US ERA ARCHIVE DOCUMENT

Border 2012 Environmental Health Work Group Meeting



National Coordinators Meeting

May 23nd 2007 San Antonio, TX

Agenda

- Status:Border 2012/EHWG Goals and Objectives (H. Zenick)
- Operational Structure A New Approach (R. Alatorre)
- EHWG- Border Indicators Task Force Interaction
- Open Discussion

EHWG Border 2012 Goals/Objectives

1. AIR: evaluate <u>respiratory health</u> <u>indicators</u> in children to assess air quality improvements in border communities.

Status: Underway

2. WATER: evaluate **gastrointestinal illness indicators** to assess water quality improvements in border communities.

Status: Underway

3. PESTICIDES:

- complete an assessment and pilot program to determine the feasibility of a binational system for reporting acute pesticide poisonings

Status: To begin 2007

- reduce pesticide exposure by educating farm workers on pesticide risks and safe handling, including ways to reduce home exposure

Status: Ongoing

4. CAPACITY BUILDING:

- establish a "distance-learning", post-graduate degree program to support advanced training on environmental health

Status: Ongoing

- extend current efforts in binational **environmental health training** for 100 health care providers each for pesticides and water.

Status: Completed through Health Resources Service Administration agreement

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EHWG Traditional Working Model

- Focus on primarily supporting the other borderwide work groups
- Initially State health and environmental representatives, and now Regional task forces, present priorities
- Through multi-vote process, identify a subset that have binational, and border-wide, applications and implications
- 2005-2006 emphasis:
 - indicators (RFA through PAHO)
 - white papers on air, water and pesticides

2007 and Beyond- Focus Areas



- Environmental Monitoring
- •Health Surveillance
- Capacity Building
- Communication
- Policy Development

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Working Groups Recommendations

Water:

- Collaboration opportunities with Water Policy Forum
- To collaborate in the Rio Gr ande project (Coliforms measurements) and can be correlated with health outcomes (GI)
- CNA will gave us access to their GIS which is going to be ready at medium term (2 years)

• Air:

- Need air measurements in those cities where we do not have monitoring yet
- Toxics air monitoring (using mobile unit)
- Technical capacity (air measurements)
- Develop a communication program focused in vulnerable population (schools)
- Conduct a workshop with academia (results of different studies)

Pesticides:

- Bi-national surveillance system for acute poisons
- Communication courses related with risks for pesticides exposure
- Lab capacity for pesticides biomonitoring (urine)