CITY COUNCIL CITY OF NEW YORK -----X TRANSCRIPT OF THE MINUTES of the COMMITTEE ON HEALTH -----X June 10, 2010 Start: 1:10 pm Recess: 2:58 pm Council Chambers HELD AT: City Hall BEFORE: MARIA DEL CARMEN ARROYO Chairperson COUNCIL MEMBERS: Peter F. Vallone, Jr. James F. Gennaro Vincent J. Gentile Joel Rivera Helen D. Foster Deborah Rose Albert Vann James G. Van Bramer Rosie Mendez

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A P P E A R A N C E S (CONTINUED)

Nancy Clark Assistant Commissioner of the Bureau of Environmental Disease Prevention NYC Department of Health and Mental Hygiene

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Kristina Jung WE ACT

Miranda Massie Litigation Director New York Lawyers for the Public Interest

1	COMMITTEE ON HEALTH 3
2	SERGEANT-AT-ARMS: Quiet, please.
3	CHAIRPERSON ARROYO: Good
4	afternoon. Is this on? Yeah. Good afternoon, my
5	names is Maria Carmen Arroyo, Chair of the
6	Committee on Health here in the City Council, and
7	today the Committee will be considering
8	[Off mic]
9	CHAIRPERSON ARROYO: I'm sorry?
10	[Off mic]
11	CHAIRPERSON ARROYO: It's too loud,
12	too low?
13	[Off mic]
14	SERGEANT-AT-ARMS: It's on, right?
15	CHAIRPERSON ARROYO: Oh.
16	MALE VOICE: Sorry.
17	CHAIRPERSON ARROYO: Okay. It's
18	on, you're going to make me do that again? Jerry?
19	[Off mic]
20	CHAIRPERSON ARROYO: Good
21	afternoon, my name is Maria Carmen Arroyo, Chair
22	of the Committee on Health. Today, the Committee
23	will be considering Introduction 175, sponsored by
24	Council Member Peter Vallone, Jr., who is here
25	with us and we will hear from him in a few

1	COMMITTEE ON HEALTH 4
2	minutes, Council Member Gennaro, and Gentile, in
3	relations to BPA and the effects on the human
4	body.
5	BPA is a chemical used to make
6	plastics and resins and is commonly found in
7	household items like food and beverage containers,
8	baby bottles, and toys, BPA is also found in the
9	inner lining of many canned goods. There has been
10	a good deal of concern over the safety of BPA,
11	particularly for young children. A study by the
12	Center of Disease Control and Prevention found
13	widespread exposure to BPA in the population. BPA
14	can be absorbed by the body through eating or
15	drinking from containers or cans made with BPA and
16	through direct oral contact. Many of the studies
17	that reviewed BPA valuated the health effects
18	found in mice and rats. Some of the adverse
19	health effects noted in animals included delayed
20	onset of puberty, reduced size, lower weight, and
21	survival.
22	There are some that dispute the
23	correlation between BPA exposure and adverse
24	health effects. The criticism includes that the
25	results in animals do not necessarily translate to

1	COMMITTEE ON HEALTH 5
2	humans, that the animals are exposed to greater
3	amounts of BPA, and that some of the studies have
4	not been replicated. While there is disagreement
5	in the scientific and medical community about the
6	health effects of BPA, the federal government is
7	investing \$30 million to study these effects and
8	the industry is voluntarily halting production of
9	BPA baby bottles and infant feeding cups.
10	The second chemical that this bill
11	regulates is phthalates. Phthalates are
12	industrial compounds used in the manufacture of
13	plastics to add flexibility and durability.
14	Phthalates are commonly found in children's toys,
15	personal care products, plastic bags, and medical
16	tubing. Similar to BPA, phthalates have been the
17	source of many studies to determine whether there
18	is a correlation between exposure and adverse
19	health effects. Several studies in lab animals
20	uncover offsprings that weigh less and experience
21	reproductive organ deficiencies. Some consider
22	phthalates an endocrine disruptor, affecting the
23	hormones, and these individuals worry that
24	phthalates will negatively impact the individual's
25	reproductive system.

1	COMMITTEE ON HEALTH 6
2	Once again, some questions whether
3	the health outcomes in lab animals translate to
4	humans, given the differences in bodies and the
5	way the human body releases chemicals exists.
6	Despite this, further studies have focused on
7	whether there are connections between phthalate
8	exposure and obesity, insulin resistance, low
9	birth weights, and even Attention Deficit and
10	Hyperactivity Disorder.
11	Today, we will hear from medical
12	professionals, scientists, environmental health
13	advocates, parents, and some students that are
14	joining us as our guests here today, and industry
15	representatives to assess the current state of BPA
16	in phthalates and consider our legislation, Intro
17	175.
18	I want to thank the Committee
19	staff, Joe Mancino, our policy analyst, Adira
20	Siman, who is legal counsel, for their work and
21	making me sound so smart with this opening
22	statement. I also want to recognize my colleagues
23	who are here from the Health Committee and those
24	who will be joining us. We have competing
25	hearings and budget briefings going on

1	COMMITTEE ON HEALTH 7
2	simultaneously, but here we're joined by the
3	former chair of this Committee Council Member Joel
4	Rivera and the prime sponsor of this legislation,
5	Council Member Peter Vallone. And now I defer to
6	Council Member Vallone.
7	COUNCIL MEMBER VALLONE: Thank you,
8	Madam Chair, and thank you very much for having
9	this hearing. There are much easier topics that
10	you could've chose to tackle, especially your
11	staff that made both of us, well hopefully will
12	make me sound good, but you did this and you did
13	it rather quickly and I want to thank you for
14	that.
15	And I did sponsor this bill because
16	it's something that's very important to me, but
17	one of the groups that brought it to my attention
18	originally is here with us today and that's the
19	Project Citizen class from P.S. 122 and they
20	actually gave me a full-blown presentation last
21	week on this, which I wish they could do the whole
22	presentation for you guys, it would just blow you
23	away, they know 10 times more than we know on this
24	topic, and they're going to testify later on. But
25	in fact Project Citizen last year, a different

1	COMMITTEE ON HEALTH 8
2	group of kids, but the same teacher, Rebecca
3	Victoros, and the same class in the same school
4	was the force behind the changing the [off mic]
5	bell from three minutes to one minute outside
6	schools, they're the ones who pushed that bill and
7	got that done. And now this year's class is
8	pushing this bill and some other environmental
9	bills that they're very concerned about. So I
10	want to welcome you guys here and can't wait to
11	hear from you again.
12	On May 6, the president's cancer
13	panel issued a report deploring the rising amount
14	of carcinogens released into our environment,
15	including BPA, and calling for much more stringent
16	regulations and a wider awareness of the dangers,
17	and that's what we're doing here today, we're
18	looking for more stringent regulations, we're
19	making people aware of the toxins in their air and
20	their food and in their plastics. What's
21	concerned me for a long time is the cumulative
22	effect of all of these toxins in our foods, in our
23	plastics, the radiation from cell phone towers,
24	which I've been at the forefront of, the mercury
25	in our fish, the air pollution that we breathe, at

1	COMMITTEE ON HEALTH 9
2	every level we're subjected to toxins, and it's
3	impossible to test the effect of all of those
4	toxins on a body. So what we need to do is act
5	against every individual one at every chance we
6	get, at every level of government, and that's what
7	we're doing here today.
8	Now there, as you said, many tests
9	that show the dangers of phthalates and BPA and
10	some don't and that's why it's inconclusive, but I
11	think one scientist said about the only way
12	that's the scientist now coming inthe only way
13	to get conclusive evidence would be to give BPAs
14	and phthalates to one group of kids, keep another
15	group away, and then wait 30 years. That's not
16	going to happen, we're not going to wait 30 years,
17	and we're not going to wait for the federal
18	government to take any more action on this because
19	we did not wait in the past when it comes to trans
20	fats. They still have not acted on trans fats, we
21	took the first step here in New York City, I wrote
22	the law that banned trans fats and everyone made
23	fun of me and said that I was going to take away
24	your cupcakes and your french fries and nothing
25	tastes any different and now the entire world is

1	COMMITTEE ON HEALTH 10
2	following us as an example when it comes to trans
3	fats, and we're going to set that same sort of
4	example, hopefully, when it comes to BPAs and
5	phthalates.
6	There is a federal law when it
7	comes to phthalates, ours expands that and gives
8	us the opportunity to enforce it on a local level.
9	There is no federal law when it comes to BPAs,
10	although several other states and municipalities
11	have acted, the ban exists in Vermont,
12	Connecticut, Wisconsin, Washington, Maryland,
13	Minnesota, cities of Chicago, other counties here
14	in New York state, so there is a precedent for
15	this.
16	And I don't want to talk any longer
17	because I want to hear from the experts on either
18	side of the issue and especially from our kids.
19	So thank you again, Madam Chair, for this
20	opportunity.
21	CHAIRPERSON ARROYO: Thank you,
22	Council Member Vallone. I'd like to acknowledge
23	we've been joined by Council Member Helen Diane
24	Foster from the Bronx, welcome, Council Member.
25	And we will start now with our

1	COMMITTEE ON HEALTH 11
2	first panel, the Department of Health is here
3	Assistant Commissioner Nancy Clark, who will
4	introduce herself for the record, and her
5	colleague sitting with her. Thank you, you may
6	begin.
7	NANCY CLARK: Is this thing on, is
8	it on?
9	CHAIRPERSON ARROYO: Yeah.
10	NANCY CLARK: Yeah, okay, great.
11	[Off mic]
12	NANCY CLARK: Good morning or good
13	afternoon, Chairperson Arroyo and members of the
14	Health Committee, my name is Nancy Clark and I'm
15	the Assistant Commissioner of the Bureau of
16	Environmental Disease Prevention at the New York
17	City Department of Health and Mental Hygiene.
18	With me today is Dr. Paramita Jorge, Bureau
19	Coordinator for Environmental Risk Assessment. On
20	behalf of Commissioner Tom Farley, I'd like to
21	thank you for the opportunity to testify regarding
22	Intro 175.
23	In my testimony today, I'd like to
24	provide an overview of what we know about the
25	potential human health effects of bisphenol A, or

1	COMMITTEE ON HEALTH 12
2	BPA, and phthalates, a summary of the federal
3	Consumer Product Safety Information Act of 2008,
4	the CPSIA, and the challenges of local regulations
5	aimed at limiting the amount of these substances
6	in children's products. Bisphenol A, or BPA, is
7	an industrial chemical used to make a hard, clear
8	plastic known as polycarbonate, which has been
9	used in many consumer products, including reusable
10	water bottles and baby bottles. BPA is also found
11	in epoxy resins which act as a protective lining
12	on the inside of metal food and beverage cans.
13	These uses of BPA are subject to premarket
14	approval by the US Food and Drug Administration,
15	the FDA, as indirect food additives or food
16	contact substances. The original FDA approvals
17	were issued in the 1960s. BPA can leach into food
18	from the protective internal epoxy resin coatings
19	of canned foods and from consumer products. BPA
20	in food and beverages accounts for the majority of
21	daily human exposure. Human exposure to BPA is
22	widespread and BPA has been found in the urine of
23	more than 90% of Americans.
24	The scientific evidence that
25	bisphenol A causes adverse health effects in

1	COMMITTEE ON HEALTH 13
2	humans is not well established. The National
3	Toxicology Program, the NTP, a federal interagency
4	program of the U.S. Department of Health and Human
5	Services, has reviewed the scientific literature
6	on BPA exposure and health effects in laboratory
7	animals. NTP notes that some of the animal
8	studies raise concerns about potential human
9	reproductive and developmental effects in both
10	females and males. Researchers generally agree
11	that more study is needed to understand exactly
12	how these findings relate to human health and
13	development. Investigations to date have not
14	demonstrated specific human health effects or
15	magnitude of such effects.
16	Phthalates are a diverse group of
17	chemicals that impart flexibility and resilience
18	when added to polyvinyl chloride or PVC plastics.
19	Phthalates are also found in a wide variety of
20	consumer products, including personal care
21	products such as soaps, shampoos, and deodorants;
22	vinyl products such as floor tile, shower
23	curtains, upholstery, and waterproof clothing;
24	children's toys and vinyl covered books; care and
25	feeding items; gel caps and codeines on some

1	COMMITTEE ON HEALTH 14
2	pharmaceuticals; and medical equipment such as
3	serum bags IV medical tubing. As a result, human
4	exposure to phthalates is common. Several studies
5	confirm the presence of phthalates or the
6	metabolites in persons of all age groups,
7	including newborns exposed prenatally.
8	People are exposed to phthalates in
9	the food they eat, the air they breathe, and
10	through direct contact with the many products that
11	contain the chemicals. Ingestion by mouthing PVC
12	products is a common means of exposure to
13	phthalates in consumer products. Generally,
14	phthalates are metabolized and excreted quickly
15	and do not accumulate in the body.
16	The six phthalates identified in
17	Intro 175 are present in a wide variety of
18	consumer products and have been subject to at
19	least some scientific investigation. The main
20	health concern posed by phthalate exposure are
21	their potential to interfere with male hormones
22	and male reproductive organ development. There's
23	also a potential that phthalates adversely affect
24	females.
25	The Consumer Product Safety

