CWA Community/Non-Medical Face Mask Q&A

What is the purpose of a community/non-medical face mask?

Face masks are for <u>source</u> control. That means they are used to stop some respiratory secretions of the wearer from getting into the air by continuously covering the mouth and nose. In that regard, community/non-medical face masks play a somewhat similar role as 'cough etiquette' involving coughing or sneezing into a tissue or crook of the elbow.

Exhaled breath from humans contains a combination of water, respiratory tract lining fluid (fats and proteins), and volatile and non-volatile chemicals. Infectious diseases, such as the coronavirus known as COVID-19, can be transmitted from a person who is infected when viral material is shed in exhaled breath by normal breathing or more forcefully when coughing or sneezing. Exhaled breath, coughs and sneezes contain thousands of droplets of varying sizes.

A face mask may help reduce the spread of infection in the community by reducing the excretion of respiratory droplets from infected individuals who may not even know they are infected and before they develop any symptoms.

However, there is very limited, indirect evidence that wearing community/non-medical face masks is an effective means of source control and actually does reduce transmission of COVID-19 in the community. The use of community/non-medical face masks to reduce transmission of diseases during a pandemic, such as influenza, is based on "mechanistic plausibility" and not on direct evidence. In other words, there is an assumption that reducing the amount of infectious droplets that get into the air will reduce risk of transmission. There have been no scientific studies applicable to COVID-19 that have proven this assumption.

Is a community/non-medical face mask considered a respirator?

No, a non-medical face mask is <u>not</u> a respirator and does not filter out small aerosols that may contain infectious material. A community/non-medical face mask is loose fitting and does not seal around the face, so air which may contain infectious material can enter around the edges and small aerosols containing COVID-19 can move through the mask material.

Are there any standards for the quality and performance of community/non-medical face masks?

There is absolutely no government regulation of the quality or performance of community/non-medical face masks. There are many different materials that are being used to make commercial and homemade masks and the materials and construction vary considerably. Some materials may be better at stopping large droplets of respiratory secretions of the wearer from getting into the air, but there isn't any way to know how a given mask might perform or to determine mask efficiency. The looser the face mask, the less effective it will be. Community/non-medical face masks made of thinner materials with a less dense weave will be less effective or not effective at all at capturing respiratory secretions of the wearer.

Does a community/non-medical face mask protect the wearer from exposure to COVID-19?

There is no scientific evidence that community/non-medical face masks are an effective means of respiratory protection for the wearer of the mask. Several recently released studies from the U.S. Center for Infectious Disease Research and Policy (CIDRAP) and the National Academy of Sciences, Engineering, and Medicine (NAS) concluded there is no evidence cloth masks impede the transmission of aerosols implicated in the spread of COVID-19. A study by the University of Ulsan College of Medicine in Seoul, South Korea concluded neither surgical nor cotton masks effectively filtered SARS–CoV-2 during coughs by infected patients.

An additional danger to consider is that the use of a face mask could pose more of a hazard to members who wear it if they believe they are being protected, but they are not. This could result in members putting themselves at risk or ignoring other precautions, such as social distancing. That is why it is so important to know what a community/non-medical face mask can and cannot do.

Is there any advantage of a wearing a community/non-medical face mask?

As already discussed, wearing a community/non-medical face mask may reduce some of the respiratory secretions of the wearer from getting into the air. Wearing a community/non-medical face mask may help to limit touching of the mouth and nose. Direct or indirect contact is another way that transmission of COVID-19 can occur through transfer of the virus from a hand to the mouth, nose or eyes after touching a contaminated surface. Community/non-medical face masks made of fabric can also be washed and reused.

Does the CDC have any guidance about non-medical face masks?

For information, see the CDC's "Recommendations Regarding the Use of Cloth Face Coverings, Especially in Areas of Significant Community-Based Transmission."
https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cloth-face-cover.html

See the CDC's "Cloth Face Coverings Q&A."
https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cloth-face-cover-faq.html

It must be noted that the CDC's recommendations are based on droplet transmission of COVID-19. The CDC does not base their recommendations on the scientific evidence of airborne transmission of COVID-19.

Are there any precautions I should take when wearing a face mask?

