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EPA Efforts to Address Children's Health Issues Need Greater Focus, Direction, and Top-level Commitment

Statement of John B. Stephenson, Director
Natural Resources and Environment

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EPA Efforts to Address Children’s Health Issues Need Greater Focus, Direction, and Top-level Commitment

What GAO Found

EPA has not proactively used the Advisory Committee to ensure that the agency’s regulations, guidance, and policies address the disproportionate risks that environmental contaminants pose to children. Our analysis found that the Advisory Committee met more than 30 times and discussed a variety of environmental health issues with dozens of officials from EPA offices such as Pesticides and Toxic Substances, and Research and Development. However, we identified just three instances where EPA specifically asked the committee for recommendations and advice on regulations—most notably an October 1997 request that the committee identify five regulations or standards for EPA to re-evaluate in order to better protect children. In the absence of focus and direction from EPA, the Advisory Committee has taken the initiative to write more than 70 letters to the Administrator since 1998 containing hundreds of recommendations on a wide variety of children’s health concerns.

EPA has not addressed key recommendations from its Advisory Committee, particularly those in a major April 2007 letter and in recent letters advising EPA on proposed revisions to national air quality standards. The April 2007 letter, which marked the 10th anniversary of the Executive Order, provided recommendations in seven key areas. These included the need for EPA to eliminate environmental health disparities among low-income and minority children. While EPA generally responds to the Advisory Committee’s letters, the agency has not fulfilled the Administrator’s commitment in his response to the 10th anniversary letter to collaboratively review recommendations from the advisory committee. The Office of Children’s Health had begun forming internal workgroups, but a new acting director stopped the process in late 2007 to hold individual meetings with EPA’s assistant administrators, and the process remains stalled. We also analyzed EPA’s responses to the committee’s specific recommendations on three recently-considered EPA air quality standards—the National Ambient Air Quality Standards for particulate matter, ozone, and lead—and we found that EPA either offered to consider the committee’s recommendations as part of the public comment process or rejected them.

The President’s Task Force, which was authorized in April 1997, provided high-level interagency leadership and coordination on children’s environmental health, but it expired in April 2005. According to the children’s health experts with whom we spoke, the task force provided important leadership on initiatives such as the National Children’s Study and the Healthy Schools Environmental Assessment Tool. The task force also developed federal strategies to address four threats to children—asthma, developmental disorders, cancer, and unintentional injuries. In 2003, the President ordered the task force to be extended by 2 years, but the order eliminated the provision for reassessing the task force. Since the task force’s expiration, EPA no longer has a high-level infrastructure or mandate to coordinate federal strategies for children’s environmental health and safety.
Madam Chairman and Members of the Committee:

I am pleased to appear here today to discuss our ongoing work regarding the Environmental Protection Agency’s (EPA) efforts to protect children from environmental health risks such as pollution in the air, lead paint in homes, pesticide residues on food, and treatment-resistant microbes in drinking water. Many of the nation’s 74 million children are exposed to such hazards daily. In 2006, for example, 55 percent of children lived in counties that exceeded one or more of the six principal air pollutants, two of which—ozone and particulate matter—are known to cause or aggravate respiratory diseases such as asthma. Asthma is the third most common cause of hospitalizations among children, resulting in $3.2 billion for treatment and 14 million lost days of school annually, according to the Centers for Disease Control and Prevention.

Children’s environmental health is a complex but vitally important subject. The federal government has therefore taken several steps to make it a priority and to ensure that it has access to the best available expert advice. In April 1997, for example, the President signed Executive Order 13045, Protection of Children from Environmental Health Risks and Safety Risks (Executive Order), which mandated a concerted federal effort to address children’s environmental health and safety risks. Among other things, the Executive Order established an interagency President’s Task Force on Environmental Health Risks and Safety Risks to Children (President’s Task Force) for a period of 4 years and charged it with recommending strategies to the President for protecting children’s environmental health and safety. The President’s Task Force was co-chaired by the Administrator of EPA and the Secretary of Health and Human Services and included the heads of at least 14 other departments, agencies, commissions, and councils.

