

Proceedings of a Statewide Stakeholder's Roundtable

Convened by the California Department of Public Health,
Environmental Health Investigations Branch with support from
the Agency for Toxic Substances Control and Disease Registry

January 2014

An abstract graphic in the bottom right corner of the page, consisting of a series of dark, curved, overlapping lines that suggest a stack of papers or a flowing ribbon, set against a light blue background.

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Background and Purpose

The Site Assessment Section (SAS) of the Environmental Health Investigations Branch (EHIB), California Department of Public Health (CDPH), conducts public health activities at hazardous waste sites in the State of California through a cooperative agreement with the federal Agency for Toxic Substances and Disease Registry (ATSDR). SAS carries out public health activities, which may include exposure assessments and investigations, health education and community involvement, technical assistance to local, state or federal agencies or community groups, and health studies when feasible. With no regulatory power, the impact that SAS makes in a community are through its public health protective recommendations to the regulatory agencies overseeing cleanup or operations and efforts in community participation and health education.

Since 2006, SAS has been providing its stakeholders the opportunity to dialogue about environmental public health in the context of a roundtable. We have brought together individuals from public health departments, local, state, and federal agencies and community-based organizations, to: increase their access to resources and experts that can assist them; provide a forum for cross-communication; and catalyze local efforts addressing environmental public health. The purpose for these roundtables is twofold: 1) to facilitate learning and sharing about environmental public health concerns relevant among communities, agencies, and SAS staff, and 2) to provide a forum for feedback and direction to the SAS group from communities and agencies.

Timeline of Stakeholders Roundtables

Year	Topic
2006	Prioritizing & Meeting Community Needs at Hazardous Waste Sites
2007	Methamphetamine Laboratories & Facilities Emitting Hazardous Chemicals in the Air
2008	Land Use Planning & Environmental Public Health
2009	*
2010	Health Impact Assessments & Long-Term Stewardship of Hazardous Waste Sites
2011	*
2012	*
2013	Water Quality & Disease Clusters
2014	Healthy Housing and Indoor Air Quality, Navigating Environmental Health Agencies and Understanding and Approaching Unengaged Communities

**Note: funding challenges prevented SAS from conducting a roundtable in 2009 and 2012; however, in 2011 instead of organizing a roundtable, SAS helped EHIB host a symposium for promotores (community health workers) from across the state.*

Stakeholder Roundtable 2014

The roundtable was held in Los Angeles, California on January 16, 2014. During this roundtable, 23 participants were convened to learn about healthy housing and indoor air quality, navigating environmental health agencies and understanding and approaching unengaged communities. Topics were selected based on suggestions made by roundtable participants and perceived utility of topics by roundtable organizers. For a copy of the agenda please refer to Appendix A.

At the beginning of the roundtable, Dr. Gabriele Windgasse, Chief of SAS, provided participants with a general background and purpose of the roundtables as well as an overview of SAS in the organizational structure of CDPH. To see a copy of Dr. Windgasse's Power Point Presentation please see Appendix B.

Healthy Housing and Indoor Air Quality

Dr. Rick Kreutzer, Chief of the Division of Environmental and Occupational Disease Control in CDPH spoke about housing issues, common indoor air pollutants, and ways to improve our indoor air quality and led an interactive discussion aimed at identifying indoor pollutants. Dr. Kreutzer also discussed the housing stock in the state and the exposure pathways that link indoor air pollutants to health and disease. His Power Point Presentation is provided in Appendix C.



Take Home Messages

- 1) Humans have three basic human needs: food, water, shelter.
- 2) Housing can be described using three overlapping frames: a consumer product, a public good and as a basic human right.
- 3) Housing stock in California is varied, with less than a 10th of it unoccupied.
- 4) Indoor air quality is impacted by pollutants that are outside of the home (e.g. freeways).
- 5) Indoor air quality is important because we spent most of our days indoors.
- 6) Causes of indoor air contamination include consumer products, toxins from outside, pets, combustion products, VOCs, second hand smoke, asbestos, formaldehyde, flame-retardant chemicals, radon and pesticides, among others.

Unanswered Questions

Responses to unanswered questions and resources	
Question	Answer
What percent of air is exchanged between units in multi-unit housing?	65% Source: http://publichealthlawcenter.org/sites/default/files/resources/tclc-syn-secondhand-2010_0.pdf
What percent of Californians smoked 50 years ago?	Estimated to be approximately 43% in 1965. Source: Pierce, J. P., Messer, K., White, M. M., Kealey, S., & Cowling, D. W. (2010). Forty years of faster decline in cigarette smoking in California explains current lower lung cancer rates. <i>Cancer Epidemiology Biomarkers & Prevention</i> , 19(11), 2801-2810.
When was asbestos outlawed in the building of homes?	Bans of certain home applications of asbestos began in 1973. A complete history of federal legislation on asbestos can be found here: http://www2.epa.gov/asbestos/us-federal-bans-asbestos
Does formaldehyde have a half-life?	Yes, it is 30-50 minutes. More details about formaldehyde can be found here: http://www.epa.gov/teach/chem_summ/Formaldehyde_summary.pdf

Who Could I Ask For Help: Navigating the Government Maze Of Environmental Health Agencies

Dr. Marilyn Underwood, Environmental Health Director of Contra Costa County spoke about federal and state environmental regulation, organization of US EPA and its state counterpart, organization of municipality and county environmental health organization. Dr. Underwood led an activity in which roundtable attendees identified the agencies (federal, state or county) responsible for addressing specific environmental health concerns. Several participants shared environmental health concerns in their communities and inquired about what agencies would be responsible for addressing the issue. Dr. Underwood's Power Point Presentation is provided in Appendix D.

Take Home Messages

- 1) Much of environmental regulation in the United States has formed in reaction to a serious event.
- 2) Federal agencies frequently have counterparts at the state, county and municipality level.
- 3) Specific environmental health issues may be under the purview of multiple health agencies.
- 4) There is wide variability in how organizations function and are structured.
- 5) At the moment, there is no unified resource to help individuals determine which environmental health agency is responsible for addressing their problem.
- 6) When roadblocks are encountered interacting with agencies, it can be helpful to bring in federal agencies (if they are not the source of the roadblock) or to partner with academic institutions.
- 7) Depending on the situation, all three branches of government can be brought in to address the concerns of a community.



Open Forum Discussion

During the lunch period there was an open discussion forum, in which roundtable participants interacted with each other. There were several community representatives who posed specific questions to representatives of environmental health agencies. One recurring theme in the discussion was the accuracy of information provided by the government. Specifically, it was unclear to participants how Superfund designations were made or revoked and what the role of corporations was in obscuring information from the public. Community members learned that all information on Superfund sites is publically available. Even emails pertaining to these sites are available through the Freedom of Information Act request (FoIA) request. Additionally, a criterion for Superfund designation was clarified. Only few documents cannot be released to the public: for example, documents that contain confidential/medial/or personally identifiable information need to be redacted before released to the public.

Resources

Topic	Website
Information on Freedom of Information Act Requests	http://www.foia.gov/how-to.html
Information on Superfund Sites	http://www.epa.gov/superfund/about.htm

A Community Advocate's Perspective on Navigating the Government Maze

Sherry Padgett shared her personal journey that led her to become a community advocate with the Richmond Southeast Shoreline Area Community Advisory Group. Sherry owns and operates a business across the street from the former Stauffer Chemical Company site in Richmond. She believes this led to serious health consequences for her and her employees because the site had been used for illegal hazardous waste dumping and the former chemical factory that was on the site had been demolished, leading to harmful exposure for the surrounding community. Sherry undertook a journey to uncover what had occurred at the site. This resulted in a long process of navigating through various agencies. Once she received answers, she began the process of community organizing to prevent construction on the site and mandate proper clean up. The roundtable attendees were moved by Sherry's story and inquired about specific hurdles she faced. Her Power Point Presentation is provided in Appendix E.

Resources

Topic	Website
For more on Sherry's quest	http://richmondconfidential.org/2012/12/06/one-womans-quest-to-clean-up-100-years-of-chemical-waste/

Understanding and Approaching Unengaged Communities

Héctor E. Alcalá, a doctoral student from UCLA Fielding School of Public Health spoke about theories that can be used to explain why communities become engaged or not. He also presented examples of communities that have had varying degrees of engagement and led the roundtable in a discussion to explain the level of engagement. Roundtable participants shared other reasons communities can be unengaged and provide concrete examples from their own experiences. His Power Point Presentation is provided in Appendix F.

Take Home Messages

- 1) Communities and individuals are motivated to act by internal and external factors.
- 2) We should refrain from blaming communities for being unengaged; instead we should identify barriers that impede their engagement and work to ameliorate these.
- 3) Trust of government institutions is a major barrier to overcome.
- 4) Some communities have greater access to resources, power, education etc., making it easier for them to engage.
- 5) Some issues are easier to become engaged about.
- 6) Communities can become engaged in a way that is harmful to health, especially if they perceive a health hazard that has not been scientifically verified or one that has been debunked. However, it is important to remember that communities frequently identify legitimate concerns before government or scientists do.
- 7) Attempts to increase engagement require an understanding of the issue and an understanding of the audience.

Closing Remarks

This roundtable provided stakeholders an opportunity to learn about the role of CDPH's Division of Environmental and Occupational Disease Control in identifying and addressing indoor air pollutants. The event also provided community members with the skills to identify air pollutants in their own communities.

Roundtable participants also learned about the large number of environmental health agencies in the state. They learned about the unique role of each agency in addressing environmental health concerns. Participants also heard a first hand account that detailed the difficulties in interfacing with agencies and ways to overcome roadblocks along the way. Finally, participants discussed ways to engage communities in response to environmental health concerns.

SAS will continue striving to provide these types of learning opportunities to their stakeholders as well as provide additional tools and resources that increase community capacity and protect public health.

To read a summary of the feedback provided by roundtable participants please see Appendix G.

For a list of roundtable participants please see Appendix H.

Appendix A: Agenda

Stakeholders Roundtable - March 21, 2013

Site Assessment Section, Environmental Health Investigation Branch
California Department of Public Health and
Agency for Toxic Substances and Disease Registry

Agenda

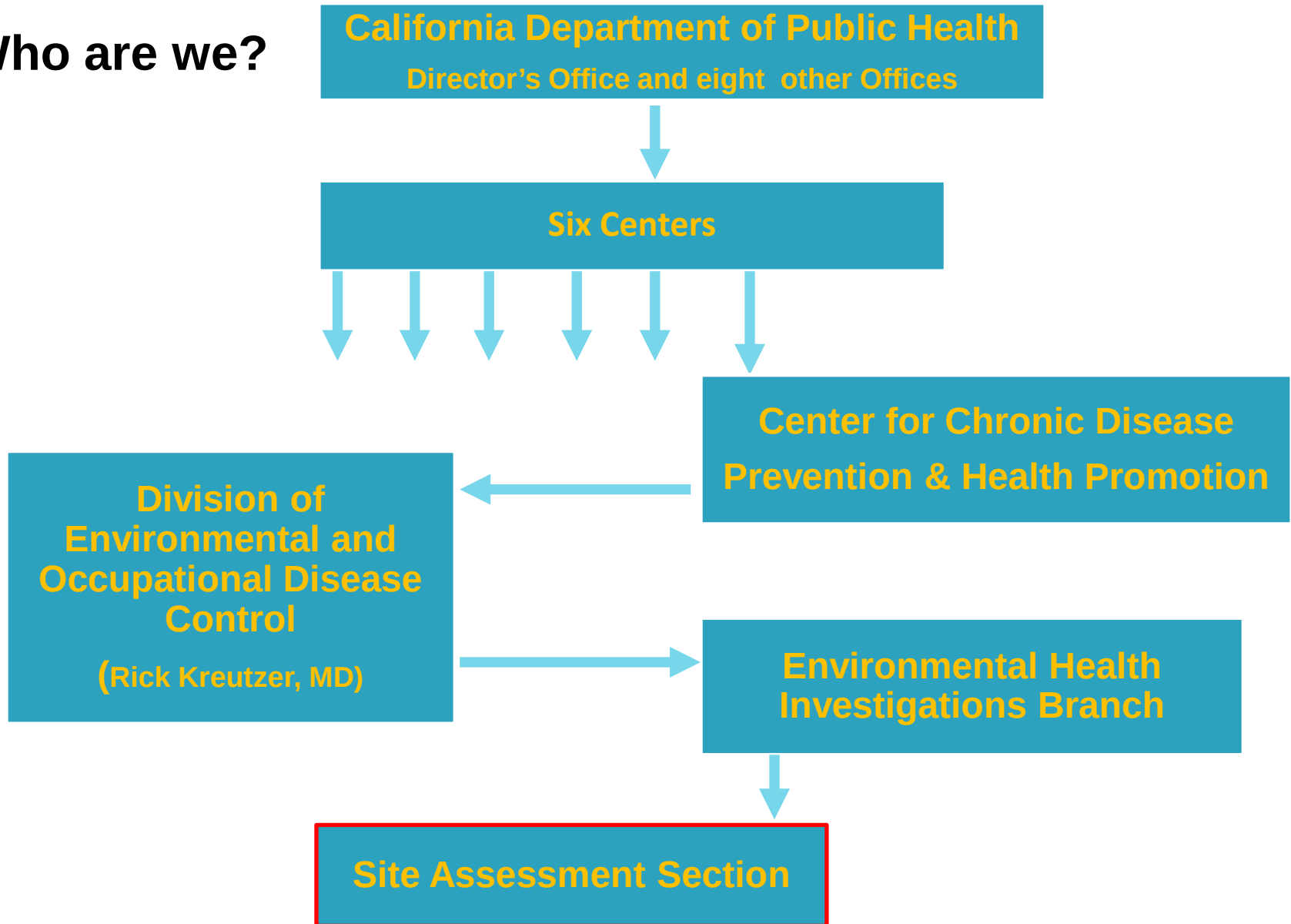
Time	Agenda Item	Presenter
8:30 – 8:45	<i>Breakfast</i>	
8:45 – 9:15	Welcome & Introductions	Tivo Rojas-Cheatham., MPH, <i>Chief of Community Participation and Education Section</i> , and Nancy Palate, <i>Health Educator, Environmental Health Investigations Branch, CDPH</i>
9:15 – 9:25	Background & Purpose of Roundtable	Gabriele Windgasse DrPH., <i>Chief, Site Assessment Section, CDPH</i>
9:25 – 10:30	Indoor Air Quality: Overlooked Concerns	<i>Rick Kreutzer, MD., Chief of the Division of Environmental and Occupational Disease Control, CDPH</i>
10:30 – 10:45	<i>Break</i>	
10:45 – 12:00	Who Could I Ask For Help: Navigating The Government Maze Of Environmental Health Agencies	<i>Dr. Marilyn Underwood, Ph.D., REHS Contra Costa County Environmental Health Director</i>
12:00 – 1:00	<i>Lunch & Open Forum/Discussion</i>	
1:00 – 2:00	A Community Advocate's Perspective on Navigating the Government Maze	<i>Sherry Padgett, Community Advocate, Bay Area Residents for Responsible Development</i>
2:00 – 2:15	<i>Break</i>	
2:15 – 3:45	Engaging the Disengaged: How to Help Those That Don't Want Help	<i>Héctor E. Alcalá, MPH, CPH, UCLA Doctoral Student</i>
3:45 – 3:55	Evaluations	<i>Tivo Rojas-Cheatham and Nancy Palate</i>
3:55 – 4:00	Summary & Closing	<i>Gabriele Windgasse</i>

Funding for this conference was made possible (in part) by the cooperative agreement from the Centers for Disease Control and Prevention. The views expressed in written conference materials or publications or by speakers and moderators do not necessarily reflect the official policies of the California Department of Public Health; nor does mention of trade names, commercial practices, or organizations imply endorsement by the U.S. Government

