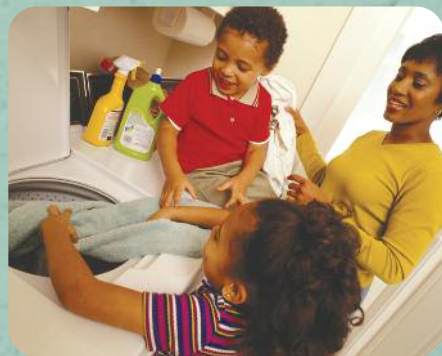
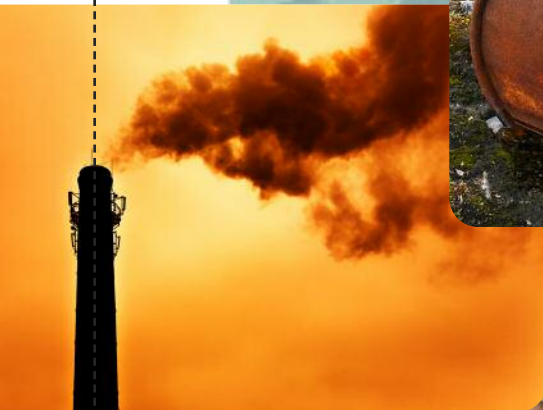


**NATIONAL  
CONVERSATION  
ON PUBLIC HEALTH  
AND CHEMICAL  
EXPOSURES**



**CHEMICAL  
EXPOSURES:**

**Community  
ideas for  
safeguarding  
health**

Community Conversation  
**TOOLKIT**

*The National Conversation on Public Health and Chemical Exposures* is a 2-year project to create a national action agenda for strengthening the United States' approach to protecting the public from harmful chemical exposures. The Centers for Disease Control and Prevention and Agency for Toxic Substances and Disease Registry are project sponsors.

*National Conversation* partners have developed this Community Conversation Toolkit to assist community leaders in hosting local meetings to gather input on public health and chemical exposure issues. We are seeking people interested in hosting a community conversation between April and June of 2010.

### **This Toolkit includes:**

- Outreach tips for recruiting participants
- Instructions for hosting and guiding a community conversation
- A brief background paper on the issue of public health and chemical exposures
- A discussion guide to prompt conversations, and
- Instructions and materials for providing the *National Conversation* team a summary of the conversation's major outcomes

### **Who should host a community conversation?**

Community leaders, health department officials, business leaders, members of faith-based groups, neighborhood associations, and anyone else with an interest in environmental or public health issues can use the toolkit to host a community conversation.

You do not need to be an expert. The *National Conversation* team wants input from anyone with a personal and/or professional interest in environmental or public health issues.

### **How will the community conversations be used?**

Summarized community conversation results will appear on a public Web site and a report. The summaries will contribute to the overall *National Conversation* process.

Thank you for your interest in holding a community conversation! We value your contribution to this project and look forward to hearing your ideas. If you have questions about this toolkit, please email [nationalconversation@cdc.gov](mailto:nationalconversation@cdc.gov).

Sincerely,



Nsedu Obot Witherspoon  
Co-Chair, Leadership Council  
*National Conversation on Public Health and Chemical Exposures*



# Community Conversation Outreach Tips

# COMMUNITY CONVERSATION OUTREACH TIPS

Here are some tips for recruiting community members to attend your community conversation.

## How many people should attend a community conversation?

- We suggest bringing together around eight to ten people for your community conversation.
- You may also consider hosting a “cluster conversation.” For a cluster conversation, you would recruit 30 to 50 people, then organize them into smaller discussion groups of 8 to 10 people each. This allows more people to participate and may provide more diverse views.

## Who should I invite?

- Think about people you know who might be interested in public health and chemical exposures. Consider, for example, neighbors, friends, family, members of community organizations, members of your place of worship, people who live near a source of pollution or waste site, and parents at your child’s school. Make a list of these people.
- Try to recruit a diverse group. When people from different backgrounds talk about their experiences and brainstorm solutions to problems, they form new relationships and come up with innovative ideas. A group of diverse members of your community is more likely to come up with solutions that benefit your community—and our nation.

