Meeting Objectives:

- Further develop *National Conversation on Public Health and Chemical Exposures* (National Conversation) Serving Communities Work Group (Serving Communities Work Group) subgroup reports, addressing all sections of the work group template
- Consider feedback from the Web dialogue, National Association of County and City Health Officials (NACCHO), and Association of State and Territorial Health Officials (ASTHO)
- Discuss and refine work group recommendations

I. Action Items

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<th>April 30: Work Plan and Immediate Next Steps</th>
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<td>1. Send out next steps document</td>
<td>Kathy Grant, RESOLVE facilitator</td>
<td>May 4, 2010</td>
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<td>2. Complete recommendations</td>
<td>Subgroups</td>
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<td>3. Complete subgroup reports</td>
<td>Subgroups</td>
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II. Meeting Summary

**April 29, 2010**

**Welcome, Introductions, and Agenda Review**

Peggy Shepard, Serving Communities Work Group chair, welcomed the group and commended everyone for the good work to date. She reminded the group that its main task is to develop 12 recommendations for the *National Conversation on Public Health and Chemical Exposures* Leadership Council (Leadership Council).

Kathy Grant, RESOLVE facilitator, reviewed the agenda, noting that subgroups would have time to work on their recommendations. Although subgroups should focus on developing their recommendations, they should also provide written background, context, and references to Kim DeFeo, National Center for Environmental Health (NCEH)/Agency for Toxic Substances and Disease Registry (ATSDR) staff member, so that she can create a cohesive report. The work group report template can be found on the project management site used by work group members: [http://www.nationalconversation-projectsite.org/serving_communities/node/1776](http://www.nationalconversation-projectsite.org/serving_communities/node/1776). Work group members can comment on the report via the project management site.
**Discussion: Reports from the Web Dialogue, NACCHO, and ASTHO**

Ms. DeFeo presented an overview of input received on the *National Conversation* from the Web dialogue and from meetings held by NACCHO and ASTHO. She encouraged work group members to think about whether this input helps them prioritize their recommendations or identify any gaps in issues the subgroups have been considering. She encouraged each work group member to read the reports in full.

Ms. DeFeo explained that ASTHO surveyed environmental health directors and held a state forum to get feedback on the *National Conversation* and the six *National Conversation* work group topics. NACCHO hosted two forums to generate input from local health directors on the topics of the six *National Conversation* work groups, including what gaps exist in information at the local level. More than 300 people participated in the Web dialogues and shared their thoughts on the *National Conversation* process and ideas for consideration by the work groups and Leadership Council.

Common themes from these three sources include:

- need to build community trust
  - open communication,
  - transparent processes,
  - face-to-face meetings, and
  - informing communities of exposures;
- need for community involvement;
- need to tell communities that science cannot answer all the questions they have, admit harm from chemical exposure vs. downplaying risks;
- need to use community-based participatory research;
- need more information on the effect of multiple and low-dose exposures;
- need for local, state, and federal agencies to communicate regularly;
- need for state and federal agencies to partner with local health departments to effectively communicate with communities;
- need to implement the precautionary principle; and
- need for funding for community groups.

These public input mechanisms also produced several recommendations relevant to the Serving Communities Work Group, including

- improve training for agency staff who interact with communities,
- increase interagency coordination,
- hire an ombudsman at agencies to work with communities,
- develop a national clearinghouse of information to give the public easy access to existing data, and
- implement the precautionary principle.

**Discussion: Serving Communities Work Group Subgroup Reports**

**Government Operations (Internal & External) Subgroup:** Liam O’Fallon, one of the Government Operations (Internal & External) Subgroup team members, shared that the group focused on four main areas: 1) partnerships and coordination, 2) training, 3) government operations, and 4) miscellaneous. Some ideas the subgroup has discussed under these four headings include the need for a better coordinating structure for agencies, officials to respond to communities in a timely manner, increased training (for federal employees and community members), and increased funding for green chemistry.
In the discussion following this report, work group members brought up several points, including that positive changes often come without the funding to implement them (for example, the new regulations on pesticides in Florida). One member requested that the Department of Defense be included in the list of federal agencies that need to take action. Another member suggested working to revive the Federal Interagency Working Group on Environmental Justice.