Also in 1997, EPA established the Office of Children’s Health Protection to support its efforts. In addition, EPA formed the Children’s Health Protection Advisory Committee (Advisory Committee) to provide advice, information, and recommendations to assist the agency in the development of regulations, guidance, and policies relevant to children’s health. Instead of a panel of experts on a single academic discipline, the Advisory Committee is made up of a broad cross-section of children’s health experts from the academic, healthcare, industry, local government, and non-profit sectors.

In April 2007, the Advisory Committee wrote to the Administrator to reflect on EPA’s achievements protecting children from environmental
health threats in the 10 years since the Executive Order was signed. The committee cited successes such as increased margins of safety for pesticides mandated under the Food Quality Protection Act and the creation of the National Children’s Study.\(^1\) However, the committee also expressed serious concerns about EPA’s continued lack of focus on children’s environmental health issues and the lack of progress in addressing its many recommendations.

My testimony is based on ongoing work for the Senate Committee on Environment and Public Works, which we expect to complete in mid-2009, that examines the extent to which EPA has maintained its focus on children’s environmental health issues and capitalized on opportunities to solve some significant and emerging environmental health challenges in the decade since the Executive Order was signed. My statement today addresses: (1) the extent to which EPA has used the Children’s Health Advisory Committee and (2) the extent to which EPA has addressed the Advisory Committee’s key recommendations. In addition, as you requested, my statement includes information about the activities and status of the President’s Task Force on Environmental Health Risks and Safety Risks to Children. In conducting our work, we met with EPA and Advisory Committee officials and analyzed documents—including committee meeting agendas, summary documents, letters to the EPA Administrator, and EPA’s response letters—using the content analysis software NVivo. We also reviewed key documents and interviewed agency officials to determine the major activities and current status of the President’s Task Force. We also obtained EPA’s views on the facts presented in my statement and made minor modifications based on the agency’s comments. Our ongoing work for this performance audit began in December 2007, and continues in accordance with generally accepted government auditing standards.

\(^1\)The National Children’s Study, led by multiple federal, state and local agencies, as well as research institutions, will examine the effects of environmental influences on the health and development of more than 100,000 children across the nation, following them from before birth until age 21. By studying children through their different phases of growth and development, researchers will be better able to understand the role of these environmental factors on health and disease.
In summary:

- EPA has not proactively used the Advisory Committee to ensure that the agency’s regulations, guidance, and policies address the disproportionate risks to children that result from environmental contaminants. Our analysis found that the Advisory Committee met more than 30 times since 1997 and discussed a variety of environmental health issues with dozens of officials from EPA offices such as Pesticides and Toxic Substances, Air and Radiation, and Research and Development. However, we identified just three instances where EPA specifically asked the committee for recommendations and advice on regulations—most notably an October 1997 request that the committee identify five regulations or standards for EPA to re-evaluate in order to better protect children. In the absence of focus and direction from EPA, the committee has taken the initiative to write more than 70 letters to the Administrator since 1998 offering hundreds of recommendations on a wide variety of children's environmental health concerns.

- EPA has largely disregarded key recommendations from its Advisory Committee, particularly those in its 10th anniversary letter and in several recent letters advising EPA on proposed revisions to national air quality standards. In April 2007, to mark the 10th anniversary of the Executive Order, the Advisory Committee provided recommendations in seven key areas of concern, including the need for EPA to eliminate environmental health disparities among low-income and minority children, strengthen the national approach to regulating toxic chemicals, and provide necessary leadership and infrastructure to protect children’s health. While EPA generally provides a letter in response to the committee, the agency has not fulfilled the Administrator’s commitment in his June 2007 response letter to review the advisory committee’s recommendations and EPA’s children’s environmental health activities. In his response to the Advisory Committee’s letter, the Administrator agreed that the 10th anniversary of the Executive Order was an appropriate time to review EPA’s children’s health activities. He directed the Office of Children’s Health to collaborate with EPA’s program offices and the Advisory Committee to review their recommendations. In addition, the acting director of the office committed to engage the staff involved with Children’s Health Advisory Management Partners (CHAMPS)—actions which have yet to happen. We also analyzed EPA’s response to the committee’s specific recommendations related to three recently-considered EPA air quality standards, and we found that EPA did not acknowledge, was noncommittal, rejected, or offered only to consider them along with comments from the general public.
The President’s Task Force on Environmental Health Risks and Safety Risks to Children provided important high-level leadership and interagency coordination on children’s environmental health from 1997 until it expired in April 2005. According to the EPA staff and children’s health experts we spoke with, the President’s Task Force provided critical leadership on several important initiatives such as the National Children’s Study and the Healthy Schools Environmental Assessment Tool. The task force also developed national strategies to coordinate federal programs to address the four major environmental and safety threats to children that it identified—asthma, developmental disorders, cancer, and unintentional injuries. Since the task force’s expiration, EPA no longer has a high-level infrastructure to coordinate federal strategies for children’s environmental health and safety. According to the experts, the task force could have helped the federal government respond to the recent health and safety concerns that prompted the recall of 45 million toys and children’s products in 2007.