## How do I get people to attend?

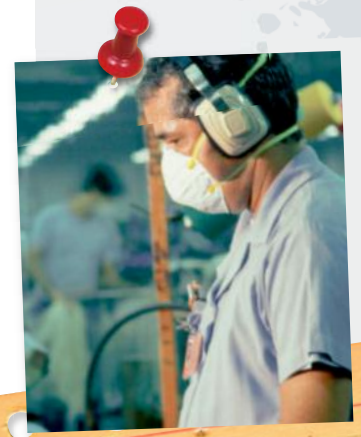
- A personal invitation is the best recruiting strategy. Send a personal email or make a telephone call and, if you haven’t heard back within a few days, follow up quickly. You can also invite people face-to-face. If you attend a community meeting, make an announcement or pass around a sign-up sheet, and to confirm attendance, follow-up with e-mails, phone calls or both.
- Partner with another organization and work together to recruit attendees through each group’s network. Your partner organization may have membership lists, a listserv, meetings where announcements could be made, and other ways to reach potentially interested people. This is also a great strategy for organizing a cluster conversation.
- Ask invitees to help you plan the meeting, make reminder calls, or bring snacks. When people have a job to do, they often are more eager to participate.
- Help people understand that their voices will matter. Express your personal wish that they participate in this event. For example, you can say that it would mean a lot to you if they would come, that their experience will help enrich the discussion, or that their presence will help ensure chemicals are used in safer ways.
- The day before the event, remind people about the community conversation.



\* HERE ARE SOME TIPS FOR RECRUITING COMMUNITY MEMBERS TO ATTEND YOUR COMMUNITY CONVERSATION.

## Prepare for your meeting

- Review the “Instructions for Conveners and Facilitators” to ensure you are prepared for your discussion.
- Consider emailing the “Understanding the Issues” background paper to participants before the meeting and asking them to read it ahead of time.
- Consider creating a short list of local governmental and non-governmental organizations that work on issues related to public health and chemical exposures before your meeting. You can provide this list as a resource to participants who want to stay involved after your conversation.
- Review the Community Conversation Summary Template so that you are familiar with the information you will need to send back to the National Conversation team.
- Contact us at [nationalconversation@cdc.gov](mailto:nationalconversation@cdc.gov) if you have any questions.



\* CONSIDER CREATING AND HANDING OUT A SHORT LIST OF GROUPS THAT WORK ON THIS ISSUE.



# Instructions for Conveners and Facilitators

# INSTRUCTIONS FOR CONVENERS AND FACILITATORS

## Purpose

By giving you tools to host or to participate in your own “conversation,” the Community Conversation Toolkit will help you engage members of your community in the *National Conversation on Public Health and Chemical Exposures*. Feedback from these conversations will contribute to the *National Conversation Leadership Council’s* action agenda. When complete, the action agenda will outline how the United States can use and manage chemicals in ways that are safe and healthy for everyone.

## How will input from my community conversation be used?

From April to June 2010, people across the United States will convene community conversations about chemical exposures. The major ideas from each conversation will appear on a publicly accessible Web site. Summaries of community conversation results will appear in a report shared with the *National Conversation’s* Leadership Council and work groups. This report will help the Leadership Council and work groups develop recommendations for the action agenda. They will use the report to determine whether:

- (1) Ideas expressed in community conversations would support recommending some actions over others, and
- (2) Any major issues highlighted during community conversations have not been considered.

## Who leads a community conversation?

Every community conversation needs three major players: a convener, a facilitator, and participants. Here are descriptions of each one’s role:

### Convener’s role

The convener brings together a group of people to share their values, experiences, and ideas. The convener organizes the meeting, finds the meeting space, invites and welcomes attendees, and summarizes and, using the summary template, sends in the results of the discussion. A local conversation may have more than one convener if several organizations partner to hold a community conversation.

### Facilitator’s role

The facilitator may also be the convener. The facilitator helps make sure all voices are heard. The facilitator makes sure everyone has a chance to speak and that no one person takes over the discussion. The facilitator should keep track of time and move the dialogue along. The facilitator should remain neutral and refrain from sharing personal views.

### Participants’ role

By participating in this facilitated discussion participants are there to share their knowledge, experience, and opinions on issues relating to chemical exposures and public health. Participants should be willing to follow ground rules set by the facilitators and by the group and be willing to listen to other opinions.



\* EVERY COMMUNITY CONVERSATION NEEDS A CONVENER, FACILITATOR AND PARTICIPANTS.

## What is in this toolkit?

1. Outreach tips
2. Instructions for Conveners and Facilitators
3. Understanding the Issues background reading
4. Discussion Guide
5. Community Conversation Summary Template
6. Sign-in sheet

## What you need to hold a community conversation

1. Location (living room, community meeting room, church fellowship hall, etc.)
2. Facilitator (The convener may serve as the facilitator; otherwise ask a volunteer before the meeting)
3. Note taker (Finding a volunteer before the meeting will be helpful)
4. Printed sign-in sheet
5. Copies of the Understanding the Issues document, Discussion Guide, and *National Conversation* fact sheet (one for each attendee)
6. Printed copy of the summary template
7. Pens/pencils for people to sign in
8. Snacks and drinks for attendees (optional)
9. Large paper on which to write the ground rules and paper for taking notes
10. Tape (to post the ground rules in a visible location)
11. Name tags if participants don't know one another well

## Detailed Agenda:

### I. Before starting

#### Convener or Facilitator:

- Ask people to sign in
- Hand out copies of the background reading for people to review before the conversation starts, and
- Invite participants to enjoy the snacks

### II. Overview of our community conversation (5 minutes)

#### Convener:

Thank you so much for coming! I've invited you to be a part of this discussion today because \_\_\_\_\_ (say a little bit about your reasons for organizing this conversation). This discussion is part of a much bigger discussion known as the *National Conversation on Public Health and Chemical Exposures*. The *National Conversation* is gathering input from people all around the United States. The



\* THE FACILITATOR  
HELPS MAKE SURE  
ALL VOICES ARE  
HEARD.