Appendix B: Background and Purpose of Roundtable

Stakeholder Roundtable 2014 - Site Assessment Section

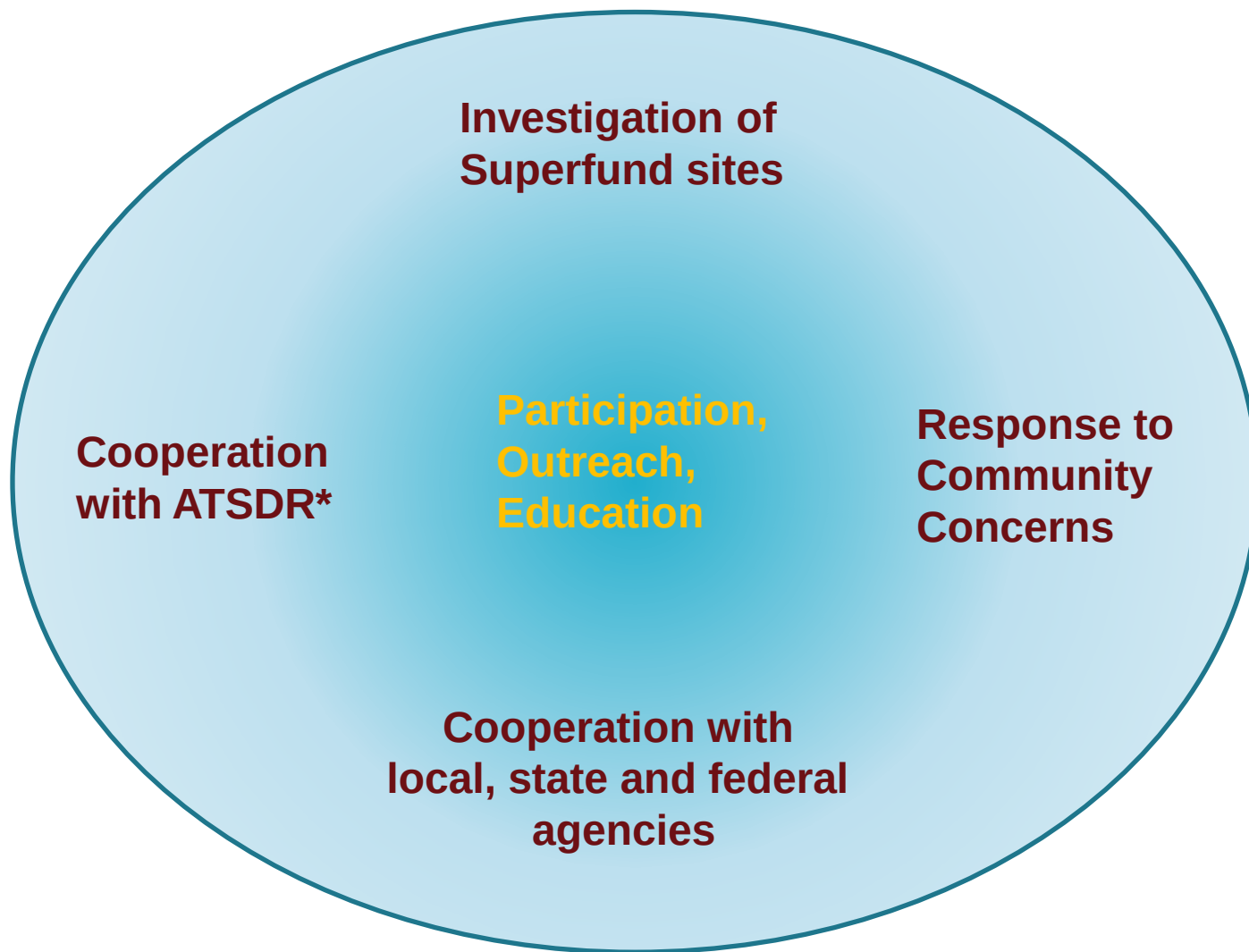
Who are we?



Stakeholder Roundtable - Site Assessment Section

Site Assessment Section:

What do we do?



*ATSDR: Agency for Toxic Substances and Disease Registry

Stakeholder Roundtable - Site Assessment Section

Roundtable Goals

- Network
- Share
- Ask
- Understand
- Apply

Resources, Proceedings, Contacts

Appendix C: Healthy Housing and Indoor Air Quality



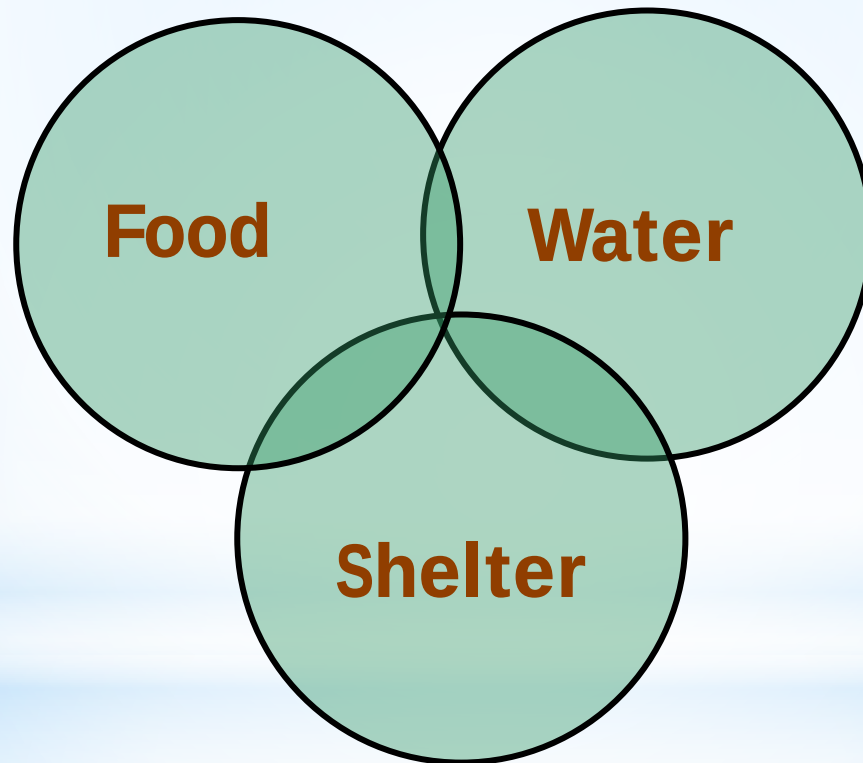
Healthy Housing and Indoor Air Quality

Rick Kreutzer, M.D.

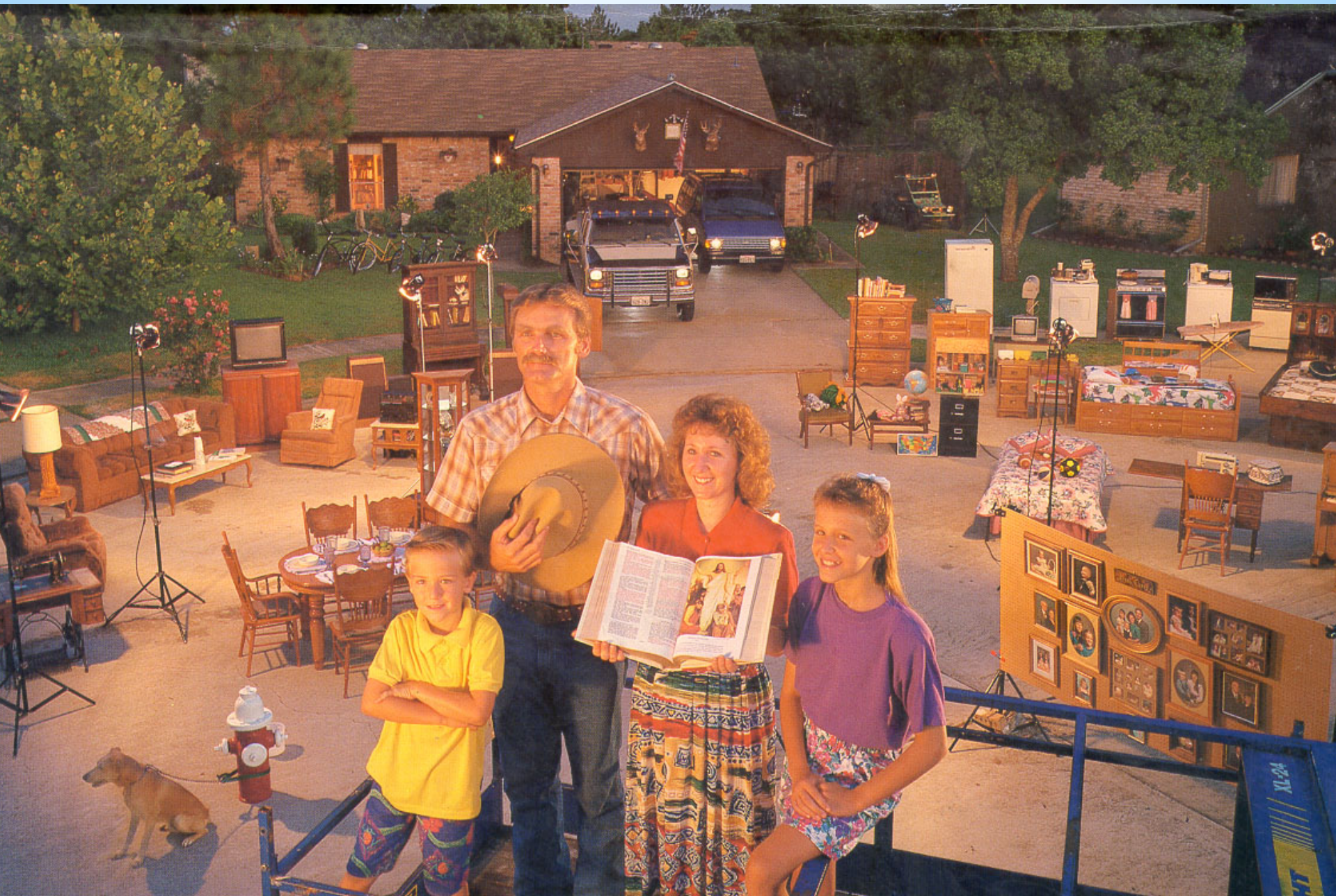
California Department of Public Health



Basic Human Needs

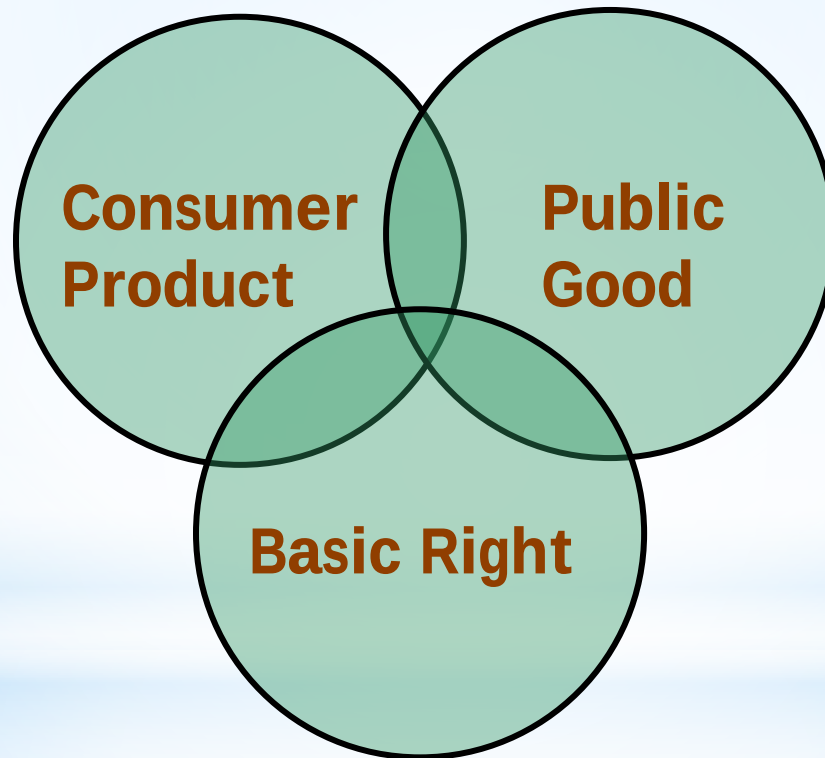




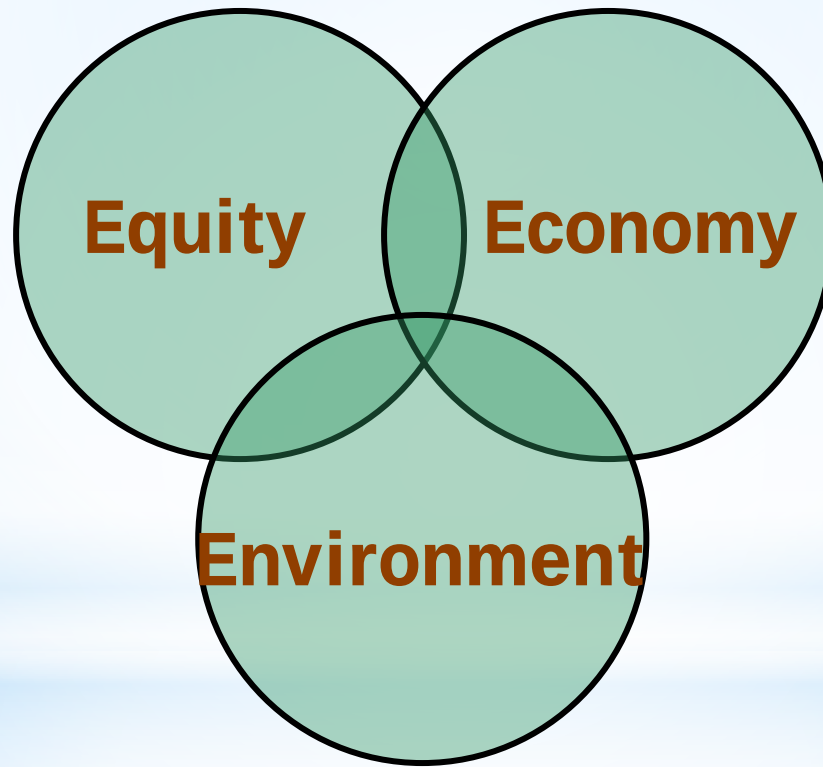




Housing Issue Frames



Healthy Places



According to the U.S. Surgeon General's “Call to Action to Promote Healthy Homes,” a healthy home is

- sited,**
- designed,**
- built,**
- renovated, and**
- maintained**

in ways that support the health of residents.

TABLE 2. Physical Housing Characteristics in CA, 2009

	Number	Percent
TOTAL NUMBER OF HOUSING UNITS	13,434,537	
Year Housing Structure Built		
≤1949	2,202,686	16.4%
1950-1979	6,276,012	46.7%
1980-2004	4,422,721	32.9%
≥2005	533,118	4.0%
Number of Units per Structure		
1, detached	7,794,203	58.0%
1, attached OR 2 units	1,302,995	9.7%
3 or 4	756,255	5.6%
5 to 9	823,752	6.1%
10 to 19	729,288	5.4%
20 or more	1,493,278	11.1%
Mobile home, boat, RV, other	534,766	4.0%

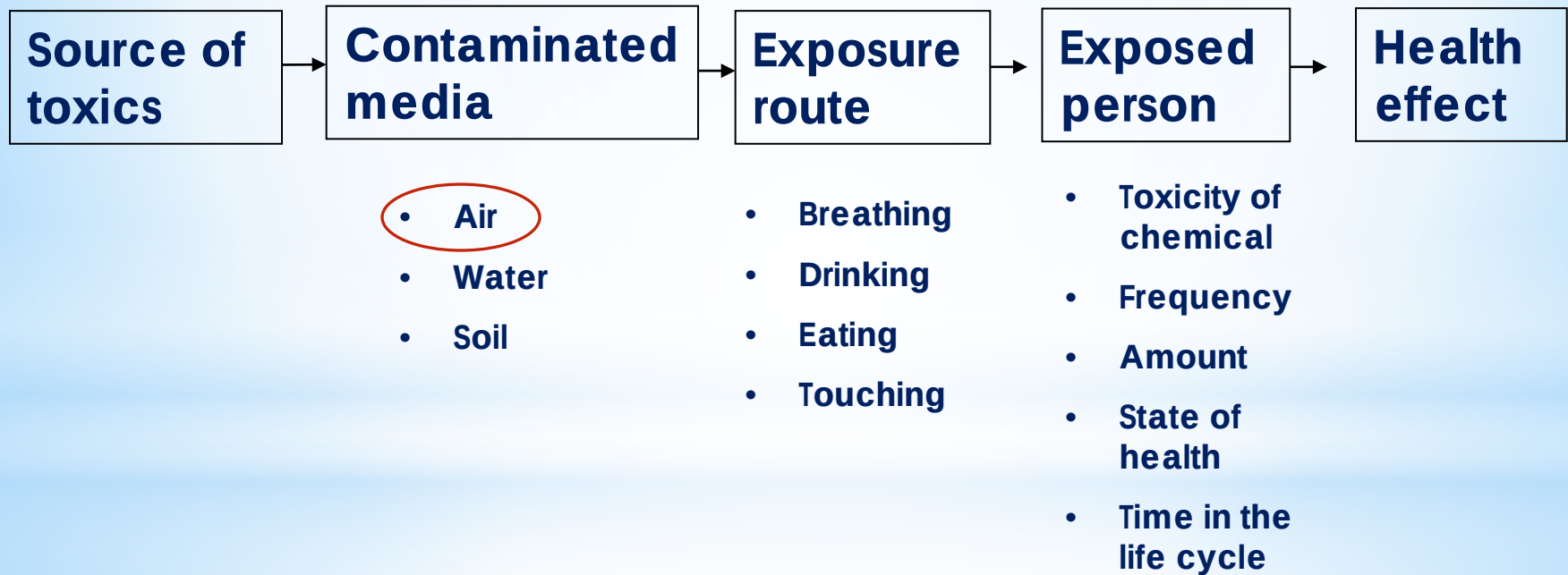
Data source: ACS 2009

Occupancy Characteristics of
Housing Units in CA, 2009

	Number	Percent
Occupied Housing Units	12,214,891	90.9%
By Tenure		
Owner-occupied housing units	6,910,054	56.6%
Renter-occupied housing units	5,304,837	43.4%
Occupied units with children	4,566,138	37.4%

High quality housing generally implies that the dwelling is clean, dry, ventilated, contaminant-free, pest-free, safe and well-maintained.