Addressing Past and Current, and Preventing Future, Environmental and Chemical Exposures Subgroup: Addressing Past and Current, and Preventing Future, Environmental and Chemical Exposures Subgroup Leader Scott Levy reported this subgroup has preliminarily narrowed its recommendations to four: 1) hiring an ombudsman at agencies to help the public better access information, 2) creating a national health database so that a patient’s records would be easily accessible by any doctor in the country, 3) applying stronger penalties for regulatory noncompliance, and 4) creating incentives for industry to comply with the laws and self-report violations.

In the resulting discussion, work group members had a mixed reaction to the suggestion that companies be given incentives for compliance or self-reporting of violations. However, work group members appeared to support the idea of increasing fines for noncompliance. A member asked if this subgroup had thought about any recommendations that would address past exposures. Dr. Levy welcomed help with a recommendation to address past exposures.

Community Advocacy, Leadership, and Research Subgroup: Community Advocacy, Leadership, and Research Subgroup Leader Mark Mitchell reported that this subgroup has discussed the following main issues:
1) How to build trust between stakeholders;
2) The need for an action plan developed for communities to address problems with the community public participation process, training, education and funding for local groups, and sharing best practices;
3) The need for research and providing support for independent research; and
4) The need for standardizing the way environmental health is assessed at the local level.

The discussion following Dr. Mitchell’s summary included the need to shift the burden of proof about potentially dangerous chemicals and products from consumers and residents to the companies producing the chemicals and products.

Restoring Health and Developing Community Resiliency Subgroup: Restoring Health and Developing Community Resiliency Subgroup Leader Mildred McClain reported this subgroup has been thinking about how to integrate environmental justice into health and wellness, including how to increase access to health care. Subgroup members have discussed how to connect emerging science to community needs, how to ensure that the Federally Qualified Health Centers are able to assist people dealing with environmental exposures, how to ensure more resources for communities, the need for a clearinghouse of best practices, and how to reform the way health departments and ATSDR interact with communities.

Subgroup Meetings
The remainder of the day was spent with subgroups meeting to complete their reports and develop their recommendations.

Public Comment
No members of the public were present to give public comment.
**Project Management Site Demonstration**
Ms. DeFeo reviewed how to use the project management site. She noted that using the project management site will be especially important when the work group members begin to edit their work group report.

**April 30, 2010**
**Welcome, Review of Day’s Agenda**
Ms. Shepard convened the meeting, and Ms. Grant reviewed the day’s agenda. Ms. DeFeo updated the group on the *National Conversation* Community Conversation Toolkit. She shared that three groups had piloted the toolkit: 1) Work group member Michael Kent organized a pilot in Oakland, California; 2) work group member Mildred McClain organized a pilot in Savannah, Georgia; and 3) a state health official organized another pilot in Gifford, Florida. The three groups gave good feedback on how to improve the materials. The final toolkit will be ready shortly and will be translated in Spanish. Ms. DeFeo encouraged work group members to consider hosting a conversation and to apply early for the limited funds.

**Discussion: Reports from Subgroups**
Below are the draft recommendations presented to the work group by each subgroup.

**Community Advocacy, Leadership, and Research Subgroup**
1. Mandate government agencies to involve communities in environmental decision-making processes.
2. Provide communities with funding and resources to become effective self advocates.
3. Provide communities with funding and technical resources to conduct independent research necessary to document local problems.
4. Establish a standard process for government agencies to use in assessing the health effects of exposures to environmental threats.

