



# **Comprehensive Risk Communication and Health Consultation Plan for Naval Air Facility Atsugi**

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**Comprehensive Risk Communication and Health Consultation  
Plan for Naval Air Facility Atsugi**

**Forward**

**1. Introduction.**

**a. Air Quality at Naval Air Facility (NAF) Atsugi.**

(1) Air quality at Naval Air Facility (NAF) Atsugi is generally poor. NAF Atsugi is located on Japan's Kanto Plain. The Kanto Plain is one of the most densely populated and heavily industrialized regions of Japan. There are many sources of air pollution, including vehicle exhaust as well as air emissions from industry. One major source of air pollution, which directly impacts NAF Atsugi, is the Jinkanpo (Shinkampo) Incinerator Complex. Jinkanpo (Shinkampo) is located adjacent to NAF Atsugi and has been in operation since 1985. There are three incinerators at Jinkanpo (Shinkampo). Under its existing license, Jinkanpo (Shinkampo) operates 24 hours per day and burns up to 30 tons of waste per day. Approval to expand operations to 90 tons per day per incinerator is expected in the near future.

(2) Jinkanpo (Shinkampo) operates under a general waste disposal permit which means it can burn materials such as municipal and industrial wastes, wood products, plastics, industrial materials, construction debris, alkalis, waste oils, waste acids, and numerous other wastes. Incinerator operators frequently soak solid waste materials with liquid wastes prior to burning. In addition, on windy days piles of ash at the complex contribute to particulate emissions from the incinerators.

(3) The incinerators are equipped with control equipment consisting of a dry quench, an acid gas reaction chamber, an electrostatic precipitator, cyclone separators, and a wet quench scrubber. However, observations by Navy environmental professionals indicate that incinerator operators may frequently bypass the air pollution control equipment.

(4) The location of Jinkanpo (Shinkampo) in relation to NAF Atsugi influences the impact of incinerator operations on the air facility. Jinkanpo (Shinkampo) is situated in a small river valley south of NAF Atsugi. NAF Atsugi is positioned on a plateau at the head of the valley, about 20 meters higher than the tops of the incinerator stacks. The river valley channels the wind in the direction of NAF Atsugi, especially during the months of April through October when prevailing winds are from the south. During this portion of the year, fumigation incidents are common in the most densely populated areas of the air facility, including family housing which has one high-rise/high density unit only 250 meters from the incinerator complex.

**b. Navy Efforts to Address Poor Air Quality and Impact of Jinkanpo at NAF Atsugi.** The Navy is concerned with the poor air quality at NAF Atsugi and for the potential health effects on Navy personnel and their families. The proximity of Jinkanpo (Shinkampo) to the air facility particularly focuses concern on exposures to incinerator stack emissions and fugitive emissions from storage, handling and disposal of waste materials. Committed to protecting the health of our people, the Navy has engaged in a number of activities to address the situation.

(1) The U.S. first expressed concerns about Jinkanpo to the Government of Japan (GOJ) in September 1990. GOJ responded with a report that Jinkanpo (Shinkampo) was in compliance with Japanese law. Since that time the U.S. has engaged in continuous negotiations with GOJ to close Jinkanpo (Shinkampo) or mitigate emissions from Jinkanpo (Shinkampo).

(2) The Navy has conducted three air quality studies; 1991, 1994, and 1997; to characterize air quality at NAF Atsugi. To augment the second and third air quality studies, the Navy Environmental Health Center (NEHC) performed screening health risk assessments (HRAs) with the air quality data. The findings of both screening HRAs indicated the potential for an increase in non-cancer and cancer health effects with ongoing exposure to the poor air quality at NAF Atsugi. A full HRA is now underway to characterize more completely the health risks at NAF Atsugi.

(3) NAF Atsugi initiated formal risk communication activities, following completion of the first screening HRA, dated October 1995. Communication activities to date have addressed: ongoing diplomatic efforts to close

Jinkanpo (Shinkampo) or modify Jinkanpo's (Shinkampo) operating procedures; findings of the screening HRAs; interim risk reduction measures to moderate the potential impact of the air quality on the health of area residents; and plans for a full HRA to characterize more completely the health risk.