Exposure Pathways

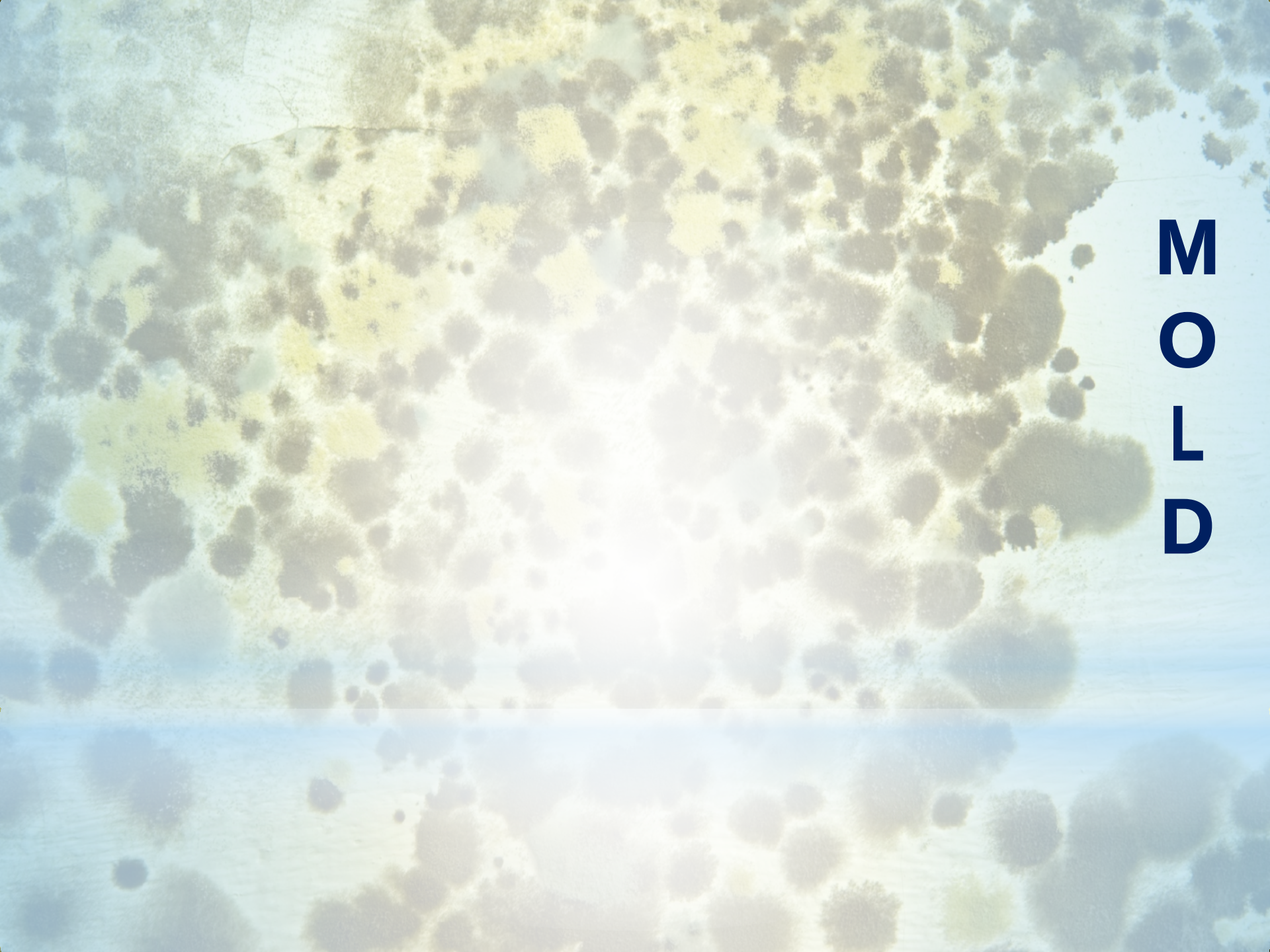


Why is indoor air important?

What causes indoor air contamination?

What are the most common indoor air contaminants?

What health effects do they cause?

A microscopic view of mold colonies, showing numerous small, dark, circular structures (spores) clustered together, forming a dense, textured mass. The background is a light, mottled blue-grey color.

**M
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D**







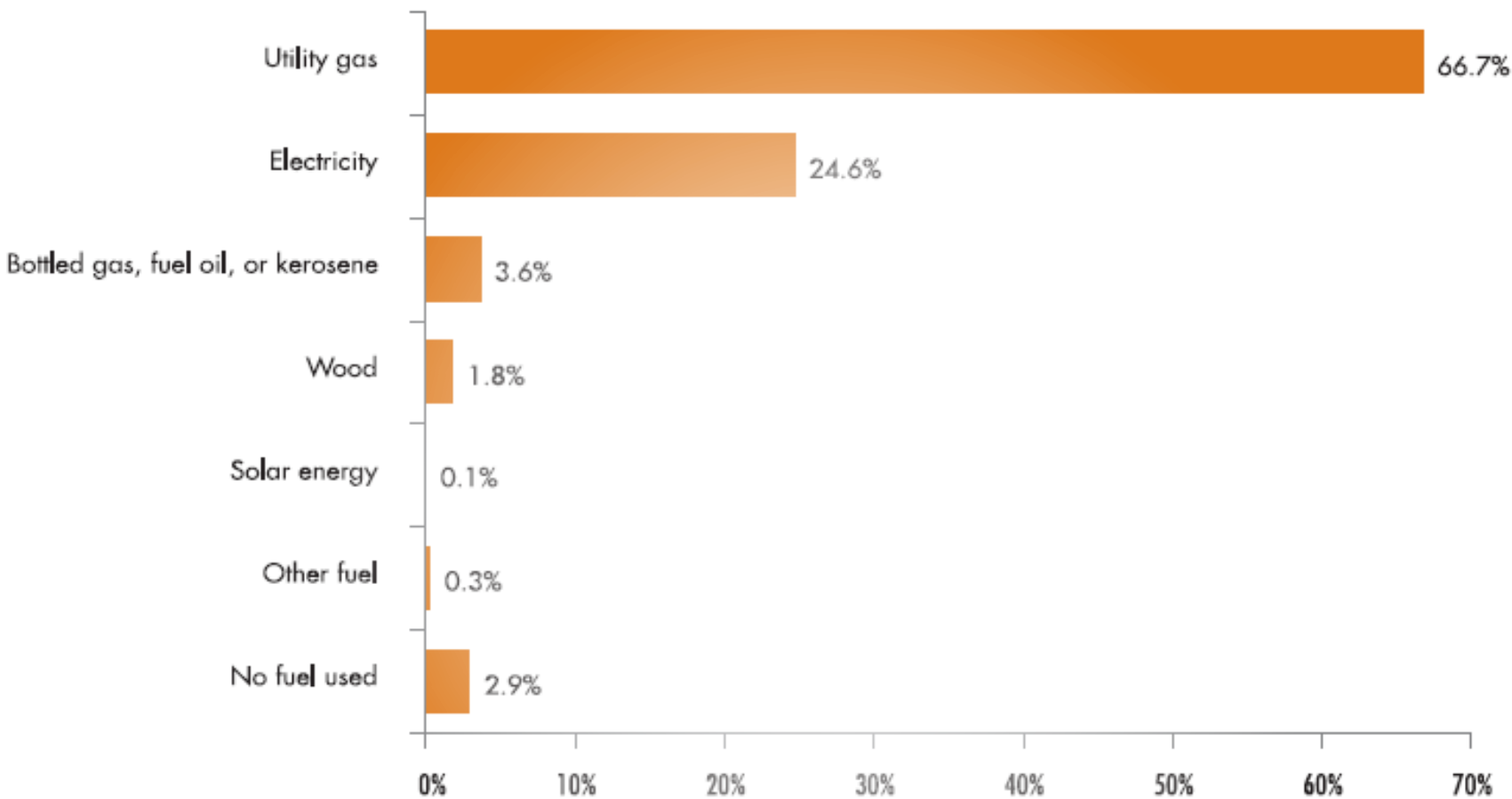




Combustion Pollutants

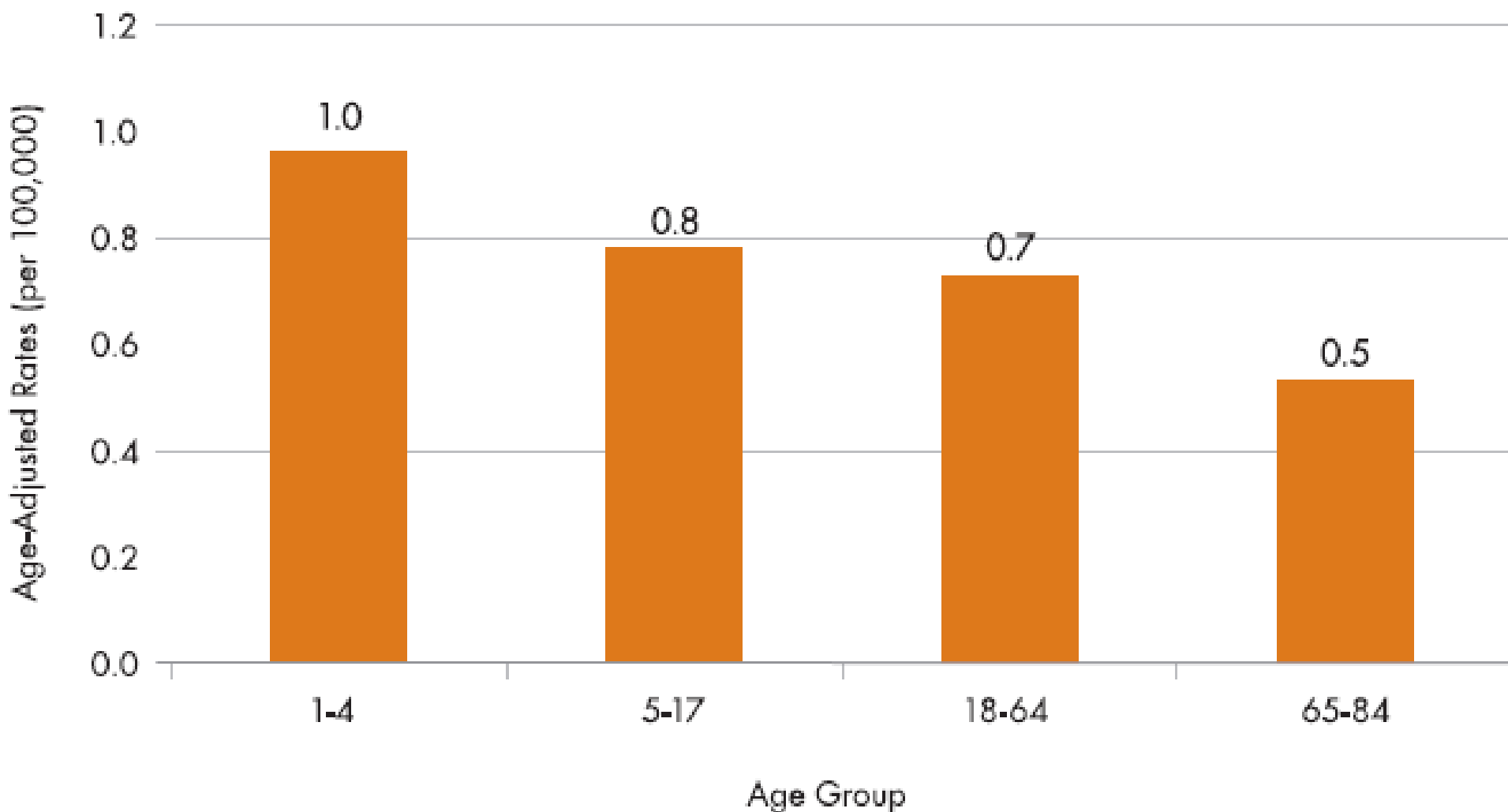
Figure 9

Heating Method for Occupied Housing Units, 2009



Data Source: ACS 2009

ED Visits for CO Poisonings in the Home, Age-Adjusted Rates, by Age Group, 2009



Data source: OSHPD 2009

Rates for those under <1 and 85+ years not calculated due to statistical instability.



It can save your life!