According to EPA, children face disproportionate and unique threats from environmental hazards for many reasons. For example, EPA has noted that children may receive higher doses of environmental contaminants because they spend more time close to the ground, touch their hands to their mouths more often, and, in proportion to their body weight, breathe more air, consume more food, and drink more water than adults. Contaminants may also affect children disproportionately because they have unique exposure pathways—through the placenta and breast milk. Furthermore, children are more vulnerable to contaminants than adults because of the relative immaturity of their biochemical and physiological functions. For example, air pollutants that would produce slight breathing difficulties in adults may contribute to more serious breathing problems in young children because of their smaller airways. Also, EPA has noted that children have limited ability to communicate and urge action about protecting their environment, so others must act on their behalf.

The Children’s Health Protection Advisory Committee, as a committee chartered under the Federal Advisory Committee Act must follow broad requirements for balance, independence and transparency. The membership of the Advisory Committee includes a diverse range of viewpoints from 29 individuals including researchers, academicians, health care providers, environmentalists, children’s advocates, professionals, and government employees who advise EPA on regulations, research, and communication issues relevant to children. The current chairman of the Advisory Committee, only the second since the committee
began meeting in 1998, has been in place since 2003. As required under FACA, a designated federal official from EPA’s Office of Children’s Health oversees the Advisory Committee’s activities, including approving meeting agendas and attending all meetings. To ensure that suitable speakers are invited to committee meetings, the meeting agendas and speakers are set by a steering committee comprised of the director of EPA’s Office of Children’s Health, the chairman of the Advisory Committee, and the chairs of any active workgroups created by the committee to examine a specific children’s issue. According to the Advisory Committee’s charter, the committee is to send its letters to the EPA Administrator. In addition, the Advisory Committee announces meetings ahead of time and gives notice to interested parties about such meetings. The plenary sessions of meetings are open to the public and EPA ensures that meeting minutes are prepared and posted to their website.

As shown in figure 1, the committee has directed the vast majority of its letters to the EPA Administrator but periodically directs letters to other EPA officials such as the Director of the Office of Research and Development.
According to the committee’s operating procedures and principles, “all recommendations must reflect the consensus of the committee and that in achieving consensus, all relevant perspectives, interests and concerns of committee members are reflected.” To accomplish detailed reviews of children’s health issues in order to achieve consensus, the committee typically forms a taskgroup from its members that meets separately with staff from the Office of Children’s Health. Taskgroups consider information presented during full committee meetings, identify relevant recommendations, and draft letters for full committee review. The committee has formed nearly three dozen such taskgroups over its history, including taskgroups that considered EPA’s proposed revisions to air quality standards for particulate matter, ozone, and lead. Although the committee typically reviews these letters during plenary sessions, the committee uses a between-meeting process—to ensure that the full
committee has an opportunity to review materials, provide input, and reach consensus without a plenary session—when a letter must be written before the next meeting, as was the case for the letters that addressed the air quality standards.

While EPA has convened the committee for dozens of presentations and discussions with EPA and non-EPA officials, the agency has made few requests for the committee’s advice or recommendations on regulations, guidance or policies to address the disproportionate risks to children’s health. Nonetheless, the committee has sent more than 70 letters to the Administrator offering hundreds of recommendations on a wide range of children’s health concerns.

