to partner agencies, and through the emerging Healthy Nail Salon Collaborative and Nail Technician Association. Members of the research team are in the process of publishing the work through the Ontario Health Promotion E-bulletin.

3. **Key Findings and Outcomes**

   It became clear through the focus group, workshops, art piece, and roundtable discussion that women working in nail salons have a variety of occupational health concerns. Participants in the focus group named several health effects from which they suffered: skin problems and irritations, allergies, nausea, trouble sleeping, tiredness, musculoskeletal issues, burning eyes and coughing. They also raised concerns they had around pregnancy and chemical exposures. The women expressed a strong desire to make their work safer but also conveyed feeling that their ability to do so was limited. Several barriers to reducing their risks were identified, including: lack of training, limited access to workplace safety information, few health and safety workplace policies and practices, and immigration and settlement issues.

   From the focus group we learned that nail technicians in Toronto who emigrated from China often learned their trade on the job. The only nail technicians who felt confident about how to protect their health at work were those that had completed formal training in Toronto and one whose owner was notably careful with his practices with respect to health. In the dominant scenario, in which technicians are learning solely through on-the-job training, owners become the gatekeepers for workplace practices and workers’ knowledge of how to protect themselves. Within our participant group this meant that with only one exception, workers were not informed by their employers about exposure risks or the steps available to protect themselves. Nail technicians reported that choosing to reduce their work hours was one of the only ways they knew to protect their health. Nail technicians also reported having very few workplace health and safety policies or practices in their salons. For example, most were familiar with health benefits of frequent hand washing but reported not being able to ask clients to do so. Most technicians also did not regularly wear gloves, and the gloves that were available were latex-based as opposed to nitrile, which is the appropriate material to best protect hands from exposures in nail salons. The nail technicians were unfamiliar with the regulatory standards that exist and many participants in the roundtable voiced that what minimal standards exist tend not to be in the interest of the workers (but rather clients) and are not well enforced. The women expressed a number of reasons why they thought the salon owners were not providing better health and safety protection for their workers. The two main reasons offered were the costs of protection measures and a lack of understanding of the issues.

   The lack of education about and enforcement of workplace health and safety provisions are exacerbated by the immigration status of these nail technicians. Immigration and settlement impact nail technicians’ ability to protect themselves in terms of understanding their rights in the workplace, knowing where to get information, who to talk to about the risks and concerns, and fear of losing their job from speaking out or asking questions. For example, many technicians expressed learning important, new information about rights in the workplace
from participating in the workshop. In the roundtable, it was reported that because employment and income are tied to immigration status, the women fear asking questions related to safety, seeking support for health concerns, or challenging owners’ practices because of the potential risk of losing their job.

The nail technicians involved in this project reported becoming increasingly engaged in the issues of workplace health and safety in salons. They reported having an increased sense of agency and confidence in speaking about and acting on these issues; members of the research team and partner agencies have also observed these changes within the peer facilitators.

4. **Unexpected/Unanticipated Outcomes**

Nail technicians involved in the research have identified the need for a Nail Technician Association, and leaders have emerged within the group to initiate this organizing. Through the support from Women’s College Hospital, Women’s Xchange we convened an initial gathering of nail technicians to explore the role and work of this Association and potential next steps; a summary of this meeting is attached in Appendix A. This is work that CTCHC is continuing to support.

CTCHC hosted a wrap-up gathering for the peer facilitators and research participants to view the videos and celebrate the work of the project. In this gathering we also consulted the participants and peers about the key outcomes of the project and the components of the final report.

The California Healthy Nail Salon Collaborative was used as an example of other potential developments that Toronto and Canada could benefit from. Through the support from Women’s College Hospital, Women's Xchange we convened an initial gathering of organizations interested in continuing or already involved in work on these issues. The National Network on Environments and Women's Health (NNEWH), Chinese Interagency Network Labour Committee, Centre for Research Expertise in Occupational Disease (CREOD), and the Occupational Cancer Research Centre (OCRC) at Cancer Care Ontario are examples of the organizations interested in this future work. A summary of this meeting is attached in Appendix B.