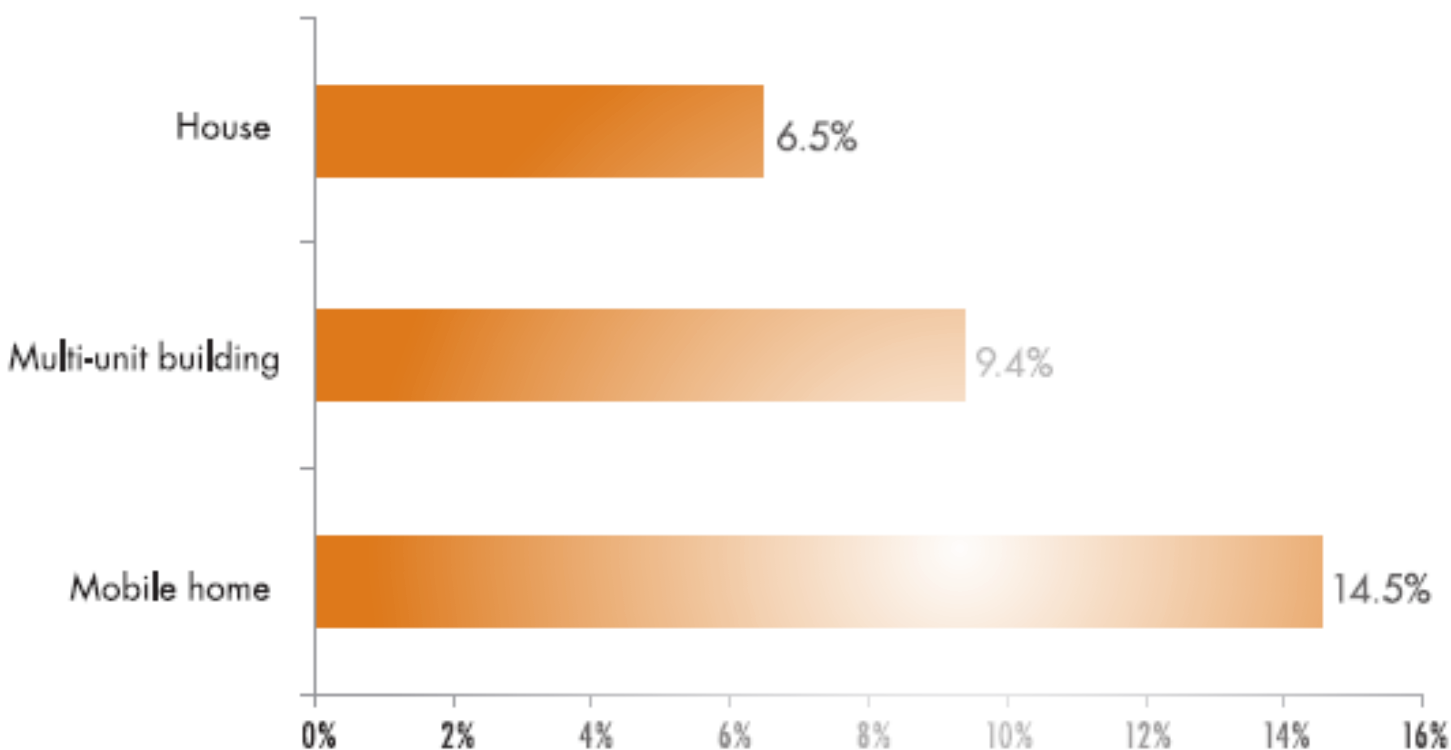


VOC vapors



FIGURE 12

**Homes where Smoking is Allowed,
by Housing Type, CHIS 2009**

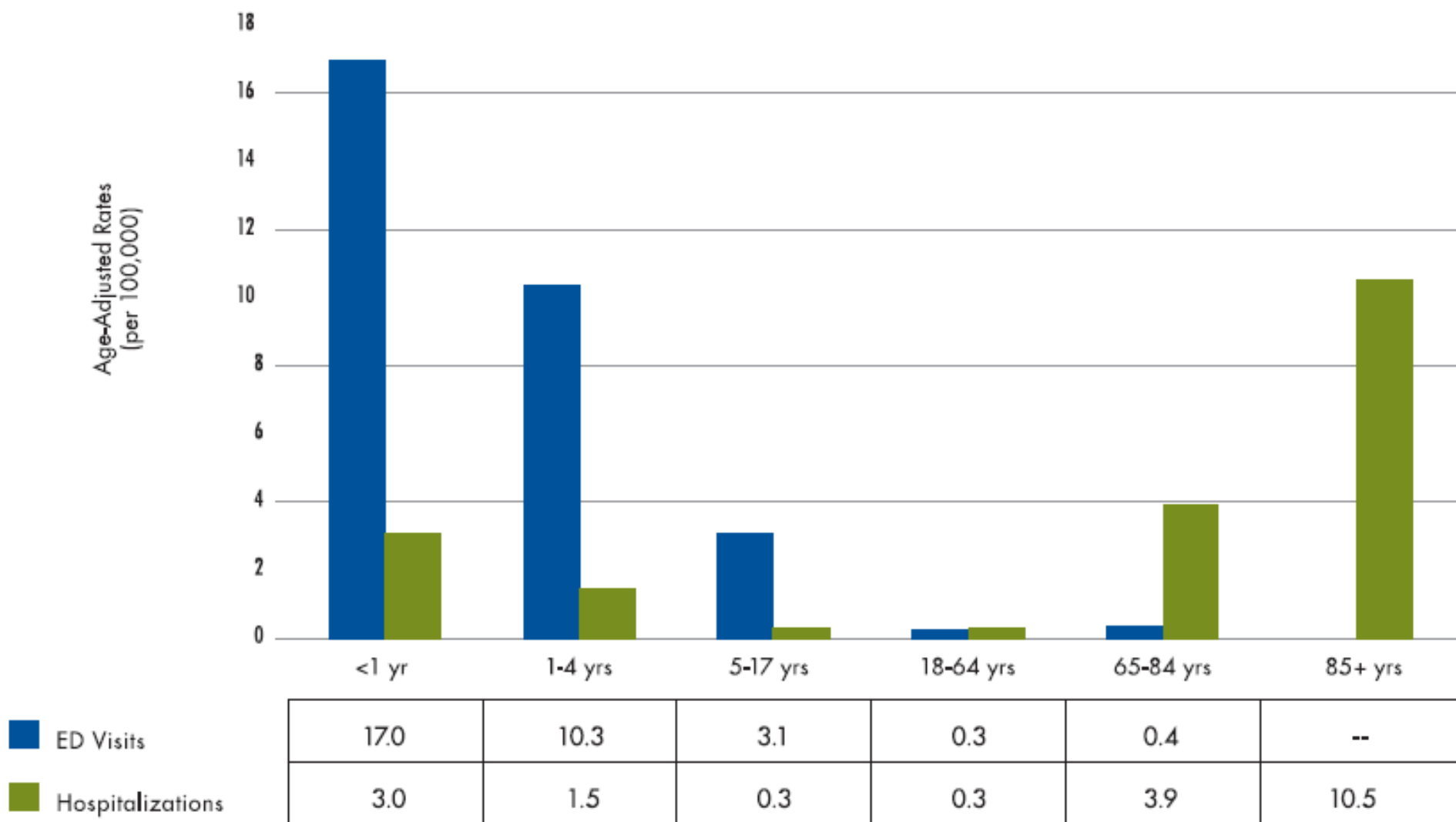


Data source: CHIS 2009

*This is slightly lower than the 10% of people reporting no smoking restrictions from CABRFSS (Figure 10), which again, likely results from differences in question wording, questionnaire design and overall survey methods.

FIGURE 33

ED Visits and Hospitalizations for Secondhand Smoke Illness in the Home, Age-Adjusted Rates, by Age Group, 2009



Data source: OSHPD 2009

Asbestos

117908







Johns-Manville

Formaldehyde

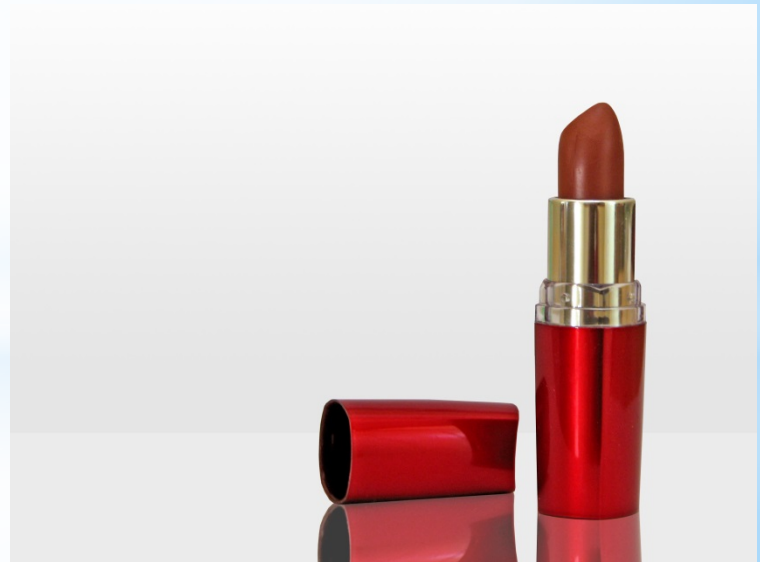




Radon & VOCs

Lead



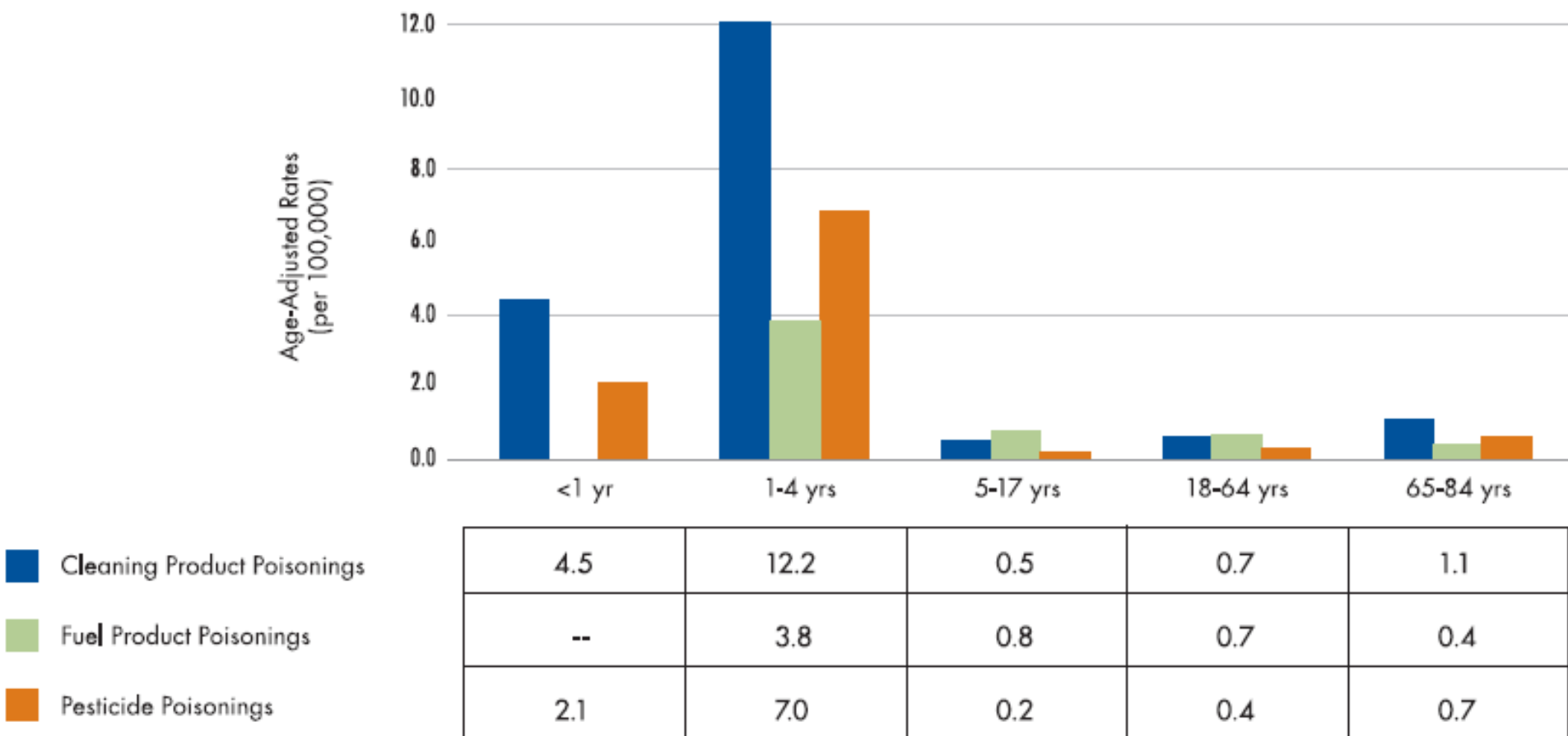


Pesticides



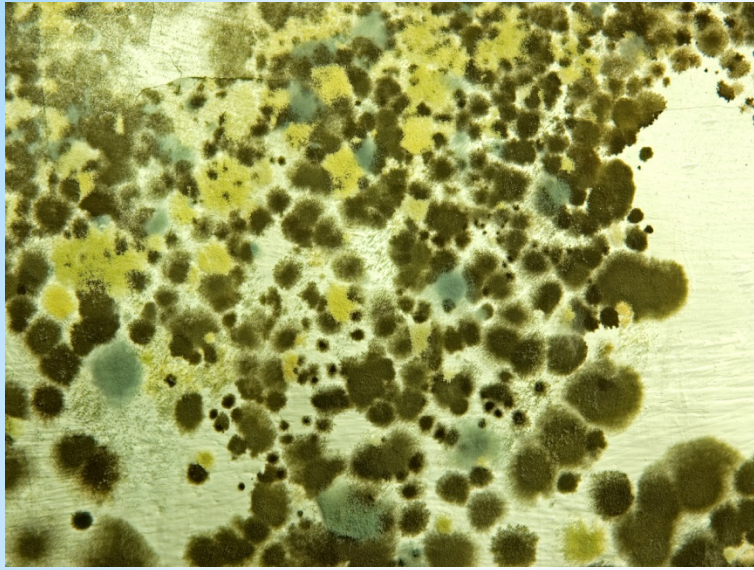
FIGURE 21

ED Visits for Accidental Poisonings in the Home, Age-Adjusted Rates, by Cause and Age Group, 2009

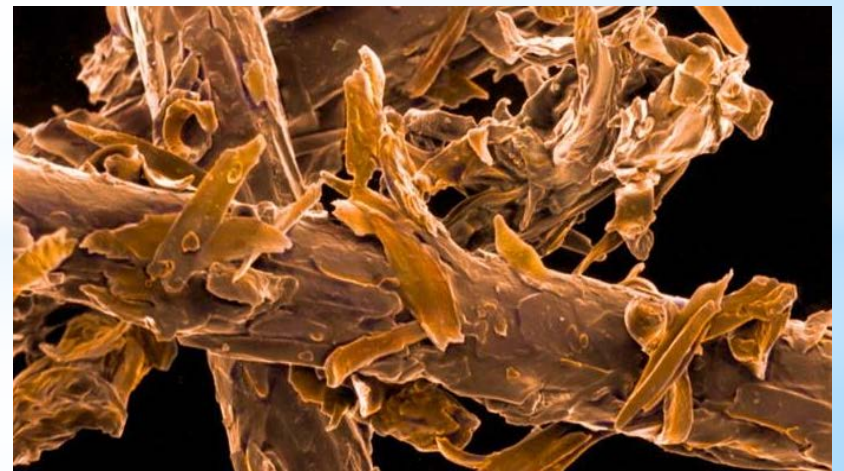


Data source: OSHPD 2009

Rates for 85+ years not calculated due to statistical instability.