*National Conversation* will then develop recommendations to better protect people from harmful chemical exposures. This project will result in a national action agenda that outlines how the United States can use and manage chemicals in ways that are safe and healthy for all people. The action agenda will be useful to many kinds of organizations, industry, government agencies, and others.

Community conversations, like the one we are holding today, are an important part of this effort. From April to June 2010, people across the United States will convene community conversations about chemical exposures. The major ideas from each conversation will appear on a publicly accessible Web site. Summaries of community conversation results will appear in a report shared with the National Conversation's Leadership Council and work groups. This report will help the Leadership Council and work groups develop recommendations for the action agenda. They will use the report to determine whether

1. Ideas expressed in community conversations would support recommending some actions over others, and
2. Any major issues highlighted during community conversations have not been considered.

Your ideas are important to this process so thank you for being here!

(Introduce the facilitator or let people know that you will be facilitating)

### III. Introductions (10 minutes)

**Facilitator:**

**If participants already know each other:** Please tell us why you think it is important to be here today.

**If participants do not know each other:** Please pair up with someone you don't know. Interview each other for 3 minutes each to learn more about one another and your motivation for participating in this discussion. In 6 minutes we will come back together and ask you to introduce your partner to the group.

### IV. Ground rules for our discussion (5 minutes)

**Facilitator:**

When we discuss topics like chemical exposures, we can become pretty passionate. Today (tonight) we want to have an open, respectful, and productive conversation. So we need to agree on how we are going to interact. Here are some suggested ground rules:

- Be respectful.
- Everyone deserves to be heard.
- One person speaks at a time.



- Speak for yourself, not for others.
- If you are offended or uncomfortable, say so—and say why.
- Disagreements are okay, but don't make them personal—no name-calling or stereotyping.
- Stick to the issue.
- Everyone helps the facilitator keep the discussion moving and on track.
- Personal stories stay in the group unless people decide it's okay to share them.

What do you think? Is there anything you want to add or subtract? Does anyone have any questions before we get started?

#### V. Identify a note taker (5 minutes)

**Facilitator:** (if you didn't do this before the meeting) (5 minutes).

To submit our input we are going to need someone to take notes. Would someone volunteer to **record the main ideas and views** discussed here? You can use the Summary Template and/or other paper to take notes on each discussion topic.

#### VI. Community conversation (1 hour 15 minutes)

**Facilitator:**

Let's get started. (Pass around copies of the Discussion Guide). Over the next 90 minutes we are going to discuss our views and ideas about chemical exposures. Remember, these questions have no "right" or "wrong" answers – the *National Conversation* is interested in learning what you think about these issues.

**Topic 1: When it comes to the impact of chemical exposures on our health, people vary in their level of concern. We invite you to share any concerns you may have.**

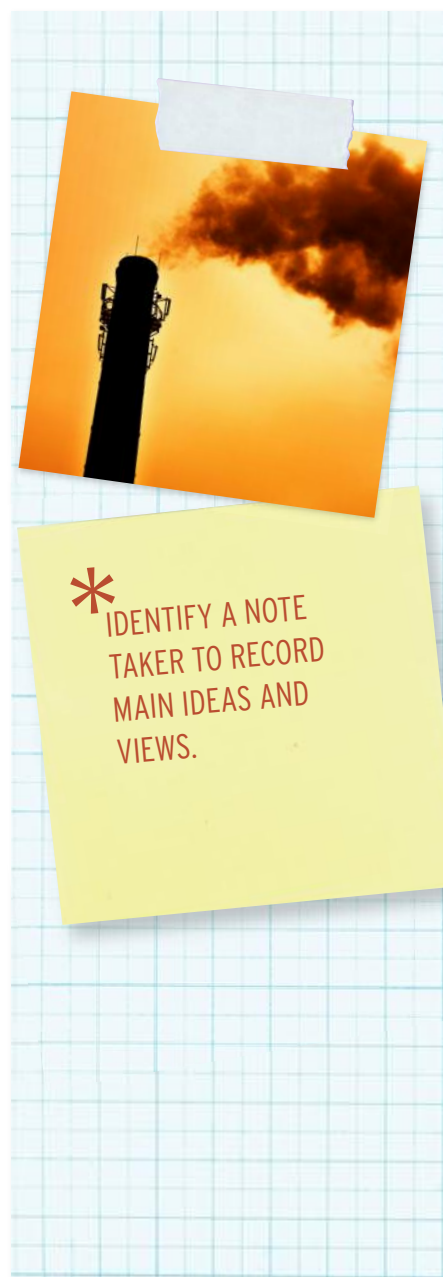
(Consider asking people to go around the table and share their thoughts to encourage everyone to participate. You may want to distribute paper and pens and ask everyone to write down one concern, then share that aloud one-by-one.)