**2. Objectives of the Comprehensive Risk Communication and Health Consultation Plan.** The Navy Bureau of Medicine and Surgery (BUMED) has prepared this Comprehensive Risk Communication and Health Consultation Plan for NAF Atsugi to guide the risk communication and health consultation process and establish a coordinated and consistent message.

a. **Risk Communication.** Health risk communication is designed to provide factual information concerning potential health risks without causing unwarranted fear or concern. The plan lays out the mechanisms and accountabilities for informing all potentially affected parties about (1) the nature and magnitude of health risks associated with the air quality, (2) specific actions being taken and that can be taken by residents to reduce those health risks, and (3) the status of ongoing environmental studies, such as the full HRA designed to characterize more completely the health risk. Multiple communication channels must be used to ensure that appropriate information reaches the right audiences. Specific target audiences for these risk communication efforts include individuals and families prior to transfer to and from NAF Atsugi as well as individuals and families at NAF Atsugi during the summer of 1998. By 24 August 1998, Risk Communication Briefs will be a required element of the NAF Atsugi check-in process for newly arriving community members and will be presented during the Area Orientation program. Risk Communication will also be required for departing NAF Atsugi community members and will be incorporated into individual and family Health Consultations provided by Branch Medical Clinic (BMC) Atsugi providers. Completion of the required Health Consultation and Risk Communication prior to permanent change of station departure from NAF Atsugi will be included in the NAF Atsugi check-out process. From another perspective, key target audiences include active duty personnel, Navy and Department of Defense civilian personnel, family members of active duty and civilian personnel, and Japanese Nationals who work at NAF Atsugi. Different communication channels will be required to reach each target audience. Specific communication channels and procedures to be employed for each of these target audiences are covered in Sections 2.0 through 4.0 respectively. These sections also address the

specific roles and responsibilities of various commands in the delivery of risk communication.

b. **Health Consultation.** In addition to establishing a program for risk communication, this plan provides for one-on-one health consultation for active duty personnel and their families at the time of the overseas medical screen, prior to transfer to NAF Atsugi, for individuals and family members over the age of six who will exceed a total stay time of six years at NAF Atsugi or a total stay time of three years at NAF Atsugi for individuals with family members under the age of six, and for all community members at the time of permanent change of station departure from Atsugi. The plan also provides for health consultations for current NAF Atsugi residents and employees who are at greatest potential health risk. Individuals potentially most sensitive to exposure to poor air quality include those with chronic respiratory diseases, children under the age of six years, and possibly pregnant or nursing women. In addition, the plan provides opportunities for other concerned individuals to receive health consultations. Principal health concerns potentially related to the air quality at NAF Atsugi, as expressed by area residents and employees, have included acute health effects such as mucous membrane and respiratory track irritation and headaches, as well as general concerns for the health of unborn and young children. Moderate to severe chronic respiratory conditions are generally disqualifying for assignment to NAF Atsugi. Development of significant acute health effects, such as exacerbation of asthma, sinusitis, or migraine headaches, while at Atsugi may require relocation of affected individuals. Pregnant women and families with children under six years of age will receive focused education on measures to take to minimize exposures to incinerator emissions and air pollution fallout. BUMED has developed guidance to conduct the health consultations, as further detailed in Sections 2.0 through 3.0.

c. **Community Outreach Program.** This comprehensive health risk communication and health consultation plan is designed to encourage two-way dialogue and ensure that timely, accurate and consistent information is provided to future and current members of the NAF Atsugi community. The plan specifically addresses the requirements of a community outreach program, as detailed in Section 4.0, for current residents. NAF Atsugi is responsible for developing an execution plan to carry out the requirements of the community outreach program, which includes formal means to evaluate the effectiveness of community outreach and risk communication activities.



d. **Training in Health Risk Communication.** It is essential that individuals throughout the Navy organization who will be involved with the oversight and execution of this comprehensive plan be familiar with the principles of health risk communication. Those charged with the responsibility of delivering health risk communication must be trained in risk communication in order to be most effective. In January 1997, May 1998, and June 1998, several individuals involved in the NAF Atsugi risk communication efforts attended NEHC-sponsored Health and Environmental Risk Communication Workshops in Tokyo, Japan, Washington D.C., Millington, Tennessee, and Atsugi, Japan. Section 5.0 details the NEHC plan for providing ongoing risk communication training to key personnel.

e. **Resource Requirements.** The level of effort required to fully execute this plan will require resources above current operating funds. Section 6.0 details the additional requirements BUMED has identified to provide risk communication support and training and to conduct one-on-one health consultations. NAF Atsugi is responsible for identifying additional resource requirements to execute the community outreach program and related risk communication.

