



National Collaborating Centre  
for Determinants of Health  
Centre de collaboration nationale  
des déterminants de la santé



PARKDALE  
QUEEN WEST  
Community  
Health Centre

## LEARNING FROM PRACTICE: BUILDING COMMUNITY POWER FOR HEALTH EQUITY - NAIL TECHNICIANS IN GREATER TORONTO



### INTRODUCTION

In 2013, the Parkdale Queen West Community Health Centre (CHC) staff observed a concerning trend: nail technicians were presenting with a similar set of respiratory and skin conditions.

During that time, an appropriate and acceptable public health and health services response would have been to ensure that the technicians received proper medical treatment for their conditions. Perhaps the response could have included developing and sharing a short data-focused report

with other health professionals and the nail technicians themselves to build awareness of the health issues they faced. Some may have gone further, gathering several nail technicians for a focus group and including quotes from the focus group in their report to bring the data to life with personal stories. A smaller number of practitioners may have created an advisory committee of nail technicians and others to advise them on their research project and worked with them to spread their findings.

This practice example was co-created by the National Collaborating Centre for Determinants of Health and the Parkdale Queen West Community Health Centre. Visit [www.nccdh.ca](http://www.nccdh.ca) for other case studies in the [Learning from Practice](#) series.

However, the Parkdale Queen West CHC, whose work is grounded in a social determinants of health framework, decided to get deeper into the issue and to intentionally involve and support this community. Having health promoters enables CHCs to mobilize and respond to emerging community needs and to look at the broader factors affecting people's health. After completing a [focus group](#),<sup>1</sup> the Health Promotion Team started the Nail Salon Workers Project and held a roundtable discussion in 2014, inviting nail technicians to participate. One of the participants suggested that a network of nail technicians was needed so that they could themselves identify common issues and work together to address them. Furthermore, the roundtable participants recognized the need to work across sectors and to bring community agencies, legal clinics, academics, clinicians, public health, nail technicians and others together to address the issues nail technicians were facing. They understood that health care, public health and they themselves did not have the power to address many of the issues the nail technicians were facing — many of them were out of the health sector's scope of work and jurisdiction.

The CHC didn't hesitate. They recruited a nail technician to work with them as a paid organizer and have continued to support, along with the Chinese and Southeast Asian Legal Clinic, the building of community power through the Nail Technician Network, created in 2017.

All over the world, public health is building community and collective power. This is one example of what health equity interventions look like in action and a description of what it takes to achieve a more equitable society. In this case study, we describe the realities of working as a nail technician and the health issues that often ensue, the efforts by Parkdale Queen West CHC to support the nail technician community, and the achievements and challenges encountered along



the way. This way of working demonstrates an approach that builds community power that, over time, can lead to structural changes and truly advance health equity. To learn more about power and health equity, see [Let's Talk: Redistributing power for health equity](#).<sup>2</sup>

**“We need a nail technician association because one person, the voice [is] very weak, and if more nail technicians join the association ... we are a more powerful voice.”**

MONICA FU, NAIL SALON WORKER AND OWNER  
(2014 ROUNDTABLE PARTICIPANT)

## WORKING AS A NAIL TECHNICIAN IN TORONTO<sup>a</sup>

### **Nail technicians**

In recent decades, salons providing discount nail care services have become abundant in Toronto, with approximately 1,500 licensed and inspected nail salons<sup>3</sup> and over 9,500 nail technicians<sup>4</sup> before COVID-19.

Nail technicians in the Greater Toronto Area are often women who are newly arrived immigrant settlers, primarily from Vietnam, China or Korea.<sup>5</sup> Upon arrival in the city, they often face a number of obstacles to finding employment, such as racial and other forms of discrimination, language barriers, unrecognized credentials, lack of local work experience, social isolation, difficulty accessing formal education and a lack of affordable childcare.<sup>6–13</sup> The nail salon sector, however, offers jobs that require no formal training or licensing, accommodates lower English proficiency and can be found through many family and community connections.

### **Precarious working conditions and employment**

Nail salon workers in discount salons face precarious employment and hazardous work conditions<sup>14</sup> due to gaps in provincial employment standards legislation and lack of enforcement of laws that do exist. Conditions of precarious employment include, but are not limited to, job insecurity, scheduling uncertainty, low wages, individual bargaining relations between workers and employers, lack of benefits or paid sick days, and limited workplace rights. Hazardous working conditions include occupational health and safety hazards, which are described in more detail below.