Even if a face mask fits well, how effective it is will depend on putting it on correctly and keeping it in place. A face mask should completely cover the nose, mouth, and chin. A face mask that gets wet will be less effective at filtering/capturing respiratory droplets produced by the wearer. If you touch the outside of the face mask, clean your hands thoroughly afterwards with soap and water or with hand sanitizer containing 60% alcohol. Try to avoid taking the face mask

on and off. If you must remove the face mask, handle by the straps to pull the face mask away from your face instead of pulling the face mask up and along your forehead to avoid contaminating the inside part of the mask. Keep the straps to the front (outside) part of the mask until you put the mask back on. You can keep a paper bag available to store the face mask until you get home and can wash the mask. Do not store face masks, particularly those that are wet, in a plastic bag.

How should I clean a cloth, community/non-medical face mask?

Cloth face masks should be washed with soap or laundry detergent and water, preferably after each use. Current recommendations are to wash in hot water. Make sure to wash your hands thoroughly with soap and water after removing and handling a face mask to remove any potential, viral or other contamination.

If I wear a community/non-medical face mask do I still have to follow other precautions?

YES. YES. YES, you still need to follow as many other risk reduction measures as possible. These measures include social distancing (preferably more than 6' from others), limiting contact with others and avoiding locations with many people especially in indoor spaces, cleaning and disinfecting work areas/equipment, and frequent handwashing with soap and water or use of a hand sanitizer containing 60% alcohol.

In a workplace, additional protective measures should be implemented by the employer to protect workers. This can include a combination of controls such as remote work which eliminates the risk of exposure, engineering controls, e.g. local exhaust ventilation, administrative controls, e.g. staggered work hours, and the use of personal protective equipment including respirators. Quarantining of workers with a known exposure to someone with COVID-19 for two weeks (in the absence of testing) and policies that enable workers to quarantine with pay or to stay home with pay when sick are critical.

A plan for control measures to protect workers returning to work should be negotiated by the Union and the employer before returning to work or before the lifting of any protective measures. There should also be provisions negotiated for a re-evaluation of controls and temporary cessation of work after COVID-19 exposures or workplace spread.

If I am purchasing a mask, what should I look for?

When choosing a mask, consider the following:

> Material: Choose face masks that are made of natural fibers, such as 100% cotton. Masks made of synthetic fabrics can contain harmful chemicals that can cause adverse health effects.

> Fit: Face masks that conform closer to the face are better. Some face masks may come in different sizes and may make it easier to find a good fit.

Quality/Filtration Ability: Face masks with multiple layers or that are made of thicker material with a tighter weave are preferable as they may be more likely to capture respiratory droplets produced by the wearer. How well different types of fabrics filter out respiratory droplets produced by the wearer will vary considerably based on many factors.

Breathability: Wearing a face mask makes it harder to breathe. This may be more of a problem for members with certain health conditions, such as asthma.

Returns/Refunds: When ordering, make sure there is a good return and full refund policy. You will not know about the fit, quality of the material, comfort, or breathability until you can actually test one out. When ordering in bulk, some vendors may be willing to send a sample for review before placing the full order.

Are there any limits on claims manufacturers can make about their face masks not intended for medical use?

On April 18, 2020, the U.S. Food and Drug Administration (FDA) issued an Emergency Use Authorization (EUA) in response to concerns relating to insufficient supply and availability of face masks for use by members of the general public and healthcare personnel. Manufacturers of face masks not intended for a medical use authorized under the FDA EUA gain some liability protection if they follow the following product labeling guidelines:

1. The product is labeled accurately to describe the product as a face mask and includes a list of the body contacting materials (which does not include any drugs or biologics);

2. The product is labeled accurately so that it does not claim to be intended for use as a surgical mask or to provide liquid barrier protection, and includes recommendations that would reduce the risk of such use; for example, the labeling might include recommendations against: use in any surgical setting or where significant exposure to liquid, bodily or other hazardous fluids, may be expected; use in a clinical setting where the infection risk level through inhalation exposure is high; and use in the presence of a high intensity heat source or flammable gas; or as an alternative example, recommendations for use only by the general public; and

3. The product is not labeled in such a manner that would misrepresent the product's intended use; *for example, the labeling should not state or imply that the product is intended for antimicrobial or antiviral protection or related uses or is for use such as infection prevention or reduction, nor should it be used for particulate filtration.*

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