### **3. Previous Air Quality Studies and Screening Health Risk Assessments (HRAs).**

a. The air quality studies conducted by the Navy in 1994 and 1997 indicate that the air quality at NAF Atsugi meets Japanese air standards, but does not meet US Environmental Protection (EPA) Standards for breathable dusts and a number of chemicals, including a number of organic compounds and heavy metals.

b. To evaluate the potential for human health effects from exposure to the poor air quality at NAF Atsugi, NEHC used the data of the 1994 and 1997 air quality studies to conduct two separate screening HRAs. NEHC released the first screening HRA in 1995. NEHC completed the draft HRA based on the 1997 air quality study in January 1998, which has since undergone peer review by the National Academy of Science's Committee on Toxicology and the ATSDR. The findings of both screening HRAs are comparable and indicate that there is an increase in lifetime risk for non-cancer and cancer health effects with ongoing exposure to the poor air quality at NAF Atsugi.

c. **Risk for Non-cancer Health Effects.** Many of the air pollutants at NAF Atsugi are mucous membrane and lung

irritants. Consequently, the predominant non-cancer health effects impact the respiratory system and the eyes. The severity of symptoms depends on a number of factors such as type of pollutants present, the concentrations of pollutants, duration of exposure, related weather conditions, and susceptibility of the exposed individual. As these parameters can vary widely during the course of a day or from day to day, the effect on an individual's health can vary considerably as well. For most individuals symptoms tend to be short-lived and directly related to exposure. Those with chronic respiratory conditions, such as asthma, chronic bronchitis, or sinusitis, and young children may be particularly sensitive to the irritating effects of air pollution and prone to more chronic symptoms as duration of exposure increases. Determination of suitability for assignment at Atsugi must be handled on a case-by-case basis. As stated earlier, moderate to severe chronic respiratory conditions will generally be considered disqualifying for assignment to NAF Atsugi. Development of significant acute health effects, such as exacerbation of asthma, sinusitis, or migraine headaches, while at Atsugi may require relocation of affected individuals.

**d. Risk for Cancer Health Effects.** The HRA process involves the use of many assumptions about exposures and the potential of health effects at low levels of exposure. The process is designed to apply assumptions conservatively to ensure protection of public health. As such the actual lifetime cancer risk is likely to be less than that calculated from an HRA.

**(1) Adults and Children Six and Older.** Based on the screening HRAs, for adults and children ages six and older, the air quality at NAF Atsugi could result in as much as one additional case of cancer over the course of a lifetime in a population of 10,000 individuals who resided at NAF Atsugi for six years. This represents an increase over and above the background lifetime expected incidence of cancer as estimated by the American Cancer Society, which is 5,000 cases in 10,000 American men and 3,333 cases in 10,000 American women. In other words, after six years of exposure at NAF Atsugi, it is expected that the number of men at risk for cancer is 5,001 in a population of 10,000 and the number of women at risk for cancer is 3,334 in a population of 10,000.

**(2) Children Under Six Years of Age.** For children under the age of six, the same level of risk, one additional case of cancer, over the course of a lifetime, in a population of 10,000 individuals, is reached after three



years of exposure to the environmental conditions at NAF Atsugi.

(3) **Comparison of Excess Cancer Risks.** To help individuals put the excess cancer risk at Atsugi into perspective, the increase in cancer risk from exposure to cosmic radiation acquired by living in Denver, Colorado, a mile above sea level, as opposed to living at sea level, is provided for comparison. For Denver residents, the excess lifetime cancer risk is one additional case of cancer in 10,000 individuals after two years of residence in Denver, when compared to a population living at sea level.