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1	COMMITTEE ON HEALTH 15
2	Improvement Act was passed by Congress in 2008.
3	This law currently limits the amount of the six
4	phthalates in children's toys, care products, and
5	feeding products to less than 0.1% of the total
б	product. The CPSIA has set final limits on three
7	phthalatesDEHP, DBP, and BBPas more is known
8	about these chemicals. The limits on the other
9	three phthalatesDINP, DIDP, and DNOPare
10	interim standards. The Consumer Product Safety
11	Commission has convened a Chronic Hazard Advisory
12	Panel on phthalates to further study these
13	chemicals and to issue a report of its findings in
14	2012.
15	The CPSIA does not address BPA in
16	children's products, however, the FDA is currently
17	investigating the need to limit BPA in food
18	containers to reduce human exposure through
19	contact of the BPA surface in containers with food
20	and beverage contents. We are following
21	developments of this FDA initiative. We fully
22	support the federal actions and industry
23	initiatives to reduce human exposures phthalates
24	and BPA in children's products.
25	The efficacy of a ban on such

1	COMMITTEE ON HEALTH 16
2	products is dependent on reliably knowing which
3	products contain the chemicals. Intro 175 covered
4	broad categories of products for which the
5	ingredients are unknown and which are not always
6	labeled. No federal regulations exist requiring
7	disclosure and labeling of ingredients in plastic
8	products, therefore, neither the department, the
9	Department of Consumer Affairs, nor the more than
10	15,000 distributors and retailers in New York City
11	who may sell the targeted products can readily
12	know which product contain BPA or phthalates. In
13	addition, this bill would require enforcement by
14	the Department of Consumer Affairs of an industry
15	where it has no regulatory authority.
16	Federal regulations are the most
17	effective way to limit public exposure and we
18	support a move towards removal of these chemicals
19	from children's products. However, we caution
20	that it is unlikely that any state or local
21	government can effectively remove products
22	containing phthalates and BPA from store shelves.
23	While many localities and states across the
24	country have adopted regulations similar to that
25	which is proposed, without oversight at the

1	COMMITTEE ON HEALTH 17
2	factory level or labeling by the manufacturer,
3	local authorities are limited in their ability to
4	enforce such a ban on products potentially
5	containing BPA or phthalates. While CSPIA allows
6	for the use of labels, the current law does not
7	require them on plastic products.
8	In summary, we support the idea of
9	limiting the use of bisphenol A and phthalates in
10	children's toys and care and feeding products and
11	support further federal action to limit BPA in
12	food and beverage containers. Banning BPA and
13	phthalates from children's products at the point
14	of production would eventually eliminate them from
15	the consumer market. However, without
16	manufacturing and labeling standard efforts to
17	identify and prohibit the sale of children's
18	products that contain these chemicals will likely
19	be ineffective and would not be enforceable on the
20	local level.
21	Thank you for the opportunity to
22	testify and I'm very happy to answer any questions
23	you may have.
24	CHAIRPERSON ARROYO: Thank you,
25	Commissioner. I'd like to acknowledge we've been

1	COMMITTEE ON HEALTH 18
2	joined by Council Member Debbie Rose from Staten
3	Island and Council Memberis that Council Member
4	Al Vann
5	FEMALE VOICE: Yes.
6	CHAIRPERSON ARROYO:from
7	Brooklyn. The one and only. I'm going to turn
8	questions over to Council Member Vallone first and
9	then, colleagues, if you have any questions.
10	COUNCIL MEMBER VALLONE: Thank you.
11	I can't say I'm not disappointed with your
12	testimony, it sounds to me like, despite the fact
13	that there are studies showing potential harm,
14	possible harm that many other states have acted,
15	many other municipalities are acted, the
16	Administration thinks we should wait, we should
17	wait for the federal government. We know they
18	didn't think we should wait when it came to trans
19	fats, but for this, they think we should wait, I
20	don't. As we are waiting, our kids are ingesting
21	more and more BPAs and phthalates and I don't want
22	this to be like lead paint, I don't want this to
23	be like asbestos, where we waited too long. We
24	know that there's a potential here and we need to
25	act on a city level to protect our people and our

1	COMMITTEE ON HEALTH 19
2	children especially before, before it's too late.
3	Now let me get in some specifics,
4	you say the best way to do this is federal, we
5	understand that, we're all in agreement on that,
6	the best way to do this would be federal, but the
7	federal government has not acted on BPAs, so you
8	seem to say the big problem here is that you can't
9	enforce it because of labeling. In the last
10	sentence, you said was while the CSPIA allows for
11	the use of labels, the current law does not
12	require them on plastic products, which current
13	law?
14	NANCY CLARK: The Consumer Product
15	Safety Information Act does not require labeling
16	of phthalates or any other materials on
17	COUNCIL MEMBER VALLONE:
18	[Interposing] The federal law.
19	NANCY CLARK:children'sthe
20	federal law.
21	COUNCIL MEMBER VALLONE: Oh, even
22	better, so you'd like us to wait for an
23	enforceable law and not do anything now. You said
24	you can't enforce because there's no labels, and
25	you're telling me that the federal law has no

1	COMMITTEE ON HEALTH 20
2	labels.
3	NANCY CLARK: Well I'm saying that
4	the federal law requires manufacturers to limit
5	the amount of phthalates in the designated
6	products at that level of 0.1%, that right now is
7	a federal law, it's enforceable. On the consumer
8	side of it, there's no way for a consumer or a
9	retailer or a government enforcea local
10	government enforcer to know if a product has
11	phthalates or not. That's all I'm saying is that
12	the law itself doesn't include a regulation on
13	labeling the contents of phthalates on the
14	product.
15	COUNCIL MEMBER VALLONE: So are you
16	aware of how they are enforcing the law in all of
17	the other states and municipalities where they've
18	passed this?
19	NANCY CLARK: Well, you know, we
20	also took a hard look at it, at what other states
21	and localities are doing, and frankly, we support
22	thewe see it as a symbolic gesture. We couldn't
23	find any information on the enforcement practices
24	of the states that have passed regulations, that
25	was information we just couldn't find. So we

1	COMMITTEE ON HEALTH 21
2	couldn't find procedures on how those rules are
3	enforced or what their experience has been, but we
4	suspect that they would have the same difficulty
5	that we would have or the city would have that
6	when they wentat what point of the production
7	retail chain would the enforcement occur and how
8	would the inspector know what product contained
9	phthalates above that level or, in this case, BPA
10	above.
11	COUNCIL MEMBER VALLONE: Well I'm
12	going to look into that myself
13	NANCY CLARK: Yeah.
14	COUNCIL MEMBER VALLONE:a little
15	more than I have, but I'm sure there's a way
16	CHAIRPERSON ARROYO: [Interposing]
17	Peter, if you can allow me
18	COUNCIL MEMBER VALLONE: Sure.
19	CHAIRPERSON ARROYO:what exactly
20	did you ask for and where did you seek that
21	information?
22	NANCY CLARK: We did a pretty
23	thorough search if we could on the timeframe that
24	we had, we looked at regulations in Washington,
25	Connecticut, Wisconsin, we looked at several of

1	COMMITTEE ON HEALTH 22
2	theand I can get back to you all the different
3	I can tell you which states that we looked at.
4	They certainly have bills that very much look like
5	similar to the proposed bill, but along with the
б	bill, we did not find what their procedures are
7	for doing enforcement.
8	CHAIRPERSON ARROYO: So was this an
9	Internet search to see if there's a policy or
10	procedure or regulation posted on a website or did
11	you dial a number and speak to a human being?
12	NANCY CLARK: I'll have to get back
13	to you, I didn't do it ourselves but we
14	[Crosstalk]
15	NANCY CLARK:from our general
16	counsel's office.
17	CHAIRPERSON ARROYO: Yeah, if you
18	can provide to the committee the extent
19	NANCY CLARK: Sure.
20	CHAIRPERSON ARROYO:to
21	NANCY CLARK: Sure.
22	CHAIRPERSON ARROYO:what
23	research was done to get to a place where you
24	think it's a symbolic gesture more than anything
25	else.

1	COMMITTEE ON HEALTH 23
2	NANCY CLARK: Sure.
3	CHAIRPERSON ARROYO: Council Member
4	Vallone
5	NANCY CLARK: Absolutely.
6	CHAIRPERSON ARROYO:I'm sorry.
7	COUNCIL MEMBER VALLONE: That's a
8	great question because they have much a bigger
9	staff than my staff of four so I'd love for you to
10	get back to me with that information. So what do
11	you recommend then that would make this more
12	enforceable or something that you would not be as
13	opposed to?
14	NANCY CLARK: Well I think as we've
15	stated, because of the way products are
16	manufactured, many of them are manufactured not in
17	this country but in other countries, so the
18	manufacturing process itself, we need an agency
19	that oversees the production practiceswhat
20	materials are used and how those products make it
21	into the marketplace. It's only a practical
22	measure on our part to understand how a local
23	government or state government could enforce such
24	a ban without knowing which products contain more
25	than the prescribed amount of phthalates or

1	COMMITTEE ON HEALTH 24
2	contain BPA, there's just not a way for people to
3	know readily.
4	I agree with you that the trans fat
5	ban was certainly a landmark and New York City was
б	really in the forefront, but trans fats are part
7	of the labeling requirements on the food that
8	contain it. Also from the Health Department, we
9	enforce that bill, because we regulate restaurants
10	and that's where our enforcement took place, in an
11	industry that we regulate on a product that has
12	labeling on it so our inspectors could see does
13	the oil contain trans fats or does it not.
14	COUNCIL MEMBER VALLONE: Right, and
15	yet we could not regulate trans fats that came
16	into New York state from elsewhere, but we could
17	regulate the ones that were here. So at a minimum
18	then, if we pass this law, if any company produced
19	one of these products here in New York City, it
20	would not be able to sell them here in New York
21	City or produce them here in New York City, unless
22	they eliminated phthalates and the BPA, correct?
23	NANCY CLARK: I'm sorry, say it
24	again fromon this bill, the way this bill
25	COUNCIL MEMBER VALLONE: Right.

1	COMMITTEE ON HEALTH 25
2	NANCY CLARK:is written, it's
3	written that you also can't manufacture. I don't
4	know, and maybe your staff knows, what the
5	identity of the manufacturers are. The city, as
6	far as I know, and maybe we can find out more, we
7	don't regulate those industries so we don't have
8	that authority to do that. Most industry, as soon
9	as theyand I'm not a lawyer so I probably should
10	stop, but some of this gets into this interstate
11	business, though I'd better
12	[Crosstalk]
13	COUNCIL MEMBER VALLONE:
14	[Interposing] It's the Commerce clause, right?
15	That's why we were unable to pass a law to bans
16	trans fats from coming into New York City because
17	the Commerce clause says we can't ban interstate
18	NANCY CLARK: Exactly.
19	COUNCIL MEMBER VALLONE:
20	commerce, but we were able to make a huge
21	statement and have it make a huge effect by
22	banning trans fats, which I believe we can make
23	with this bill also.
24	Madam Chair, I'd like to come back
25	maybe later for some questions and turn to some

1	COMMITTEE ON HEALTH 26
2	other Council Members. Thank you.
3	CHAIRPERSON ARROYO: Council Member
4	Rivera.
5	COUNCIL MEMBER RIVERA: Thank you
6	very much, Madam Chair. I just had a couple of
7	follow-up questions myself. In terms of the
8	actual plastics themselves, they do identify which
9	plastic is involved because on the bottom there's
10	a coded numerical coding that signifies which
11	plastic is used in the production of a bottle or
12	something that's being sold to a consumer, so I'm
13	not too familiar with the law that you say that
14	doesn't require it.
15	NANCY CLARK: I think what you're
16	referring to is the triangle recyclable.
17	COUNCIL MEMBER RIVERA: Yeah, the
18	triangle, yeah.
19	NANCY CLARK: That doesn't
20	necessarily include everything, for example, we
21	know that number seven may contain BPA, but we
22	don't know that specifically because that number
23	sevenor you might tell menumber seven is
24	other, it like contains other plastics and BPA is
25	an other.