Since 1997, EPA has convened the Advisory Committee 32 times for meetings which included presentations and discussions with many EPA and non-EPA officials on a wide variety of children’s health topics. Staff from the EPA Office of Children’s Health told us that the committee’s value comes, in part, from the verbal input that committee members provide to EPA officials during the discussions surrounding those presentations. According to our analysis of agendas and meeting summaries, EPA and non-EPA speakers made 189 presentations for the committee during the past decade. As shown in figure 2, EPA officials made 79 percent of the presentations to the advisory committee, with the Office of Children’s Health (OCHP) accounting for the largest proportion. Since 2006, for example, officials from OCHP have given regular updates to the committee on EPA’s revisions to the National Ambient Air Quality Standards for particulate matter, ozone, and lead. In addition, the Office of the Administrator (OA) has given a number of presentations, and three of the four EPA Administrators since 1997 have met with the committee.²

²The Advisory Committee met with Administrator Browner on July 6, 1998; Administrator Whitman on February 27, 2002; and Administrator Johnson on July 17, 2007.
The figure also shows that EPA’s program offices made regular presentations to the Advisory Committee, including the agency’s Office of Prevention, Pesticides and Toxic Substances (OPPTS), Office of Air and Radiation (OAR), Office of Research and Development (ORD), and Office of Water (OW). For example, officials from the Office of Air and Radiation, and the Administrator himself, gave three presentations to the committee on the air quality standards between 2005 and 2007.

Although the Advisory Committee was established to provide EPA with advice, information and recommendations—and reports directly to the Administrator—it also regularly hears from non-EPA officials to gather additional information. As the figure also shows, 21 percent of Advisory Committee presentations were made by representatives from other federal agencies, industry, academic experts, states and localities, and advocacy and non-profits. For example, the committee has heard from representatives from the Centers for Disease Control and Prevention and the National Academy of Sciences.
EPA Has Rarely Sought the Advisory Committee’s Advice on Regulations, Guidance, and Policies that Address Children’s Health

Despite convening the Advisory Committee more than 30 times over the last 10 years for discussions with a variety of speakers, EPA has rarely sought out the committee’s advice and recommendations to assist it in developing regulations, guidance, and policies that address children’s health. We identified only three instances where EPA specifically asked the committee for advice on regulations, three instances on guidance, and one instance on policies. The clearest example is EPA’s request in October 1997—prior to the committee’s first meeting—that the committee identify five regulations or standards for the agency to re-evaluate in order to better protect children. In another instance, in 2005, EPA asked CHPAC for comments on data that the agency planned to use to support the Clean Air Mercury Rule. In addition to these requests regarding regulations, guidance, and policies, we identified 14 other instances where EPA asked for the committee’s advice on programs, plans, or other issues. The requests varied in topic and scope, ranging from a 2005 request for advice on evaluating EPA’s pilot version of the Voluntary Children’s Chemical Evaluation Program (VCCEP) to a request in 2002 to suggest a health organization to be asked to join EPA’s Smart Growth Network.

Although EPA has not proactively requested the Advisory Committee’s advice on regulations, guidance, and policies, the members of the committee have nonetheless devoted considerable time to drafting and reviewing 70 letters that the committee has sent to the Administrator since 1998. Those letters contained a range of advice, information and recommendations, to which EPA has responded a total of 51 times. As figure 3 shows, the committee typically sends 8 or fewer letters a year.

The number of letters reviewed reflects the period between May 1998 and June 2008.
The Advisory Committee Has Offered Hundreds of Recommendations to EPA on a Range of Children’s Health Issues

The Advisory Committee’s letters offered EPA hundreds of recommendations about a variety of topics related to reducing environmental health risks to children. We identified over 600 recommendations during our review of the committee’s letters. A small number of letters contained recommendations relating to multiple children’s environmental health issues, such as a May 2008 letter with recommendations about mercury regulation, farm worker protection standards, organophosphate pesticides, and air quality. However, most letters contained recommendations on a single issue. As shown in figure 4, the number of recommendations varied from year to year, ranging from more than 120 recommendations in 2000 to 20 thus far in 2008.

For the purposes of our review, we defined a recommendation as “any and all statements made in Advisory Committee letters that advise and ask/request/suggest/urge EPA to take action”.