**VIEWPOINT A:** Chemical use and exposures do not concern me.

I trust that most products for sale are safe or receive enough scrutiny to be safe. I think that air, water, or other types of pollution are regulated well enough to protect my family and me. I am much more concerned about other threats to my health.

**VIEWPOINT B:** I'm a little concerned.

I've read in the news about dangerous chemicals and about lapses in our nation's chemical safety system. I'd like to avoid some chemical exposures. For instance, I don't buy toys for my child that might contain lead and I avoid eating fish containing high mercury levels. While I think I can maintain good health without paying a lot of attention to this issue, I'd like to learn more about the potential risks of chemical exposures.



**VIEWPOINT C:** I'm very worried about my everyday exposures to chemicals.

I think that harmful chemicals are used far too widely in the United States. I try very hard to avoid exposure to them. I drink filtered water, buy mostly organic produce and natural cleaning and personal care products, and work to educate others about the issue.

**VIEWPOINT D:** I'm more confused than concerned

I hear conflicting reports about the risks posed by chemicals. I don't know whom to trust or where to go to get accurate information that I can understand.

Possible follow up questions:

*What viewpoints stand out or are closest to your own?*

*Is there a viewpoint you would like to add?*

*Is there a viewpoint you don't agree with?*

*Are there any common areas of concern?*

*What additional information would you want or need to be better able to answer this question?*

**Topic 2: Think about and discuss a few values you believe should guide our nation's approach to protecting us from harmful chemical exposures. Here are some examples:**

(Read the question aloud and give people 2 minutes to review the viewpoints and think about their answers. Remind people the listed viewpoints are there only to spark ideas and encourage them to share others. It may be helpful to ask people to write their ideas down.)

*Please share your thoughts with the group.*

**VALUE A: Transparency**

We need to make information readily available about chemicals and public health. For instance, government decisions should be made openly, and businesses should list publicly the ingredients in their consumer products.

**VALUE B: Convenience**

Chemicals support our modern way of life. We should look for ways to reduce exposures that do not force us to make huge changes in our lifestyles.

**VALUE C: Prevention**

While much about the effects of chemical exposures on human health is still unknown, we should nonetheless try to stop exposures to harmful chemicals.

**VALUE D: Justice**

Chemical exposures are not borne equally across the United States. Everyone should enjoy a clean and healthy environment and access to resources that can help protect health.



**\* REMEMBER, THESE QUESTIONS HAVE NO "RIGHT" OR "WRONG" ANSWERS.**

## VALUE E: Personal Responsibility

People should take personal responsibility for their health by making choices that limit their exposure to harmful chemicals in their food, consumer products, water, and environment.

Possible follow up questions:

*What do you think about what you have heard?*

*Do you believe we have found any common ideas?*

**Topic 3: We can learn from specific stories of success or failure related to protecting people from harmful chemical exposures. Have you experienced any successes or failures regarding protection from chemical exposures? If so, discuss what contributed to such successes or failures.**

### VIEWPOINT A: Success

Successes come in many forms. Perhaps...

- After meeting with local community members and hearing their concerns, a business voluntarily replaced a toxic chemical in one of its products with a safer, less expensive substitute.
- A government agency investigated health concerns of our community. They involved us in the process, addressed many of our questions, and helped us understand why other questions couldn't be answered.
- The city stopped using pesticides in the parks after a local university collected data on children's exposures.
- A group of nurses educated parents about ways to reduce asthma triggers in their homes.

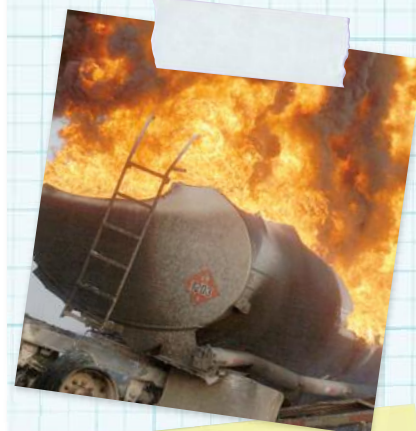
### VIEWPOINT B: Failure

Failures also come in many forms. For instance...

