

CHEJ Unequal Response Unequal Protection

Meeting Notes- April 8, 2021

Attendees:

- Wilma Subra
- Lou Zelle
- Yomi Noibi
- Pamela Miller
- Sharon Croisant
- Darryl Malek-Wiley
- Frank Bove
- Tiffany Hansen
- Melissa Mays
- Jill Johnston
- Anne Rabe
- Thomas Dydek
- Marilyn Howarth
- Yanna Lambrinidou
- Michael Hansen
- Lee Ann Smith

Questions from Merged Document Overview:

- Public health threat is way too high a threshold. We should look at more fish/wildlife/biota (it's a more realistic threshold for us to work with), because we want to stop it there instead of the threshold being humans. Focus on more of the environmental impact in order to have a lower threshold (Anne Rabe).
 - We need a well defined threshold/trigger similar to the FDA on a "contaminated tomato" (Anne Rabe)
- Do we have an analytical chemistry expert in the group? Seems like we need to know what is possible and how much analyses would cost (Thomas Dydek)

- For "Taking it to the Community" community should be a different word, so it clarifies that's not the first place the community gets involved (Wilma Subra)
- Not sure what the fourth community engagement principle means (page 20 of draft document) Should look into this. (Lou Zeller)
- There might be different triggers. Find a significant environmental threat (Anne Rabe)
 - Has statutory language that's pretty detailed that she will share with us.

Focussed Discussion Part 1: Initiating Health Investigations

- Can look at toxicities of the chemicals involved, the exposure pathway, numbers of people involved (ex. defining an area of impact)
 - Come up with a scientifically driven priority scheme (Thomas Dydek)
- In the tomato analogy, the entity has authority, legal traction, financial support; Create an analogy to this process in order to be on solid ground? (Lou Zeller)
 - In the tomato example, They drop everything and go investigate it. There
 has to be some kind of timeline model, but should be something that
 allows it to be triggered (Lois Gibbs)
- Brainstorm early warning signs that could serve as a trigger for an early response. These could be sentinel fish/wildlife species showing signs of harm, children experiencing asthma, etc. (Pamela Miller)
- There are many different ways a legitimate problem evolves and shows itself. Some communities only have historical information.
- If Criteria is too specific, we may exclude important concerns. Language should be general enough to be inclusive- community concern may be enough
- Not all situations warrant a total and comprehensive health investigation. Don't ignore any legitimate concerns. (Marilyn Howarth)
 - Broadly inclusive might be "credible evidence," a term used in the Clean Air Act to enable re-opening of a permit. (Lou Zeller)
 - Agencies may narrowly define that. Have a checklist of contamination of fish, wildlife, flora, fauna, water etc above standards. (Anne Rabe)
- Differentiate between chronic and acute exposures and account for cumulative impacts. (Wilma Subra)
- Communities may not always know they're exposed. Focussing on biota/wildlife is only helpful if they give you a complete idea of exposure pathways. Exposure pathways are the key. (Frank Bove)
- A criterion could be if there's harmed workers. Identify sites where occupational exposure has already occurred. (Tiffany Hansen)
- Consider how different chemicals manifest in different ways within a population (Lee Ann Smith)

- Investigate chemical plants with a history of toxic chemical releases for a cumulative impact. (Darryl Malek-Wiley)
 - Look at high risk areas (golden triangle, cancer alley)
 - Could we identify/help communities to do a risk profile (Sharon Croisant)
- I'm confused about how potential sites for investigation are identified. Is the object to prioritize the community identified "problems ", or is it how we can identify which communities have problems? (Thomas Dydek)
- (CHEJ proposed the idea of creating a focus group to discuss this further).
 - Members: Pamela Miller, Anne Rabe, Lee Ann Smith, Teresa Mills, Wilma Subra, Marilyn Howarth

Focussed Discussion Part 2: Evaluate Whether An Investigation Continues

- If the investigation says there's not a problem, the community needs to determine if they missed anything on the input side. (Wilma Subra)
- Compile list of exposure pathways the community needs to go back and examine. (Anne Rabe)
- Community puts together a checklist of contacts (Stephen Lester)
- If study finds emissions from one or several plants, there needs to be an immediate reduction in the board across the plants. Examine all air/water permits within a set distance from the community. (Darryl Malek-Wiley)
- Mitigate any exposure sources found during the investigation, regardless of the investigation's outcome.
 - There are things that can be done even if there's not a particular connection to a health impact (such as convincing chemical plants to change their processes) (Frank Bove)
- There must be something there that can validate what the initial concerns are and serve as a long term watchdog.
 - Physicians could be alerted to the health/chemical pathways.
 - Information should be made available to the medical community so the physician knows what to do. (Lou Zeller)
- Community educator responsible for educating the community about various potential investigation outcomes. This will help residents understand that it might be punted back to them to determine what's going on. (Teresa Mills)

Next Steps

- Submit comments anytime until April 23
- Follow up breakout group meeting next week
- We're working on a mandatory response time for the investigation framework
- Next meeting: Review next version of document