### Community Action for a Renewed Environment

### **PROMOTING HEALTHY COMMUNITIES**

### **September 26, 2011**



## What is CARE?

CARE is a community-based, community-driven program created to build **partnerships** to help **communities** understand and reduce risks from all sources of pollution using grant funding and technical assistance.





### The CARE Process

CARE helps communities access technical support and build capacity to reduce toxics through collaborative action at the local level. CARE helps communities:

- Join together in partnerships with local government, organizations and industry.
- Develop a comprehensive understanding of the sources of environmental pollutants and set local environmental priorities;
- (3) Carry out projects to reduce risks through collaborative action at the local level, and
- (4) Ensure self-sustaining partnerships and capabilities so that it leaves behind organized stakeholder groups and a structure to continue to improve human health and the local environment.





# CARE's Origin

- CARE launched in 2005, influenced by a number of factors:
  - **NAPA evaluations**: Need changes to "stovepipe structure," need cross-media, better efforts in communities.
  - **Low-income communities**: EPA regulations and programs were NOT impacting local (their) pollution problems, and not addressing small and diverse area sources.
  - 2004 NEJAC: EPA should "initiate community-based collaborative, multi-media, risk –reduction pilot projects" in EJ communities.
  - Build on Success. Success with regional CARE-like projects to give targeted assistance to high-risk communities; Lessons learned from CBEP, Targeted Watershed, EJ, P2



# **Strong Support for CARE**

### NAPA Report May 12, 2009:

- *"CARE complements EPA's traditional regulatory and enforcement efforts to provide additional targeted assistance to communities at highest risk."*
- *"The CARE partnership engages the energy of the community and the expertise of EPA to identify and reduce pollutants..."*
- *"CARE makes EPA more responsive to communities needs and priorities through an emphasis on community-driven priorities."*

### **NEJAC Letter to Administrator:**

- *"CARE has already proven to be a high quality community tool that supports environmental justice"*
- "...CARE Program is a community tool (EJ communities) need"
- *"NEJAC is compelled to advise and encourage expansion of and increased funding for the CARE program by your Agency."*

### **Community Support:**

- "CARE has given us a voice"
- "There would have been virtually no progress without the CARE partnership"



### A Report by a Panel of the NATIONAL ACADEMY OF PUBLIC ADMINISTRATION

### Putting Community First: A Promising Approach to Federal Collaboration

for Environmental Improvement An Evaluation of the Community Action





### From 2005-2009 CARE Communities Have:

- Leveraged dollar-for-dollar EPA grant funding.
  - Communities leveraged over \$15M from local and national sources.
  - Received in-kind donations of an additional \$2M.
- Engaged over 1,700 partners in local projects (local organizations, businesses, local and state agencies, universities, foundations, federal agencies).
- Visited over 4,000 homes providing information and/or environmental testing
- Provided environmental information to:
  - Over 2,800 businesses
  - Over 50,000 individuals
  - Engaged over 300 schools, 6,300 youth



# **CARE Level I Projects**

- Portland, ME (2010)
- Wichita, KS (2008)
- Spokane, WA (2007)
- All three communities had a community driven process and gathered data from multiple sources (local, state, and federal)



## Portland, ME

- Project served City of Portland (62, 561)
- Utilized CARE 10-step Roadmap (<u>http://www.epa.gov/care/library/20080620roadmap.pdf</u>)
- Employed community health outreach workers to help facilitate data collection.
- Outreached to harder-to-reach population.
- Brainstormed /Identified multiple environmental concerns
- Selected issues that resonated in every focus group



### Portland, ME – Priorities

- Ranked and prioritized by environmental media by sensitive population, high mortality health effects, etc.
- Water: Contaminant spread due to flooding, runoff/sewage overflow, and illegal dumping into sewers
- Air: Emissions from idling vehicles and human exposure to common chemicals
- Land: Household/consumer safety, lead paint and soil contamination, reduced open green space, and bike safety.



# Wichita, KS

- Project serving inner-city Wichita (200,000)
- Utilized the Nominal Group Technique (a process allowing for group brainstorming and participation from everyone)
- Generated a community driven a 92-page list of local environmental concerns after 52 discussion groups
- Prioritized 19 concerns, using a zero-to-five scale, in terms of risks to the environment, health and economy; urgency for action, and the perception of community interest in addressing each issue



### Wichita, KS -- Priorities

- Established 25-member Environmental Leadership Council with three sub-committees—Air, Water and Waste—that categorized the 92 pages of local environmental concerns into 19 issues
- 19 issues were reduced to 3 concerns for addressing in CARE Level II as:
  - Poor waste management
  - Pollution in the Arkansas River
  - Mobile source air emissions



### Spokane, WA

- Project served Spokane County (425,000)
- Utilized Protocol for Accessing Excellence in Environmental Health (PACE-EH) <u>http://www.cdc.gov/nceh/ehs/CEHA/background.htm</u>
- Developed "issue profiles" on identified data and presented community health indicators at project meetings to help understand and locate corresponding data <u>www.communityindicators.ewu.edu</u>
- Included most vulnerable community members by targeting families at high risk of childhood lead poison (e.g., families in poverty, household income, and age of home)



### Spokane, WA - Priorities

- Identified and grouped environmental risks by built environment, land use, water, food, indoor air, and air toxics. The decided priorities were:
- Built Environment (included land use)
- Indoor Environment -- Lead
  - Tested 820 kids with 11% exhibited elevated blood lead levels
  - Educated 1300 families on health effects, exposure factors and symptoms
- Water Quality



# Thank You!

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Spokane: Sally Hanft (hanft.sally@epa.gov)

CARE Co-Chair: Marva E. King (king.marva@epa.gov)

See CARE Website: http://www.epa.gov/care