(4) Based on the inherent limitations and assumptions of the HRA process and the limited air quality data from which the screening HRAs were conducted, normal tour lengths equating to six years for adults and children over six and to three years for children under six present acceptable levels of lifetime cancer risk, as per EPA standards, pending completion of the full HRA and complete definition of the environmental health risk.

4. **Previous Community Outreach Activities.** NAF Atsugi has had the lead in communicating the health risk to residents. Public health professionals with experience in health risk communication at the Navy Environmental Health Center (NEHC) have assisted the staff of NAF Atsugi and Branch Medical Clinic (BMC) Atsugi regarding effective risk communication tools to convey health risk in proper perspective and community health education to provide information on how individuals can reduce their health risk.

a. NAF Atsugi has hosted the following formal events:

- **Oct 95:** Public Availability Session: The public exhibit reviewed the background and results of the 1994 air quality study and 1995 screening health risk assessment in understandable language, addressed health and medical issues, discussed base initiatives, and discussed related political issues.
- Voluntary health screening was offered to concerned personnel.
- A plan to educate base personnel on sensible precautions to protect their health was addressed.
- **Feb 97:** Shirley Lanham Elementary School teachers brief.
- **APR 97:** Public exhibit.
- **Apr 97:** Shirley Lanham Elementary School 4<sup>th</sup> Grade Class Brief.

- **Nov 97**: Public Availability Session:
- NAF Atsugi hosted a Public Availability Session to update residents on ongoing efforts by the Navy to resolve the incinerator issue. Public exhibits and information booths with subject matter experts were set up to provide information on the nature of air pollution at Atsugi, related medical risk, and precautionary measures and engineering controls to reduce exposure to poor air quality and incinerator emissions.
- The CO NAF Atsugi and representatives from Commander Naval Forces Japan (CNFJ) and NEHC met with a group of concerned citizens to discuss specific issues.
- **Jan 98**: NAPRA (tenant command) safety standdown brief.
- **Feb 98**: Branch clinic sponsored training for Child Development Center, Youth Center and Family Home Care Providers.
- **Mar 98**: Branch clinic sponsored training for family members in measures to take to minimize exposure to air pollution and its fallout.

b. NAF Atsugi has not used any formal means to evaluate the effectiveness of these past community outreach activities. However, sufficient information has been gathered via these previous activities to assemble a listing of frequently asked questions. These questions appear in the Frequently Asked Questions (FAQ) Fact Sheet (Appendix T).

c. NAF Atsugi and the BMC Atsugi continue to be engaged in ongoing community outreach efforts designed to communicate health risk, evaluate potential health effects of poor air quality, and educate residents on effective measures to protect their health.

**5. Risk Reduction Activities at NAF Atsugi.** Risk reduction efforts at NAF Atsugi pre-date the 1995 screening HRA. Early efforts consisted of posting placards to warn joggers about air emissions from the Jinkanpo Incinerator and to inform the community on the status of negotiations with the Government of Japan (GOJ) and the Kanagawa Prefecture Government (KPG) about the incinerator's emissions. With the release of the 1995 screening HRA, NAF Atsugi intensified risk reduction efforts. Actions have been taken on three fronts: (1) diplomatic initiatives, (2) engineering controls, and (3) community health education.

a. Diplomatic efforts have been ongoing with GOJ and KPG since shortly after the incinerator opened in 1985. Only recently has noticeable progress been made in that KPG

has temporarily withheld approval for expanded operations at the incinerator and GOJ has begun to discuss the merits of raising the stack height to better disperse incinerator emissions. Negotiations continue regarding options to close the incinerator or to otherwise significantly modify incinerator emissions and their impact on the environment.

b. Engineering controls include purchasing and distributing portable air cleaners to residents of Navy family housing and the Bachelor Officers' Quarters and Bachelor Enlisted Quarters. In addition, the design for retrofitting the existing heating, ventilation, and air conditioning system of the high-rise family housing units with a state of the art air cleaning system is nearly complete.

c. Community health education efforts include providing education about minimizing exposure to incinerator emissions, providing education about minimizing exposure to soot from incinerator emissions and other sources of poor air quality, and developing a base wide pollution advisory and alert system which is broadcast over the local public access television station.

d. BUMED and NEHC have developed four epidemiology studies in response to concerns about the environmental exposures at Atsugi and the potential for adverse health effects. The findings of these studies will assist the Navy in better characterizing the health risks at Atsugi and identifying further actions to reduce health risk.