Building on the Healthy Nail Technicians Project we have launched a Peer-led Occupational Health Project focused on protecting nail technicians’ hands through a train-the-trainer model, funded and supported in kind by Centre for Research Expertise in Occupational Disease at St. Michael’s Hospital, through their funding from the Ontario Ministry of Labour. Cancer Care Ontario and St. Michaels Hospital have also submitted an application to the Ministry of Labour that would continue to build on the Healthy Nail Technicians Project, in which CTCHC would be involved.

5. **Recommendations for Policy, Practice, or Further Research**

There are many opportunities to improve workplace health in nail salons. We received positive feedback from the workshops and roundtable in terms of increasing the understanding of the health risks in nail salons and some of the ways to reduce these risks. Nail technicians told us that they learned new things about how to protect their health and that they wanted more information. Providing educational opportunities is one way we can continue to support nail technicians. Based on the work of the California Healthy Nail Salon Collaborative and our initial work on the Peer-led Occupational Health Project, we have learned that working to build relationships with salon owners and bringing them on board is critical to the success of improving workplace health.

Understanding the lack of regulatory support and enforcement also presents an opportunity to improve the health conditions for salon workers. Many participants at the roundtable reported to have a better understanding of the levels of government that need to be approached and where the regulatory gaps are that need to be addressed. Many roundtable participants identified the need for continued research and interdisciplinary work, and the role that long-term data collection can play in supporting advocacy for healthier nail salon working conditions. An opportunity to educate the wider public on these issues also exists; for example, building allies through clients at nail salons, who share in the impacts of chemical exposures in the salons.

The emerging Nail Technician Association and Healthy Nail Salon Collaborative also present significant opportunities for future research and advocacy, and improvements in health services for these workers.
Appendix B – Exploring a Nail Technician Association

December 16\textsuperscript{th} at Central Toronto Community Health Centres

In attendance: Julia Ma, Sophia Li, Jackie Liang, Monica Fu, Cate Ahrens, Yiman Ng.

Chair: Monica Fu (nail technician)

Questions to consider:
- Should and could the Association be supported by an agency?
- Potential agencies: Central Toronto Community Health Centres, Chinese Interagency Network, labour committee
- Could we find funding to support this development?
- How would the Association function and what structure would be useful?

The case for a Nail Technician Association:
- We (nail technicians) know the profession the best; we have a lot to offer
- The profession is underestimated, but we are everywhere; we are overlooked and undervalued immigrant women
- We need to advocate for healthier working conditions; there are many ways to do this

Vision for the Nail Technician Association – written by Monica Fu

A) The relationship of the Nail Technician Association and government
  1. Employment
     - Support for settlement agencies and immigration for connecting newcomers to this work; helping to reduce unemployment rate and safer occupations
     - Provide information and line of communication for nail salon industry
  2. Health
     - Improve the health of workplaces, reduce the number work-related illnesses
     - Communicate and promote workplace health and safety information
     - Inform public health care about the medical support needs of this industry
  3. Workplace Standards
     - Provide healthy and qualified workplace, materials and equipment standards
     - Provide healthy workplace practice standards for nail technician
     - Provide healthy environment standers for clients of the nail salons
  4. Data and Policy
     - Provide long-range data for the industry; assist in the collection of data
     - Communicate policy to nail salons and nail technicians
     - Assist in communicating policy and standards to new salons and potential owners/operators

B) The relationship of the Nail Technician Association and nail technicians
  1. Employment
     - Provide list of qualified nail salons
  2. Health
     - Provide education about health and healthy workplace practices
     - Provide solutions for health issues where possible
3. Labour Protection
   - Inform about labour standards and provide support and advocacy wherever possible; for example, wages in arrears, not receiving deposit returns