- Our community asked a government agency to investigate a local chemical release but could not get anyone to respond.
- After hearing about chemicals in some personal care products, I tried to switch to safe options. I had a difficult time finding information to help me make a decision.
- The health department investigated health concerns in our community, but in the end it didn't have enough information to provide us with any answers.
- My doctor dismissed my concerns about chemical exposures.

### VIEWPOINT C: I don't know

I'm new to this issue. I might have a story to share later on during the *National Conversation*.



\* TRY TO DRAW OUT PARTICIPANTS WHO HAVEN'T SAID MUCH.

Possible follow up questions:

*What specific actions ensured success?*

*What do you believe or know caused the failure?*

*Are there specific actions that can be taken to avoid failure in the future?*

**Topic 4: Many groups, from government to businesses to nonprofit organizations, have a part in protecting the public from harmful chemical exposures. After listening to the personal accounts you just heard, or other experiences, share your thoughts on steps one or more of these groups might take to prevent harmful exposures.**

*Does anyone have any specific experiences you would like to share that speak to this question?*

**VIEWPOINT A:** Build capacity at the state and local levels to address public health concerns related to chemical exposures

While many policy decisions related to chemical exposures occur at the federal level, public health concerns are often local. Currently, state and local governments vary in the resources they have to protect the public from chemical exposures and, when problems are identified, to respond adequately to those exposures. Federal agencies should commit resources to make sure that state and local governments can adequately respond to residents' concerns and can provide protection from local environmental health threats.

**VIEWPOINT B:** Involve members of the public in decisions that affect their health

Government agencies, corporations, universities, community groups, and others should provide meaningful opportunities for interested members of the public to participate in decisions at local, state, and national levels.

**VIEWPOINT C:** Encourage partnerships

We need to do a better job of working together to promote health and to prevent chemical exposure. At the local level, building effective partnerships may require federal agencies, foundations, and others to provide resources to community-based groups. At the national level, federal agencies ought to coordinate their research and share information more freely.

**VIEWPOINT D:** Take a comprehensive approach to promoting health

Promoting public health requires government agencies to look at chemical exposures in addition to the other public health issues that communities face. For example, while a health department works with a community to study possible risks from local water contamination, it can also work with this same community group and others on programs to combat obesity and poor nutrition.



## VII. Next steps? (10 minutes)

### Convener or Facilitator:

Those are all the questions for today, but the conversation doesn't have to end here! We've had a great discussion and we have a lot of energy in this room. Is anyone interested in having a follow-up meeting to think about actions this group can take locally on these issues?

If so, would someone here be willing to get this group back together in a few weeks? (If there is a volunteer, be sure to share a copy of the sign-in list with that person so he/she can organize a future meeting.)

(If you created a list of local groups working on related issues, provide this to attendees so they can stay connected to or get involved in efforts to prevent harmful chemical exposures in your community).

## VIII. Wrap up (5 minutes)

### Convener:

Thank you everyone for coming and participating in this community conversation! Your input, along with that of hundreds of other people across the country, will help improve our nation's system for protecting people from harmful chemical exposures. To follow the progress of this initiative and give additional input through upcoming Web dialogues, please go to the Web site listed on the *National Conversation* fact sheet distributed to you.

(Collect the notes from the notetaker and the sign in sheet.)

## IX. Report back to the *National Conversation!*

### Convener:

To be completed within one week of the event.

1. **Download the electronic copy of the summary template**, available at: [www.atsdr.cdc.gov/nationalconversation/community\\_conversations.html](http://www.atsdr.cdc.gov/nationalconversation/community_conversations.html).
2. **Fill out** the summary template using the notes from the meeting.
3. **Send** the summary to [nationalconversation@cdc.gov](mailto:nationalconversation@cdc.gov). All summaries are due by **June 30, 2010**.





# Understanding the Issues

# UNDERSTANDING THE ISSUES

## Why do we need a conversation about public health and chemical exposures?

Each day, people in the United States come across thousands of different chemicals in their homes, workplaces, and schools. Because we use chemicals in so many aspects of our lives, we must carefully balance their benefits and risks. Many chemicals enhance our quality of life and offer real benefits. Some chemicals, for example, are often used to disinfect our drinking water supply. But exposure to other chemicals can cause short-term health effects, long-term health effects, or both. For many chemicals, we may not know or fully understand the risks exposure poses. Also, some groups—children, the elderly, people of color, and low-income communities—face higher health risks because of certain chemical exposures. As a nation, we can and should do a better job of protecting everyone from harmful chemical exposures.<sup>1</sup>

## We've come a long way, but we need to go further

Over the past few decades, several laws have helped to reduce exposures to some well-known, harmful chemicals. Removing lead from gasoline, for example, greatly reduced blood lead levels in the United States. Still, we lack a system that adequately protects the public from all kinds of chemical hazards. To achieve such protection, we must improve scientific knowledge, modernize policies, use best practices, educate health professionals and the public, and much more.