**6. Summary of Key Elements and Perspective for Delivering Risk Communication and Health Consultation on the Environmental Health Risk at NAF Atsugi.** The key elements and perspective for provision of risk communication and health consultation on the potential environmental health risk at NAF Atsugi, as addressed in this forward, include the following:

a. The Navy is committed to protecting the health and well being of our people.

b. The Navy is aggressively engaged in diplomatic negotiations with GOJ to close Jinkanpo (Shinkampo) or significantly reduce incinerator emissions and will keep the Atsugi community informed regarding the status of negotiations.

c. The Navy will communicate a current factual description of the environment at NAF Atsugi, the poor air

quality due to pollution, and the impact of Jinkanpo (Shinkampo) on the facility. Related to this, the Navy is conducting a comprehensive Health Risk Assessment to characterize more completely the environmental health risk at Atsugi and several epidemiology studies to evaluate the impact of the environment on the health of the people at Atsugi. The Navy will provide status reports on these studies and share findings on these studies as they are completed.

d. The Navy will communicate the known and potential non-cancer and cancer health effects related to exposure to the air pollution and identify those at greater risk for these health effects.

e. The Navy will provide one-on-one health consultations for those identified to be at greater risk and will offer health consultations to all who request them.

f. The Navy will provide education to the Atsugi community regarding measures individuals and families can take to reduce exposures to environmental pollution and incinerator emissions.

g. The Navy is pursuing the use of various engineering controls at NAF Atsugi to reduce exposure to air pollution and incinerator emissions. The Navy will keep the community apprised on the status and effectiveness of these efforts.

1.0. Definitions.

1.1. Risk Communication. The term "risk communication," as used in this plan, applies to the process of informing and educating people regarding the environmental health risk at Atsugi and continuing actions being taken to mitigate the risk.

1.2. Health Consultation. The term "health consultation," as used in this plan, applies to the conduct of a clinical health assessment of an individual with the specific intent to review the environmental health risk at Atsugi and determine the potential impact of the health risk on health of the individual.

1.3. Abbreviations.

1.3.1. **BMC Atsugi** is the Branch Medical Clinic Atsugi, Japan.

1.3.2. **BUMED** is the Bureau of Medicine and Surgery for the Department of the Navy.

1.3.3. **BUPERS** is the Bureau of Naval Personnel.

1.3.4. **CPF** is the command of Commander in Chief Pacific Fleet.

1.3.5. **CNFJ** is the command of Commander Naval Forces Japan.

1.3.6. **NAF Atsugi** is Naval Air Facility Atsugi, Japan.

1.3.7. **NEHC** is the Navy Environmental Health Center.

1.3.8. **Jinkanpo** is the name of the privately owned Japanese

incinerator located adjacent to the fence line at NAF  
Atsugi. It has also been called **Jinkampo** and  
**Shinkampo** in translated documents.



2.0. Risk Communication and Health Consultation for Individuals Prior to Transfer to NAF Atsugi. The Navy will ensure health risk communication regarding the environment at NAF Atsugi is provided to all active duty personnel, family members of active duty, and civilian personnel prior to transfer to Atsugi. The Navy will coordinate with the Department of Defense (e.g. DOD Dependent Schools (DoDDS)) and other Federal agencies to provide them with health risk communication materials they may use to inform their employees of the environmental health risk prior to relocation to the area. Provision of health risk information will enable personnel and family members to make informed decisions regarding their move to Atsugi. The Navy will also provide one-on-one health consultations to active duty personnel and their families to discuss the implication of the health risk on an individual basis and to ensure medical suitability of transfer to the Atsugi environment.

2.1. Risk Communication.

2.1.1. Risk Communication for Active Duty Personnel. BUPERS and BUMED are jointly responsible for providing environmental health risk communication to active duty personnel who are receiving orders to commands stationed at NAF Atsugi and the aviation commands assigned to the aircraft carrier homeported in Japan.

