Re: Inglewood Oil Field Communities Health Assessment and Inglewood Oil Field Communities’ Survey

Dear Dr. Ferrer,

Pursuant of Section Five of the Baldwin Hills Community Standards District Settlement Agreement:

Health Assessment and Environmental Justice Study. The County shall complete a Community Health Assessment of the communities surrounding the Oil Field which shall include an Environmental Justice component by June 2012 and ensure additional assessments are completed every five to seven years throughout the life of the CSD... Public Health will analyze the information by socio-economic and demographic data to accommodate and reflect an Environmental Justice component.¹

Since the initial health assessment released on April 11, 2012 took more than 3 years to complete, it would be prudent to initiate and fund the next assessment this quarter in order to be on track for completion by June 2019. In the interest of the surrounding communities, the Community Advisory Panel (CAP) Facilitators strongly urge that the process is adequately funded and begin immediately. We also ask that very early in the process a presentation be made to the CAP on the scope, objectives and timeline for the study. (The timing and other details of this presentation should be coordinated with Tim Stapleton of the Department of Regional Planning, (213) 974-6453.)

To improve the outcomes from the Community Health Assessment and better address the health concerns of the communities surrounding the Inglewood Oil Field, this letter offers methodological recommendations for you to consider for this and ongoing Community Health Assessments.

It is well founded that oil drilling operations utilize and emit toxic chemicals known to result in adverse health impacts. Specifically, studies within the Inglewood Oil Field have identified pollutants, including diesel particulate matter (DPM), trace and heavy metals (cadmium, nickel, mercury, manganese, lead), benzene, formaldehyde, and arsenic², many of which are known carcinogens and can cause birth defects. Additionally, up to 50,000 gallons of hydrofluoric and hydrochloric acids are utilized on the field annually, according to the current operator, Sentinel Peak Resources. Unfortunately, academic studies of the health impacts of urban oil drilling in California are rare and do not provide much in term of longitudinal information. However, recently published work has shown links between proximity to neighborhood oil drilling and adverse health impacts including nausea, nosebleeds, headaches, and respiratory issues including asthma.³ iv In addition to these adverse health impacts, many residents experience high stress and anxiety because of their concern and lack of conclusive evidence about the true health impacts of existing near urban oil drilling. While residents living near the Inglewood Oil Field are also in close proximity to other polluting sources (i.e. high traffic roads and Los Angeles International Airport), it is important to separate out the individual and cumulative impacts residents face by living, working, and playing near the oil field.
Informed by the recent studies and vocal community concerns, we seek to improve all future Community Health Assessments for the residents and businesses surrounding the Inglewood Oil Field by offering the Department of Public Health the following recommendations:

1. **Stratify study findings to adequately uncover unusual patterns of disease.**
   a. The initial study failed to provide data on the length of residency of the survey respondents. Understanding long-time residents’ patterns of illness and disease is more useful than cross-sectional reporting of people who currently reside in the area.
      i. *Future assessments should stratify results by length of residency and create a sample mostly comprised of long-term residents (10 years or more) in order to account for exposure time.*
   b. The initial 1.5 mile sample buffer did not adequately consider travel and contamination patterns of oil extraction pollution. The Community Health Assessment will better detect unusual disease patterns if the assessment isolates surveys for residents and other individuals who spend significant time near the field (i.e. Ladera Heights, West Los Angeles College students and employees, Wateridge Complex tenants) with the potential to be exposed to oil field pollutants.
      i. *DPH should identify which communities are reasonably likely to face oil field air, soil, and water runoff pollution exposure. Furthermore, the sample should be stratified and results analyzed in quarter-mile increments.* In addition, data exists on oil field emissions travel patterns and should be utilized when identifying populations because evidence and logic indicates that exposure decreases as distance from pollution sources increases. Since disparate pollutants will have varying health impacts at different distances, only by stratifying the sample, for example into quarter-mile increments, can researchers have a chance at detecting disease patterns. Furthermore, a more fine-tuned examination allows detection of more acute issues like odor, noise, and vibration problems.

   c. To comply with the settlement agreement, an environmental justice component of the assessment is required. A discussion of environmental justice could inform decision-making and CSD policy development by identifying whether residents were included in the policymaking process or whether particular groups disproportionately experience harms from the oil fields.
      i. *Analyze data adjusting for socio-economic status (race, income, and education) and discuss environmental justice with an analysis of community engagement, considerations made during the oil field policy decision-making process, and whether some groups are disproportionately impacted by oil field operations.*

2. **Develop a relevant study research design to capture short- and long-term health indicators related to oil and gas activities.**
   a. The prior study placed heavy emphasis on health behaviors that are unrelated to oil field toxic exposures, potentially missing important health impacts of living near oil and gas operations.
      i. *All future studies should include a section that articulates how and why health indicators were chosen.*
   b. While the 2011 study utilized questions that were used in prior health studies for comparison purpose, it placed too much emphasis on health behaviors and neglected to include questions about self-reported symptoms.
      i. *Based on initial feedback from the community, and from epidemiological literature, the next Community Health Assessment should include questions to address short- and*
3. Actively engage and utilize the Health Working Group.
   a. There is ongoing interest from community stakeholders around engaging with the County regarding the health impacts of the Inglewood Oil Field. To adequately address health equity concerns, it is crucial that DPH engage with residents and other key health experts in identifying best practices for collecting ongoing information and data from the community and providing them with adequate opportunities to review.
      i. To allay community concerns and engage community members in a constructive dialog with researchers, recommendations from community groups must be encouraged and included.

Thank you for your commitment to ensuring the health and wellbeing of Los Angeles County residents. Everyone looks forward to working with you on the next Community Health Assessment for the Inglewood Oil Field.

Sincerely,

David McNeill
Co-Facilitator of the Community Advisory Panel

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viii Los Angeles County Department of Public Health. (February 2018). Public Health and Safety Risks of Oil and Gas Facilities in Los Angeles County.