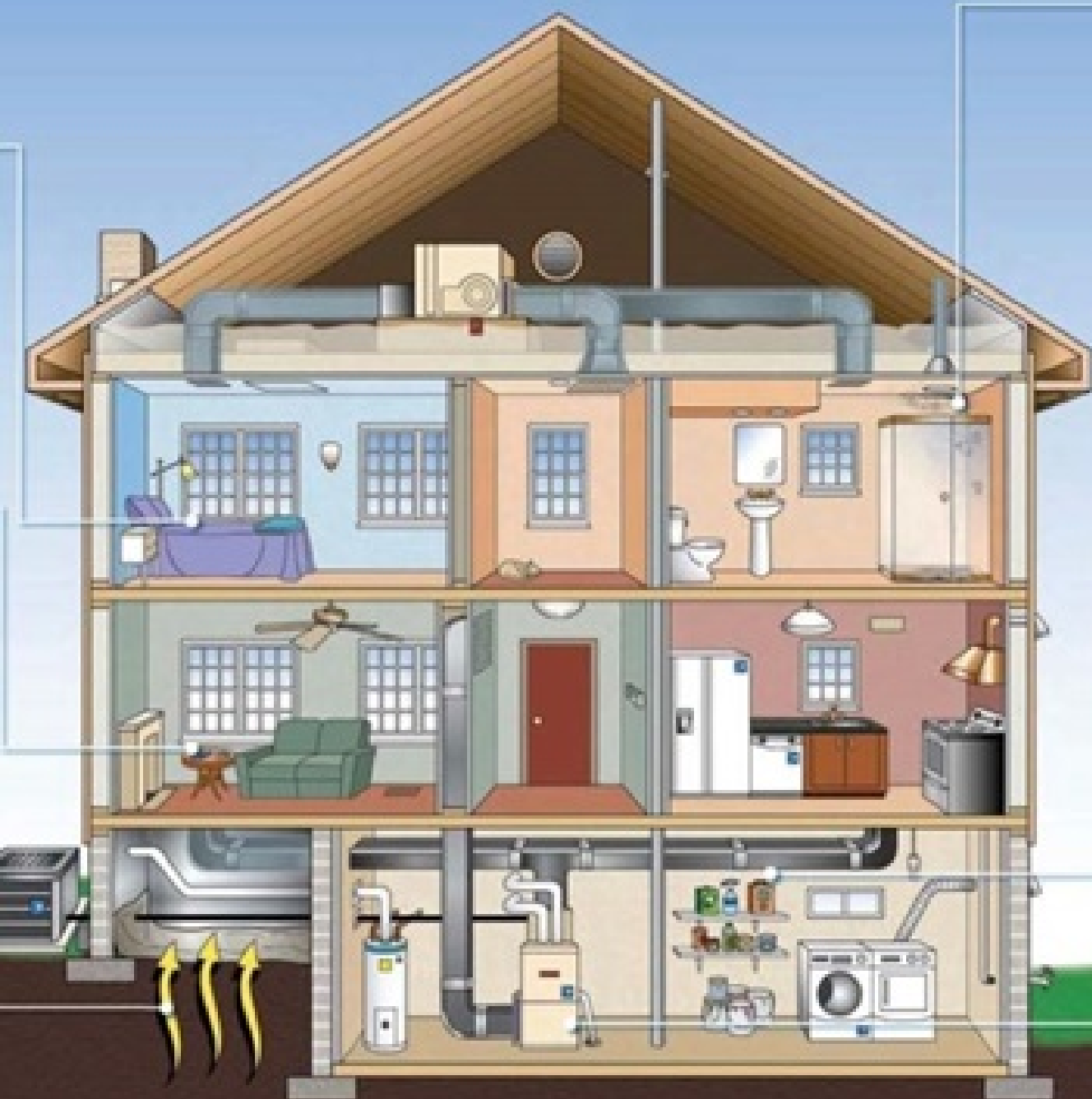
Asthma Triggers







**How can we improve
our indoor air?**



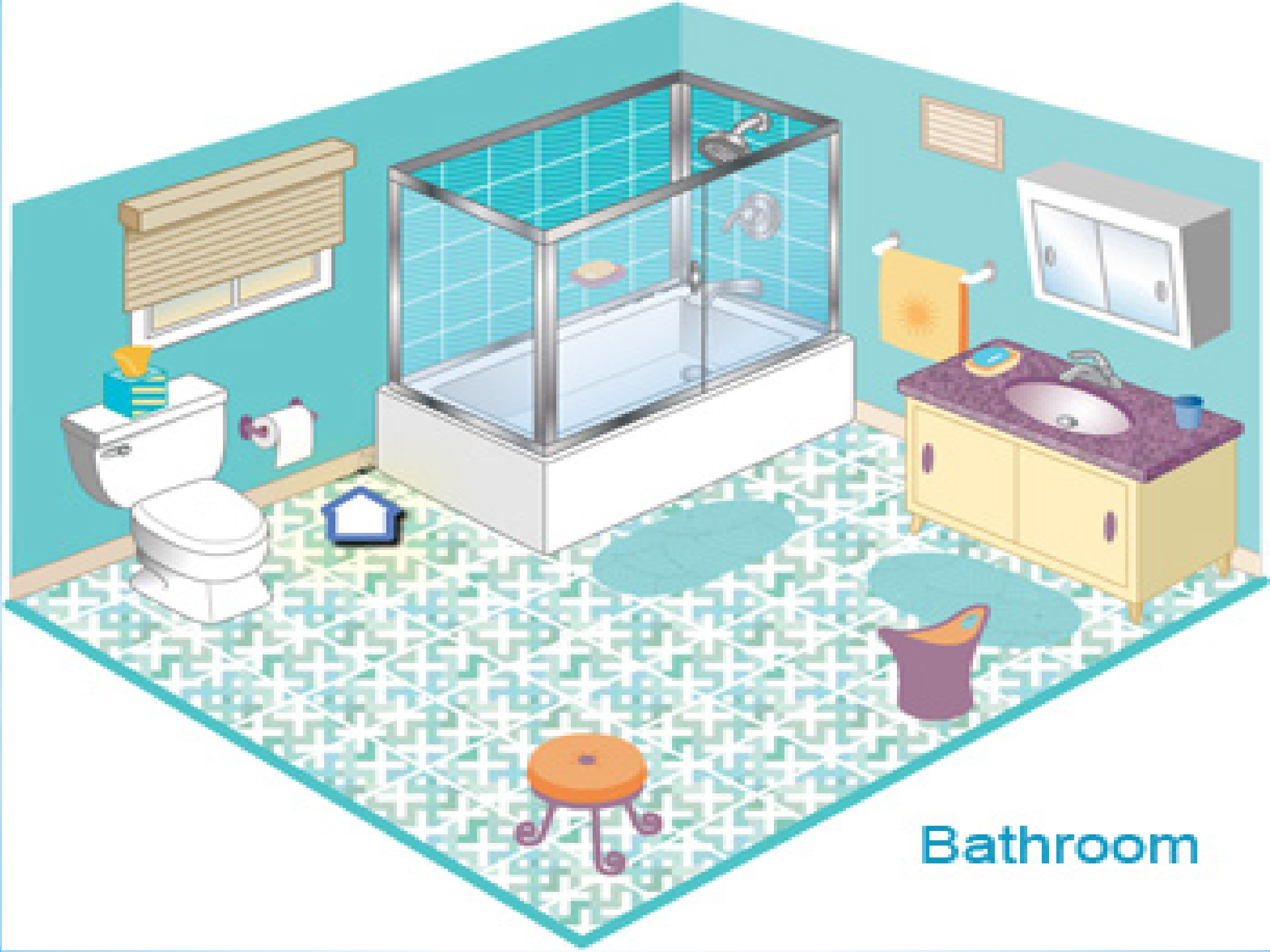




Living Room



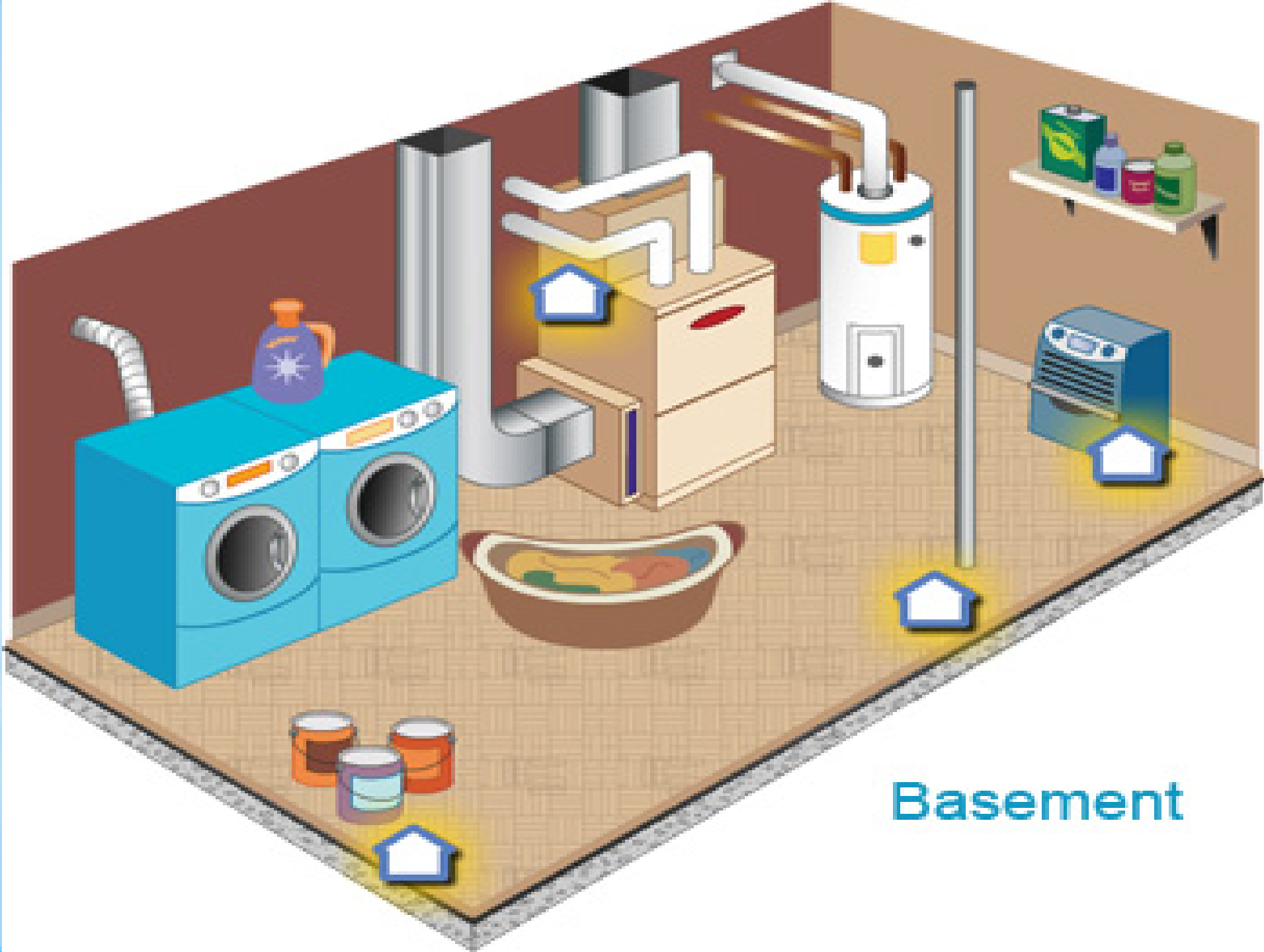
Kitchen



Bathroom



Bedroom



Basement



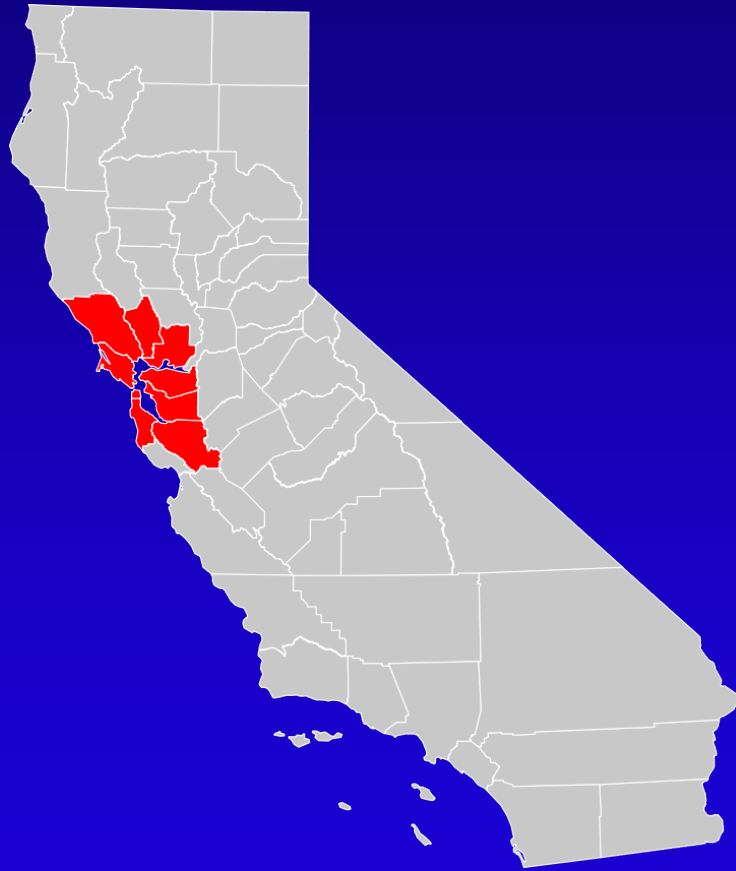
Questions?

Appendix D: Who Could I Ask For Help: Navigating the Government Maze of Environmental Health Agencies

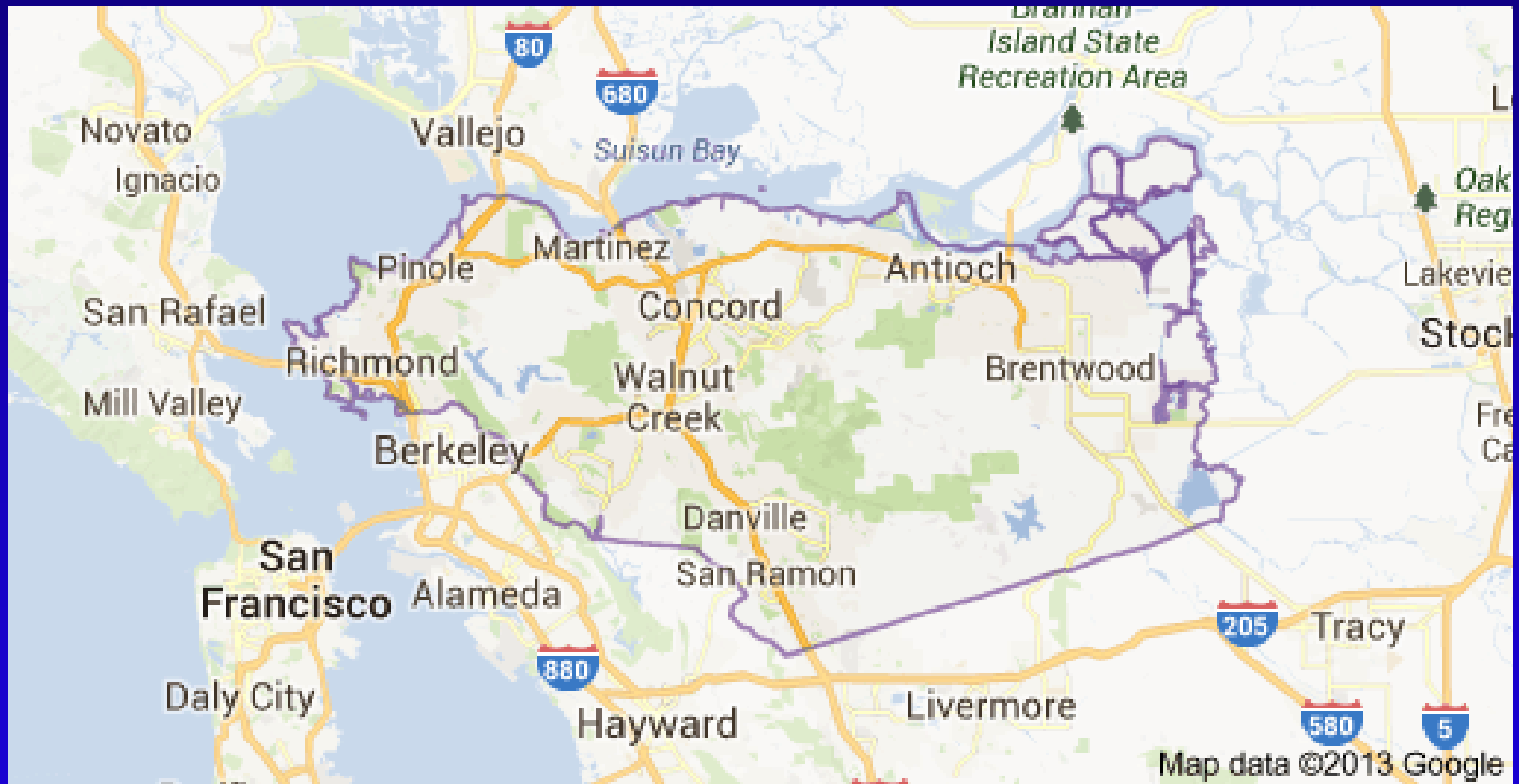
Who Could I Ask For Help?: Navigating The Government Maze Of Environmental Health Agencies

Marilyn C. Underwood, PhD, REHS

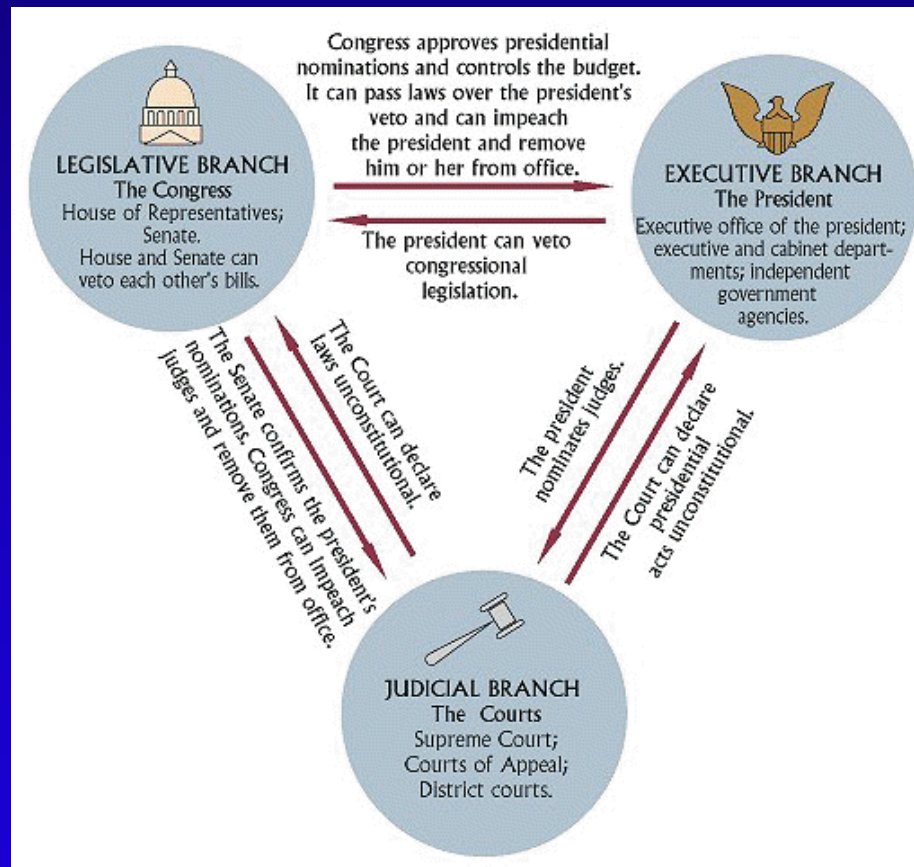
Contra Costa County is Part of the San Francisco Bay Region



Contra Costa County



The Three Branches of Government



Federal Environmental Laws Often Reactionary to Bad Events

- Cuyahoga River burning (1969)
- Drinking water contamination in Minnesota (1972)
- Love Canal (1975)
- Three Mile Accident (1979)
- Clean Water Act
- RCRA (Resource Conservation and Recovery Act)
- Superfund
- Low Level Radioactive Waste Act

Major Federal Statutes for Environmental Protection

- 1. CAA: Clean Air Act
- 2. SDWA: Safe Drinking Water Act
- 3. CWA: Clean Water Act
- 4. RCRA: Resource Conservation and Recovery Act
- 5. CERCLA: Comprehensive Environmental Response Compensation and Liability Act
- 6. SARA: Superfund Amendments and Reauthorization Act
- 7. TSCA: Toxic Substances Control Act
- 8. FIFRA: Federal Insecticide, Fungicide, and Rodenticide Act
- 9. FDCA: Food, Drug, and Cosmetic Act
- 10. CZMA: Coastal Zone Management Act
- 11. ESA: Endangered Species Act
- 12. NEPA: National Environmental Policy Act

Major California Statutes for Environmental Protection

- 1. California Clean Air Act
- 2. Porter-Cologne Act
- 3. Hazardous Waste Control Law
- 4. Hazardous Waste Source Reduction and Management Act
- 5. Toxic Substances Control Act
- 6. Safe Drinking Water and Toxic Enforcement Act (Prop 65)
- 7. California Coastal Act
- 8. California Endangered Species Act
- 9. California Environmental Quality Act

US Environmental Protection Agency- Agency for Toxic Substances and Disease Registry- Region IX