The full work group discussed this subgroup’s recommendations and made some suggestions:
- Regarding mandating community participation in environmental decision-making, consider referencing times when community involvement is already required, such as in the National Environmental Policy Act process and through the Environmental Justice Executive Order.
- Regarding increasing community participation, specifying that these efforts be funded is important.
- Regarding increasing training for community members, specify that groups may not only need legal advice or technical training but training in accounting and how to manage their organization. Also stress that, although providing resources to community groups is important, the burden should not always be on communities to respond to industrial pollution. Increased corporate responsibility should be combined with increased government vigilance. The government has a moral responsibility to use its resources to address issues of legacy pollution and to protect people from harmful chemical exposures.
- Regarding a standard process for assessing environmental health threats, look at models such as the disability-adjusted life years (DALYs); geographic information systems to compare, for example, lead poisoning or asthma rates at the neighborhood level; or the community health assessment model developed by Rosalie Bertell.
In response to a question, Dr. Mitchell, subgroup leader, clarified that these recommendations were directed toward all levels of government.

**Government Operations (Internal & External) Subgroup**
1. Develop coordinating structures/mechanisms across agencies.

**Internal Activity Coordination and Communication**
- Establish and support multi-agency (including DOD) working group to address community health from different perspectives:
  - federal
  - state
  - local
  - tribal
- Convene funders forum
- Outline process of case studies

**External Communication**
- Develop strategies of communicating outwardly in a coordinated fashion:
  - Web pages
  - Ombudsman
- Facilitate bidirectional communication and engagement:
  - advisory boards/committees
  - risk communication
    - Participatory
    - Emergency
- Review and implement open government plans (EPA, U.S. Department of Health and Human Services [HHS], other)

2. Establish, facilitate, and promote training programs for government employees, community groups/residents, academia, and AmeriCorps-like volunteers.

**Government Employees**
- Create programs that build capacity of government employees to partner more effectively with community groups and residents:
  - Cultural competencies
  - Communication skills
  - Facilitation

**Rationale:**
- Funding
- Issue tracking
- Processes
- Materials/resources/tools
- Questions
- Best practices
- Standards and guidelines

**Examples:**
- Environmental Justice-Interagency Working Group
- EH Working Group
- U.S. Environmental Protection Agency (EPA)/U.S. Department of Housing and Urban Development/U.S. Department of Transportation

**Side Issue: One-Health:**
- Animals as sentinels

**Example:**
National Institutes of Health (NIH)
Director’s Council of Public Representatives (COPR)

**Example:**
Incident command structure

**Side Issue: Science-based Information:**
Emphasize that materials are science-based

**Example:**
HHS Office of Minority Health Materials
Community Groups and Residents
- Create programs that build the capacity of community groups and residents to
  - communicate with government staff, researchers, and decision makers
  - interact with government and researchers
  - navigate government systems and processes
  - access government systems and resources/tools

Academia
- Establish programs to build the skills of current and future researchers with a commitment to community-engaged research:
  - fellowships
  - training, and
  - loan repayment programs

AmeriCorps-like Volunteers
- Establish a new Environmental Public Health AmeriCorps Program:
  - Bring in young graduates committed to working with community groups. Focus on environmental public health issues. Groups are using AmeriCorps volunteers for social justice programs. Give a specific focus to environmental public health.

3. Review ATSDR mission and mandate to ensure the agency serves public health better/more effectively.
   - Identify the responsibility of the government to respond to community concerns related to environmental exposures and/or human health
   - Implement a process for peer review of ATSDR studies
   - Review ATSDR’s ToxFAQs
   - Develop a task force to revisit ATSDR-produced materials:
     - outside review
     - goal of making the materials useful to community groups

4. Model/lead the way!
   - Adopt green practices within agencies:
     - procurement
   - Formalize mechanisms for community engagement

The full work group discussed these draft recommendations. The subgroup clarified that its

Examples:
- Janitorial services that use green practices
- Meetings at hotels that are union and green
- NIH COPR (see above)
- Community advisory committees
- Community forums

Examples:
- NIH, National Institute of Minority Health and Health Disparities—loan repayment program and training program
- NIH, National Institute of Environmental Health Sciences (NIEHS)—fellowship program

Examples:
- Protocol for Assessing Community Excellence in Environmental Health

Side Issues:
- Identify successful models and programs
- Make them available
- Community residents as trainers
- Range of community capacity
- ATSDR high turnover due to low funding
focus has been on directing recommendations toward the federal government but that it could consider recommendations for other levels of government.