Source: GAO analysis of EPA documents.
In addition, we organized the Advisory Committee’s recommendations into 10 categories to help demonstrate the breadth and depth of children’s health issues that have concerned the committee. Figure 5 shows that the largest number of recommendations were focused on improving indicators and data used for tracking children’s health information (133), urging that children’s health vulnerabilities are considered in EPA risk assessments (127), and improving or developing agency guidance documents (125). The committee also offered many recommendations on topics such as research (99), external partnerships and inter-agency coordination (97), policy (96), and regulations and standards (80).

5Some recommendations were considered to emphasize more than one subject area and as such the categories are not mutually exclusive.
The process that EPA initiated to carry out the Administrator’s commitment, in a June 2007 letter, to address the Advisory Committee’s key recommendations has stalled. In addition, EPA has largely disregarded the advisory committee’s recommendations on air quality standards, mercury, and the Voluntary Children’s Chemical Evaluation Program.

EPA Has Largely Disregarded Key Recommendations from the Children’s Health Protection Advisory Committee
On the 10th anniversary of the Executive Order, the Advisory Committee wrote to EPA to express its views on key elements of a comprehensive vision for protecting children’s health and made recommendations for action. The committee’s April 10, 2007 letter provided recommendations in seven areas for renewing EPA’s vision on children’s environmental health and its commitment to the principles outlined in the Executive Order. As illustrated in figure 6, the areas of concern to the committee included the need for EPA to (1) eliminate environmental health disparities among low-income and minority children, (2) strengthen the national approach to regulating toxic chemicals, and (3) provide necessary leadership and infrastructure to protect children’s health.

**Figure 6: Seven Key Recommendations to EPA from its Advisory Committee’s 10th Anniversary Letter, April 2007**

- **Ensure healthy environments**
- **Commit the necessary EPA infrastructure, and inter-agency collaboration**
- **Institute “environmental health literacy”**
- **Foster environmental preparedness and prevention**
- **Eliminate environmental health disparities**
- **Expand critical research**
- **Strengthen the national approach to regulating chemicals**

Source: GAO analysis of Advisory Committee’s April 10, 2007 letter.
The Administrator’s June 13, 2007 response letter directed the Office of Children’s Health to work collaboratively with program offices across the agency and committed the agency to working with the committee to review these recommendations. However, EPA has not yet fulfilled the Administrator’s commitment. The Office of Children’s Health had established workgroups within its Children’s Health Advisory Management Partners (CHAMPS) to address each of the seven areas outlined by the committee, and the program offices had begun identifying representatives to serve on the workgroups. However, a new acting office director stopped the process in late 2007, opting instead to hold individual meetings with EPA’s assistant administrators. The acting director decided that strengthening relationships with senior management would be a quicker way to identify leadership issues related to children’s health, ensuring that they would be engaged and invested in the agency’s response. In March 2008, a new permanent director replaced the acting director. At present, the process of addressing the Administrator’s commitment remains stalled.

Advisory Committee Recommendations on Air Quality Standards Have Not Been Substantially Addressed

We also examined the Advisory Committee’s recommendations related to three air quality standards—the National Ambient Air Quality Standards (NAAQS) for particulate matter, ozone, and lead, which EPA recently reviewed. The committee was particularly concerned about the air quality standards because of rising rates of asthma among U.S. children and the relationship between poor air quality and the incidence and severity of asthma. To express its concern, the committee wrote a number of letters to urge EPA to tighten the standards based on scientific evidence that they were not sufficiently protective of children’s health. Specifically, we identified seven letters containing 23 recommendations with respect to EPA’s proposed revisions to the particulate matter, ozone, and lead standards. In general, the committee’s recommendations were further supported by recommendations from EPA’s Clean Air Science Advisory Committee (CASAC), which also has been sharply critical of several of EPA’s decisions. For example, CASAC wrote to the administrator stating

6CHAMPS is a cross-agency group of headquarters and regional staff who work on children’s issues that was formed by the Children’s Health Office to discuss projects and share information.

7EPA sets Primary National Ambient Air Quality Standards for ozone, particulate matter, sulfur dioxide, nitrogen dioxide, carbon monoxide, and lead.

