



*The League of Women Voters of Oregon is a 101-year-old grassroots nonpartisan political organization that encourages informed and active participation in government. We envision informed Oregonians participating in a fully accessible, responsive, and transparent government to achieve the common good. LWVOR Legislative Action is based on advocacy positions formed through studies and member consensus. The League never supports or opposes any candidate or political party.*

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To: Oregon Department of Environmental Quality  
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Portland, OR 97232  
Email: [CAOCommunity@deq.state.or.us](mailto:CAOCommunity@deq.state.or.us)

Re: Comments on your draft Community Engagement Toolkit

The League of Women Voters of Oregon adopted positions related to Air Quality in 1968. Since that time, we have engaged with the Dept. of Environmental Quality and the State Legislature on policies to protect Oregon's air quality including engaging in your Cleaner Air Oregon program.

Thank you for developing a guide for including public participation in your CAO program. We all hope that incorporating community voices will go a long way toward improving the lives of those most affected by toxic air contaminants.

You are working from an admirable vision statement. We applaud your intentions to make community participation flexible and appropriate for differing circumstances. The language of the toolkit seems to be all that we would wish for.

Our worry is that the implementation will fall short of the goals. Here are some specific concerns:

1. You state: *Early community assessment is encouraged to allow sufficient time to complete it comprehensively and collaboratively, and to predict community engagement resource needs. The assessment should be completed by the time DEQ approves a facility's emissions inventory.*

This is a key element. In early roll-outs, this seems to be a problem. Community involvement needs to be sought from the earliest stages of the risk assessment process. It takes time to mobilize a community. Often, community leaders are the ones with intimate, on-the-ground knowledge of an area, the ones who could point out elements missed by the EJSCREEN.

2. One of the Key Principles is to “*make it easy for communities to engage through structured, deliberate processes*”. For EJ communities, the ability to do so is in short supply. In the Community Engagement Assessment, Step 8, you state: *Consider the following practices to remove barriers to meaningful engagement:*” Among the stated considerations are:
  - *Plan your meetings and outreach so that they are accessible to as many community members as possible.*
  - *Hold meetings at locations that are close to transit lines.*
  - *Post hard copies of materials at local community centers and libraries.*
  - *When possible, provide food and childcare free of charge at public meetings.*
  - *Hold meetings at times when more people might be available to attend (such as the evening or weekend).*

These are critical points. Without them, participation would be out of reach for many. Can these sorts of

practices be made standard rather than considerations? How can they be funded for an agency that is already spread so thin for both dollars and staff resources? Have you considered assessing higher community engagement fees to make more of this possible?

Additionally, communications and alerts to the community need to be completed throughout the process. Information shared needs to be timely and updated frequently. Public access needs to be provided for all documents that a facility is required to submit, without requiring the submittal of public records requests. Community members should not be expected to continually check websites for updates, and plans for the community engagement process should be transparent and accessible as well.

3. EJTF values call for “*ensuring that impacted communities have both the technical ability and the resources to meaningfully participate.*” These are things desperately needed. How does that get achieved? What kind of technical ability and resources is the CAO prepared to offer? Is it possible to provide internet access for those without it? Again, how can this be put into concrete language and actions going forward? How can you ensure that the process isn’t allowed to work differently in wealthier neighborhoods?
4. The process says: *If EJSCREEN outcomes are close to designated thresholds (80th percentile for EJ Index and Environmental Indicators; 60th percentile for Demographic Indicators), cross-reference findings with other data sources (such as [US Census data](#) or the [University of Wisconsin’s Neighborhood Atlas](#)) to inform a better understanding of the community. Report your findings from this additional research in the space below.*

This needs to be done with on-the-ground analysis, not solely by using data tools in an office. Key community leaders with strong knowledge of the area need to be sought out and consulted.

5. *Raise the community engagement tier by one level if facilities posing potentially higher risk for toxic air contaminants are located within 1.5 miles of this facility or are known to have an impact on the assessed community.*

Would that 1.5-mile rule be sufficient to account for factors such as prevailing winds or terrain that might multiply the effects of local air contaminants? Does this language capture the potential for a concentration of facilities to produce an undue health risk, whether those facilities are *known* to have a risk or not? Can this reflect the best computer modeling to capture this?

6. In the Community Engagement Assessment, Step 3: *Assess the facility’s history and profile within the community. Answer the following questions to the best of your ability. This may require consultation with DEQ regional staff, DEQ permit writers, DEQ compliance staff, CAO technical teams, DEQ Regional Solutions staff, Oregon Health Authority, local public health agencies, **or other individuals who have insight into the facility’s history or relationship with DEQ and the surrounding community.** Consultation with these stakeholders is imperative to accurately understanding and assessing these community engagement factors.*

This bolded statement seems to bury an important factor in clear and necessary understandings. The decision-makers must seek out and facilitate the involvement of those potentially affected.

7. In the Community Engagement Assessment, Step 3, Table 1, Questions 4 and 5 ask: *Is there a history of complaints about this facility, including complaints about nuisance odors or noise?* and *Have community groups, elected officials, tribal representatives, or media expressed interest or concern with this facility?*

Sometimes these things aren’t known or articulated. There may be just a foul odor, headaches or other symptoms. Those who experience those may not know why, or what the source may be. It requires time and some knowledge to know how to complain.

While this is a worthwhile question in a correct place to assess a given facility, what measures could be put in place to assist a beleaguered community so that members are educated about this, acquire that kind of awareness, and know where and how to complain? It may be easy to overlook a source that is a health risk without that.

8. On page 13 of the Toolkit, it states: *DEQ has the authority to require source tests. In special circumstances, communities may ask that DEQ require a facility to source test. **Requestors must demonstrate a capacity to analyze an emissions inventory and identify areas for improvement, which may require expert technical consultation.** On facility web pages, communities can view DEQ letters requesting source testing, as well as the source testing results.*

How are you prepared to help disadvantaged communities to acquire such capacity? This is another area where wealthy communities may be able to obtain results that are out of reach for others.

9. In the EJSCREEN, Step 4 is to assign a Community Engagement Tier. *“This decision should be made collaboratively and by considering the number of questions with “yes” answers in Table 1 of the Community Assessment Template.”* Tier 1 is designated *“communication only”*.

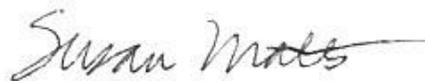
How can the tier designation be made collaboratively if there is only communication without meeting and input planning?

Thank you for the immense work and thought that this Community Engagement Toolkit obviously entails. The goals and intentions are laudable. We can all hope and plan that, over time, the actions laid out in this document will lead to true trust, knowledge, and collaboration.

Thank you for your work and for being committed to protecting public health.



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