Nail technicians across North America have expressed concerns about their employment conditions, violations of their labour rights and occupational health as well as harassment, verbal abuses and systemic racism.<sup>15,16</sup>

Reports of these employment standards violations in nail salons have been documented anecdotally by labour and community health organizations and more formally through inspections carried out by the Ontario Ministry of Labour, Immigration, Training and Skills Development.<sup>17,18</sup>

### **Official supports for nail salons**

While nail salons are frequently inspected by public health and labour departments, these supports rarely extend to guidance prior to inspection visits. Owners and workers are unfamiliar with the formal regulations and informal norms from public health and labour that can put owners into conflict with these agencies and make starting and keeping a business riskier and more difficult. Language barriers can exacerbate these conflicts and make owners feel further marginalized when they feel they are not being listened to.

### **The effect of the pandemic on the sector**

The COVID-19 pandemic has exacerbated these unacceptable working conditions by profoundly disrupting the industry economically and causing job loss; changing the job structure such as where technicians perform their work (e.g., technicians working at home and in clients' homes); introducing new occupational health concerns such as risk of COVID infection among other things; and exposing workers to an increase in overt acts of anti-Asian racism.<sup>19</sup>

### **Intersectionality**

The intersection of immigration status, lack of familiarity with Canadian norms and culture, low English proficiency, racism, devaluation/deskilling of work and workers and a lack of system support leads to an imbalance of power, which creates fertile grounds for exploitation of workers and hazardous working conditions.

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a Content in this section and several other sections of the case study is based on the 2021 Social Sciences and Humanities Research Council – Race, Gender and Diversity Initiative submission by Arrandale et al.

### HEALTH ISSUES FACED BY NAIL TECHNICIANS

Precarious employment impacts the health of workers.<sup>14</sup> Nail technicians earn below minimum wage and are expected to work long hours.<sup>20</sup> They are exposed to chemical hazards as well as physical, ergonomic (e.g., awkward postures), biological (e.g., fungal infections) and psychosocial (e.g., verbal abuse) hazards.<sup>21-31</sup> Chemical hazards in salons include the presence of an array of volatile organic compounds (VOCs) — acrylates, phthalates, formaldehyde, toluene and methyl methacrylate — found in nail primers, varnishes, hardeners, enamel removers and products used to apply artificial nails.<sup>23,32-42</sup>

Nail technicians have consistently and continuously expressed concerns about the health effects of their work, including skin problems, respiratory irritations, allergies, gastrointestinal issues, sleep disturbances, fatigue, musculoskeletal issues, eye pain and strain, and increased menstrual pain, as well as concerns about mental health, cancer and reproductive health.<sup>1,21</sup> These concerns are consistent with the scientific literature.<sup>22,43-59</sup>



### SUPPORTING NAIL TECHNICIANS TAKES MANY FORMS

To support nail technicians, the Parkdale Queen West CHC has created, staffed and/or participated in three different initiatives: the Nail Salon Workers Project, the Nail Technician Network and the Healthy Nail Salon Coalition (formerly known as the Healthy Nail Salon Network). Each of these required the CHC to commit staff time and resources, to show leadership in addressing these issues head on and to take risks given that shifting power requires disrupting the status quo. The commitment to this work came from both staff and leadership and was grounded in their understanding of the work of health promotion that CHCs are responsible for.



Ontario's community health centres have been around for over forty years. But they've always been a bit ahead of their time.

They were inspired by the ideas of Tommy Douglas' original vision for Medicare. Douglas hoped that as it evolved our health system would focus more on keeping people well – not just treating them when they get sick.

To do this, CHCs deliver primary care services in combination with health promotion and illness prevention services. And what makes CHCs stand out is a strong community development focus. So in addition to promoting the health of individuals and families, CHCs mount initiatives that address social, economic and environmental problems negatively impacting people's health.

Governed by community members, and working hand in hand with those they serve, CHCs also prioritize improving the health and wellbeing of populations who've traditionally faced barriers accessing health services.

ALLIANCE FOR HEALTHIER COMMUNITIES<sup>60</sup>

### **The Nail Salon Workers Project**

The Nail Salon Workers Project, a program within the CHC, supported the development of the Nail Technician Network and the Healthy Nail Salon Coalition. Many Nail Salon Workers Project activities are carried out collaboratively with other members of the Healthy Nail Salon Coalition.

The project carries out work in five areas:

#### Worker engagement and organizing:

Peer educators, a mix of nail technicians and others from cultural communities connected to nail salon work, have been an ongoing foundation to the project. Leadership development, capacity-building and worker-centredness are at the core of this engagement.

#### Education and training:

The project provides occupational health and safety workshops, including modules on reproductive, ergonomic, skin and respiratory health, as well as workshops on labour issues and anti-Asian racism. Project staff and partners have created multiple [resources](#) and an [occupational health and safety guide](#) tailored to nail salon work. During the COVID-19 pandemic, webinars included mental health support, responding to anti-Asian racism, understanding regulatory changes in salons and protecting yourself at work.