8CASAC is an independent committee of scientists that advises the EPA Administrator and was established by statute in 1977 to review the agency’s work in setting NAAQS.
unanimously that the revised air quality standard for particulate matter “does not provide an adequate margin of safety … requisite to protect the public health.” Table 1 shows that EPA’s revised air quality standards for particulate matter, ozone, and lead are at or above the upper limits of recommendations from both advisory committees.

Table 1: Advisory Committees Recommendations for Revisions to NAAQS Compared to EPA’s Finalized Standards

<table>
<thead>
<tr>
<th>Standard (µg/m³) unless noted</th>
<th>EPA Previous Standard</th>
<th>Clean Air Science Advisory Committee</th>
<th>Children’s Advisory Committee</th>
<th>EPA Final Standard</th>
</tr>
</thead>
<tbody>
<tr>
<td>Particulate Matter (PM)</td>
<td>Fine PM (annual)</td>
<td>15</td>
<td>13-14</td>
<td>Less than 15</td>
</tr>
<tr>
<td></td>
<td>Fine PM (daily)</td>
<td>65</td>
<td>30-35</td>
<td>Less than 35</td>
</tr>
<tr>
<td></td>
<td>Course PM (daily)</td>
<td>150</td>
<td>No recommendation</td>
<td>Less than 70</td>
</tr>
<tr>
<td>Ozone (in parts per million)</td>
<td>Human Health standard (8-hour average)</td>
<td>0.08</td>
<td>0.060-0.070</td>
<td>0.060</td>
</tr>
<tr>
<td>Lead</td>
<td>Human Health standard (3-month average)</td>
<td>1.5</td>
<td>≤ 0.2</td>
<td>0.02</td>
</tr>
</tbody>
</table>

Sources: GAO review of Advisory Committee letters and EPA air quality regulations.

*EPA defines the standard for fine PM as consisting of particulate matter 2.5 micrometers or less in diameter, abbreviated as PM₁₀⁻₂.⁵

*EPA was under court order to complete the review of lead NAAQS by September 15, 2008, but the agency received an order extending the deadline to October 15, 2008.

*Although these standards were promulgated in 1997, they are only now coming into effect, because of legal challenges, the need to establish a monitoring network, and various administrative factors.

*In its September 15, 2005 letter, CASAC recommended a new course PM indicator (PM₁₀⁻₂), which EPA put forward in its proposed rule. CASAC did not discuss the option of retaining the existing daily standard for course PM (i.e., PM₁₀⁻₂) of 150 ppm during its advisory process.

While EPA provided the Advisory Committee with official response letters to six of its seven NAAQS-related letters, we found that the agency generally did not acknowledge or was noncommittal to the committee’s recommendations, or that it offered merely to consider them as part of the public comment process. EPA did not specifically acknowledge 11 of the committee’s 23 recommendations, but provided a generic statement about considering the recommendations with all others. For example, EPA did

⁹EPA did not provide a response to address 6 out of the 23 recommendations that we identified.
not directly address the committee’s recommendations related to the lead standards or the ability of a national lead-monitoring system to accurately measure and facilitate effective control of the complex exposure routes of airborne lead. Instead, EPA responded that it would consider the committee’s recommendations along with all other public comments. EPA acknowledged another 5 of the committee’s recommendations, although it was noncommittal, providing no details about whether or how the agency would address them. In one instance, EPA rejected a committee recommendation. In its February 2007 letter, the committee recommended that EPA reinstate the opportunities for public review and input provided for in the previous NAAQS process to allow for scientific input and public review. This letter, as well as a similar one from CASAC, warned that the new process could significantly reduce opportunities for scientists to provide input, as they had at key steps of previous NAAQS reviews. In its response, EPA stated that changes to the review process would enhance the agency’s ability to issue timely decisions while promoting participation by scientific experts and the public. While there are periods in the rulemaking process where EPA officials are in ongoing deliberations and may not commit to actions until a standard is finalized, EPA did not provide the Advisory Committee with any explanation after deliberations were complete and officials were free to comment.