4. Professional Education
   - Provide list of qualified beauty schools and training instructors

5. Communication and Resource Sharing
   - Provide a hub for information and news related to the profession and nail salons

C) The relationship of the Nail Technician Association and society
1. Information Sharing
   - Communicate the required standards for salons
   - Provide healthy product information
   - Provide suggestions for what to do if a client has concerns about a salon
   - What clients can do to support healthy environments in the nail salon

2. Media Promotion and Action
   - Clients help bring attention to this profession
   - Build allies between women using the services and women providing the services
Appendix B – Exploring a Healthy Nail Salon Collaborative

January 20th at Central Toronto Community Health Centres
( hosted by CTCHC and NNEWH)

In attendance: Victoria Arrandale, Linn Holness, Irene Chen, Julia Ma, Yuan Xu, Jyoti Phartiyal, Sophia Li, Jackie Liang, Monica Fu, Xiao Shao, Erica Phipps (telephone), Anne Rochon Ford, Cate Ahrens

Regrets: Linor David, Caryn Thompson, Jeff Masuda, Ruby Lam, Leslie Piekarz, Heather Marshall, Fe de Leon

Introduction
- Overview of the day and why we’re here: National Network on Environments and Women’s Health (NNEWH) and Central Toronto Community Health Centres (CTCHC) each have funding to support this work in some way. We were keen to see who’s interested in participating in a Collaborative and what that might look like.
- Go around the room: name, where you work, relationship to this issue (this was a significant portion of the meeting)

Work So Far
(acronyms are fleshed out in the lists on the next page)
- Healthy Nail Technicians Project (CTCHC funded by Women’s Xchange, Women’s College Hospital) – Cate Ahrens
- Peer-led Occupational Health Education Project: Protecting Nail Technicians’ Hands (CTCHC funded by CREOD) – Cate Ahrens
- NNEWH’s Literature Review (funded by Tides Foundation) – Anne Rochon Ford
- Nail Technician Association – Monica Fu (nail technician)

California Example
- Anne Rochon Ford describes the work that has been done in California with respect

The Potential Collaborative
- Venn diagram exercise to imagine the potential players: Who might be interested? Who is missing from today? What other agencies and connections?
See list below.
- Differentiating the Nail Technician Association and the Collaborative. Association would be led by and made up of Nail Technicians; a resource for Nail Technicians and broader society to understand their workplace and experience, supports, trainings, advocacy. Collaborative is made up of community, academic and government agencies offering a collective voice to make larger changes that will improve working conditions for nail salon workers. More time spend on this in future meeting.

Next Steps
- Meeting March 4th, 2015 @ Central Toronto Community Health Centres
- Broaden our invitations based on the list below; engagement
- What would our work and structure look like?
- Distinction between the work of the Collaborative and the work of the Association

Notes from our brainstorm:
Agencies who are interested in being involved in the Collaborative:
National Network on Environments and Women’s Health (NNEWH)
Agencies who might be interested (and aren't currently around the table):
- Toronto Public Health – Equity and Access Office
- Workers’ Action Centre
- Access Alliance
- Immigrant Women’s Health Centre
- South Asian Women’s Centre (Lien or others)
- Vietnamese Women’s Association
- Metro Toronto Chinese and South Asian Legal Clinic
- Bramalea Community Health Centre – occupational health outreach worker (Hal Delair)
- Workplace Safety and Prevention Services (Bill) – through MOL, covers this sector
- Environmental Defense – consumer focus
- Canadian Environmental Law Association
- Toronto Environmental Alliance
- Hong Fook, mental health
- Second Career, employment assessment centres

Agencies that might fit with Collaborative AND Nail Tech Association:
- Salon Owners
- Enterprise Toronto
- Salon training community/schools/etc
- Community Learning Centre
- Other nail technician populations – Ukraine Immigrant Services

Resources to support the work (but might not be a “member” of the collaborative):
- National Research Council Indoor Air Quality
- Ministry of Labour (Ontario)
- City Councilors, specific allies
- Body Safe Inspectors