1	COMMITTEE ON HEALTH 27
2	COUNCIL MEMBER RIVERA: But isn't
3	it true that federal government sets a baseline of
4	what the law should be and then we can go above
5	and beyond as long as it doesn't supersede
6	whatever pre-existing law exists. So don't we
7	have the authority or the wherewithal to acquire
8	certain amendments to a law to enact a law that'll
9	be more informative to consumers, can't we do
10	that?
11	NANCY CLARK: That might be a legal
12	question that I probably can't answer or don't
13	know what our jurisdiction is above and beyond
14	what the federals go, I believe that the Consumer
15	Product Information Safety Act does preempt locals
16	from enacting phthalates, but that would I refer
17	back to our general counsel and to the Council's
18	counsel to understand that part. BPA, right now,
19	there is no federal rule other than the FDA rule
20	that's currently standing, which is now under
21	review.
22	CHAIRPERSON ARROYO: I'm sorry,
23	Council Member Rivera, but, Commissioner, it's
24	difficult for me to accept that you come before
25	the Committee and then say I don't know, I don't

1	COMMITTEE ON HEALTH 28
2	know is not what we're looking for, we're seeking
3	for information that would better inform how this
4	Committee and this legislation can be moved
5	forward. So what is the jurisdiction, you're not
б	an attorney, I appreciate that, but get us back
7	the answer.
8	NANCY CLARK: Sure, we'll do that.
9	CHAIRPERSON ARROYO: And don't make
10	our Committee staff work any harder than they
11	already do. I'd like to acknowledge we've been
12	joined by Council Member Van Bramer, he is here,
13	yeah, thank you for joining us. I'm sorry.
14	COUNCIL MEMBER RIVERA: No, I'm
15	done.
16	CHAIRPERSON ARROYO: You're done
17	COUNCIL MEMBER RIVERA: Thank you.
18	CHAIRPERSON ARROYO:okay. So
19	because you're saying labeling presents a major
20	challenge to the enforcement of this legislation,
21	and in absence of understanding what other
22	municipalities or states have done with enacting
23	similar laws and enforcement of similar laws, it
24	puts us at a disadvantage to really have a more
25	in-depth conversation about possible alternatives

1	COMMITTEE ON HEALTH 29
2	and adjustments to this legislation that I'm sure
3	the sponsor would be very interested in engaging a
4	conversation about. Mr. Vallone, I'm not going to
5	speak for you, but I'm very frustrated to sit here
6	and hear that you don't know what other states or
7	municipalities are doing with regards to
8	enforcement of a law that is very similar to this
9	one. And because we don't have the requirement
10	for labeling to identify the chemicals in the
11	plastics, that it really puts us at a disadvantage
12	for enforcement.
13	NANCY CLARK: Well I appreciate
14	your frustration and also our own with the time
15	that we had to prepare for this issue we did the
16	best we could and we will follow up to the best
17	that we can to get more information and provide it
18	to the Council.
19	CHAIRPERSON ARROYO: So it
20	NANCY CLARK: [Interposing] But I
21	think labeling is truly a barrier just to
22	understand the breadth of products that were
23	covered here the
24	[Crosstalk]
25	CHAIRPERSON ARROYO: [Interposing]

I

1	COMMITTEE ON HEALTH 30
2	It sounds to me like you would recommend that
3	labeling be required.
4	NANCY CLARK: Well two things,
5	phthalates, I think the federal government has
6	limited the amount of phthalates to the same level
7	that the City Council proposal does. So that part
8	of the bill, I don't know if it's to the Council's
9	satisfaction, but it appears that those six
10	phthalates are already regulated. The first three
11	which have been studied more have a final
12	standard; the other three, they're enforcing the
13	0.1% limit but they've convened in the meantime a
14	committee of experts to further investigate. So
15	that's an interim standard and they're expecting
16	to issue a report, I believe, in the spring of
17	2012 and I am assuming they're either going to
18	stand by the interim or they're going to change it
19	in some way based on their scientific review.
20	CHAIRPERSON ARROYO: What is the
21	interim standard?
22	NANCY CLARK: So the onlyI'm
23	sorry?
24	CHAIRPERSON ARROYO: What's the
25	interim standard because you do indicate in your

1	COMMITTEE ON HEALTH 31
2	testimony that the law currently limits the amount
3	of six phthalates in children's toys, care
4	products, and feeding products to less than .1%
5	NANCY CLARK: Correct.
6	CHAIRPERSON ARROYO:of the total
7	product and that the CPSIA set final limits on
8	three, and as more is known on those, the limit on
9	the other three are interim standards
10	NANCY CLARK: Right.
11	CHAIRPERSON ARROYO:what's the
12	interim standard?
13	NANCY CLARK: The same, it's 0.1%,
14	they put the same limit on the other three, they
15	just didn't call it a final standard.
16	CHAIRPERSON ARROYO: I see, okay.
17	NANCY CLARK: As I understand it,
18	the federal government regards that the law as in
19	effect and regards the limits on all six in
20	effect. They've only given themselves two years
21	of additional scientific review for the three
22	other phthalates, which they set interim standards
23	for. So it just means that it's kind of a
24	temporary the way I read it, and that at the end
25	of this panel, on the Chronic Hazards Advisory

1	COMMITTEE ON HEALTH 32
2	Panel, at the conclusion of their review, the
3	agency will either uphold the current limit of 0.1
4	and change it from interim to final or change it
5	again. But I think that the intent of that
б	legislation was to limit all six, but I believe
7	they didn't feel they had the science behind them
8	on the three.
9	[Crosstalk]
10	CHAIRPERSON ARROYO: And that is on
11	the manufacturing level.
12	NANCY CLARK: Yes.
13	CHAIRPERSON ARROYO: Labeling does
14	not even come into
15	NANCY CLARK: [Interposing]
16	Labeling does not even come intothe law itself
17	and it's a very complex law, it also covers lead,
18	content of lead in children's product. And we do
19	commend the federal legislators for enacting that
20	bill, they did it quickly and tried very hard to
21	address important environmental health issues, but
22	there are a lot of complicated technical and
23	scientific issues surrounding that whole
24	legislation. So some of theso, for example, I
25	believe on phthalates, it's in effect, they expect

1	COMMITTEE ON HEALTH 33
2	manufacturers to limit the amount; however,
3	they've not yet issued their testing and
4	certification requirements. So in other words,
5	manufacturers may be using different methods on
6	how they test their products because the federal
7	government haven't yet issued what they're
8	expecting the standard to be. And that just
9	speaks to the complexity of some of the technical
10	and scientific issues.
11	CHAIRPERSON ARROYO: What advocacy
12	has the department done at the federal level to
13	deal with the issue of labeling?
14	NANCY CLARK: We currently do not
15	have ato my knowledge, that we don't have an
16	official position on labeling. We recognize it as
17	a deficiency in this current bill, and I'd have to
18	go back to understand or to review to see if
19	earlier versions of that bill included labelings
20	and it fell out
21	CHAIRPERSON ARROYO: [Interposing]
22	Well it's a deficiency
23	NANCY CLARK:I don't know that.
24	CHAIRPERSON ARROYO:in the
25	federal law, not this bill.

1	COMMITTEE ON HEALTH 34
2	NANCY CLARK: Oh, I'm sorry, when I
3	say bill, I'm talking about the federal law, I'm
4	sorry.
5	CHAIRPERSON ARROYO: Oh, okay.
6	NANCY CLARK: I'm not a lawyer.
7	[Crosstalk]
8	[Off mic]
9	NANCY CLARK: Sorry.
10	CHAIRPERSON ARROYO: Well we just
11	want to be
12	NANCY CLARK: [Interposing] No,
13	it's complicated
14	CHAIRPERSON ARROYO:clear
15	[Crosstalk]
16	NANCY CLARK:so I don't want to
17	make things more so
18	CHAIRPERSON ARROYO: So in order
19	for us to work and use our energies in a direction
20	that's going to get us closer to where we hope
21	this bill would get us, what advocacy what would
22	the department engage in to address the deficiency
23	in the federal law that doesn't give us, I guess,
24	the power or the ability to be able to say, you
25	can not put anything on your shelves that contains

1	COMMITTEE ON HEALTH 35
2	these things in excess of whatever that is.
3	NANCY CLARK: I can't speak
4	CHAIRPERSON ARROYO: [Interposing]
5	Did everyone understand that question 'cause I
6	think I
7	NANCY CLARK: I do.
8	CHAIRPERSON ARROYO:confused
9	myself.
10	NANCY CLARK: I think you're
11	asking, what are we doing to make it
12	CHAIRPERSON ARROYO: Yes.
13	NANCY CLARK:better at the
14	federal level, and I appreciate that. We have a
15	lot of challenges working with federal rules and
16	standards on a lot of things and a lot of actions
17	that we take at the Health Department, especially
18	a lot of areas under the purview of both the
19	Consumer Product Safety Commission, as well as the
20	Food and Drug Administration. I can tell you that
21	we follow them very carefully, our legislative
22	affairs group monitors and when we have
23	opportunities, we do weigh in. But it's certainly
24	an area that we follow very closely and care a lot
25	about.

1	COMMITTEE ON HEALTH 36
2	CHAIRPERSON ARROYO: Now this law
3	only addresses phthalates, not BPA, so
4	NANCY CLARK: Not BPA.
5	CHAIRPERSON ARROYO:I don't want
6	to lose that part of the
7	NANCY CLARK: Exactly.
8	CHAIRPERSON ARROYO:
9	conversation, I know Council Member Vallone has
10	other questions, but the BPA discussion
11	NANCY CLARK: Exactly.
12	CHAIRPERSON ARROYO:it has to be
13	part of that advocacy that we need to do. If the
14	department feel so strongly that we should have
15	federal action in order for the department or the
16	city to be in a better position to do the
17	enforcement necessary, we cannot forget that there
18	is this other animal out there called BPA that has
19	to be part of that conversation.
20	NANCY CLARK: Right.
21	CHAIRPERSON ARROYO: Council Member
22	Vallone?
23	COUNCIL MEMBER VALLONE: [Off mic].
24	Okay, thank you. Some follow up questions. I
25	agree with Chair completely, I think this labeling

1	COMMITTEE ON HEALTH 37
2	thing is an interesting technicality that we can
3	easily get around either by lobbying the federal
4	government or doing it on our own here in New York
5	City. But I do think it's not consistent of you
6	to act on trans fats and be a worldwide leader
7	when it comes to trans fats, but say that when it
8	comes to this equally important issue that you're
9	going to sit back and monitor and basically take
10	no action, because you didn't describe any action
11	that you would take. So I want to give you a
12	chance to explain yourself again, you said
13	something about not having the authority to
14	regulate manufacturing, but let you had the
15	authority to regulate food, where is that coming
16	from?
17	NANCY CLARK: In the New York City
18	Health Code, we regulate restaurants for food
19	safety because we want to ensure that the food
20	that people eat doesn't make them sick and we have
21	historic authority to do that. Also through the
22	Food and Drug Administration on the federal level
23	gives locals and states the authority to regulate
24	food service establishments.
25	COUNCIL MEMBER VALLONE: I'm well

1	COMMITTEE ON HEALTH 38
2	aware of that.
3	NANCY CLARK: Right, but you
4	COUNCIL MEMBER VALLONE: Of the
5	food part
6	NANCY CLARK: Yeah.
7	COUNCIL MEMBER VALLONE:but
8	under what authority have we acted as a City
9	Council together with the Mayor to regulate the
10	toxins in our air? We have passed many, many laws
11	when it comes to regulating the amount of toxins
12	in our air and you have been very supportive of
13	that, under what authority?
14	NANCY CLARK: So you're going to
15	have to be more specific 'cause it may not be in
16	my part of the Health Department, but I'll give it
17	a shot.
18	COUNCIL MEMBER VALLONE: Limits to
19	the amount of carbon dioxide in our air, limits to
20	the amount of pollutants in oil, the different
21	types of oil we can use, things like that, which
22	all reduce the amount of toxins in our air, that's
23	the basis for what we're doing. I would assume
24	that's because you're the Department of Health and
25	your job is to protect the health of New Yorkers,

1	COMMITTEE ON HEALTH 39
2	not just regulate the food. But if we were able
3	to pass laws which regulate the toxins in the air,
4	why can't we pass laws and enforce laws that
5	regulate the toxins in our food? Or in our
6	plastics, I'm sorry, not the food.
7	NANCY CLARK: I may have to beg off
8	and talk more generally to our legal people on
9	those different authorities. Some of those rules
10	that you're talking about limiting the types of
11	fuel oil that are burned in the city, we're also,
12	remember, working under federal Clean Air Act
13	provisions and so there's already an umbrella of
14	federal regulation there, and through our local
15	authority, through building codes and also the
16	environmental protection part of the city rules
17	that have purview over that. So that's not
18	something that the Health Department specifically
19	regulates, although we do, and as we generally do,
20	support actions that limit known health hazards.
21	COUNCIL MEMBER VALLONE: Like this
22	one. But you mention that you haven't taken an
23	official position, I assume you're familiar with
24	the many studies that show a correlation between
25	BPH levels and phthalate levels and serious

1	COMMITTEE ON HEALTH 40
2	problems in animals, and I assume you're also
3	aware that in 2007 a panel of 38 experts released
4	a consensus statement that addressed the potential
5	impact of BPA on human health. The statement
б	asserted that the health effects present in
7	animals that were exposed to low doses is cause
8	for concerns to humans because of the potential
9	risk for similar adverse effects. The authors
10	correlated recent increases in human diseases,
11	such as prostate and breast cancers, reproductive
12	disruptions, diabetes, obesity, and other problems
13	and adverse effects observed in lab animals
14	exposed to low levels of BPA. I'm aware there are
15	studies that show otherwise, but you're aware of
16	all the studies that show the potential problems
17	with BPA and phthalates.
18	NANCY CLARK: Correct. Well as
19	much as we can be, yeah. But we do follow it and
20	we've looked at both and we also understand that
21	with many scientific areas, especially when we
22	talk about low dose exposures and we look at
23	studies, and always the strongest evidence for the
24	scientific community is when your studies are
25	replicablewhen they're repeated and show the

1	COMMITTEE ON HEALTH 41
2	same effects and that's the strongest type of
3	evidence for us and when you get
4	COUNCIL MEMBER VALLONE: I'd love
5	to
6	[Crosstalk]
7	NANCY CLARK:when you get those
8	differences, I think that the scientific
9	community, you will find some that say absolutely,
10	these are very serious endocrine disruptors and
11	should be closely regulated and then you'll also
12	find scientists who says that these aren't
13	effects, that the studies don't show that, and I
14	think that's the frustration of the scientific and
15	environmental health community right now. And
16	it's important that the FDA is taking another hard
17	look because the limiting of BPA on food and
18	beverage contact surfaces is an importantcould
19	be an important transfer of exposure so
20	COUNCIL MEMBER VALLONE: Yes.
21	NANCY CLARK:we are again
22	applaud them for taking those
23	COUNCIL MEMBER VALLONE: It very
24	well could be
25	NANCY CLARK: -that further study.

