Statement by the World Health Network Opposing the Petition Against CSA Z94.4-25

In Defense of Science-Based Workplace Protections: Why the Petition Against CSA Z94.4-25 Must Be Rejected

A petition is being circulated in opposition to CSA Z94.4-25, the new standard that sets rigorous, science-based guidelines for respiratory protection in workplaces, especially healthcare. The World Health Network (WHN) strongly opposes this petition. It is misleading, misinformed, and poses a threat to the health and safety of healthcare workers, patients, and the public.

1. CSA Z94.4-25 Reflects Modern Airborne Science

CSA Z94.4-25 is the product of a transparent, interdisciplinary process grounded in the science of airborne transmission and exposure control. It incorporates the Source-Pathway-Receiver model and a tiered hazard classification framework (H1–H4) to determine appropriate levels of protection (PL1–PL4). These principles are drawn from current aerosol science, infection control, engineering, and occupational health.

The standard does not propose a one-size-fits-all solution. Instead, it provides a structured risk assessment framework and scalable requirements tailored to specific hazards. It emphasizes engineering and administrative controls first - with respirators as a critical last line of defense when these controls are insufficient.

2. The Petition Ignores the Science - and Fails to Engage With the Standard

The petition opposing CSA Z94.4-25 does not engage with the scientific basis of the standard itself. It makes assertions about burden and feasibility, but provides no evidence-based rebuttal to the risk modeling, exposure pathways, or control strategies that form the heart of the CSA standard.

This omission is especially significant because CSA Z94.4-25 draws on detailed assessments in Chapters 7 and 8, which outline how bioaerosols are generated, transmitted, and mitigated. The petition's failure to address any of these elements raises concerns about the signers' familiarity with the scientific foundations of airborne hazard prevention.

We believe that any credible critique of this standard must begin with an understanding of the science it is based on. The petition offers none - and in doing so, risks undermining both public trust and professional credibility.

3. Qualifications Matter in Evaluating Standards

CSA Z94.4-25 addresses airborne hazards - a domain that demands specialized expertise. While the petition is signed primarily by professionals trained in traditional infection prevention models, most do not hold qualifications in airborne exposure science, aerosol behavior, or respiratory protection.

Public positions on airborne respiratory protection - whether supportive or critical - will naturally be viewed through the lens of professional qualifications in this domain. Those who choose to oppose this standard without grounding in the science of airborne transmission should expect their judgment to be scrutinized accordingly.

4. The Standard Protects Healthcare Workers and Beyond

CSA Z94.4-25 rightly recognizes that airborne exposure risk in healthcare settings is substantial and persistent. The standard requires healthcare workers to wear respirators (minimum PL1) in clinical settings and during care delivery, except in designated low-risk zones determined by qualified airborne transmission risk assessment. This protects not only workers but also patients and institutional integrity.

By incorporating design flexibility (e.g., reusable respirators, easy-breathing CA-N95 options) and allowing for institution-specific airborne transmission risk management plans, the standard provides a scalable, adaptable path to implementation.

Importantly, CSA Z94.4-25 applies the same principles across industries, consistent with how airborne particles behave - which apply regardless of domain. This is a strength, not a weakness: pathogens do not conform to organizational boundaries.

5. WHN's Position

We commend the CSA for developing a transparent, science-based standard that addresses longstanding gaps in airborne respiratory protection. We call on regulators, employers, health systems, and professional societies to reject the petition and move forward with full implementation of CSA Z94.4-25.

We welcome dialogue - but it must begin with an understanding of airborne transmission, and a shared commitment to protecting everyone at risk.

Signed, The.World.Health.Network