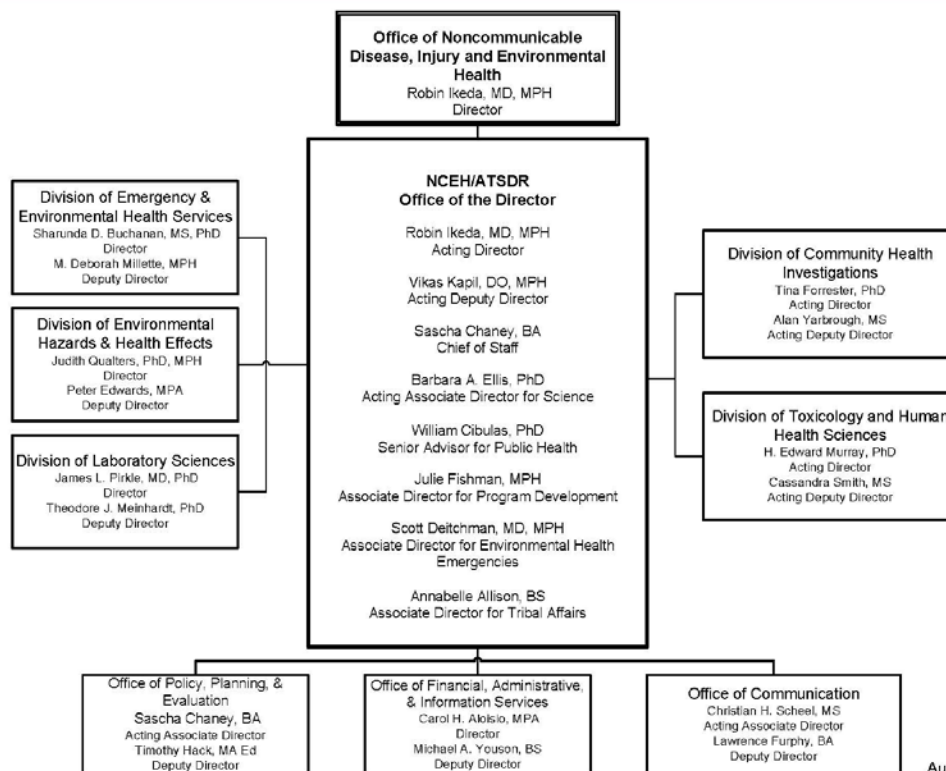
USEPA- Region IX



National Center for Environmental Health and Agency for Toxic Substances and Disease Registry

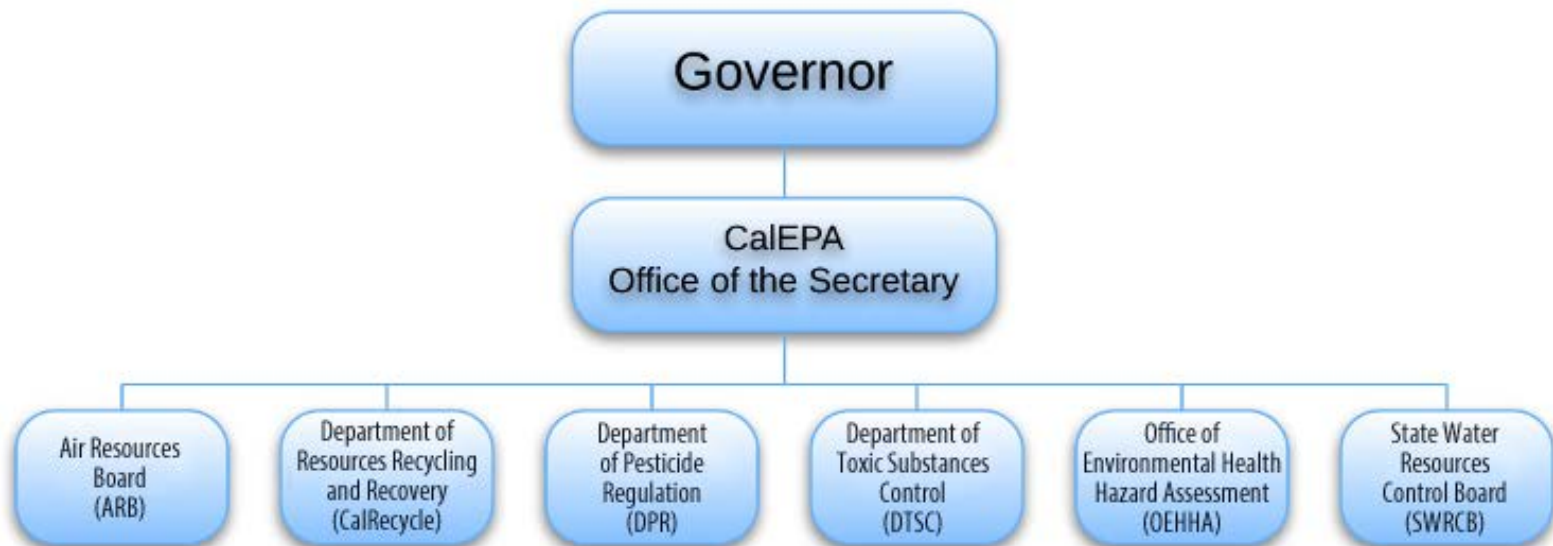


**National Center for
Environmental Health**
Agency for Toxic Substances
and Disease Registry

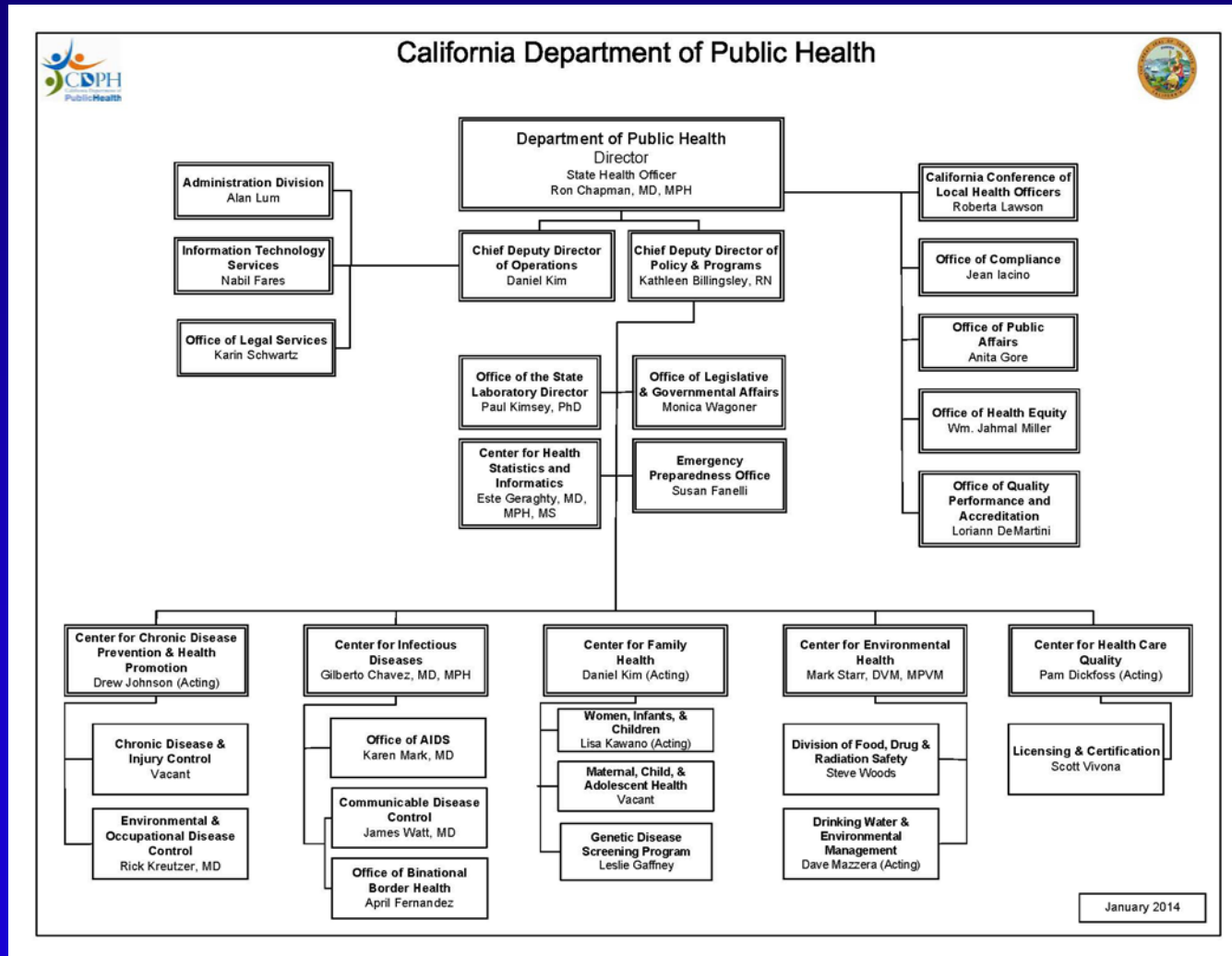


August 2013

California Environmental Protection Agency



Environmental Health/Public Health State Level



Environmental Health Local Level

- 58 counties and 4 cities have a health officer
- Certain state programs may be handled by local jurisdictions
 - Certified Unified Program Agency (CUPA)
 - Local Primacy Agency (LPA) for Drinking Water
 - Local Enforcement Agency (LEA) for Solid Waste and Medical Waste
 - Local Delegation Agency for Site Cleanup

Environmental Health Local Level

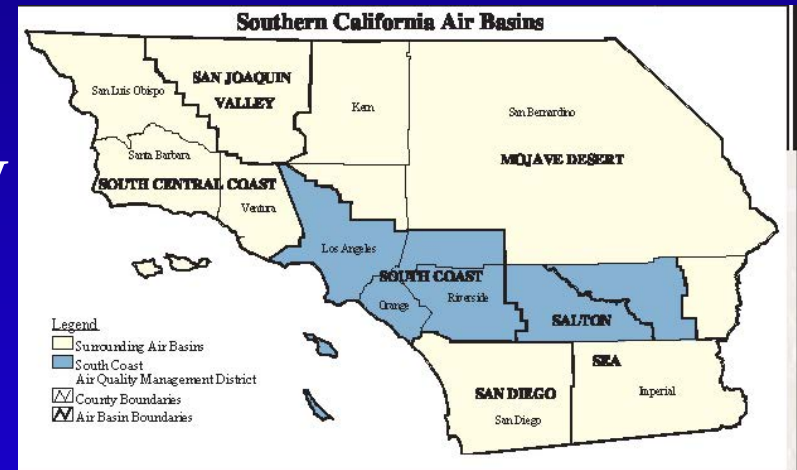
- Health officer or their designee:
 - Food.
 - Housing and Institutions.
 - Radiological health in local jurisdictions contracting with state health
 - Milk and dairy products in local jurisdictions with an approved CDFA program
 - Water oriented recreation
 - Safety.
 - Vector Control.
 - Waste Management.
 - Water Supply.
 - Air Sanitation.
 - Additional environmentally related services and programs as required by the County Board of Supervisors, City Council, or Health District Board.
 - and may include land development and use

Environmental Health/Public Health at Local Level

- Most smaller jurisdictions will have an epidemiologist or public health nurse focusing on infectious disease
- Certain larger jurisdictions may have someone or a group focused on the environmental
 - Los Angeles County has the Toxics Epidemiology Program
 - Contra Costa has a Haz Materials Ombudsman and Committee

Air Quality Complaints

- Contact one of the 34 air pollution control districts in the state
- South Coast Air Quality Management District
 - For odors, smoke, dust, and other air quality complaints, call 800-CUT-SMOG



Air Quality Complaints

- Bay Area Air Quality Management District

- Report Air Pollution 800-HELP-AIR
- Report Exhaust (Smoking Vehicles) 800-EXHAUST
- Report Odor 800-334-ODOR
- Report Woodsmoke 877-4NO-BURN



Contacting USEPA Region IX

- Comments and questions may be submitted to EPA Region 9 staff by completing an online form:

<http://www.epa.gov/region9/comments.html>

- Environmental Information Center can be reached at (866) EPA-WEST
- 24-Hour Environmental Emergencies call (800) 300-2193

ATSDR Petition Process

- Petitioner asks ATSDR in a letter to review information about hazardous substances at a site and evaluate whether exposure to those substances might cause any harm to people
- ATSDR reviews the petition and decides to accept it or not accept it
- If accepted, a team either at the state level or federal, investigates and reports back to the petitioner (and the community)

Cal/EPA Online Complaint System

- Use to report an observation of any activity, conduct or physical evidence that you suspect to be illegal or unauthorized or have knowledge of suspected illegal or unauthorized conduct impacting, or threatening to impact, California's environment or the public health
- Cal/EPA Environmental Complaint Form
http://www.dtsc.ca.gov/database/CalEPA_Complaint/index.cfm

Local Response to Community Concerns

- Via websites:
 - <http://cchealth.org/contact/>
 - <http://cchealth.org/eh/complaint-form.php>
- Direct calls to general office number
- Referred calls from other parts of county
- Referred calls from Board of Supervisors staff
- Direct calls to my office

Land Use- a Vital Environmental Concern

- Land Use generally under local control
 - Cities incorporated area
 - Counties unincorporated area
- Zoning and General Plan are primary tools
- State and federal can get involved
 - Coastline/Wetlands
 - Federal or state-owned lands
 - Protection of farm land

Useful Map Tools

- DTSC Envirostor:
<http://www.envirostor.dtsc.ca.gov/public/>
- USEPA's Toxic Release Inventory
<http://www2.epa.gov/toxics-release-inventory-tri-program>
- CDPH Environmental Health Tracking Program
http://www.ehib.org/page.jsp?page_key=65
- State Water Resources Control Board Geotracker
<http://geotracker.waterboards.ca.gov/>
- CalEPA/OEHHA Enviroscreen
<http://oehha.ca.gov/ej/ces11.html>

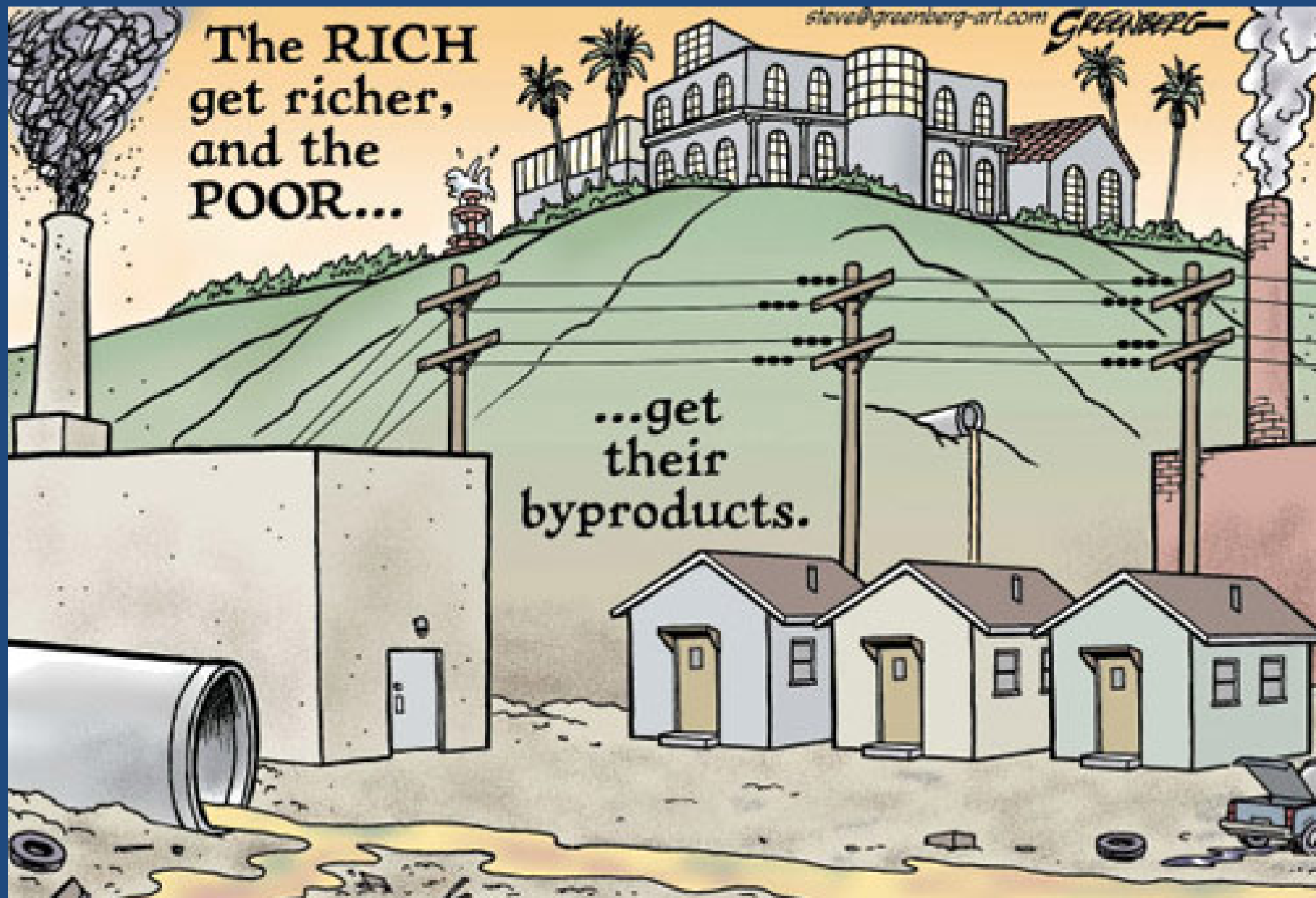
Appendix E: A Community Advocate's Perspective on Navigating the Government Maze

The RICH
get richer,
and the
POOR...

steve@greenberg-art.com

GREENBERG

...get
their
byproducts.





