

CREATE HOSPITALITY

Religious facilities set apart space, naming it sacred providing sanctuary or *safe space* to those who enter. Likewise the faith community itself creates sacred space through lifestyle changes and attitude by reducing fragrances for those seeking sanctuary from pollutants that harm the body. This accommodation is particularly important for children, pregnant women, immune-suppressed individuals, the chemically sensitive and chemically injured.

We, the community of support, become the stewards of such sacred space. The work of the community is to maintain the integrity of the space for those who seek refuge, healing, and hope.

DEFINITION OF FRAGRANCE

Brigham and Women's Hospital defines *fragrance* as "any product which produces a scent, strong enough to be perceived by others including but not limited to colognes, perfumes, after shave products, lotions, powders, deodorants, hairsprays and other hair care products, and other personal products." This definition appears in Brigham and Women's Hospital Personnel Policy Manual under Fragrance-Controlled Workplace.ⁱ

Fragrance products are any product that contains fragrance or scent. For example: Some products may be marketed as "unscented" but may contain rose oil, which is highly fragranced; or it may contain masking fragrances.

WHY ARE FRAGRANCES A HEALTH ACCOMMODATION ISSUE?

Scented products are toxic chemicals. Perfumes/colognes were described in 1986 by the National Academy of Sciences as significant neurotoxins (toxic to the brain). The report stated that 95% of the chemicals

used in fragrances are synthetic petrochemicals. Perfumes/colognes and scented product companies have a legal loophole to avoid telling ingredients even to doctors! All other chemical companies must do this under Occupational Safety and Health Administration (OSHA) Hazard Communication Standard.

Scented products can contain mood-altering substances, which change brain biochemistry. US EPA analysis has shown irritant and neurotoxic chemicals in fragrances.ⁱⁱ

Fragrances contain significant amounts of chemicals called phthalates.ⁱⁱⁱ Phthalate chemicals damage genetic material in sperm and cause birth defects in boys, which can impair testicular (male hormone) function.^{iv} Occupational exposure to phthalates can reduce testosterone in men.^v Phthalates accumulate in breast milk of the mother and cause abnormal hormone levels in nursing baby boys.^{vi}

Fragrances can cause respiratory damage. Phthalate exposure can increase asthma and rhinitis^{vii}. Individuals with asthma



and/or other respiratory inflammation show reduced lung function with even brief exposures to scented products.^{viii} A large scientific study^x shows that most healthy people have lung/respiratory symptoms with scented products.

Research by Bell shows increased illness from perfumes/colognes among otherwise healthy young and elderly people. Chemicals released by “air fresheners,” “air deodorizers,” and mothballs can also



reduce lung function in healthy persons. Scented and unscented hairspray reduces lung function in healthy people. Standardized testing confirms respiratory irritation and brain/nerve toxic effects.

The vast majority of people with asthma have increased symptoms and worsening of lung function with exposure to scented products.

Fragrances affect autoimmune disease and lupus. Animal studies now show a link between phthalates and lupus. Lupus is a serious autoimmune disease that is rapidly increasing in numbers of affected people. Up to 1,500,000 Americans have been diagnosed with lupus and 16,000 more are newly diagnosed yearly.

Fragrances have effects on chronic illness. Data analyzed on 90 of Dr. Grace Ziem’s patients with chronic illness from chemical injury shows that with exposure, 58% experience illness symptoms following 20 minutes of exposure to perfumes/colognes, and 65% with exposure to “air freshener” (odor masking) chemicals while using a restroom.^{xi} Dr. Ziem also has patients that developed chronic brain and lung damage following repeated occupational exposures to scented products.

In response to these health hazards, there are increasing fragrance free policies in public places and workplaces (comparable to smoke free policy). In the large scientific study above, perfumes/scented products cause almost as much respiratory irritation as cigarette smoke.

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PRECAUTIONARY PRINCIPLE

Federal law protects fragrance manufacturers from disclosing ingredients. This protects their secret formulas or Trade Secrets. The law does not require manufacturers to test the ingredients in their products or prove their safety. Therefore, there is no regulation.

The Precautionary Principle states that if we do not have scientific proof of safety, we should use precaution, based on what we now know, rather than assuming the product is safe until conclusive evidence is forthcoming. Currently, it falls to the private sector or individuals to obtain evidence to prove a product unsafe. This is the only route to remove the product from the market place. Funding limits this action.

It is the ethical responsibility of each individual and faith community to educate themselves and plumb the depths of their theology and values to make informed consumer choices and lifestyle changes that protect health and make community accessible to the effected and injured. Let’s err on the side of precaution.

IMPLICATIONS FOR WORSHIP

Many religious traditions burn candles or oils and incense, anoint with oils, and place cut flowers or potted plants on the altar. All of these products contain synthetic fragrances, petroleum products, pesticides, or other toxic chemicals.

Choirs increasingly struggle because fragrances affect the voice of its singers. Worship participants become exposed to the fragrances from close proximity to clergy or lay worship leaders during sacraments, e.g., laying-on of hands, anointing, baptizing, receiving communion elements, etc.

Worshippers get trapped in the pew when someone wearing fragrance sits in front, in back, (even a few rows away) or to the side of them.

CULTURAL CHALLENGES

Business has identified *scent* as the last untapped frontier. Marketing shapes our culture, defining our needs, norms, and identity.

The worldview of the 21st century assimilates fragrances and personal care products into the very identity of persons. Some will not be seen in public or even by their spouse without makeup, hairspray, or fragrances. Therefore, it can be understood by some as a right to one's existence. This makes sacrifice for another person's health and well-being a difficult, if not impossible task.

For others it is a matter of personal freedom, guaranteed by the Bill of Rights, to make whatever personal choices one deems appropriate for him/herself. Therefore, fragrances are defined as a right.