The work group suggested that, whenever a federal or state group does work or an investigation, that agency should leave a copy of the report or results with the local government for easy local access.

The work group also suggested that, when the subgroup members discuss ways to improve communication, they include methods other than those that rely on the Internet because many communities still lack regular Internet access.

The work group also discussed the idea that government agencies should abide by a code of ethics and/or code of conduct. Group members agreed to share examples.

Work group members discussed the importance of having the government consider setting standards for indoor air quality. They asked if any other National Conversation work groups are considering putting forward a recommendation about IAQ.

**Addressing Past and Current, and Preventing Future, Environmental and Chemical Exposures Subgroup**

1. Establish a national health database immediately, including cancer, infertility, spontaneous abortions, neonatal death, infant mortality and birth defects, and asthma. Allow data to be centralized, accessible by health-care providers in the data’s original format with the potential of removing any patient identifying information from the data for researchers.

2. ATSDR and other agencies must ensure effective compliance by implementing stronger enforcement through actions, including banning production, revoking permits, and considering criminal penalties. This compliance should be monitored through frequent and unannounced inspections to ensure worker and community health and safety. Communities should have some ability to participate in enforcement decisions. This ability can be the assurance of strong citizen suit provisions as well as a citizen appeal process.

3. ATSDR, EPA, state, tribal, and other agencies should mandate community engagement early on in decisions related to site remediation, siting decisions, permitting, and closure.

4. Develop market-based programs to engage industry, such as
   a. incentives for creating nontoxic alternative substances,
   b. third-party certification for standards of social and ethical responsibilities to workers and communities to give industry economic incentives, and
   c. good neighbor partnerships among industry, government agencies, and the community.

Examples:
- Katrina trailers
- Water quality
- Indoor air quality (IAQ)

Side Issues:
- Consumer Product Safety Commission role
- Race and institutional racism
- Community data and ground truthing
- Environmental Public Health Tracking
The full work group discussed this subgroup’s recommendations. Ben Gerhardstein, NCEH/ATSDR staff, pointed out that, to include ATSDR in the subgroup’s third recommendation, the subgroup should expand this recommendation to mandate public participation in health assessments as well because ATSDR currently participates in the other listed activities. The work group then discussed whether ATSDR’s mandate should be expanded. For example, the work group suggested that ATSDR could potentially partner with EPA in some of EPA’s siting and remediation decisions.

In response to the last subgroup recommendation that market-based approaches be developed to engage industry, some work group members agreed this idea was good while others remained wary of working so closely with industry. Members agreed that increasing research into green chemistry is a good idea.

Restoring Health and Developing Community Resilience Subgroup

Practice
1. Improve access to health and health care.

Twenty percent of the new Federally Qualified Health Centers created by the Affordable Care Act will be established in disadvantaged, environmentally burdened communities by 2013.

- Establish holistic and comprehensive community health centers and mobile care.
- Identify agency resources/programs to support community health and wellness and resilience (ombudsmen).
- Provide special environmental health care to deal with multiple exposures and diseases.
- Take a multidisciplinary team approach.
- Gather data:
  - expand and standardize,
  - develop better community-level profiles,
  - develop better personal histories,
  - use community-level profiles and community histories to improve treatment and address environmental sources, and
  - apply all these results to national-level policy.
- Respond to the relationship between community health and the built and social environments.
- Establish a single clearinghouse that includes best practices, contact information for communities, success stories, and reality check of communities.

Policy

One-hundred percent of federal agencies will incorporate and apply the new HRA paradigm in cumulative exposure, disproportionate impact, and the precautionary principle in their decision-making (e.g., rulemaking, regulations, guidance, policies, and protocols) to restore community health, wellness, and resilience between now and 2013.