Richmond Southeast Shoreline Area
On Richmond's 32-mile shoreline

© 2008 Europa Technologies

Image © 2008 TerraMetrics

© 2007 Google

Zeneca Site Demolition Derby 2000



Orange Pond

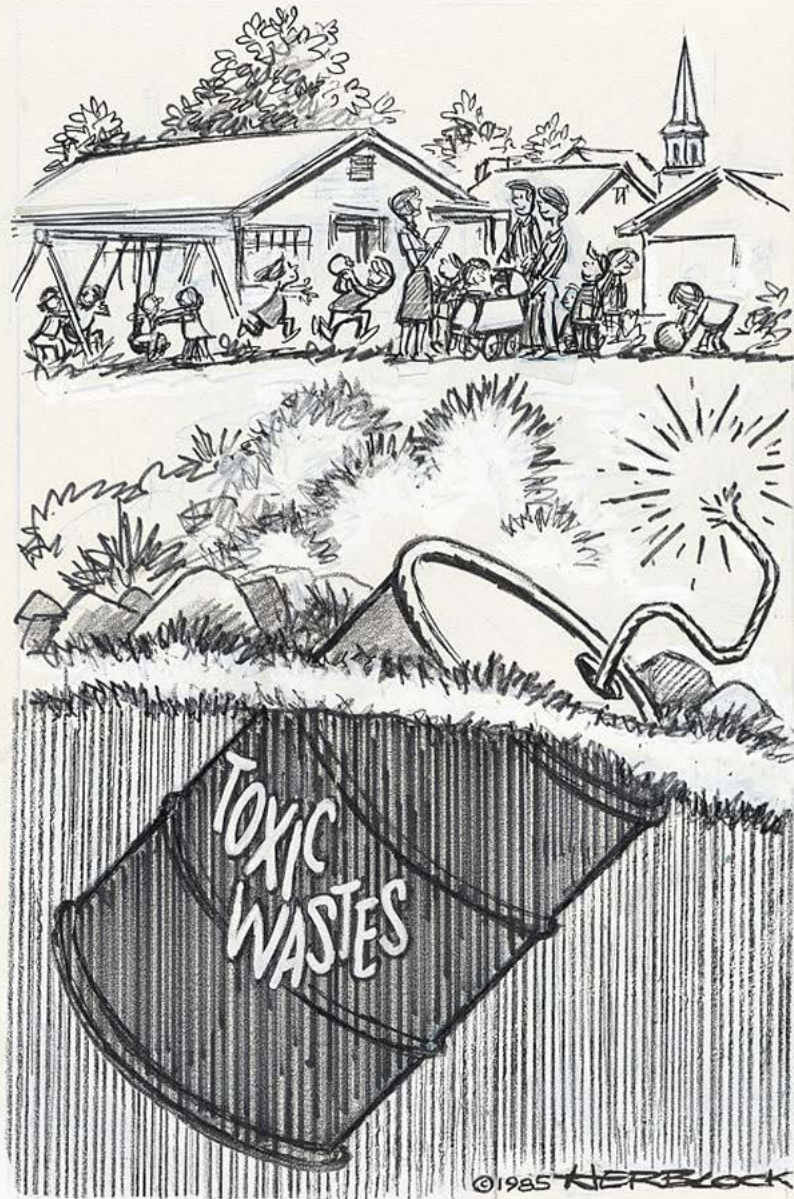


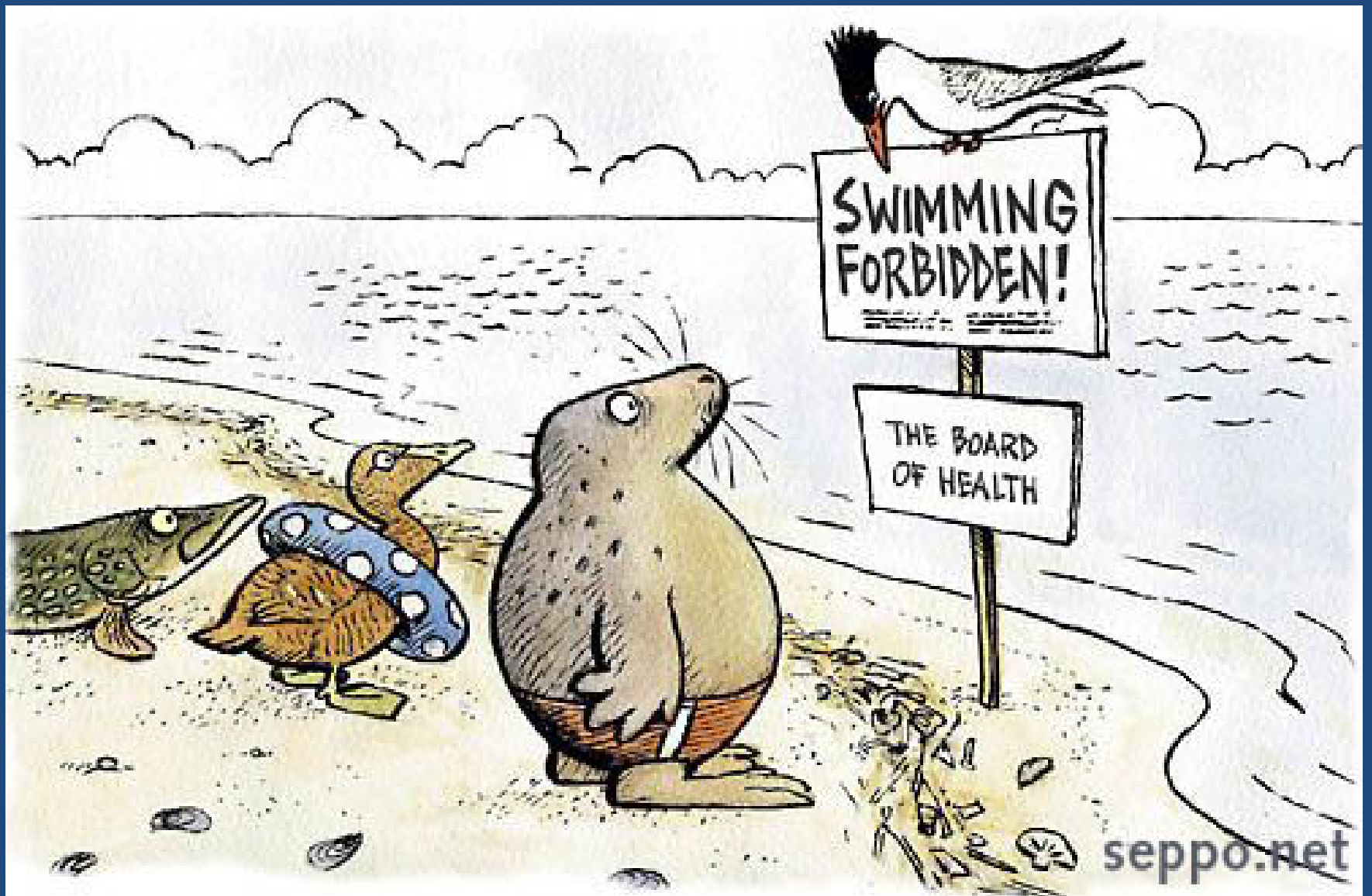
UNIVERSAL PRESS SYNDICATE
©1990 WASHINGTON STAR

Opinion



5/15/85





seppo.net

Appendix F: Understanding and Approaching Unengaged Communities

UNDERSTANDING AND APPROACHING UNENGAGED COMMUNITIES

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OUTLINE

- Defining community
- Factors influencing behaviors
- How organizations interact with communities
- Activity
- Conclusions

WHAT IS A COMMUNITY

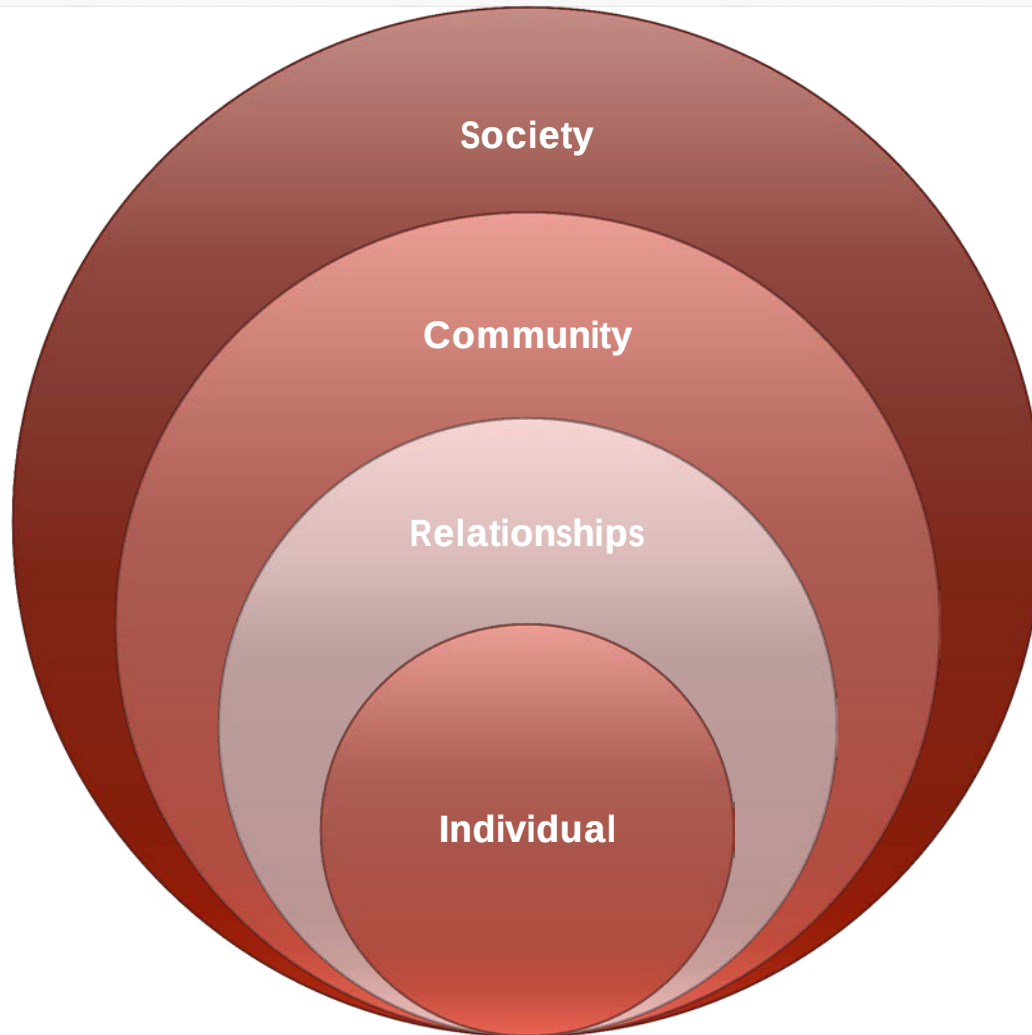
- “a group of people living in the same place or having a particular characteristic in common” – Merriam Webster



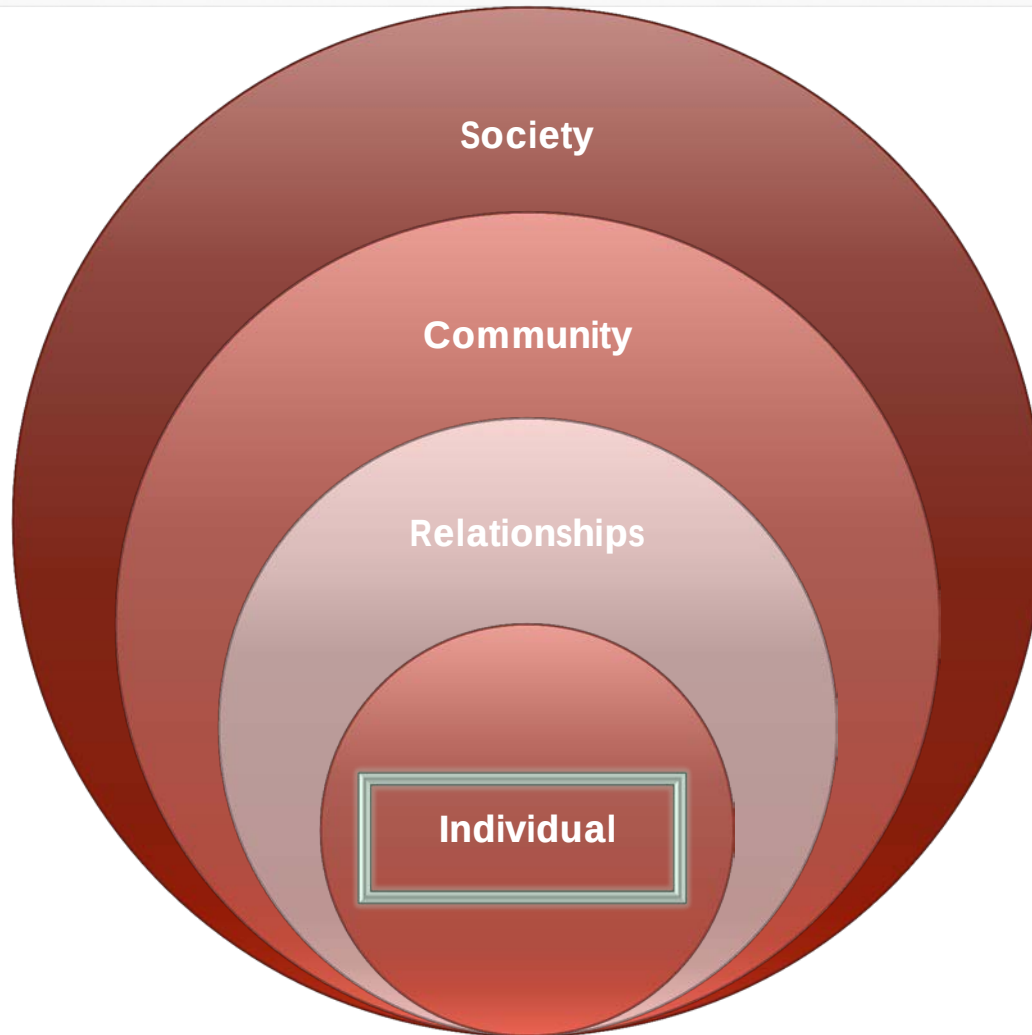
ECOLOGICAL FRAMEWORK

- Allows us to understand why individuals and communities become engaged or not
- Created by Bronfenbrenner (1994)
- Behavior of individual is affected by families, communities and society at large
- Reciprocal relationships