1	COMMITTEE ON HEALTH 42
2	COUNCIL MEMBER VALLONE:and let
3	me say with the amount of science out there that
4	raises the alarm level and with the amount of
5	states and municipalities that are taking action
6	to protect our citizens, I think your department
7	with its vast resources should be doing a lot more
8	than just monitoring what's happening at the
9	federal level. If you think there's something we
10	need to do at the federal level, then I will help
11	you do it; if you think there's some way I need to
12	change this law around to make it more
13	enforceable, more palatable to you, then I will do
14	it, but I will not sit here, I will not sit here
15	and wait until the federal government acts, before
16	I act with the help of this Committee and the
17	leadership of Carmen Arroyo and the rest of the
18	members of this Committee to protect our city and
19	our kids.
20	[Applause]
21	COUNCIL MEMBER VALLONE: Thank you,
22	thank you.
23	CHAIRPERSON ARROYO: Thank you,
24	Council Member, and I just want to piggyback on
25	that. Knowing how strongly the city has played a

1	COMMITTEE ON HEALTH 43
2	role on so many important issues that then come
3	out as a model for the nation and the world, I
4	cannot accept that this issue cannot be one of
5	them, in particular, since we need to rely, to a
6	certain extent, on the federal level to act in
7	particular on this labeling issue. So you're
8	hearing from this Committee and the sponsor of
9	this legislation that we need to work a little bit
10	more proactively on parallel tracks to try to get
11	this ban and/or restriction enacted. I'd hate to
12	wait 30 years to find out that on this legislation
13	we probably could have prevented effects on the
14	health of people in our city and we did not do the
15	right thing. So we will circle back and what I'd
16	like to offer is to see if we can meet with the
17	sponsor and have a conversation about what other
18	actions we ought to be taking to help the
19	Administration and the department send a very
20	strong message to the federal government that this
21	is important and that they need to act.
22	NANCY CLARK: Right, yeah, we'd
23	like to do that too, thank you.
24	CHAIRPERSON ARROYO: Thank you for
25	your testimony and we will see each other

1	COMMITTEE ON HEALTH 44
2	hopefully in the very near future to have those
3	conversations.
4	We've been joined by Council Member
5	Rosie Mendez from Manhattan. And now that
6	NANCY CLARK: Thank you.
7	CHAIRPERSON ARROYO: Thank you. We
8	are going to move to probably the most important
9	panel that we're going to hear from this
10	afternoon, Georgina Vlasipoulos, Vlasipoulos, did
11	I say that right?
12	[Off mic]
13	CHAIRPERSON ARROYO: Correct me.
14	[Off mic]
15	CHAIRPERSON ARROYO: Georgia
16	Vasilopoulos [phonetic].
17	[Off mic]
18	CHAIRPERSON ARROYO: Vasilopos.
19	[Off mic]
20	CHAIRPERSON ARROYO: Robin Mann
21	[phonetic]
22	[Off mic]
23	COUNCIL MEMBER VALLONE: More time
24	in Astoria.
25	[Off mic]

1	COMMITTEE ON HEALTH 45
2	CHAIRPERSON ARROYO:and these
3	young folks are here from Woodside.
4	[Off mic]
5	COUNCIL MEMBER VALLONE: P.S. 122
6	in [off mic].
7	CHAIRPERSON ARROYO: P.S. 122 in
8	Queens.
9	[Off mic]
10	CHAIRPERSON ARROYO: Is this your
11	first time here?
12	GEORGIA VASILOPOULOS: Yeah.
13	MALE VOICE: Say yes.
14	CHAIRPERSON ARROYO: Okay. So
15	you're going to identify yourself, give your name
16	and begin your testimony and make sure that you
17	speak into the microphone so that the sergeant can
18	record us.
19	[Off mic]
20	CHAIRPERSON ARROYO: You may begin.
21	[Off mic]
22	GEORGIA VASILOPOULOS: My name is
23	Georgia Vasilopoulos [phonetic] and I am a fifth-
24	grade student from P.S. 122 and I will begin with
25	a few questions. Do you have or know any

1	COMMITTEE ON HEALTH 46
2	children? When they were infants, did you give
3	them milk from a baby bottle? Did you put a
4	pacifier in their mouth to soothe their cries?
5	Did you ever think that you might have harmed the
6	child by giving them these things? It turns out
7	that many products such as baby bottles,
8	pacifiers, rubber ducks, sports equipment,
9	cleaning products, and many toys contain bisphenol
10	A and phthalates. These chemicals can cause
11	reduced testosterone levels, lowered sperm counts,
12	genital effects in baby boys, obesity, cancer, and
13	other dangerous diseases. I have a little brother
14	and I'm worried about his future in a world filled
15	with toxins.
16	Studies have shown that phthalates
17	and BPA are not only harmful when swallowed, they
18	can actually go through the skin and cause harm to
19	the innocent child that is holding one of his or
20	her toys. Who would've thought that something
21	that is not meant to be swallowed can still cause
22	harm to whoever comes in contact with it?
23	BPA and phthalates don't only harm
24	children, they also harm the environmentour
25	world. Since phthalates break down quickly in the

1	COMMITTEE ON HEALTH 47
2	air, soil and water contamination must be
3	prevented. Once they enter water, they begin to
4	accumulate in fish and shellfish, causing
5	deformities, deaths, and fertility reduction. The
6	public should be made aware of the dangers.
7	We believe in educating the
8	citizens in order to assist them in making the
9	right purchase decisions. Some manufacturers are
10	limiting or eliminating their use of phthalates,
11	but others insist there's no hard proof that
12	phthalates are causing any sort of problems. They
13	should look at the medical research.
14	Would you want your child getting
15	sick just because they played with a toy or drank
16	a cup of milk? Children are our future, would you
17	want the future to be filled with people that have
18	diseases? The world and our health always go
19	before everything else. Let us provide the next
20	generations to come with a world that is toxic
21	free.
22	ROBIN MANN: Hello, my name is
23	Robin Mann and I am a fifth-grade student that
24	goes to the school P.S. 122.
25	The problem of bisphenol A and

1	COMMITTEE ON HEALTH 48
2	phthalate contamination and child care products is
3	a very serious and widespread problem. For
4	example, many nations including Mexico and
5	countries in Europe passed similar bans on plastic
6	chemicals in general. Furthermore, according to
7	sixwise.com and bisphenolA.org, 2.8 billion tons
8	of BPA are produced globally each year. DEHP
9	phthalates also slow down middle brain growth and
10	may be the cause of the increased rate of allergic
11	reactions that are occurring.
12	Subsequently, BPA is continuing to
13	grow as a problem. About 93% of citizens in the
14	U.S., children included, excrete it in their
15	urine. When BPA was tested on rats, they suffered
16	increased fat formation, human diabetic symptoms,
17	and neurotoxic damage. This most certainly affect
18	humans, but to varying degrees. The harm it can
19	do to juveniles daily, however, is much greater
20	than anyone older. It's obvious that the
21	excessive use of bisphenol A and phthalates in
22	young care products is a very hazardous and large-
23	scale dilemma.
24	In conclusion, I was very fortunate
25	that today we were able to testify as two of the

1	COMMITTEE ON HEALTH 49
2	95% of Americans that are being victimized by BPA
3	and, moreover, phthalates. We must create
4	policies that can save lives, reduce health
5	problems, and make safe products for raising
6	children with. What is more important, another
7	person's money or the health of the next
8	generation in our world?
9	CHAIRPERSON ARROYO: I had to find
10	out, they're 11 years old, they sound like they're
11	90. Thank you both very much for your testimony.
12	Any of my colleagues have any questions for our
13	panelists? Council Member?
14	[Off mic]
15	CHAIRPERSON ARROYO: Rosie?
16	FEMALE VOICE: Rosie first.
17	COUNCIL MEMBER VALLONE: Rosie
18	first.
19	CHAIRPERSON ARROYO: Okay.
20	COUNCIL MEMBER MENDEZ: I was just
21	wondering for either one of you, how did you learn
22	so much about this topic? 'Cause I just learned
23	all this stuff here sitting in this hearing so
24	ROBIN MANN: Well one way we learn
25	that was recently we did a Project Citizen about

1	COMMITTEE ON HEALTH 50
2	environmental effects and health effects that
3	cleaning products and chemicals in them do, and so
4	we were also able to learn about these chemicals
5	as well and child care products.
6	COUNCIL MEMBER MENDEZ: I want to
7	thank you for your testimony today.
8	COUNCIL MEMBER VAN BRAMER: I just
9	wanted to thank you for coming here today and I
10	know that Council Member Vallone is not surprised
11	that such brilliant young minds come from
12	northwest Queens, and as a kid who grew up in
13	Astoria, neither am I. Both of you were
14	tremendous, you're so poised, and particularly for
15	you, young man, for your last sentence, you looked
16	up at each of us for effect, it was brilliantly
17	done, so I just wanted to thank you both for
18	coming and representing Queens so well.
19	COUNCIL MEMBER VALLONE: Can I ask
20	one thing?
21	CHAIRPERSON ARROYO: I want to
22	acknowledge that Council Member Mathieu has joined
23	us, he also has a question, but go ahead
24	[Off mic]
25	CHAIRPERSON ARROYO: Council Member

1	COMMITTEE ON HEALTH 51
2	Mathieu?
3	[Off mic]
4	CHAIRPERSON ARROYO: Eugene, I'm
5	sorry.
6	COUNCIL MEMBER EUGENE: Thank you
7	very much. I'm not surprised, but I'm impressed
8	and all of us were impressed and you know what,
9	you know so much about this topic, I think this is
10	a motivation for all of us adults to do research
11	[off mic] and to be concerned about everything
12	that you say. I commend you and I congratulate
13	you. Good job, job well done.
14	CHAIRPERSON ARROYO: Council Member
15	Vallone?
16	COUNCIL MEMBER VALLONE: If you
17	think these two are impressive, you should've seen
18	the whole class make a presentation to me
19	completely memorized about two weeks ago, and not
20	just on this topic on which I was educated well
21	beyond what I knew, but on so many other
22	environmental topics. And I think it was this
23	young man in the front row here who took it upon
24	himself to e-mail me, found my e-mail, e-mailed
25	me, told me what they were doing, and that's where

1	COMMITTEE ON HEALTH 52
2	I went to the class and heard so much more. If
3	you guys each had one more bill, very quickly,
4	that we could, as a Health Committee, work on,
5	what would you recommend?
6	UNKNOWN VOICE 1: Tough question.
7	UNKNOWN VOICE 2: Well
8	CHAIRPERSON ARROYO: Don't be shy.
9	COUNCIL MEMBER VALLONE: Think back
10	on your presentation, other things you discussed.
11	[Off mic]
12	COUNCIL MEMBER VALLONE: Perhaps
13	cleaning products in schools?
14	ROBIN MANN: Yeah.
15	GEORGIA VASILOPOULOS: Yeah.
16	ROBIN MANN: Yeah, I think it would
17	be to enforce the law that we should have
18	environmentally sensitive cleaning products used
19	in school.
20	COUNCIL MEMBER VALLONE: Very good,
21	and I've actually, to inform you, we wrote a
22	letter to Joe Klein two days ago asking him what
23	he's doing to enforce that law because you guys
24	told me to. So keep up the great work, we're all
25	so impressed.