These cultural challenges lead us to wrestle with the question: What is *reasonable* accommodation? Can I, or will I, reduce, minimize, or eliminate my fragrance on behalf of another?

THEOLOGICAL CHALLENGES

What we do in worship can be an end in-itself, or it can be a means to a relationship with God and God's people—the community

that God forms. Our symbols invite us to participate with God.

Scriptures speak of fragrances pleasing to God. Fragrance has deep theological roots as a symbol of communicating with God. Candles, oils, incense, and flowers have been, and are, symbols that draw us into the Mystery of God, where we come to know and remember who we are.

Worship forms us to BE community, yet the very symbols that have traditionally formed community now threaten well-being and block the very thing they intend to create.

The theological challenge is: How do we eliminate fragrances for the health and well-being of the community and the inclusion of those in need of communing with God and participating in community, without losing the symbolic roots that form our faith identity and tradition?

BEGIN WITH PRAYER, STUDY & DISCUSSION

How do our scriptures provide insight to guide us in examining our worship through the lens of those affected by fragrances?

Take a survey of those attending worship and those congregants who have been absent, asking if they describe themselves as sensitive to fragrances. Also, ask if they know people who are, and if fragrances keep them from attending worship. Develop questions from, *Implications for Worship*, to listen more deeply and gather more specific information.

Many people slip away, unnoticed, because they can no longer tolerate



fragrances. They don't talk about it because they do not either understand it themselves

or experience it as understandable to others.

A survey asks the question and names the issue. This gives validity to those silently suffering and struggling. The questions communicate: *We care!* They also open the discussion, which paves the way for telling and hearing stories.

The process of listening can open our eyes and our ears. We may even hear God, hearing the cries of the world—the very things our eyes and ears could not see and hear before.

IMPLEMENT A FRAGRANCE-REDUCTION POLICY

A policy provides a structure for action. It forms a commitment to intentional community. It communicates a will for change and incorporates a vision for well-being and inclusion.

Begin with a *Fragrance-Reduction Policy* rather than a *Fragrance-Free Policy*. This allows room for education and transformation, while accepting that people are in transition or just entering the faith community without knowledge of this policy of care.

A Fragrance-Free Policy may create a divide between those who have a detectable fragrance and those who don't. We do not want to create an environment for finger-pointing and discrimination against those who may be trying. It may be more difficult for those who have lost their sense of smell and do not realize that their fragrances are a problem.

The goal of the policy is to create a vision and to build community. The work of the policy is to be stretched and reshaped by the Intimate Stranger, just as Jacob was at the River Jabbok. There he came face-to-

face with God, with his past, present, and future, blessed and given a new identity.

EDUCATE YOUR FAITH COMMUNITY

Post your policy. Keep your vision before the community. Use signage, worship folders, newsletters, banners, and website to inform, remind, and reshape lifestyle.

Provide creative reminders to post in the home on the bathroom mirror to help people reshape their routines and develop new habits before leaving their homes to attend worship.

Organize study groups to explore health issues for the general population as well as those who are vulnerable or disabled.

Clergy and faith educators can help their faith community explore identity formation rooted in faith versus culture, as well as exploring faith versus tradition.

Use the Women's Health and the Environment Toolkit, available at www.womenshealthandenvironment.org to help study groups or discussion groups explore the issues and become actively involved in creating a healthier community to live, work, play, and go to school.

INTRODUCE SAFER ALTERNATIVES

Introduce your faith community to alternative products. Some are available from grocery stores and pharmacies. Others are available from health food stores and mail order.

Research your current products and alternatives at www.safecosmetics.org, click on the *Skin Deep Program*. The Environmental Working Group tests products and provides information so the consumer can evaluate and select products from a perspective of potential health effects.

Endnotes:

ⁱ Brigham and Women's Hospital, contact Mary Ellen Cotter, Director of Occupational Health (617) 732-6131.

ⁱⁱ L. Wallace et al. US EPA Air and Waste Management Assoc. "Identification of polar volatile organic compounds in consumer products and common microenvironments", presentation at the 84th annual meeting and exhibition. Vancouver British Columbia, June 16-21, 1991.

ⁱⁱⁱ S Duty, et al "The relationship between environmental exposures to phthalates and DNA damage in human sperm using the neutral comet assay", *Enviro Health Persp* 113, No9: 1164-1169 2003.

^{iv} S.Swan, et al "Decrease in anogenital distance among male infants with prenatal phthalatae exposure", *Environ Health Persp.* 113 No. 81:1056-1061, 2005.

^v G.Pan, et al, "Decreased serum free testosterone in workers exposed to high levels of di-n-butyl phthalate (DBP) and di-2-ethylhexyl phthalate (DEHP): A cross-sectional study in China." *Environ Health Persp.* 114:1643-1648, 2006.

^{vi} MK Main, et al, "Human breast milk contamination with phthalates and alterations of endogenous reproductive hormones in infants three months of age", *Enviro Health Persp*, 14:270-276, 2006.

^{vii} "Phthalates linked to lupus in mice", *Environ Health Persp.* 113:A809, 2005.

^{viii} P Kumar, et al, "Inhalation challenge effects of perfume scent strips in patients with asthma", *Annals of Allergy, Asthma & Immunology* 75:429-433, 1995.

^{ix} C Shim, et al. Effects of odors in asthma", *Am J of Med* 80:18-22, 1986.

^x N. Eriksson et al, "Flowers and other trigger factors in asthma and rhinitis—an inquiry study", *Allergy*, 42:374-383, 1987.

^{xi} G.Ziem, Presented as an invited speaker to National Institute of Environmental Health Sciences Workshop on experimental approaches to chemical sensitivity." 1995 . *Environ Health Persp.* 105:417-436, 1997.