2.1.1.1. BUPERS Role. At the time orders to Atsugi are negotiated, the detailers at BUPERS will provide information on the environmental pollution at Atsugi and the potential for impact on health to active duty personnel. Detailers will refer personnel who desire additional information to knowledgeable points of contact at NAF Atsugi and NEHC. BUPERS commenced risk communication on 29 May 98.

2.1.1.1.1. BUPERS will identify all requisitions for Atsugi-based commands with an "auto remark" which will prompt detailers to provide the risk communication. The auto remark will read:

"Use Detailer Script to provide environmental information to the member."

2.1.1.1.2. Detailers will use an abbreviated Detailers' script to present the risk communication (see Appendix A). As detailers are not expert health risk communicators, detailers will provide the information on the abbreviated detailers' script and direct personnel who desire more information to points of contact at NAF Atsugi and NEHC. As part of the risk communication, detailers will also provide

information on access to NAF Atsugi and NEHC home pages for those interested in learning more about the issue.

2.1.1.1.3. BUPERS will maintain the text of the Detailers' Script on the BUPERS home page and in the Job Advertisement and Selection System (JASS) Open Mind as a general note for all to see.

2.1.1.1.4. Detailers will insert a standard statement in each service member's orders to an Atsugi-based command to document provision of this risk communication (See Appendix B).

2.1.1.1.5. Detailers were offered training in risk communication in May 1998 by NEHC. The training was done in Arlington, Virginia on 12-13 May 98 and in Millington, Tennessee on 25-26 May 98. This training provided detailers with a general understanding of risk communication, background information on the situation at NAF Atsugi, and an understanding of their role in the risk communication process as the first point of contact for active duty members considering orders to Atsugi. (See section 5.0, Training in Health Risk Communication, for further details.)

2.1.1.2. BUMED Role. BUMED through their medical staff at Navy medical treatment facilities (MTFs) will provide more in-depth environmental health risk communication to active duty personnel at the time of the overseas medical screen. BUMED first directed MTFs to incorporate this risk communication at the time of the overseas medical screen by message dated 26 Feb 98 (see Appendix C). BUMED prepared additional guidance to execute the plan as detailed below and released updated guidance in a message dated 7 July 1998 (see Appendix D).

2.1.1.2.1. Medical staff are directed to review a background summary document, developed by BUMED, entitled Response to Environmental Conditions at Naval Air Facility Atsugi: A Review, prior to conducting the medical overseas screen and risk communication (see Appendix E). To standardize communication of the environmental health risk at Atsugi to the active duty member, BUMED has also developed a Health and Environmental Fact Sheet (see Appendix F) that the medical provider will review with each individual or family undergoing medical overseas screening for suitability for assignment to NAF Atsugi.

2.1.1.2.2. Medical staff will provide a copy of the current Health and Environmental Fact Sheet on general health risk information related to the environment at Atsugi prepared by

BUMED to each service member and adult family member at the time of risk communication.

2.1.1.2.3. Medical staff will document provision of risk communication to the active duty member on a special overprinted Standard Form (SF) 600 (see Appendix G) developed by BUMED to summarize the environmental health risk at Atsugi.

2.1.1.2.4. The active duty member will countersign his/her SF 600 to acknowledge receipt of the risk communication.

2.1.1.2.5. In addition to providing medical staff with detailed guidance on the conduct of the risk communication, BUMED will also coordinate with NEHC to offer these staff more formal training in risk communication through the use of a 36 minute video specifically prepared for this purpose and scheduled for distribution in September 1998. (See section 5.0. Training in Health Risk Communication for further details.)

2.1.2. Risk Communication for Family Members of Active Duty Personnel. As for active duty members, BUMED through their medical staff at Navy medical treatment facilities (MTFs) will provide environmental health risk communication to all adult family members (18 years and older) of active duty at the time of the overseas medical screen. Family members will receive the same services as detailed for active duty members in section 2.1.1.2. Whenever possible the overseas medical screen should be completed as a family unit with sponsor, spouse, and children present.

2.1.2.1. Medical staff will document provision of risk communication to family members on the special overprinted SF 600 (see Appendix G) developed by BUMED to summarize the environmental health risk at Atsugi. One SF 600 will be completed for each family member.