1	COMMITTEE ON HEALTH 53
2	[Off mic]
3	CHAIRPERSON ARROYO: Thank you,
4	Council Member Vallone, for sharing this treasure
5	with us. Thank you both for coming to the
6	Committee and helping us understand this issue a
7	little better, and congratulations to you and
8	obviously to your teachers and those that are
9	leading you through this process.
10	Congratulations, job well done.
11	Now we will call our next panel, we
12	have two Stevens and a Joan. We have Steven
13	Risotto, ACC Phthalates Ester panel, Stevenoh,
14	you got me, what does that say? Hen?
15	[Off mic]
16	MALE VOICE: It's handed over
17	already.
18	[Off mic]
19	CHAIRPERSON ARROYO: Hentges, Jess
20	or R.
21	MALE VOICE: Hentges.
22	FEMALE VOICE: Hentges.
23	CHAIRPERSON ARROYO: From the
24	American Chemistry Council, and we have Joan
25	Lawrence from Toy Industry Association.

1	COMMITTEE ON HEALTH 54
2	MALE VOICE: Do you want to start
3	it?
4	CHAIRPERSON ARROYO: Come up, you
5	can flip a coin, whoever would like to go first,
6	if you're in favor, hopefully you all are, and if
7	you're on both sides of the issue, be nice to each
8	other.
9	STEVEN ROSARIO: Madam Chair, I'm
10	actually not Steve Risotto, I am Steve Rosario, my
11	colleague, Mr. Risotto is stuck on a train, he's
12	trying to
13	[Off mic]
14	STEVEN ROSARIO: No, no, no, no,
15	no, he's trying to make it up from Washington, DC,
16	he really is our expert on the phthalates so I can
17	really only go over some of his testimony. If he
18	does get here, I'd appreciate it if the panel
19	would let him speak because I know you had a
20	couple of questions on phthalates. I will just go
21	over very quickly, that the federal government has
22	pretty much
23	CHAIRPERSON ARROYO: [Interposing]
24	I want to interject something
25	STEVEN ROSARIO: Sure.

1	COMMITTEE ON HEALTH 55
2	CHAIRPERSON ARROYO:to the
3	panelists. All of us who are sitting on the
4	Committee today have a competing briefing over in
5	the members' lounge on the budget. I am going to
6	ask that you please summarize your testimony,
7	you've given us a copy for the record, that will
8	be entered, but in the interest of time and
9	allowing us as much opportunity to get in as much
10	of that briefing as possible, I would appreciate
11	it.
12	STEVEN ROSARIO: Absolutely, and I
13	hate reading testimony so I am going to summarize.
14	[Off mic]
15	STEVEN ROSARIO: [Coughs] Excuse
16	me. The federal government in terms of phthalates
17	has pretty much occupied the field. As the
18	Assistant Commissioner said, there are three
19	phthalates that have already been banned, three
20	that are under a temporary restraint where the
21	Consumer Product Safety Commission is currently
22	researching these. The CPSC has issued actual
23	test methods, protocols, which is very important
24	in our field, and Dr. Steve Hentges will really be
25	able to address some of those issues because what

1	COMMITTEE ON HEALTH 56
2	happens in phthalates and what happens with BPA
3	are very similar in the sense of testing and what
4	not.
5	The issue with phthalates is that
6	and it's very easy to save phthalates, but
7	phthalates really is a family of 13 different
8	chemical compounds, and I think that's what makes
9	it a little different than trans fats because you
10	can say phthalates but once you say phthalates,
11	you really then have to talk about the difference
12	between the 13 because they're all used for
13	different applications.
14	I think you did hear that DEHP,
15	DBP, and BBP are the three that are banned by the
16	federal government, DIMP, DIDP, and DNOP are the
17	two that are under restriction and currently going
18	further evaluation by the Chronic Hazard Advisory
19	Panel. And this panel is doing a comprehensive
20	review of all exposures, not just children's toys,
21	but other products and also alternatives. You
22	oftentimes will hear when someone will say, well
23	there is a safer alternative. And again, I think
24	that something that is a little tricky because no
25	one really defines what a safer alternative is,

1	COMMITTEE ON HEALTH 57
2	but at least the CHAP panel is looking at those.
3	In many ways, Intro 175 duplicates
4	what the feds are already doing both in terms of
5	protections for children, and obviously the city,
6	as the Assistant Commissioner said, does not
7	really have the kind of resources to enforce
8	locally. One of the issues that had been raised
9	is well, what are other states doing and not so
10	much on phthalates because many states have
11	already ceded that to the federal government,
12	because we think they're doing a very good job so
13	far. I believe the panel has already started its
14	meetings, so they're not sitting back, we're
15	dealing with a Consumer Product Safety Commission
16	that is very active. At this point, what I'll do
17	is I'll turn it over to Dr. Hentges on BPA.
18	DR. STEVEN HENTGES: Madam Chair,
19	Members of the Committee, I am Dr. Steve Hentges,
20	and thank you for the opportunity today to speak
21	to you about BPA. So I'm at the American
22	Chemistry Council, and what I do there is I manage
23	a group of the global manufacturers of BPA and
24	polycarbonate plastic and in that role I've been
25	deeply involved in the science on BPA for

1	COMMITTEE ON HEALTH 58
2	SERGEANT-AT-ARMS: [Interposing]
3	Speak into the microphone, please.
4	DR. STEVEN HENTGES: Sorry, keep
5	turning my head. Been deeply involved in the
6	science on BPA for more than 10 years now.
7	So I think you know what BPA is,
8	it's used primarily to make two things
9	polycarbonate plastic and epoxy resins, these are
10	not new materials, they've been safely used for
11	more than 50 years now and they're used today in a
12	very wide array of common consumer products. I
13	think it's important to keep in mind that you hear
14	so much about BPA you may think that you are being
15	exposed to a lot of BPA by use of consumer
16	products, you're not, these products
17	polycarbonate and epoxycontain only trace levels
18	of residual BPA, typically part per million
19	levelsvery, very low levels. So it really isn't
20	possible as a consumer to be exposed to any
21	significant level of BPA.
22	In your excellent introduction, I
23	think you also pointed out that there are many
24	studies on BPA and, in fact, BPA is one of the
25	best tested of all substances in commerce, you'll

1	COMMITTEE ON HEALTH 59
2	find very few substances that have more test data,
3	more scientific data than BPA. And what that
4	means is that we have a very rich scientific
5	database on which to assess the safety of BPA.
6	In the interest of time, if nothing
7	else, I'm not going to be going through all of
8	those hundreds and thousands of studies on BPA,
9	I'd be happy to follow up with you if you'd like
10	to do that, but today, I think just get to the
11	bottom line. What I think is most important for
12	you to know is that those studies have been
13	reviewed by many government agencies around the
14	world, in particular in the last couple of years.
15	And based on the weight of that scientific
16	evidence there is a consensus among regulatory
17	bodies around the world thatand this is from
18	U.S. to Canada to Europe to Japan to Australia and
19	New Zealanda consensus that BPA is not a risk to
20	human health, in particular at these very low,
21	very trace levels that people could be exposed to
22	from use of consumer products.
23	Just within the last year, really
24	the last couple of years, we've seen updated
25	assessments from the European Food Safety

1	COMMITTEE ON HEALTH 60
2	Authority, the European Union, supporting
3	statements from the French Food Safety Authority,
4	the Danish Environmental Protection Agency, the
5	Swiss Health authorities. Just in January of this
6	year we saw an updated statement from the German
7	Federal Institute for Risk Assessment and also one
8	from the Australian and New Zealand Food Safety
9	authorities. All of them agree that BPA, at these
10	trace levels that we are exposed to, is not a risk
11	to human health.
12	In the U.S., the relevant agency,
13	for BPA anyway, is FDA and, as I think you know,
14	FDA has an assessment that's underway right now.
15	FDA has been monitoring the science on BPA for
16	more than 10 years now and they've been consistent
17	in their views on the safety of BPA. But they do
18	have an assessment that's underway now, I don't
19	know when they will next have something to say
20	about it, but they have been consistently
21	affirming their view on the safety of BPA. In
22	January, for example, FDA provided an update on
23	their views and I'll give you just a couple of
24	quotes that I think succinctly summarize where
25	they're at, the one that is probably the most

1	COMMITTEE ON HEALTH 61
2	concise is from Dr. Joshua Sharfstein, who is
3	basically second in command at FDA, he said, if we
4	thought it was unsafe we would be taking strong
5	regulatory action, but in fact, FDA is not taking
6	or even proposing any regulatory action at this
7	time. What they are doing is they're doing some
8	research of their own, they recognize, as we do,
9	that there are scientific questions that can and
10	should be answered and so they are conducting
11	research in their labs down in Arkansas, the
12	National Center for Toxicological Research. That
13	research will play out over the next one or two
14	years, something like that. We've already heard
15	some of the preliminary results from them at a
16	scientific conference back in December, we expect
17	to see published in the peer-reviewed scientific
18	literature, a couple of papers in the next one or
19	two or three months. So FDA is very actively
20	involved in BPA. And so far their views on it
21	have been very consistent about the safety of BPA.
22	Although many government agencies
23	have already reviewed BPA, they do remain vigilant
24	and continue to monitor BPA. There is new science
25	that continues to come out, government agencies

1	COMMITTEE ON HEALTH 62
2	are staying engaged, staying involved, they're
3	monitoring, they're reviewing, and that's what we
4	expect them to do. For example, coming up, we
5	expect an update in July, it looks like the date
б	from the European Food Safety Authority, which is
7	kind of like FDA in Europe; we also expect an
8	update from the Japanese government, the Ministry
9	of Health, Labor, and Welfare, which, again, is
10	kind of like the FDA in Japan. At the
11	international level, the World Health Organization
12	and the Food and Agricultural Organization of the
13	UN are planning a review of BPA that'll take place
14	in November of this year.
15	And the reason I bring this all up
16	is that, in light of this very intense scrutiny
17	from government agencies around the world, it's
18	not clear to me at least that legislative action
19	on BPA is really necessary or appropriate at this
20	time, and so I would encourage you to consider the
21	views of the many governments around the world
22	that have looked at BPA, looked at the science in
23	great detail, and drawn their conclusions so far.
24	Want to finish off, I know you have
25	other things you want to do, so I want to be

1	COMMITTEE ON HEALTH 63
2	respectful of your time, but I want to finish off
3	just with one last thing. When you think about
4	the rich scientific database on BPA, again,
5	there's really nothing that has that kind of data
6	available, you won't find any alternatives that
7	have been tested even remotely as well. So
8	although you hear about safer alternatives, that
9	is really not something you can say based on
10	scientific fact, the facts really aren't there.
11	So I think just in closing, again,
12	I don't take up any more of your time, you may
13	have questions, but in closing, I want to
14	encourage you to consider these consensus views of
15	the governments around the world that have
16	reviewed the safety of BPA, we support FDA and
17	their review, and we would encourage you to also
18	work with them. Thank you.
19	JOAN LAWRENCE: Good afternoon,
20	Chairwoman and Members of the Committee, my name
21	is Joan Lawrence, I'm Vice President of Safety
22	Standards and Government Affairs for the Toy
23	Industry Association, and the Toy industry
24	Association is a not-for-profit trade group based
25	here in New York City and we represent over 500

1	COMMITTEE ON HEALTH 64
2	toy companies and distributors throughout the U.S.
3	I want to talk about Intro number
4	175. First I'm going to talk about the phthalates
5	provisions in it and, as you have heard already
б	today, these are provisions that are already
7	federal law for toys sold anywhere in the U.S.,
8	including in New York City. They are identical to
9	the federal requirements and these are already
10	enforced at the federal level and toy companies
11	selling in the U.S. must test their products to
12	those federal requirements and produce a
13	certificate of compliance to sell to a retailer
14	here in this country. So that is an existing
15	requirement and I would suggest that it's not
16	necessary for New York City to do the same thing,
17	it would be redundant, and could impose additional
18	redundant testing requirements on the companies
19	producing those toys. In other words, if you want
20	to sell to a retailer who has stores in New York
21	City, the retailer would then want the assurance
22	of knowing you tested specifically for New York
23	City even if you had already tested for the
24	federal requirement. So it imposes additional
25	testing requirements, which is delays and money