#### Advocacy:

The project works with community agencies, legal clinics, academics, public health and nail technicians to conduct advocacy on issues faced by nail technicians at the municipal (e.g., licensing regulations), provincial (e.g., Employment Standards Act violations) and federal levels (e.g., chemical regulations). Staff also created links to opportunities for the Nail Technician Network members to engage with broader social change movements relating to workers' rights, immigration and status issues, and access to health care. They are at the beginning stages of moving toward more public-facing messaging and campaigns to support change in the sector.

#### Research:

The project has partnered with researchers at the University of Toronto, Toronto Metropolitan University, York University and other researchers to study issues relevant to nail technicians, including chemical exposure studies and environmental injustice.

#### Network-building:

The project has built connections within Ontario, in other provinces and in the United States to support the work. Through these connections, staff learn from others doing similar work, gain access to relevant research and issues arising, share lessons learned and resources, and amplify the issues and messages.

### **The Nail Technician Network**

The Nail Technician Network was created by nail technicians as a forum to get to know each other, learn together, take action to address concerns and have fun. The organizers who staff the network, who are employed by the CHC, start by going door to door to nail salons, offering information and resources to technicians and engaging them in conversations to establish trust. As the relationship develops, the organizers ask about concerns the nail technicians have and respond to those concerns with additional information and resources. They bring the workers together in person, inviting them to meetings and social events, with the goal of helping people see that the issues they are facing are common and having them participate in defining next steps to address these issues. Workers see their concerns reflected in others, including those from different ethnic groups, and this breaks down isolation and builds solidarity.

Once nail technicians are engaged, organizers seek to build their capacity and leadership. Nail technicians participate in skills-building and training on a broad range of issues such as protection during COVID-19, reproductive health and the roles of different government agencies in protecting health. Workers learn to articulate the concerns they have and are challenged to take increasingly active leadership roles in working to address those concerns.

Nail technicians are also engaged in collective action, putting that leadership into practice. They collectively decide what actions to take, which has included holding rallies, meeting with government officials, participating in research projects and talking publicly about the issues nail technicians face. Individual members participate in these activities based on their interest and capacity.

### **The Healthy Nail Salon Coalition**

In the early 2010s, work was simultaneously underway at the University of Toronto and St. Michael's Hospital to identify skin conditions common among nail salon workers and at York University (where the National Network on Environments and Women's Health was based at the time), which was looking at the impact of toxic chemicals in salon products on women's health. Various sources of small project-based funding allowed these groups to come together based on their common interests and led to the formation of the Healthy Nail Salon Coalition in 2015.

The Parkdale Queen West CHC convenes and co-chairs the coalition, whose members include staff at the CHC, University of Toronto, St. Michael's Hospital, Workers' Action Centre, Chinese and Southeast Asian Legal Clinic, Occupational Health Clinics for Ontario Workers, Canadian Environmental Law Association and other agencies and individuals. It has also had participation and support from the Ontario Lung Association, Environmental Defense, Working Women Community Centre in Toronto and Toronto Public Health. The coalition's central aim initially focused on protecting the overall health of nail salon workers by decreasing their risk of exposure to harmful chemicals. The areas of work have since expanded and shifted, led by the nail technicians who have brought forward concerns about employment standards and anti-Asian racism. The coalition and the ongoing collaboration within the coalition have been a critical source of support for the Nail Salon Workers Project at the CHC.

## **ADVANCING HEALTH EQUITY FOR NAIL TECHNICIANS BY SHARING AND BUILDING POWER**

The various projects and networks to support nail technicians in Toronto have collectively discovered that, to advance health equity with this group, a different approach is needed. The findings below distill years of working and learning together:

- While health care and public health practitioners can identify some of the problems nail technicians face, the workers themselves must identify and prioritize the issues they want to address.
- The solutions proposed, if crafted by outside organizations, fall short of addressing the needs of those made most vulnerable by current structures and systems. Workers, however, understand the unique dynamics within the sector and understand their own risks and risk tolerance. Codeveloped solutions have the greatest impact.
- Public health and health care do not, on their own, have the power to address many of the complex issues facing nail technicians. Some may fall under the purview of labour and immigration agencies. Building the power of workers to advocate for themselves is an important strategy to use alongside public health and health care advocacy.
- Public health and health care must find the right balance between taking the lead from the community and supporting the community to organize further. This includes supporting nail technicians as they move into a place of discomfort, pushing for change and making demands of the sector. The CHC can use its access to health data and staffing — community health workers and health promoters — to encourage community engagement and conduct education, mobilization and advocacy.

Centring the workers themselves — the issues and solutions they identify, their voices — forces us to address the artificial silos and boundaries we have created in our health systems. Nail technicians do not distinguish between whether their problems fall under occupational health, environmental health, public health, primary care or, more broadly, labour law.