2.1.2.2. Each adult family member over the age of 17 will countersign his/her SF 600 to acknowledge receipt of the risk communication. The sponsor or spouse will sign the SF600 for children under 18 years.

2.1.3. Risk Communication for Civilian Employees. BUMED is currently working with ODASN (CP/EEO) and CPF to establish a plan for providing risk communication to civilian employees working for the U. S. Navy and employees of DoD Dependents Schools (DODDS).

2.2. Health Consultation for Active Duty Personnel and Family Members, a BUMED Role. In addition to providing environmental health risk communication, BUMED through their medical staff at Navy medical treatment facilities (MTFs) will also provide one-on-one health consultation to active duty personnel and each of their family members as part of the overseas medical screen for transfer to Atsugi. In follow up to the message dated 26 Feb 98 which tasked MTFs to conduct the risk communication, BUMED released additional guidance regarding the one-on-one health consultation to be incorporated into the medical overseas screen on 7 July 1998(see Appendix D).

2.2.1. The Overseas Medical Screen. NAVMEDCOMINST 1300.1C, Suitability Processing for Overseas Assignment of Navy and Marine Corps Members and their Accompanying Dependents, and BUMEDNOTE 1300, Suitability Screening for Overseas and Remote Locations, provide direction for performing an overseas medical screen. The standard overseas medical screen includes a medical record review, a current medical history (SF 93) on each beneficiary, and a physical examination, when medically necessary.

2.2.1.1. A special overprinted SF 600 (see Appendix G) is used to summarize findings of the medical record review and the current medical history and to document any potentially disqualifying diseases or conditions per the directions of NAVMEDCOMINST 1300.1C. Potentially disqualifying conditions for assignment to NAF Atsugi are specifically addressed in section 2.2.2.1.

2.2.1.2. NAVMED 1300/1, the Medical and Dental Overseas Screening Review for Active Duty or Dependents, is used to summarize chronic medical conditions, requiring routine or continuing access to care or access to specialized medical care, and to recommend suitability for assignment to the overseas location.

2.2.1.3. NAVPERS 1300/16, Report of Suitability for Overseas Assignment, is used to compile findings of the medical overseas screenings for the service member and his/her family members into one document and to document whether or not the service member and each family member is medically recommended for the assignment to the overseas location.

2.2.2. Suitability for Assignment based on Environmental Health Risk at NAF Atsugi. As part of the overseas medical screen, and in addition to communicating the environmental health risk at NAF Atsugi, medical staff will discuss

potential impact of the risk on any medical conditions identified at the time of the overseas medical screen and determine the suitability of assignment to Atsugi. Potential non-cancer and cancer health effects of exposure to the poor air quality at Atsugi will be discussed and are highlighted in the Forward to this document.

2.2.2.1. At present, chronic respiratory conditions, such as asthma or chronic obstructive pulmonary disease, are the only potentially disqualifying conditions for assignment to Atsugi. Level Three and Level Four asthma, as defined in New Asthma Therapy Recommendations: May 1997 Guidelines for the Diagnosis and Management of Asthma Expert Panel Report 2 of the National Institutes of Health National Heart Lung and Blood Institute, are specifically disqualifying for assignment to NAF Atsugi. For other chronic conditions, medical staff must use their professional judgement to determine suitability of assignment to Atsugi, however any moderate to severe chronic respiratory conditions may be considered disqualifying on a case-by-case basis. Medical staff conducting the overseas medical screen and suitability assessment are encouraged to contact the Branch Medical Clinic at NAF Atsugi to discuss suitability determinations.

2.2.3.2. Medical staff will annotate on the risk communication SF 600 (see Appendix G) whether or not a potentially disqualifying condition exists and the medical determination of suitability or qualification for assignment to Atsugi.

2.2.3.3. Medical staff will also annotate the details of the disqualifying condition on the overseas screening SF 600, NAVMED1300/1 and NAVPERS 1300/16.



3.0. Risk Communication and Health Consultation for  
Individuals Employed by, Assigned to, or Residing at NAF  
Atsugi and Tenant Commands.