### *Better science to protect the public*

We have learned a lot about how chemical exposures can affect our health, but a lot remains that we don't fully understand. We know that we are exposed to multiple chemicals at the same time but past studies largely have focused on the health effects of exposure to one chemical. National biomonitoring studies, which measure chemicals in blood, urine or other body tissues, have measured in United States residents more than 200 chemicals.<sup>2</sup> But we still do not have enough information about the how these multiple exposures may affect our health. And given our current level of exposure, we also do not understand the health risks many of these chemicals pose.

<sup>1</sup> For the purposes of the *National Conversation* project, “chemical” is defined broadly to include industrial and naturally occurring chemicals regardless of their source, including biologically produced chemical substances. We encourage *National Conversation* participants to consider emerging chemical exposure issues such as those presented by engineered nanoparticles. The project will not address human health risks posed by radioactive properties of chemicals.

<sup>2</sup> For CDC's *National Report on Human Exposure to Environmental Chemicals*, see [www.cdc.gov/exposurereport/](http://www.cdc.gov/exposurereport/)



**\* EACH DAY, AMERICANS  
ENCOUNTER THOUSANDS  
OF DIFFERENT CHEMICALS  
DURING ROUTINE  
ACTIVITIES.**



### *Strengthened policies and practices*

Local, state, tribal, and federal government agencies, business groups, and other non-governmental organizations work to prevent harmful chemical exposures, but to better protect us, they need to do a better job. Among the many ways to do this are:

- Switching to safer, greener chemicals;
- Limiting exposures through stricter regulation of industrial processes;
- Increasing scrutiny of chemicals used in consumer products; and
- Improving our ability to understand the effect of, and our response to, exposures once they have occurred.

### *Increased Public Understanding and Involvement*

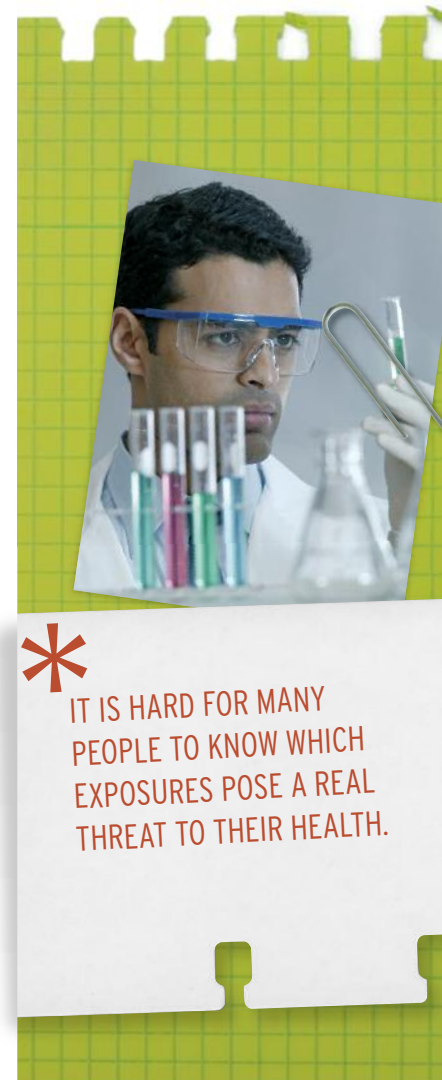
Every day we encounter complex and at times conflicting information about chemical exposures. For many people knowing which exposures pose a real threat to their health is difficult. Doctors, government officials, journalists, and others need to do a better job of communicating about these exposures so people have accurate information about risks and about when they need to take steps to reduce exposures. We also need to do a better job of involving the public in decisions that may affect their health.

### **How are people exposed?**

We can be exposed to chemicals from many sources including the food we eat, the air we breathe, and the water we drink. Chemicals come from many sources including industrial and vehicle emissions, molds and other microbes, pharmaceuticals, pesticide use, runoff from hazardous waste sites, and chemicals used in consumer goods such as household cleaners, cosmetics, food and beverage containers, gardening products, and toys. Workers can be exposed directly to hazards and can bring harmful chemicals home with them, unknowingly exposing their families.