In other words, advancing health and racial equity for and with nail technicians also means working towards structural changes. For this to happen, public health and health care institutions must share power and decision-making with those most impacted by inequity so that their needs steer the efforts. Public health and health care must also support community power-building to address issues beyond their direct control (e.g., labour standards, chemical regulation), using the power and resources they do have in allyship with nail technicians driving the work.

### Key achievements

This collaborative work has many impacts, including:

- **Issue identification:** In-depth work with nail technicians and owners to build trust and get a fulsome picture of the sector, the challenges faced within it and the barriers to improving working conditions.
- **Demonstration of need and impact, along with solutions and necessary funding to achieve change:** Several multiyear funding sources have been secured to work on scalable solutions across the spectrum of issues faced by the technicians.<sup>b</sup>
- **Ongoing advocacy and partner meetings at the municipal, provincial and federal levels with tangible outcomes:** Examples include the modification of Toronto Public Health's BodySafe program to include gaps

identified by this collective, and there is now access to several decision-maker tables previously out of reach for the nail technicians.

- **A strong, active and growing network of agencies and partners who are researching and advocating for issues affecting nail technicians and owners:** Partners are spread across various communities in Ontario, and these efforts are also connected with other similar efforts across provinces and the United States.
- **Rapid COVID-19 response and support:** The CHC project quickly shifted focus to carry out individual wellness calls to the Nail Technician Network members; provide connections to community resources (e.g., food banks, mental health supports) and to online gathering and workshop opportunities to connect people; and respond to pressing issues and changing restrictions.

### Major challenges

The Nail Salon Workers Project and the Nail Technician Network have also faced many challenges along the way.

Before the start of the pandemic, members of the network were meeting regularly, meaningfully discussing the issues they faced and their solutions, and planning their work together. The network was so active that the project staff had trouble keeping up with the demand from the community. There was a growing membership and a palpable base emerging, ready to take on issues. COVID-19 hindered this momentum and threw both the sector and the organizing efforts into disarray. Fortunately, as society emerges out of the pandemic, organizing efforts are starting up once again.

Another challenge is the burden put on volunteers to organize workers and build worker power. Hard work, dedication and long hours are needed to do this work, and because this type of effort currently sits outside the norm in public health, staff must be creative in how they secure consistent resources for it. Typical public health funding sources make this work difficult to start and maintain.

<sup>b</sup> For a full list of funders, please refer to the Nail Salon Workers Project Funder Acknowledgements section.

Yet another difficulty is in the historical oppression that members of the network have faced in their countries of origin. For many, speaking up publicly is daunting since heavy consequences may have followed in their native land. Many nail technicians are reluctant to show overt leadership and to engage in advocacy or activities seen as political. This makes it more difficult to organize and to take a community-driven approach. Leadership development and activism in this group must reflect this reality. For example, rather than showing real people, the project has used animation to share information and build support. And leadership is being developed slowly, starting with network members engaging others by teaching seemingly unrelated skills such as cooking or origami.

Finally, complex problems such as those faced by the technicians tend to fall within the purview of multiple siloed



jurisdictions, including public health (municipal), labour (provincial) and chemical regulation (federal). The project staff and network have observed that this obscures who must act to implement solutions and has often resulted in agencies attempting to shirk responsibility.

### INGREDIENTS OF A POWER-BUILDING APPROACH

Distilled from this experience, Parkdale Queen West CHC staff, the nail technicians and the Healthy Nail Salon Coalition have learned about key ingredients that enable the health sector to engage in a power-building approach:

- Workers from directly impacted communities must be hired to do peer outreach in order to build relationships and act as a conduit for communication.
- Leadership must be committed to working differently by providing space for innovation and risk-taking. Truly following the lead of workers means that public health and health care staff will be asked to engage in activities they have not done before, activities that are likely outside of their comfort zone. Staff must have the full support and trust of leadership, even when things do not turn out as planned.
- Stable funding is needed for the long term as well as hard effort and dedication that organizing requires. Organizing is based on building trust, which requires time, regular meetings and responsive actions. Fluctuations in funding that affect staffing harm relationships and trust and result in a failure to organize workers.
- A long-term commitment from all those involved — leadership, health promoters, community health workers, researchers, public health staff, nail technicians — is required to build community power. While small victories are possible along the way, policy and structural changes leading to improvement in health outcomes will likely necessitate years of effort. Consistency and dedication are critical components of long-term success.
- Cross-sector partnerships, both formal and informal, have allowed organizations and formations to play roles that best suit their positionality. These collaborations have also fostered the sharing of resources and expertise in service of a shared goal.
- When building relationships with nail technicians, a whole-person approach must be taken. Relationships cannot solely focus on talking about work-related issues. Other aspects of life — immigration, families, stresses and frustrations about living in Canada — impact their work, and work impacts other aspects of their lives.



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