ECOLOGICAL FRAMEWORK



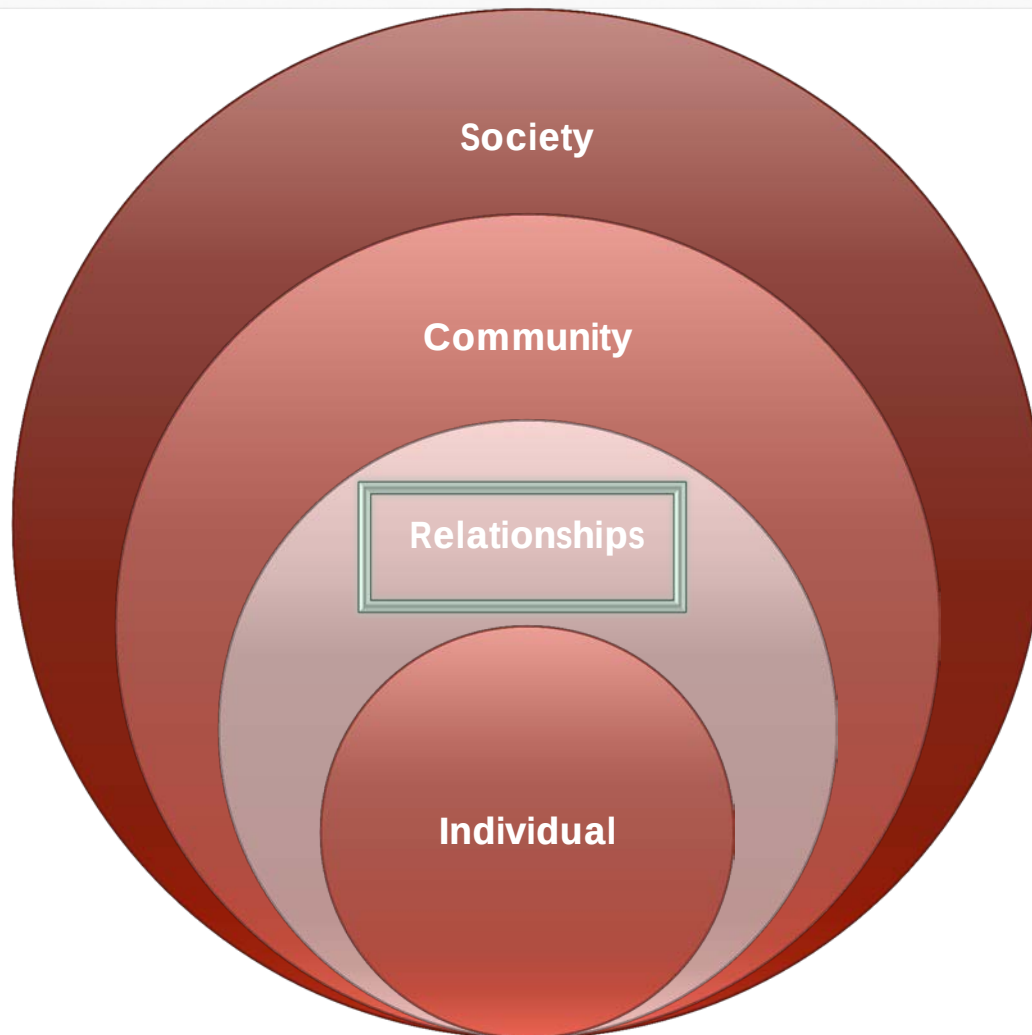
ECOLOGICAL FRAMEWORK: INDIVIDUAL LEVEL



ECOLOGICAL FRAMEWORK: INDIVIDUAL LEVEL

- First level
- Refers to everything that exists within the individual:
 - Beliefs
 - Attitudes
 - Perceptions
 - Previous experiences
 - Gender
 - Race
 - Religion

ECOLOGICAL FRAMEWORK

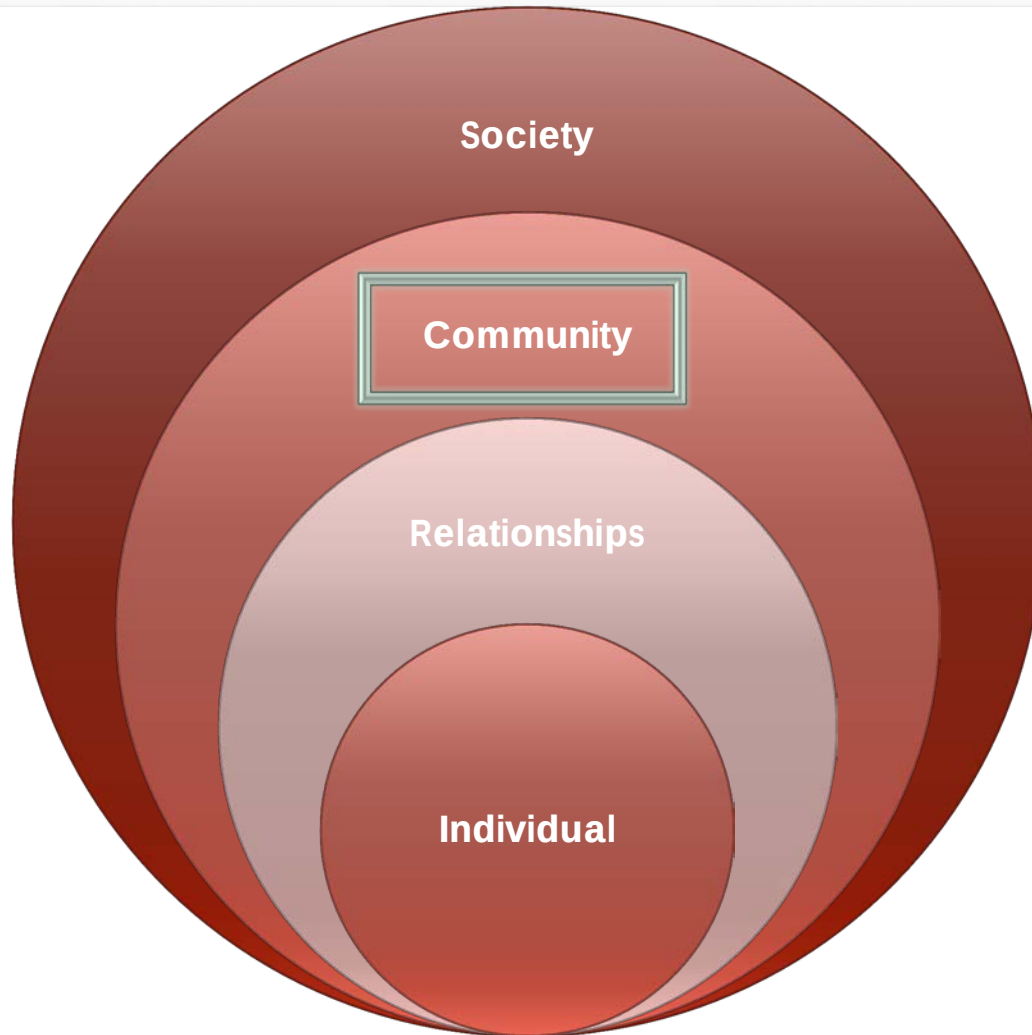


ECOLOGICAL FRAMEWORK: RELATIONSHIP LEVEL

- Second level
- Refers to relationships between individuals
 - Romantic partnerships
 - Friends
 - Family
 - Co-workers and colleagues



ECOLOGICAL FRAMEWORK

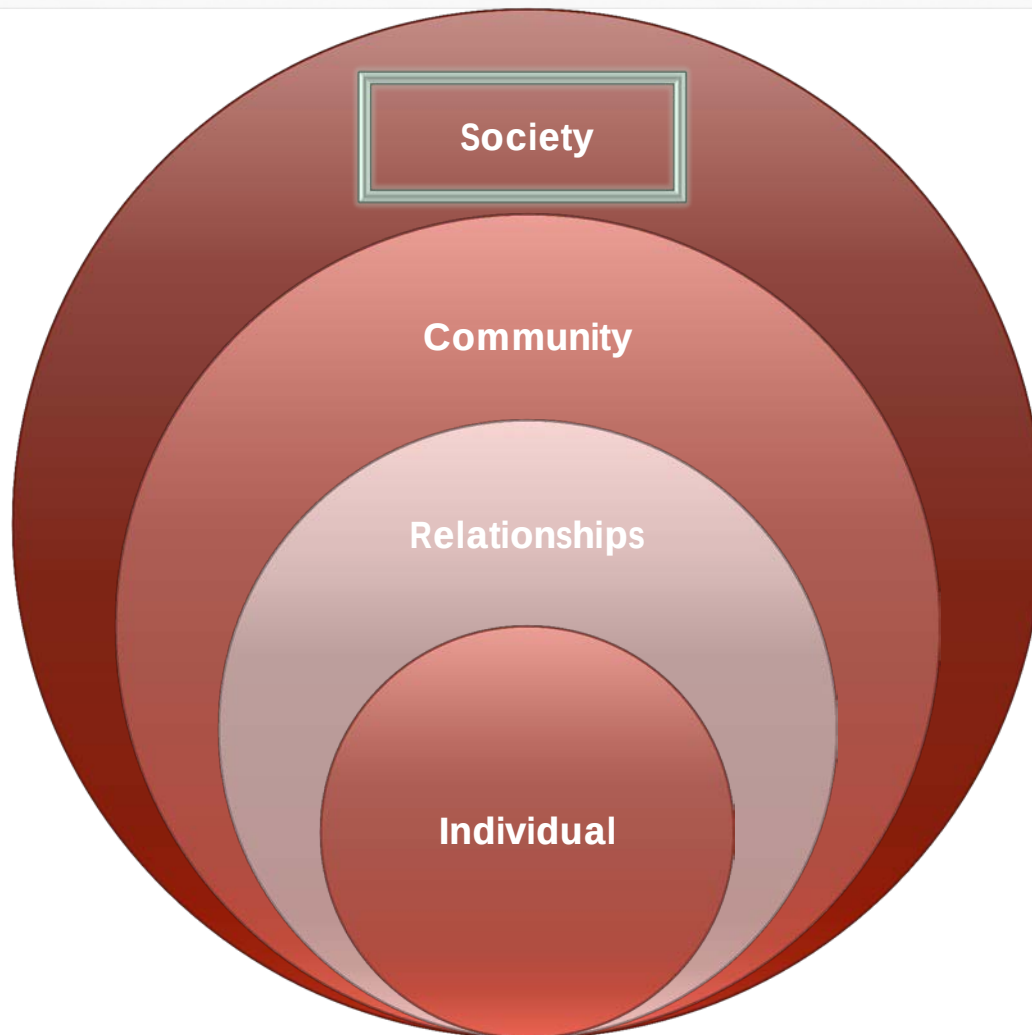


ECOLOGICAL FRAMEWORK: COMMUNITIES

- Third level
- Refers to the community and institutions that exist within it
 - Neighborhoods
 - Schools and other government offices
 - Businesses
 - Workplaces



ECOLOGICAL FRAMEWORK: SOCIETY



ECOLOGICAL FRAMEWORK: SOCIETY

- Fourth level
- Refers to laws, norms and systems
 - Economic system
 - Laws and regulations
 - Values
 - Racism, sexism, homophobia etc.



HOW ORGANIZATIONS ENGAGE COMMUNITIES

- We represent organizations that want communities engaged
- We want them to identify problems and/or react to the problems to we have identified
- This normally means we want individuals and communities to “do something”
- There are distinct approaches to attempting to engage communities

HOW ORGANIZATIONS ENGAGE COMMUNITIES: AS EQUAL PARTNERS

- Communities and experts work together to identify problems and solutions
- Organizations can offer suggestions, but ultimately respect the wishes of communities



HOW ORGANIZATIONS ENGAGE COMMUNITIES: AS UNEQUAL PARTNERS

- Organizations identify problems for communities
- Communities can offer suggestions, but ultimately organizations are limited by their missions, authority or expertise



ACTIVITY

- Examine the following scenarios
- Determine the engagement of the community to a specific health problem. Is the community response appropriate?
- How would you intervene/help this community to promote engagement? (If at all)
- What are the potential barriers you could potentially encounter or have to overcome?

SCENARIO 1: VACCINATIONS

- Communities of predominately wealthy parents are refusing to vaccinate their children.
- There is the widespread fear that vaccinations cause more diseases than they prevent.
- Parents have mobilized and are actively promoting their views.
- The overwhelming majority of the scientific community disagrees with their views.



SCENARIO 2: NUCLEAR REACTORS

- Communities surrounding nuclear reactors are generally ambivalent to their nuclear neighbors.
- Industry experts and politicians promote reactors as an effective means of energy production.
- A few experts see potential dangers to nuclear reactors, but they do not have a wide platform.
- Public programs have limited ability to mitigate risk.



SCENARIO 3: SMOKING BANS IN MULTIUNIT HOUSING (MH)

- Experts have identified smoking in MH as health risk .
- Organizations have outlined specific pathways for banning this practice.
- Several complexes and homeowners associations have successfully banned the practice .
- Many roadblocks to passing municipality level policies.



CONCLUSIONS

- Communities are unengaged for many reasons.
- We can approach communities in different ways to get them engaged.
- We must balance what the community thinks is important and what we think is important.

Appendix G: Feedback



Stakeholder Roundtable 2014

Feedback Evaluation

- 23 people participated in the roundtable
- 12 of the attendees were community advocates , 7 were CDPH staff, and 4 were representatives of other government agencies
- 11 of the community advocates that participated in the Roundtable completed an evaluation
- 73% of the community advocates that attended the meeting provided written feedback

How effective was the Roundtable at describing healthy housing and indoor air quality?

Total respondents: 91%

Rating	Response Percentage
Very Effective	80%
Somewhat Effective	20%
Somewhat Ineffective	
Not at all Effective	

How effective was the Roundtable at providing an overview of the environmental health government agencies?

Total respondents: 91%

Rating	Response Percentage
Very Effective	70%
Somewhat Effective	20%
Somewhat Ineffective	10%
Not at all Effective	

How effective was the Roundtable at providing the testimony and the advice of a community advocate navigating the maze of environmental health agencies?

Total respondents: 100%

Rating	Response Percentage
Very Effective	82%
Somewhat Effective	18%
Somewhat Ineffective	
Not at all Effective	

How effective was the Roundtable at providing an opportunity to dialogue about understanding and approaching unengaged communities?

Total respondents: 91%

Rating	Response Percentage
Very Effective	60%
Somewhat Effective	20%
Somewhat Ineffective	20%
No Opinion	



Stakeholder Roundtable 2014

Feedback Evaluation

Did the roundtable provide an opportunity to express your opinions and ideas effectively?

Total respondents: 91%

Rating	Response Percentage
Yes	100%
No	

Comments:

- "I had an opportunity to share. Presenters were receptive"
- "Healthy housing and indoor air quality"
- "Great respect shown to each individual"
- "A good size (#) for the roundtable"
- "The environment was inviting and a safe place to express ideas and ask questions"
- "Good time for exchange"

Did you gain professional or personal knowledge or other value from your participation in the roundtable today?

Total respondents: 91%

Rating	Response Percentage
Yes	100%
Some	

Comments:

- "I had a chance to hear the experience of others that helped me see hope in the work I'm doing"
- "Yes, especially on superfund"
- "Gained a better understanding of how to navigate the bureaucracy"
- "All the presentations were outstanding. I learned many things that I will take back to my community"
- "The presentation on indoor air quality was interesting and encouraged me to research this topic further and bring it back to my community"
- "Interacting and community"

What do you see as the most important results or outcomes of the roundtable?

- "More informed community advocates"
- "Hector's presentation"
- "Knowledge of navigation"
- "Networking- talking to community leaders"
- "The relationship building, getting to meet others from community to state and federal organizations"
- "ATSDR's participation"
- "It inspired me to do deeper research and not be clouded by emotion"
- "Friendly dialogue with stakeholders- stronger relationships and greater trust"
- "Meeting CDPH staff that can help us navigate the public health system"



Stakeholder Roundtable 2014

Feedback Evaluation

Please list any additional thoughts you have that were not captured by today's process:

- "Sherry's story was very moving and inspirational"
- "I would have liked more time prioritizing sites where ATSDR can study"
- "Excellent planning"
- "Thank you for providing a forum for a well-told community story by Sherry Padgett"

Appendix H: Attendees List

Registration - 2014 Stakeholder Roundtable

Last	First	Title	Organization
Agbahiwe	Chioma	Community member	Black Community Health Task Force
Aguilar	Edgar	Program Manager	Dignity Health Hospitals
Alcalá	Héctor	Doctoral Student	UCLA
Bartlett	Russell	Health Assessor	California Department of Public Health
Chevez	Armando	Health Assessor	California Department of Public Health
Edmonds	Lynn	Executive Director	One Step A La Vez
Knowles	Robert	Sr. Regional Representative	Agency for Toxic Substances and Disease Registry
Kreutzer	Rick	Chief, DEODC	California Department of Public Health
Kwon	Danny	Health Assessor	California Department of Public Health
Olmedo Velez	Luis	Executive Director	Comite Civico del Valle, Inc.
Padgett	Sherry	Community Advocate	Bay Area Residents for Responsible Development
Palate	Nancy	Health Educator	California Department of Public Health
Perez	Lourdes	Program Coordinator	Ceres Partnership for Healthy Children
Rayman	Jamie	Health Educator	Agency for Toxic Substances and Disease Registry
Rojas-Cheatham	Tivo	Chief, Health Education and Public Participation Section	California Department of Public Health
Romero	Graciela	<i>Promotora (Bay Area/Northern California)</i>	Vision y Compromiso

Registration - 2014 Stakeholder Roundtable

Last	First	Title	Organization
Ruiz	Jose Ernesto	Promotor (Tulare)	Tulare County Public Health Department
Smith	Ernie	Professor of Medicine and Clinical Linguistics	Charles R. Drew University of Medicine and Science
Tasnif-Abbasi	Maryam	Brownfields Coordinator	DTSC
Thomas	Bonita	Graduate Student	Pacific Oaks College
Underwood	Marilyn	Environmental Health Director	Contra Costa County
Uribe	Luis	Promotor (Santa Barbara)	Vision y Compromiso
Windgasse	Gabriele	Chief, Site Assessment Section	California Department of Public Health