June 2, 1999

Dr. Max Lum, Co-Chair, Risk Communication and Education Subcommittee
Environmental Health Policy Committee, and
Director of Health Communications
National Institute for Occupational Safety and Health
Directors Office
200 Independence Ave., SW
Humphrey Building
Room 317B
Washington DC 20201

Dr. Tim Tinker, Co-Chair, Risk Communication and Education Subcommittee
Environmental Health Policy Committee, and
Agency for Toxic Substances and Disease Registry (ATSDR)
1600 Clifton Rd
MS E60
Atlanta, Georgia 31333

Dear Dr. Lum and Dr. Tinker,

The Children’s Health Protection Advisory Committee (CHPAC) of the United States Environmental Protection Agency (EPA) appreciates the opportunity to comment on the Six Guiding Principles for Communicating Children’s Environmental Health and Safety Risks. The Advisory Committee applauds the Subcommittee in its effort to address risk communication on this very important topic. The current document builds on existing research, covers many of the important topics, asks many appropriate questions, and potentially addresses a real need. However, this document appears to have a broad application to risk communication in general rather than to the specific challenges of communicating children’s environmental health risks.

Overall, the document tends to weigh heavy in the area of personal responsibility (primarily parental) for improving children’s environmental health. Community initiatives, public policy, regulations, industrial and municipal practices have an equal responsibility for improving children’s environmental health and could be highlighted in the Six Guiding Principles.
The document does not clearly note its intended audience nor does it include a clearly stated goal. We recommend that the Subcommittee targets these very important principles to the wide range of people who have opportunities to communicate about children's environmental health and safety risks to different populations.

Other comments are as follows:

1. The introduction speaks briefly about children's environmental health. More information about the specific concerns would be very helpful;

2. Framing the topic (risk communication) as a tool for promoting pollution prevention activities and as a way to minimize harmful health impacts would make the document user-friendly;

3. A wider selection of other general risk communication documents could be included in the bibliography;

4. An annotated bibliography could include case studies of risk communication that lead to behavior change;

5. The *Six Principles* could be re-ordered to reflect an order of importance (e.g. the fifth principle could be listed first). Dividing the sixth principle into several steps would also be useful;

6. Different audiences (e.g. urban vs rural) may require different and multiple strategies. This could be highlighted throughout the document and in particular in the first paragraph of Principle 5.

7. The current wording implies that printed materials are the primary method of communicating children's health risks to all sub-populations. A more appropriate approach might be one that recognizes printed materials as only one of the many methods for effective risk communication. For example, experience with farm workers suggests that direct one-on-one communication that is reasonably short, educationally appropriate for the literacy level, and interactive has a positive effect in changing behavior. In addition, communicating via radio has been shown to be very cost effective and is broad enough in range that it can reach a variety of sub-populations. Approaches such as these respect local history, cultural values, and acknowledge community residents and groups as full partners in the development of a risk communication strategy;

8. Cultural factors should be considered as conditions for, not obstacles to, effective risk communication strategies;

9. Techniques such as "active listening" and "focus group" discussion analysis could be noted as some of the important tools that can be used for developing effective risk communication strategies;

10. State and local health officials are heavily involved in communicating risks to the public and could be included in the *Six Principles*. 
Finally, the Committee thought that a practical checklist for communicating effectively about children’s environmental health risks would be most useful. The Committee expressed interest in reviewing such a checklist should the Subcommittee decide to act on this recommendation.

Thank you for your time and effort in compiling the *Six Principles*. We look forward to the next draft of the document.

Sincerely,

J. Reut Reigart, MD  
Chair, Children's Health Protection Advisory Committee

JRR/pc