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July 27, 2015

Supervisor Mark Ridley-Thomas  
Second Supervisorial District  
866 Kenneth Hahn Hall of Administration  
Los Angeles, CA 90012

Dear Supervisor Ridley-Thomas:

I am writing in response to your July 17, 2015 letter requesting our review of the California Council on Science and Technology (CCST) Report on Well Stimulation in California, and to comment specifically on the DPH Community Health Assessment of the Inglewood Oil Field (IOF) Communities.

As you recall, the DPH Health Assessment was designed to compare health outcomes in the communities near the IOF with health outcomes in the rest of Los Angeles County. DPH conducted a random telephone survey of 1,020 adults in the Inglewood communities, utilizing questions about health conditions from the Los Angeles County Health Survey. DPH also analyzed secondary data, including cancer reports from the USC Cancer Surveillance Registry; and birth defects, low-birth-weight births, and mortality data from both County and State databanks. DPH concluded that the health outcomes in the IOF Communities were similar to those found in the rest of the County.

The DPH Health Assessment was not designed to determine whether specific health outcomes were attributable to living near the Inglewood Oil Field; rather, it simply compared health outcomes in these communities to health outcomes in the rest of the County. To determine whether living near the IOF impacts the health of the community would require a prospective cohort study requiring several years of controlled research, typically involving a population size of tens of thousands of individuals. Such a study may be impractical and cost tens of millions of dollars. Even if such a study were performed, in this case, the study population for the IOF communities would simply be too small to generate meaningful results. For these reasons, concerns about community health risks are best addressed by continued monitoring and surveillance of the environment and oil field operations.

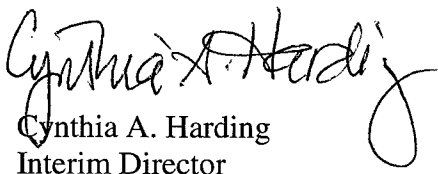
The California Council on Science and Technology (CCST) report correctly notes the limitations of the DPH Health Assessment, which were also noted in a written report submitted to your Board on April 11, 2012. These limitations listed below were also presented to the community at a public meeting on August 22, 2013. The three key limitations were:

- 1) The DPH Community Assessment was not designed to confirm whether oil drilling activities were associated with health outcomes.
- 2) The DPH Community Assessment did not take into account other determinants of health such as behavioral risk factors (e.g., smoking, physical activity), social factors (e.g., education, income, access to care), and environmental exposures (e.g., traffic-related pollution).
- 3) The DPH Community Assessment was not designed to establish causal relationships between emissions and specific health outcomes.

We are in agreement with the CCST Report that more study is needed at the State and Federal level on the health and safety implications of oil well stimulation and related activities. This could include a comprehensive evaluation of emissions from the operation of equipment; assessment of potential discharges into water and air; and assessment of the risks of earthquakes and other geological impacts. The results of such studies should be interpreted in the context of all risks associated with oil field operations. A thorough review of the public health implications of oil field production would provide an overall sense of cumulative public health risks, and inform local decision-making related to existing or proposed oil field operations.

Please let me know if you have questions or need additional information.

Sincerely,

  
Cynthia A. Harding  
Interim Director

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