Advisory Committee Recommendations on Mercury and Voluntary Children’s Chemical Evaluation Program

We also reviewed the Advisory Committee’s recommendations on mercury and EPA’s Voluntary Children’s Chemical Evaluation Program (VCCEP). As with the air quality recommendations, EPA either did not acknowledge or remained noncommittal toward most of the committee’s recommendations related to mercury and VCCEP. Specifically, we identified five Advisory Committee letters containing 29 recommendations focused on the need to protect children from the risks posed by mercury and three EPA response letters. Our review of EPA’s response letters indicates that the agency did not acknowledge 10 of the recommendations. For example, EPA did not acknowledge the recommendation that EPA create incentives in its proposed Interstate Air Quality Rule to reduce children’s exposure to mercury. Furthermore, EPA acknowledged but provided no details about how the agency would address another 4 recommendations. For example, the committee recommended to EPA that hot spots—areas disproportionately affected by mercury emissions—

EPA did not provide a response to address 13 of the 29 recommendations that we identified.
be prevented under any Interstate Air Quality Rule. EPA acknowledged the recommendation in its response, but did not address how this would be ensured, stating instead that in implementing cap-and-trade programs in the past, the agency has not observed the creation of hot spots, and that a cap-and-trade program creates incentives for the utility sector to aggressively seek reductions in nitrogen oxides (NO\textsubscript{x}) and sulfur dioxide (SO\textsubscript{2}), which ultimately provide early mercury reductions.\footnote{\textsuperscript{11} We have reported previously on major shortcomings in EPA’s proposed mercury rule that limit its usefulness for informing decision makers and the public. Among other things, we found that EPA did not consistently analyze its mercury policy options or provide estimates of the total costs and benefits, and that EPA did not estimate economic benefits directly related to decreased mercury emissions (GAO-05-252).} Only in its 1998 response to the committee’s mercury-related recommendations did EPA acknowledge the recommendations offered by the committee and detail how it had addressed or intended to address each of the recommendations raised. For example, to address the committee’s recommendation about the need to take a holistic approach to evaluate all sources of mercury emissions, EPA pointed to a November 1998 draft strategy that addressed the multimedia nature of mercury. With respect to the committee’s recommendation to consider mercury releases from municipal and medical waste combustion sources, EPA described actions that, once fully implemented, would reduce mercury emissions caused by human activities at these types of sources by 50 percent from 1990 levels.\footnote{\textsuperscript{12} In addition, EPA described final regulations for hazardous waste combustion facilities (e.g., incinerators, cement kilns, lightweight aggregate kilns) that were expected to be promulgated in February 1999.}

Similarly, our review of EPA’s responses to the Advisory Committee’s 14 recommendations regarding VCCEP indicates that the agency largely did not acknowledge the committee’s recommendations. Half of the recommendations were in a June 2006 letter to EPA. In its response, EPA stated that it would carefully consider the committee’s comments and undertake a thorough evaluation of the program in the coming months, but, stopped short of providing detail or information on if or how it would address six of the seven recommendations in this committee letter.\footnote{\textsuperscript{13} EPA did acknowledge the importance of public review and stated that it would address the committee’s recommendation to publish a Federal Register notice later that year, announcing a formal evaluation of the VCCEP pilot and how it intended to seek stakeholder views and comments like those provided by the committee.} Moreover, in addition to its specific recommendations, the committee concluded in its letter to EPA that the pilot program, as implemented, was
not on track to fulfilling its stated goal, and that there has been limited information on specific chemicals relevant to children’s health provided to the public. The Advisory Committee added that an opportunity had been lost to develop and disseminate more advanced methods for assessing children’s exposures and consequent risks.

The President’s Task Force was authorized by executive order in April 1997 for a period of 4 years to provide high-level leadership and interagency coordination on children’s environmental health. It was comprised of nine cabinet officials and seven White House office directors and was co-chaired by the Administrator of EPA and the Secretary of Health and Human Services.\textsuperscript{14} The task force convened for meetings five times—in October 1997, April 1998, January 1999, September 1999, and in October 2001 after the President extended it until April 2003. At the urging of the EPA Administrator in April 2003, the President ordered the task force to be extended for a final 2 years. However, this order eliminated the provision for reassessing the need for continuance of the task force, which was not convened after October 2001. Nonetheless, a senior-staff steering committee continued to meet until 2005 to provide coordination and draft strategies to address the threats to children’s health.