- All federal policies will reference the National Academy of Sciences’ HRA report and disproportionately impacted factor analysis effort.
Practice
3. Improve and fund training. [Note: This recommendation will be included in the Community Advocacy, Leadership, and Research Subgroup’s Recommendation #2.]

One-hundred percent of federal agencies will obligate 10% of their total budget to environmental public health and community engagement training to disadvantaged, environmentally-burdened communities (including service providers, government, tribal, academia, and private sector) by using a multidisciplinary approach to more effectively address community health and wellness and to develop community resilience by the end of 2012.
- Private sector will also contribute

4. Improve communication.
- Close the loop with communities
- Make personnel changes
- Engage in multilevel community efforts (beyond computers)
- Create opportunities for cross-sector stakeholders and training to better define health and wellness through an environmental justice lens
- Provide ombudsmen

The full work group discussed these draft recommendations after their presentation. A work group member suggested adding “occupational” environments to the following bullet under “1. Improve access to health and health care: Respond to the relationship between community health and the built and social environments.”

In response to a suggestion that medical schools start providing more training on environmental health, the work group noted that the National Conversation Education and Communication Work Group is considering this idea among its recommendations.

A work group member suggested that the subgroup include language about community health workers and other culturally appropriate strategies for improving health.

Dr. McClain welcomed any other members to send her specific language for consideration by this subgroup.

Discussion: Work Plan and Immediate Next Steps
After the work group discussed the subgroup reports, Ms. Grant led a discussion of next steps for the work group. Grant told the group that the Leadership Council will meet on June 1, 2010, and will provide comments on the National Conversation work groups’ progress so far. In preparation for that, the work group agreed to complete its recommendations by May 21, 2010; complete its subgroup reports by June 11, 2010; and have a conference call in June to discuss an integrated set of recommendations. Ms. Grant agreed to send out a next steps memo after this meeting to outline the plan moving forward.
Wrap Up and Adjourn
Ms. Shepard thanked everyone for their hard work and commended the group members for all their efforts in developing recommendations.

III. Participation

Members Present
Lisa Conti, Florida Department of Health
Steve Crawford, Passamaquoddy Tribe at Pleasant Point
Jeannie Economos, Farmworker Association of Florida
Karla Fortunato, Health & Environmental Funders Network
Lori Geckle, U.S. Army Center for Health Promotion and Preventive Medicine
Derek Guest, Environmental and Sustainability Solutions
Rita Harris, Sierra Club Environmental Justice Program
Mercedes Hernandez-Pelletier, North Carolina Department of Health and Human Services, Division of Public Health
Michael Kent, Contra Costa Health Services
Scott Levy, The Permanente Medical Group
Egide Louis, U.S. EPA–Region 4
Mildred McClain, Harambee House Inc./Citizens for Environmental Justice
Pam Miller, Alaska Community Action on Toxics
Mark Mitchell, Connecticut Coalition for Environmental Justice
Liam O’Fallon, NIEHS
Suzi Ruhl, U.S. EPA Office of Environmental Justice
Hilda Shepeard, ATSDR
Arturo Uribe, Mesquite Community Action Committee

Regrets
Melinda Downing, U.S. Department of Energy
Jerry Ensminger, Camp Lejeune Citizens Advisory Panel
Buzzy Guillette, University of Florida
Sarah Norman, Baltimore City Health Department
Barbara Sattler, University of Maryland School of Nursing
Ken Smith, NACCHO
Susan West Marmagas, Virginia Tech

Facilitation and Staff Team Members Present
Peggy Shepard, WE ACT for Environmental Justice; Serving Communities Work Group chair
Carolyn Harper, NCEH/ATSDR senior liaison
Kathy Grant, RESOLVE facilitator
Kim DeFeo, NCEH/ATSDR staff
Ben Gerhardstein, NCEH/ATSDR staff

Other Attendees
Linda Johnson-Fardan, Harambee House Inc./Citizens for Environmental Justice