1	COMMITTEE ON HEALTH 65
2	and costs of the product.
3	So then if we talk about the BPA
4	provisions in the bill
5	COUNCIL MEMBER VALLONE:
6	[Interposing] Just to clarify, that's only
7	regarding three of the phthalates that the rules
8	have been set for.
9	JOAN LAWRENCE: No, it's all six
10	phthalates named in this bill. All six are
11	regulated at the federal level.
12	COUNCIL MEMBER VALLONE: Well three
13	have set regulations through the rules, the rest
14	have not yet been set.
15	JOAN LAWRENCE: [Interposing] Three
16	have permanent requirements under the Consumer
17	Product Safety Improvement Act and three have
18	interim requirements that are in full effect
19	unless CPSC rescinds them or changes them in any
20	way, which they have not yet, they are studying
21	them. So all six are in full effect at this time.
22	And then regarding BPA, there is no
23	jurisdiction in the U.S. or internationally that
24	has restricted BPA use in toys. As you've heard,
25	it's used specifically for the safety it brings to

1	COMMITTEE ON HEALTH 66
2	a product, and when it comes to toys that is
3	shatter resistance. We are trying to avoid more
4	acute hazardsssharp edges that would result in
5	breakage or small parts which, of course, are
6	choking hazards. So it's really chosen for
7	specific uses in specific types and parts of toys,
8	where you do not want breakage and so that's why
9	it's chosen. It's also, you've heard, well
10	demonstrated for its safety. Numerous times FDA
11	and other scientific bodies have looked at this
12	and found no reason to restrict it in children's
13	toys. And there is no other jurisdiction that has
14	done this. A couple of states have looked at
15	restricting it in toys and upon further study
16	found that there is no reason to do it based on
17	the way toys are used, the reason it is used in
18	toys, and the safety that it brings to those toys.
19	So that, in short, is a summary of
20	my testimony which you have in full, including a
21	little bit of background on safety standards here
22	in the U.S. We have comprehensive safety
23	standards, and I actually chair a group under ASTM
24	International, which is a safety standards
25	development organization. We have consumers,

1	COMMITTEE ON HEALTH 67
2	medical experts, pediatricians, government, and
3	industry that together write our U.S. standards
4	and they were recognized by Congress in 2008 as
5	exemplary and adopted as mandatory federal rule.
6	So this is an effort that is actually my full-time
7	job is developing standards and ensuring that we
8	have tough standards here in the U.S. for any
9	product sold here and that we educate the industry
10	on what they are so that they can comply.
11	CHAIRPERSON ARROYO: Some
12	manufacturers have already stopped making products
13	with the chemicals that we're discussing here. So
14	have they found a substitute that does not give us
15	the same level of concern that these chemicals
16	that we're discussing today do?
17	JOAN LAWRENCE: Well for phthalates
18	they have to
19	CHAIRPERSON ARROYO: [Interposing]
20	And how are they
21	[Crosstalk]
22	JOAN LAWRENCE:stop using them.
23	And, yes
24	CHAIRPERSON ARROYO: So there is a
25	substitute.

1	COMMITTEE ON HEALTH 68
2	JOAN LAWRENCE: For phthalates.
3	CHAIRPERSON ARROYO: Yes. That
4	we're not going to in three, five years discover,
5	oh my goodness, we have a problem with these too?
6	JOAN LAWRENCE: Do you want to talk
7	about alternative plastics?
8	STEVEN ROSARIO: Well actually,
9	Madam Chair, with your permission, may I really
10	relinquish my seat here for my colleague, the
11	expert who just came in, Mr. Steve Risotto?
12	CHAIRPERSON ARROYO: It's actually
13	quite simple, is there anobviously, there's an
14	alternative and what about for BPAs? 'Cause I
15	keep hearing about phthalates and the legislation
16	also addresses BPA, so we're not having a very
17	substantive conversation around BPA. Council
18	Member
19	STEVEN ROSARIO: Well, Steve, why
20	don't you answer the question about BPA
21	alternatives.
22	CHAIRPERSON ARROYO: Substitute, is
23	there a substitute?
24	DR. STEVE HENTGES: Yeah, well
25	first for BPA you wouldn't have polycarbonate

1	COMMITTEE ON HEALTH 69
2	plastic without BPA, so that's polycarbonate is
3	what you're looking at, is there a substitute for
4	that, and I think, as probably you said in your
5	introduction, baby bottle manufacturers have
6	already moved to different plastics, not because
7	polycarbonates unsafe, it's because they're not
8	really interested in the public attention to BPA.
9	But to get to your question
10	CHAIRPERSON ARROYO: [Interposing]
11	I'm sorry, I don't understand what
12	DR. STEVE HENTGES: [Interposing]
13	There's a lot of controversy and baby bottle
14	manufacturers aren't really in the business of
15	defending the safety of the plastic, they're
16	interested in selling a product, so with all the
17	controversy and public attention, they've moved on
18	to other materials. But to get to your question,
19	are they safer, I don't think we can really answer
20	that, there's no alternative that has anywhere
21	near the same scientific data as BPA. And what
22	you said at the end there is actually almost
23	exactly the same as a quote that I want to give
24	you. This is from a paper written very recently
25	by two authors, one of which is Linda Birnbaum,

1	COMMITTEE ON HEALTH 70
2	who is the head of NIHS, and picking out one
3	sentence here, they were looking at BPA kind of as
4	a case study and they said our literature search
5	on some of the replacement chemicals revealed no
6	exposure information and, very similar to you,
7	they said, years from now will we be seeing
8	exposure studies describing certain BPA
9	alternatives as emerging chemicals of concern.
10	The answer is we don't know, the data is not there
11	to be able to say the alternatives are safer.
12	CHAIRPERSON ARROYO: Council Member
13	Vallone?
14	COUNCIL MEMBER VALLONE: That's no
15	reason not to get rid of something that we know is
16	a problem. Joan, I think it was, you said that
17	the industry is abiding by the elimination of
18	phthalates at the federal level, what have they
19	done to do that?
20	JOAN LAWRENCE: Companies are
21	required to comply with the 0.1% levels that you
22	also have in your New York City proposed law and
23	they must test their products with an independent
24	testing lab to demonstrate compliance with that
25	federal requirement before selling to a retailer.

1	COMMITTEE ON HEALTH 71
2	COUNCIL MEMBER VALLONE: And has
3	this resulted in any problems in your industry?
4	Are toys falling off the shelves in six different
5	pieces? What has the result of the elimination of
б	phthalates been to your industry?
7	JOAN LAWRENCE: Numerous products
8	have had to be destroyed, thrown out, it has
9	created increased testing costs
10	COUNCIL MEMBER VALLONE:
11	[Interposing] Those were products that were
12	previously produced.
13	JOAN LAWRENCE: Yes, that's right,
14	prior to the
15	COUNCIL MEMBER VALLONE:
16	[Interposing] Nothing that was built
17	JOAN LAWRENCE:effective date
18	COUNCIL MEMBER VALLONE:
19	subsequent just disintegrated
20	JOAN LAWRENCE:effective date
21	COUNCIL MEMBER VALLONE:want to
22	be clear, okay.
23	JOAN LAWRENCE: Some companies have
24	actually as a result of the federal legislation
25	gone out of business because of the unintended

1	COMMITTEE ON HEALTH 72
2	costs that it created in terms of testing and
3	compliance. The way actually the federal
4	legislation is written, it doesn't matter if your
5	product is plastic or not, you still have to test
6	for compliance, and so a wooden toy, for example,
7	would have to be tested to prove that it doesn't
8	have any plastic in it. And that's one example of
9	where it's having some unintended consequences.
10	COUNCIL MEMBER VALLONE: What
11	company has gone out of business as a result of
12	this law?
13	JOAN LAWRENCE: We actually have
14	several members that have dropped their membership
15	and gone out of business because of it, I don't
16	have their names with me, but I would be happy to
17	provide that.
18	COUNCIL MEMBER VALLONE: As a
19	result of the phthalates law, not the economy,
20	it's the phthalate
21	[Crosstalk]
22	JOAN LAWRENCE: [Interposing] As a
23	result of the Consumer Product Safety Improvement
24	Act which includes the phthalate law and testing
25	to it, yes.

1	COMMITTEE ON HEALTH 73
2	COUNCIL MEMBER VALLONE: Oh, so it
3	could have been other provisions of the Consumer
4	Product Improvement Act.
5	JOAN LAWRENCE: Well yes, because
б	it requires testing to all of its requirements.
7	COUNCIL MEMBER VALLONE: And there
8	are many of your members obviously who are dealing
9	with this ban by just lowering the amount of
10	phthalates in their products.
11	JOAN LAWRENCE: That's right, some
12	have moved away from making any products of that
13	soft, pliable plastic that phthalates brings to a
14	product.
15	COUNCIL MEMBER VALLONE: I haven't
16	seen any shortage of these projects in the
17	supermarkets. [Off mic]. You said you're from a
18	not-for-profit, I just want to make clear that
19	this is not an unbiased not-for-profit, I assume
20	you're funded by the toy industry.
21	JOAN LAWRENCE: We are, our members
22	include the toy companies, we have over 500 member
23	companies located throughout the U.S., and we also
24	own and manage the American International Toy
25	Fair, which is every February here in New York.

1	COMMITTEE ON HEALTH 74
2	We bring 30,000 companies, retailers, and
3	manufacturers to New York City for the annual
4	show.
5	COUNCIL MEMBER VALLONE: I'm sure
6	you do a great job, I love toys. Normally, you
7	and I are on the same page when it comes to toys,
8	but the chemical industry
9	JOAN LAWRENCE: [Interposing] Then
10	you would love to hear about our foundation, but I
11	won't go into that.
12	COUNCIL MEMBER VALLONE: Another
13	time. The American Chemistry Council, I assume,
14	that's a group funded by whom?
15	DR. STEVEN HENTGES: It's
16	manufacturers of chemicals and the ones I work
17	with in particular are the global manufacturers of
18	BPA and polycarbonate plastic.
19	COUNCIL MEMBER VALLONE: And
20	there's nothing wrong with that, you're entitled
21	to your advocate's position, but I just want to
22	make clear that you're funded by the industries
23	that we are trying to regulate. I don't want to
24	do what the Chair doesn't want you to do and take
25	up time, so we'll discuss this all at a further

1	COMMITTEE ON HEALTH 75
2	date, but thank you for coming down today.
3	CHAIRPERSON ARROYO: I just have a
4	real simple question, we had these incredible
5	young people come here to tell us, to raise
6	awareness about this issue, and what do we say to
7	them, are they wrong?
8	DR. STEVEN HENTGES: I don't think
9	it's right or wrong, I think we recognize that
10	there are concerns about BPA and for phthalates as
11	well, and so what we do is we work very closely
12	with the government agencies like FDA that
13	regulate these products, we sponsor a lot of
14	research ourselves because we recognize there are
15	scientific questions that need to be answered, so
16	we continue to sponsor research ourselves. So
17	we're very active, I don't think it's fair to say
18	that we would be denying these issues at all,
19	we're very well aware of them, we appreciate
20	hearing about them, and we will continue working
21	on them.
22	CHAIRPERSON ARROYO: We have a new
23	member on the panel who jumped off the train I
24	understand a few minutes ago, so we want to give
25	you a couple of minutes to give us some wisdom on

1	COMMITTEE ON HEALTH 76
2	this issue.
3	STEVEN RISOTTO: Thank you, it
4	slowed down enough for me to get off without
5	having to hurt myself too badly. I appreciate the
6	opportunity to be here and I apologize for my
7	tardiness.
8	[Crosstalk]
9	SERGEANT-AT-ARMS:your name,
10	sir.
11	STEVEN RISOTTO: My name is Steve
12	Risotto, not to confuse you with Steve Rosario
13	[Crosstalk]
14	STEVEN RISOTTO: Okay. And I am
15	[Crosstalk]
16	CHAIRPERSON ARROYO:you missed
17	that part.
18	STEVEN RISOTTO: Okay. I am a
19	native New Yorker, and I represent the phthalates
20	manufacturers, I am the Senior Director for
21	Phthalate Esters at the American Chemistry
22	Council.
23	And I think rather than repeat what
24	Joan and Steve have already said, I want to
25	address the one question you raised, Madam Chair,

1	COMMITTEE ON HEALTH 77
2	about the alternatives to phthalates and how well
3	tested they are and whether concerns might occur
4	in subsequent years. And how I respond to that is
5	that Congress, in its wisdom, directed CPSC to
6	appoint an advisory panel, a Chronic Hazard
7	Advisory Panel, to look not only at the interim
8	restrictions on the three phthalates that Joan
9	referenced, the restrictions that are in place
10	until CPSC decides to remove them, but to also
11	look at the alternatives to the phthalates in
12	making flexible plastic and to look at all
13	exposures to both the phthalates and these
14	products, not just exposures from toys. Their
15	report is expected in two years, probably April of
16	2012 or thereabout, and then CPSC will make some
17	recommendation on whether further action is
18	required six months after that. So there is at
19	least an awareness that the replacement of the
20	phthalates with other products needs to be
21	considered, potential health concerns. Not to
22	suggest that there are necessarily, but that is
23	something that Congress has directed CPSC to look
24	at.
25	CHAIRPERSON ARROYO: Thank you.