The President’s Task Force identified four major environmental and safety threats to children—asthma, developmental disabilities (including lead poisoning), cancer, and unintentional injuries, and it recommended national strategies for each of them. The task force recognized that an integrated solution was needed across the federal government to address the complex interaction between a child’s biology, behavior, and the physical, chemical, biological, and social environment. According to the children’s health experts with whom we spoke, the task force provided critical leadership on several important initiatives such as the National

\textsuperscript{14} The Executive Order states, “The Task Force shall be composed of the Secretary of Health and Human Services, who shall serve as a Co-Chair of the Council; Administrator of the Environmental Protection Agency, who shall serve as a Co-Chair of the Council; Secretary of Education; Secretary of Labor; Attorney General; Secretary of Energy; Secretary of Housing and Urban Development; Secretary of Agriculture; Secretary of Transportation; Director of the Office of Management and Budget; Chair of the Council on Environmental Quality; Chair of the Consumer Product Safety Commission; Assistant to the President for Economic Policy; Assistant to the President for Domestic Policy; Assistant to the President and Director of the Office of Science and Technology Policy; Chair of the Council of Economic Advisers; and such other officials of executive departments and agencies as the President may, from time to time, designate.”
Children’s Study and the Healthy Schools Environments Assessment Tool (Healthy SEAT). These national programs focus heavily on the environmental influences on children, with the National Children’s Study examining the role of environmental factors on health and disease and Healthy SEAT offering school districts a self-assessment tool for evaluating environment, safety, and health hazards. In addition, the departments and agencies that made up the task force partnered to prepare a fiscal year 2001 interagency budget initiative to fund the task force’s initiatives in the four priority areas. The Secretary of Health and Human Services and the Administrator of EPA submitted the request to the Office of Management and Budget with the recommendation that it be included as part of the President’s budget request that year. Officials told us that OMB’s involvement helped ensure that adequate funds were available to these agencies to address children’s health.

Since the task force’s expiration, EPA and HHS no longer have a high-level infrastructure or mandate to coordinate federal strategies for children’s environmental health and safety. According to the EPA staff and children’s health experts with whom we spoke, the task force could have helped the federal government respond to the health and safety concerns that prompted the 2007 recall of 45 million toys and children’s products, 30 million of them from China. Furthermore, since the provision of the executive order expired in 2005, the task force no longer reports the results of its efforts to the President. Those reports collected and detailed the interagency research, data, and other information necessary to enhance the country’s ability to understand, analyze, and respond to environmental health risks to children.

Conclusions

In 1997, the President issued an executive order on Protection of Children from Environmental Health and Safety Risks calling on federal agencies to work together to protect children’s health from environmental risk. In the same year, EPA established an Office of Children’s Health Protection and formed its Children’s Health Protection Advisory Committee. In the intervening decade, we have seen a number of successful efforts to strengthen environmental protections for children, including the landmark Food Quality Protection Act, which provides protections from pesticides. However, we also have seen growing evidence that children’s environmental experience before birth, early in life, and through adolescence may have lifelong consequences and may affect subsequent generations.
EPA’s Advisory Committee and others have recently raised concerns that the agency’s focus on children’s environmental health has diminished since the executive order was signed. Based on our review of EPA’s use of the Advisory Committee and the agency’s general unresponsiveness to the committee’s key recommendations, coupled with the expiration of the President’s Task Force, we believe the agency needs to reinvigorate its focus and leadership on children’s environmental health in order to meet current and emerging challenges facing the nation’s children.

To honor the Administrator’s commitment to the Children’s Health Protection Advisory Committee, we are recommending that the Office of Children’s Health Protection expeditiously complete the cross-agency process to review the committee’s key recommendations. We are further recommending that the Administrator examine ways to more proactively use the committee to reinvigorate its focus on protecting children’s environmental health.

Madam Chairman, this concludes my prepared statement. I would be happy to respond to any questions that you or members of the Committee may have at this time.

Contact points for our Offices of Congressional Relations and Public Affairs may be found on the last page of this statement. For further information about this testimony, please contact John Stephenson at (202) 512-3841 or stephensonj@gao.gov. Key contributors to this testimony were Diane Raynes, Terrance Horner, Aaron Shifrin, and Corissa Kiyan. Other contributors included Elizabeth Beardsley, Mark Braza, Muriel Brown, and Benjamin Shouse.
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