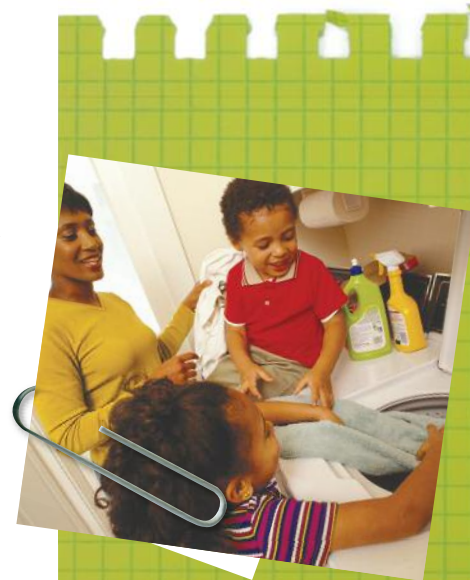
### **What makes an exposure harmful?**

We are exposed to many chemicals every day. But what makes an exposure harmful to our health? Answering this question is often complicated, requiring information about the source, route, dose, and potential health effects of the chemical, as well as knowledge about our health status.



<sup>3</sup> See the American Public Health Association's *Protecting America's Health: Federal Chemical Safety System* brochure for more information on the roles and responsibilities of federal agencies. [http://www.apha.org/NR/rdonlyres/3787ACA1-EFC6-49DD-A9CA-21811326186A/0/APHACChemSafety\\_f2\\_single.pdf](http://www.apha.org/NR/rdonlyres/3787ACA1-EFC6-49DD-A9CA-21811326186A/0/APHACChemSafety_f2_single.pdf)

For example, if a local manufacturing or service business leaks a chemical from an underground tank, that leak is a potential exposure source. If that chemical contaminates the water in a nearby well, drinking water from that well is a potential exposure route. If the chemical can cause negative health effects and is present at a harmful level or dose, it poses a health risk. When all of these links are present, and when risk is sufficiently high, a reason for concern most likely also present. In addition to these environmental factors, individual characteristics, such as a person's existing health problems or other risk factors, can make one person more likely to be harmed by an exposure than someone else. In sum, determining how our health may be affected by an exposure is a difficult process. Many times we are without entirely satisfactory answers.



JOIN THE NATIONAL  
CONVERSATION!

### How can you get involved?

You can help protect public health by joining the *National Conversation on Public Health and Chemical Exposures*. The *National Conversation* is a 2-year initiative to create an action agenda of recommendations to help ensure chemicals are used and managed in ways that are safe for everyone. The Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry support this project. It is designed to collect input from many organizations and individuals, including you! Visit our website ([www.atsdr.cdc.gov/nationalconversation](http://www.atsdr.cdc.gov/nationalconversation)) to learn more about how you can participate in the *National Conversation*.



# Discussion Guide

# DISCUSSION GUIDE

*The viewpoints presented here are meant to spark conversation and are not meant to be exhaustive. Please consider other possibilities not included*

**Topic 1: When it comes to the impact of chemical exposures on our health, people vary in their level of concern. We invite you to share any concerns you may have.**

**VIEWPOINT A:** Chemical use and exposures do not concern me.

I trust that most products for sale are safe or receive enough scrutiny to be safe. I think that air, water, or other types of pollution are regulated well enough to protect my family and me. I am much more concerned about other threats to my health.

**VIEWPOINT B:** I'm a little concerned.

I've read in the news about dangerous chemicals and about lapses in our nation's chemical safety system. I'd like to avoid some chemical exposures. For instance, I don't buy toys for my child that might contain lead and I avoid eating fish containing high mercury levels. While I think I can maintain good health without paying a lot of attention to this issue, I'd like to learn more about the potential risks of chemical exposures.

**VIEWPOINT C:** I'm very worried about my everyday exposures to chemicals.

I think that harmful chemicals are used far too widely in the United States. I try very hard to avoid exposure to them. I drink filtered water, buy mostly organic produce and natural cleaning and personal care products, and work to educate others about the issue.

**VIEWPOINT D:** I'm more confused than concerned

I hear conflicting reports about the risks posed by chemicals. I don't know whom to trust or where to go to get accurate information that I can understand.

**Topic 2: Think about and discuss a few values you believe should guide our nation's approach to protecting us from harmful chemical exposures. Here are some examples:**

**VALUE A:** Transparency

We need to make information readily available about chemicals and public health. For instance, government decisions should be made openly and businesses should list publicly the ingredients in their consumer products.

**VALUE B:** Convenience

Chemicals support our modern way of life. We should look for ways to reduce exposures that do not force us to make huge changes in our lifestyles.



\* REMEMBER, THESE QUESTIONS HAVE NO "RIGHT" OR "WRONG" ANSWERS.

### VALUE C: Prevention

While much about the effects of chemical exposures on human health is still unknown, we should nonetheless try to stop exposures to harmful chemicals.

### VALUE D: Justice

Chemical exposures are not borne equally across the United States population. Everyone should enjoy a clean and healthy environment and access to resources that can help protect health.