I

1	COMMITTEE ON HEALTH 78
2	Council Member, do you have any further questions?
3	Thank you for your testimony, I certainly
4	encourage you to continue your conversation with
5	the sponsor of this legislation. I think working
6	together, we might be able to get to a place where
7	we feel a much greater level of comfort about what
8	we're trying to accomplish here. More
9	importantly, to respond to the issues that these
10	young people have raised for us. Thank you for
11	your testimony.
12	We're going to call up a panel of
13	four and you're all in favor so we're going to put
14	you all together, and so that way you don't have
15	to be nice to each other. We have Wendy
16	Rubinstein [phonetic] from Mount Sinai Children's
17	Environmental Health Center, are you here?
18	WENDY RUBINSTEIN: Yes.
19	CHAIRPERSON ARROYO: Miranda
20	Massie.
21	MALE VOICE: Right here [off mic]
22	[Crosstalk]
23	CHAIRPERSON ARROYO: New York
24	Lawyers for the Public Interest?
25	[Off mic]

1	COMMITTEE ON HEALTH 79
2	FEMALE VOICE: I'm sorry.
3	CHAIRPERSON ARROYO: You're Lawyers
4	for Public Interest, one of my favorite groups.
5	Kristina Jung [phonetic], WE ACT, and Michael
6	Schade
7	[Crosstalk]
8	CHAIRPERSON ARROYO:Schade
9	FEMALE VOICE: Yes.
10	CHAIRPERSON ARROYO:Center of
11	Health, Environment, and Justice. And you didn't
12	travel very far.
13	[Off mic]
14	CHAIRPERSON ARROYO: Welcome. Have
15	you guys done this before?
16	FEMALE VOICE: No.
17	CHAIRPERSON ARROYO: Go in whatever
18	order you think you feel more comfortable. Speak
19	into the mic, otherwise Nick will yell at you, and
20	identify yourself before you begin your testimony.
21	As in the former panel, please summarize your
22	testimony, if you have a hard copy for the record,
23	it will be entered fully into the record. You may
24	begin.
25	WENDY RUBINSTEIN: Should I go?

1	COMMITTEE ON HEALTH 80
2	FEMALE VOICE: Sure.
3	WENDY RUBINSTEIN: Should I start?
4	Okay. Members of the Health Committee, thank you
5	so much this opportunity to testify today on
6	amending the Administrative Code of the City of
7	New York in relation to the sale of toys and child
8	care products that contain bisphenol A and/or
9	phthalates. My name is Wendy Rubinstein, I'm the
10	mother of a three-year-old and I'm an Executive
11	Board member of Mount Sinai's Children's
12	Environmental Health Center. I'm also a lifelong
13	New Yorker, as is my husband of 10 years.
14	The Children's Environmental Health
15	Center at Mount Sinai is among the foremost
16	institutions researching the effects of every day
17	chemicals on pediatric health and development.
18	Our director, Dr. Philip Landrigan, is a world
19	leader in the field of public health and
20	preventive medicine.
21	Dr. Landrigan, Mount Sinai's
22	pioneering doctors, and researchers, and my
23	colleagues on the Executive Board share grave
24	concerns about the relationship between pediatric
25	exposures to everyday chemicals such as BPA and

1	COMMITTEE ON HEALTH	81
2	phthalates and childhood and adult disease. We	
3	believe there is an urgent need for state and	
4	local governments to enact laws such as the one	
5	being considered today because the federal	
6	chemical regulatory process is broken.	
7	More than 80,000 new synthetic	
8	chemicals have been developed since World War	
9	sorry, World War II, with fewer than 20% ever	
10	having been tested for possible toxicity to	
11	infants, children, and pregnant women. Almost	
12	3,000 of these chemicals are classified as high	
13	production volume, meaning they are produced in	
14	excess of one million pounds per year, this	
15	includes BPA and phthalates.	
16	Coinciding with this chemical	
17	revolution is the fact that rates of chronic	
18	childhood disease are skyrocketing. Scientific	
19	evidence is implicating chemical exposures in	
20	early life as the reasons for these increases in	
21	childhood disease, as well as an increased risk	
22	for disease in adulthood.	
23	Studies by the Federal Centers for	
24	Disease Control and Prevention have demonstrated	
25	that nearly all Americans have measurable	

1	COMMITTEE ON HEALTH 82
2	concentrations of BPA and phthalates in their
3	bodies. The main concern surrounding BPA and
4	phthalate exposure is due to their ability to
5	disrupt the normal functioning of the body's
6	endocrine system. BPA was originally developed by
7	the pharmaceutical industry as a synthetic
8	estrogen, and it was discovered afterwards to have
9	helpful properties in plastics.
10	Infant formula and foods can be
11	contaminated with BPA when it leaches from the
12	chemical linings used to keep cans from rusting.
13	Phthalates are also endocrine disruptors, they
14	alter the normal functioning of the body's
15	hormonal signaling system and disrupt
16	communication between cells and organs in the
17	body. Both BPA and phthalates can leach out of
18	the products to which they are added, causing
19	exposure through ingestion of foods found in
20	plastic packaging or mouthing of products,
21	children are particularly at risk.
22	There is a broad and growing
23	consensus within the scientific community that BPA
24	and phthalates pose significant threats to our
25	children's health and that exposure should be

1	COMMITTEE ON HEALTH 83
2	avoided. As the evidence against these chemicals
3	mounts, legislation has increasingly been adopted
4	as a precautionary measure to restrict their use
5	both at the state and local levels in the United
6	States and also abroad. In 2005, the EU banned
7	phthalates in all toys and child care products.
8	Last year in Canada, the use of BPA was restricted
9	in bottles, toys, and food packaging for infants
10	and newborns. California has banned some classes
11	of phthalates in toys and child care products,
12	legislation banning BPA in children's products
13	have also been passed in Minnesota and
14	Connecticut. Here in New York state, bans on BPA
15	have been passed, starting with Suffolk County in
16	2009, followed by Schenectady and Albany Counties.
17	I urge the Health Committee to support this Local
18	Law and protect the children of New York City from
19	chemicals strongly suspected of posing serious
20	health risks.
21	When my daughter Ava was born just
22	over three years ago, I could not imagine how
23	difficult it is to be a parent in today's complex
24	world. I am unable to trust the products sold in
25	the market place and spend countless hours

1	COMMITTEE ON HEALTH 84
2	researching their ingredientsif they are even
3	listed on the product at all. Phone calls to
4	manufacturers and storekeepers do not help, as a
5	majority are completely unaware of the chemicals
6	used in the products they sell for use by
7	children. As a parent knowledgeable and concerned
8	about these issues, I can say from the experience
9	that the federal government has allowed a heavy
10	burden to be placed on parents' shoulders. It is
11	impossible to do what is right for your child's
12	health with the current state of chemical
13	regulation in this country. Suspect chemicals
14	such as BPA and phthalates are ubiquitous and even
15	if one is successful in reducing exposures at home
16	to a minimum, there are still daily exposures as
17	soon as your child steps out the front door.
18	This amendment to the
19	Administrative Code is an important sign of
20	progress towards filling the enormousexcuse me,
21	holes in our federal health protection system. It
22	is a common sense, precautionary measure that will
23	reduce the threats to our children's health and
24	should also have the side benefit of improving the
25	well-being and productivity of their worried

1	COMMITTEE ON HEALTH 85
2	parents. Thank you.
3	CHAIRPERSON ARROYO: I'm going to
4	try to be real nice about this, so please
5	summarize your testimony. And I'm going to
6	apologize in advance for the rush, but we have
7	competing hearings and briefings going on that are
8	all equally important and I want to give everyone
9	as much opportunity as possible to provide
10	testimony. Thank you.
11	MIKE SCHADE: Great, I'll do my
12	best to be brief. So good after, Chairwoman and
13	Members of the Committee, thank you for the
14	opportunity to testify here today. My name is
15	Mike Schade, and I'm with the Center for Health
16	Environment, and Justice, we're a national
17	environmental health organization. I work out of,
18	CHEJ's office here in New York City and have been
19	working professionally on children's environmental
20	health issues here in New York state for the past
21	10 years.
22	I am the co-author of a number of
23	national reports investigating both phthalates, as
24	well as bisphenol A and various consumer products,
25	including those that children come in contact with

1	COMMITTEE ON HEALTH 86
2	on a regular basis.
3	So first I'd like to start by
4	saying that we commend and fully support the
5	Council's legislation to ban phthalates and BPA in
6	children's products, and first I'd like to address
7	the issue of phthalates. As some other panelists
8	have mentioned, it appears, while well-
9	intentioned, unfortunately, the proposed
10	legislation on phthalates may unfortunately be
11	preempted by the federal law that Congress
12	enacted.
13	Given this, we urge the City
14	Council to investigate opportunities for the city
15	to regulate and address phthalates that find their
16	way into other products that children, infants,
17	and women of childbearing age come in contact with
18	on a regular basis which are not currently covered
19	by the federal lawthe CPSIA law that was
20	mentioned. We feel that this is critically
21	important as many phthalates have been linked to
22	reproductive health problems in women, including
23	shorter pregnancy duration, premature breast
24	development in girls, sperm damage in men,
25	impaired reproductive development in boys, and

1	COMMITTEE ON HEALTH 87
2	many other health issues.
3	Phthalates, pretty much everyone in
4	this room has measurable levels of phthalates in
5	our bodies, phthalates are highest in children
6	ages 6 to 11, like some of the children in this
7	room here today, and phthalates are also highest
8	in women. Now while phthalates have been banned
9	by Congress in children's toys, they are
10	widespread in many other products that children
11	come in contact with on a daily basis in schools,
12	including schools here in New York City. Over 90%
13	of all phthalates are found in PVC plastic, which
14	is the plastic toy that most commonly contains
15	phthalates. Many of these products are found in
16	schools, this includes products like vinyl
17	flooring, backpacks, lunch boxes, and other
18	products that children come in contact with on a
19	daily basis. Unfortunately, right now the federal
20	law does not address these products of concern.
21	Children and teachers can be
22	exposed to phthalates from these products because
23	the phthalates can evaporate and be released into
24	the air inside schools. These chemicals then
25	cling to the dust and then can be breathed in by

1	COMMITTEE ON HEALTH 88
2	children, teachers, and other faculty in schools.
3	There's been a number of
4	independent peer-reviewed scientific studies that
5	have come out in recent years that have found
6	correlations between phthalates off gassing from
7	vinyl flooring and asthma in both children and
8	adults. One new study that just came out this
9	past year actually found a statistically
10	significant correlation between phthalates off
11	gassing and autism in children.
12	As we know, asthma is a huge issue
13	here in New York City, so we really urge the city
14	to explore other ways that the city could address
15	phthalates in products that are not being covered
16	by the federal law. For example, the city could
17	investigate ways for schools to buy PVC in
18	phthalate-free building products, school and
19	office supplies. The city obviously spends
20	millions and millions of dollars a year through
21	procurement, buildings, renovating buildings, many
22	of these materials contain phthalates and children
23	are being exposed to them on a daily basis and
24	unfortunately, the law as it's currently written,
25	as well as the federal law, does not address these

1	COMMITTEE ON HEALTH 89
2	critical exposure areas.
3	Now I'd like to switch some of my
4	testimony to BPA, and I will summarize my
5	testimony here. BPA is a synthetic sex hormone,
6	there's been over 200 independent peer-reviewed
7	scientific studies that have found that BPA can be
8	harmful even at very low levels of exposure,
9	including levels that all of us are being exposed
10	to on a daily basis through the products that we
11	buy through the food that we eat and so on. BPA
12	has been linked to cancer, abnormal behavior,
13	diabetes and heart disease, infertility,
14	developmental problems, reproductive health
15	problems, even obesity, early puberty, which
16	actually is actually a known risk factor for
17	breast cancer.
18	It's worth noting that most of
19	these studies that have found harm from BPA were
20	done by independent scientists, many of whom are
21	academic institutions that were funded by the
22	government. Now there are studies that are out
23	there that have found that BPA is safe and BPA is
24	not harmful, and it's worth noting that most of
25	those studies that found that BPA is safe are

1	COMMITTEE ON HEALTH 90
2	actually studies that were funded by the chemical
3	or the plastics industry. Those studies
4	consistently found no harm and, just like the
5	tobacco industry argued for decades that smoking
6	is perfectly safe, the BPA and plastics industry
7	continues to argue that BPA is perfectly safe.
8	Now if we look at the statistics,
9	it's clear that every one of us is exposed to BP
10	on a regular basis. Almost every single person in
11	this room here has measurable levels of BPA in our
12	bodies, and this is according to testing done by
13	the federal government, the CDC. Even babies are
14	born pre-polluted with BPA. BPA has been found in
15	the cord blood of newborn infants. BPA is found
16	in many different consumer products from baby
17	bottles to water bottles, food can linings, and so
18	on.
19	Most recently, I co-authored a
20	report, which I have here with me, called New
21	Silver Lining, and in this report what we did is
22	we sent canned food to laboratories to find out
23	whether or not the food that we're eating from
24	cans actually contains BPA, because BPA is
25	commonly used as a lining in the epoxy resins that