### VALUE E: Personal Responsibility

People should take personal responsibility for their health by making choices that limit their exposure to harmful chemicals in their food, consumer products, water, and environment.

**Topic 3: We can learn a from specific stories of success or failure related to protecting people from harmful chemical exposures. Have you experienced any successes or failures regarding protection from chemical exposures? If so, discuss what contributed to such successes or failures.**

### VIEWPOINT A: Success

Successes come in many forms. Perhaps...

- After meeting with local community members and hearing their concerns, a business voluntarily replaced a toxic chemical in one of the products it makes with a safer, less expensive substitute.
- A government agency investigated health concerns of our community. They involved us in the process, addressed many of our questions, and helped us understand why other questions couldn't be answered.
- The city stopped using pesticides in the parks after a local university collected data on children's exposures.
- A group of nurses educated parents about ways to reduce asthma triggers in their homes.

### VIEWPOINT B: Failure

Failures also come in many forms. For instance...

- Our community asked a government agency to investigate a local chemical release but could not get anyone to respond.
- After hearing about chemicals in some personal care products, I tried to switch to safe options. I had a difficult time finding information to help me make a decision.
- The health department investigated health concerns in our community but in the end it didn't have enough information to provide us with any answers.
- My doctor dismissed my concerns about chemical exposures.



\* HELP US HAVE AN OPEN, RESPECTFUL AND PRODUCTIVE CONVERSATION.

**VIEWPOINT C: I don't know**

I'm new to this issue. I might have a story to share later on during the *National Conversation*.

**Topic 4: Many groups, from government to businesses to nonprofit organizations, have a part in protecting the public from harmful chemical exposures. After listening to the personal accounts you just heard, or other experiences, share your thoughts on steps one or more of these groups might take to prevent harmful exposures.**

**VIEWPOINT A: Build capacity at the state and local levels to address public health concerns related to chemical exposures**

While many policy decisions related to chemical exposures occur at the federal level, public health concerns are often local. Currently, state and local governments vary in the resources they have to protect the public from chemical exposures and, when problems are identified, to respond adequately to those exposures. Federal agencies should commit resources to make sure that state and local governments can adequately respond to residents' concerns and can provide protection from local environmental health threats.

**VIEWPOINT B: Involve members of the public in decisions that affect their health**

Government agencies, corporations, universities, community groups, and others should provide meaningful opportunities for interested members of the public to participate in decisions at local, state, and national levels.

**VIEWPOINT C: Encourage partnerships**

We need to do a better job of working together to promote health and to prevent chemical exposure. At the local level, building effective partnerships may require federal agencies, foundations, and others to provide resources to community-based groups. At the national level, federal agencies ought to coordinate their research and share information more freely.

**VIEWPOINT D: Take a comprehensive approach to promoting health**

Promoting public health requires government agencies to look at chemical exposures in addition to the other public health issues that communities face. For example, while a health department works with a community to study possible risks from local water contamination, it can also work with this same community group and others on programs to combat obesity and poor nutrition.





# Community Conversation Summary Template

# COMMUNITY CONVERSATION SUMMARY TEMPLATE

The note taker for your community conversation can use this template to record the major topics and ideas discussed during the Community Conversation.

Within one week of the event, the convener should:

1. Download the electronic copy of the summary template, available at: [www.atsdr.cdc.gov/nationalconversation/community\\_conversations.html](http://www.atsdr.cdc.gov/nationalconversation/community_conversations.html).
2. Fill out the summary template using the notes from the meeting.
3. Send the summary to [nationalconversation@cdc.gov](mailto:nationalconversation@cdc.gov). All summaries are due by June 30, 2010.

## Convener contact information:

NAME: \_\_\_\_\_  
EMAIL ADDRESS: \_\_\_\_\_  
PHONE: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_

## Convening organization(s) (if applicable):

\_\_\_\_\_

Meeting location (city, state): \_\_\_\_\_

Meeting date: \_\_\_\_\_

Number of participants: \_\_\_\_\_

Brief description of participants and community:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Topic 1: Concerns

Participants' main concerns included:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



**\***  
YOU DO NOT NEED  
TO BE AN EXPERT.  
THE *NATIONAL  
CONVERSATION*  
TEAM WANTS INPUT  
FROM ANYONE WITH  
A PERSONAL AND/OR  
PROFESSIONAL  
INTEREST IN  
ENVIRONMENTAL OR  
PUBLIC HEALTH  
ISSUES.



Participants disagree about certain issues, including:

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**Topic 2: Values**

List several values that participants thought were important:

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**Topic 3: Roles and responsibilities**

Participants noted key steps that certain groups could take, including:

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**Topic 4: Learning from accounts of success and failure**

The main lessons we can learn from the discussion of successes and failures include:

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Did the group make any plans for a follow up meeting about local action?

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