1	COMMITTEE ON HEALTH 91
2	we find in canned food. Surprisingly, we found
3	BPA in over 90% of the canned foods that we
4	purchased, this was things like vegetables and
5	green peas and other products, 92% of the cans
6	that we tested had measurable levels of BPA. We
7	tested 50 cans from 19 states across the country,
8	including here in New York state.
9	Given these various health concerns
10	around BPA exposure, given our ubiquitous exposure
11	to it, there's been a major market and policy
12	movement away from BPA. Some of the biggest
13	retailers in the country like Wal-Mart and Target
14	and CVS are going BPA-free, many different
15	companies that make infant formula and baby food
16	packaging are going BPA-free, companies like
17	Nestlé and we're seeing a major market shift away
18	from BPA in canned food. Over 10 years ago, Eden
19	Foods actually went BPA-free in 1999. If a small
20	company like Eden Foods can go BPA-free, why can't
21	some of the bigger food packaging companies here
22	in this country? Water bottle companies such as
23	Nalgene have eliminated BPA, this here water
24	bottle is BPA-free. If you look at most of the
25	sectors where BPA is commonly used in food contact

1	COMMITTEE ON HEALTH 92
2	materials, there are safer and cost-effective
3	alternatives that are out there.
4	On the government policy side, many
5	U.S. cities and counties have also taken steps to
6	regulate BPA. Here in New York state, Suffolk
7	County, Albany County, Rockland County, and
8	Schenectady counties have all taken efforts to
9	restrict or ban BPA, particularly in baby bottles.
10	The city of Chicago has also enacted a restriction
11	on BPA. So clearly the city has authority to
12	address this chemical of concern given the
13	precedent that's been set by others cities as well
14	as counties here in New York and across the
15	country. Legislation to restrict BPA has been
16	introduced in over 20 states across the country,
17	there's been six states that have enacted
18	restrictions on BPA, including Connecticut and
19	Maryland. At the U.S. federal level, federal
20	legislation is now being considered to restrict
21	BPA, Senator Schumer and Representative Weiner
22	have both introduced legislation to ban BPA. And
23	in terms of federal health agencies, both the FDA
24	and the Department of Health and Human Services
25	earlier this year have issued statements

1	COMMITTEE ON HEALTH 93
2	expressing concern about the impact that BPA
3	exposure has on human health, and these statements
4	actually mirrored concerns by the federal and
5	national toxicology program.
б	So it's actually not true that the
7	federal government has given BPA a sign of
8	approval. The NTP has expressed some concern for
9	BPA effects on the brain, behavior, and prostate
10	gland in fetuses, infants, and children at levels
11	that all of us are exposed to on a daily basis,
12	including exposures. The U.S. EPA has declared
13	BPA a chemical of concern and is in the process of
14	developing a chemical action plan, and in Europe
15	and elsewhere around the world, we're beginning to
16	see more and more restrictions on BPA. In fact,
17	just yesterday, the German environmental agency
18	they announced that they're advising
19	manufacturers, importers, and users of BPA to use
20	safer alternatives, in Canada, BPA has been banned
21	in baby bottles. So there is a major market shift
22	away from BPA at every level of the economy where
23	BPA is being used, and at the same time we're
24	seeing major restrictions on BPA in cities,
25	counties, states, at the federal level, and also

1	COMMITTEE ON HEALTH 94
2	the international level.
3	So given this, we feel that these
4	similar trends should be reinforced here in New
5	York state, we feel that New Yorkers deserve these
6	same levels of protection and we strongly urge you
7	to support this legislation, and think about ways
8	that it can be brought in to address other areas
9	in which children and consumers are exposed to
10	both phthalates and bisphenol A. Thank you.
11	CHAIRPERSON ARROYO: [Off mic] Try
12	not to grab it by the base, yeah, pull it by the
13	base.
14	[Off mic]
15	MALE VOICE: The base.
16	FEMALE VOICE 1: You should pull it
17	by the base.
18	KRISTINA JUNG: Yeah.
19	[Off mic]
20	KRISTINA JUNG: The other base.
21	CHAIRPERSON ARROYO: Yeah.
22	KRISTINA JUNG: Okay. Madam
23	Chairwoman and Members of the Council, my name is
24	Kristina Jung and I will be delivering testimony
25	on behalf of WE ACT.

1	COMMITTEE ON HEALTH 95
2	WE ACT is a northern Manhattan-
3	based organization which builds healthy
4	communities by ensuring the meaningful
5	participation of people of color and low income in
6	thesorry, the development of environmental
7	health and protection policy and practice. We
8	thank the Committee and the Council for taking
9	leadership on this very important action to
10	protect the health and development of our
11	children, particularly the infants and toddlers
12	who will be most benefited by the proposed
13	legislation.
14	And there has been a lot of
15	testimony regarding the hazards of BPA and
16	phthalates and their widespread use, so I will
17	simply address this legislation from an
18	environmental justice perspective. So within the
19	environmental justice context phthalate and BPA
20	containing PVC products are most pervasively used
21	in communities of color and low income. In
22	northern Manhattan, our neighborhoods abound with
23	discount and \$.99 store offering the cheapest,
24	most poorly manufactured PVC products most likely
25	to contain the worst forms of phthalate, so

1	COMMITTEE ON HEALTH 96
2	there's a very disproportionate impact on these
3	communities here. Low income families use
4	phthalate and BPA containing products for
5	everything from baby feeding to dinnerware,
6	microwave cookware, not to mention personal care
7	and beauty products, such as creams, nail
8	adornments, and hair perming solution, so any
9	action to stem the use of these toxic materials
10	would greatly benefit the members of the
11	community. And the rest is in the testimony and
12	the written testimony, so go for it.
13	MIRANDA MASSIE: Good afternoon,
14	Madam Chair and Members of the Committee, my name
15	is Miranda Massie and I am the Litigation Director
16	at New York Lawyers for the Public Interest, which
17	is a civil rights nonprofit legal organization.
18	I'm also an attorney in our environmental justice
19	section. We work with communities of color and
20	low income communities around New York City on
21	environmental and environmental health issues.
22	And I'm very pleased to be here today and very,
23	very pleased for the occasion, we strongly support
24	the proposed legislation and think that it's
25	really imperative for New York City to take a

1	COMMITTEE ON HEALTH 97
2	stand on this, in the case of BPA, very
3	established environmental health issue.
4	In the case of phthalates, the
5	research is at a somewhat earlier point as we
6	understand it, but there's still more than enough
7	research showing the probability of pervasive and
8	severe health effects, immunological, endocrine,
9	reproductive, neurological health impacts to take
10	action.
11	Because we're short on time today,
12	I won't do what I would normally do, which would
13	be to make some points repetitively for emphasis.
14	I have excellent written testimony hereand I can
15	say that because it was prepared by an absolutely
16	stupendous intern we have in our office this
17	summer who I want to acknowledgeand it goes
18	through the peer-reviewed research in
19	CHAIRPERSON ARROYO: [Interposing]
20	What's the intern's name?
21	MIRANDA MASSIE: Her name is
22	Bethany Tolintino [phonetic], thank you, Madam
23	Chair. She's right over there in the corner,
24	hiding behind a column.
25	[Off mic]

1	COMMITTEE ON HEALTH 98
2	MIRANDA MASSIE: I'm sure she'll
3	get revenge later.
4	[Off mic]
5	MIRANDA MASSIE: Our testimony goes
б	to the health impacts, it summarizes the peer-
7	reviewed science, it summarizes the move toward
8	regulation. We're at a loss to understand some of
9	the testimony that was offered by the industry
10	panel, frankly, we just simply don't understand
11	how it relates to what we've seen in the
12	literature, but we'll let you and your staffer
13	sort through those controversies.
14	And I guess in closing, I just want
15	to address the question of whether redundancy is a
16	reason not to pass the legislation. It seems to
17	us very much the case that it's not, the federal
18	standards could change and New Yorkers deserve to
19	be protected against these toxins, regardless of
20	what the federal government does or doesn't do.
21	I would also add that New York City
22	taking a stand on this can help add to the impetus
23	to protect all of us against endocrine disruptors,
24	including, but not limited to, BPA and phthalates.
25	New York City's stand on similar issues, has had a

1	COMMITTEE ON HEALTH 99
2	tremendously positive impact on human health.
3	There was some talk earlier about the trans fat
4	legislation in New York City, I would also point
5	to smoking bans, that New York City can make a
6	difference nationally and internationally by
7	taking a position on these questions. And we've
8	done a lot of work around advocating for reform of
9	the Toxic Substances Control Act, which is, I'm
10	sure you know, is a federal law that severelyits
11	deficiencies are absolutely fundamental and severe
12	and it has not succeeded in protecting the
13	population against the introduction of toxic
14	chemicals for profit into the stream of commerce
15	and into our bodies. There are reform efforts now
16	underway in Congress, they look quite strong, and
17	part of the impetus behind them is because local
18	legislation and state legislation has been passed
19	and because large manufacturers and large
20	retailers have moved away from some of the
21	chemicals in question. So what you do can make a
22	very big difference even if, in technical terms,
23	some of the provisions currently overlap with
24	those in federal law. Thank you very much.
25	CHAIRPERSON ARROYO: Thank you all

1	COMMITTEE ON HEALTH 100
2	for your testimony and your very helpful
3	information. I think that one of the things that
4	comes out of your testimony here is understanding
5	that there is legislation pending both in the
6	Senate and in the House of Representatives to
7	introduce, quite interestingly, by New York
8	Representatives. And for the Committee, I think
9	what we can consider doing, and we need to have
10	further conversation, is possibly a resolution
11	asking for those pieces of legislation to be moved
12	forward as probably the most immediate next step
13	that we can take as a committee.
14	MIRANDA MASSIE: That would be
15	fantastic and, in fact, our office is preparing
16	that resolution for your consideration.
17	CHAIRPERSON ARROYO: Wonderful, so
18	I think we need to identify with the Committee
19	staffif you don't already, Adira and Joe, who
20	are the ones that handle the smart technical stuff
21	for the Committeeso that we can collaborate with
22	the prime sponsor of this legislation that we're
23	here discussing today to see how we can on
24	parallel tracks take different types of action.
25	Thank you all foryes?

1	COMMITTEE ON HEALTH 101
2	MIKE SCHADE: Can I say one thing
3	about that?
4	CHAIRPERSON ARROYO: Sure.
5	MIKE SCHADE: It's just worth
6	noting that there's also similar legislation
7	that'sthere's two different federal bills that
8	are being considered by Congress right now, the
9	other bill is being considered and being pushed
10	toward by Senator Dianne Feinstein, who is a
11	senator that really pushed forward the phthalates
12	ban at the federal level, and there's no guarantee
13	that that legislation will actually move, in fact,
14	it's very controversial because it's being
15	attempted to be added to the Food Safety Bill
16	right now. So it's just worth noting that there's
17	no guarantee that the federal legislation will
18	move, which is really why it's really critical for
19	us to have protection at the municipal level here
20	in New York City, because that legislation is very
21	critical. And, of course, Congress has many other
22	issues that they're considering right now and,
23	unfortunately, this is not the number one issue
24	that is being considered. So I just wanted to
25	throw that out there.

1	COMMITTEE ON HEALTH 102
2	CHAIRPERSON ARROYO: My glass is
3	always half full, so I think any action that we
4	can take as a Council to help motivate legislation
5	moving forward at other levels of government is
6	always a useful tool that we have and use quite
7	often when we feel very strongly about the subject
8	at hand.
9	MIRANDA MASSIE: And what I was
10	saying, I had misunderstood you, was that we're
11	going to be presenting you with something on the
12	Toxic Substances Control Act reform, but we can
13	also work something up on phthalates as well in
14	conjunction with the center. Thank you.
15	CHAIRPERSON ARROYO: Thank you,
16	thank you all for your testimony, thank you for
17	our special guests here today for your wisdom. I
18	think we walk away from this hearing a little bit
19	better informed than we were coming into it and
20	have maybe cleared or clarified better what our
21	next steps ought to be in moving this legislation
22	forward, so thank you all. And with that, this
23	hearing is adjourned.

I, Tammy Wittman, certify that the foregoing transcript is a true and accurate record of the proceedings. I further certify that I am not related to any of the parties to this action by blood or marriage, and that I am in no way interested in the outcome of this matter.

Signature Tanny Withman

Date ____June 28, 2010__