3.1. New Arrivals. Newly arrived Service members and their families as well as civilian employees and their family members are required to participate in an Area Orientation Brief (AOB) and a separately scheduled Risk Communication Session for New Arrivals provided by NAF Atsugi. Although all newly arrived personnel should have received risk communication and health consultation during their medical overseas screen prior to departure from CONUS, the Health Risk Communication Office at NAF Atsugi will schedule all new arrivals over the age of 17 for an additional risk communication session. This session will provide an opportunity for NAF Atsugi Command representatives and BMC Atsugi staff to inform newly arrived individuals of the updated status of environmental concerns and ongoing actions that may reduce exposure to environmental pollution. If any newly arrived personnel or family member did not receive the Health Consultation during the medical overseas screening evaluation in CONUS, that individual and his family will be referred to BMC Atsugi for a Health Consultation.

3.1.1. Risk Communication for Active Duty and Family Members. NAF Atsugi is responsible for providing Environment and Health Risk Communication Briefings to all new arrivals, including military members, as well as all family members over the age of seventeen years.

3.1.1.1. Presentation of Risk Communication.

3.1.1.1.1. The Risk Communication Session will be given by a team consisting of an NAF Atsugi Command representative and a BMC Atsugi representative. The initial presentation will last approximately thirty minutes, followed by a poster availability session where community members will have an opportunity to address specific questions or concerns with the Risk Communication Team members. The briefing session will review the air quality issues at NAF Atsugi, actions being taken to address these issues, potential health effects related to poor air quality, and recommended personal protective measures that individuals may adopt to minimize environmental exposure for themselves or family members.



3.1.1.1.2. The Risk Communication Session should follow the same format as BUMED/NEHC/BMC Atsugi/NAF Atsugi developed for use with the current residents of NAF Atsugi. This is described in section 3.2.

3.1.1.1.3. A poster availability session should immediately follow the Risk Communication Session in order to provide an opportunity for individuals to meet with local informed experts.

3.1.1.1.4. The NAF Atsugi Health and Environmental Fact Sheet will be distributed at the Risk Communication Session.

3.1.1.1.5. Consultants from the Environmental Programs Directorate of NEHC will assist NAF Atsugi with developing updated briefing packets when new information from ongoing environmental studies at NAF Atsugi becomes available.

#### 3.1.1.2. Documentation of Risk Communication.

3.1.1.2.1. NAF Atsugi must retain documentation of provision of Risk Communication to all new arrivals.

3.1.1.2.2. A page 13 entry, developed by NAF Atsugi will document provision of Risk Communication (see Appendix H).

3.1.1.2.3. For those individuals who have had previous assignments to NAF Atsugi, the page 13 entry must also document when the individual, and all family members over the age of 6 years, will reach a total stay time of 72 months at NAF Atsugi.

3.1.1.2.4. For those individuals with children under the age of 6 years, the page 13 entry must document when the family will complete a total stay time of 36 months at NAF Atsugi.

3.1.1.2.5. Each individual over the age of 17 years will be required to provide signature to the page 13 to document receipt of the Risk Communication Brief.

#### 3.1.1.3. Scheduling of Health Consultations.

3.1.1.3.1. At the time of the Risk Communication session, the Risk Communication Team will inform all individuals that the Navy is committed to providing each individual and family member an opportunity to meet with a health care provider to discuss the possible health effects of the environmental conditions at NAF Atsugi. Every individual

will be advised of the opportunity to schedule an elective individual Health Consultation at BMC Atsugi. The Health Consultation schedules forty minutes for a family of four and twenty minutes for an individual appointment.

3.1.1.3.2. During the Risk Communication session, new arrivals will be advised that if a Health Consultation was not performed during the medical overseas screening process prior to arrival at NAF Atsugi, the individual and all family members will be referred to BMC Atsugi for the necessary Health Consultation.

3.1.1.3.3. NAF Atsugi will notify the BMC Atsugi of any individuals or families requesting or requiring a Health Consultation.

3.1.2. Risk Communication for Civilian Employees and Family Members of Civilian Employees. Until further guidance is issued, NAF Atsugi will ensure that all newly arriving Civilian Employees and Family Members of Civilian Employees are offered and included in the same process of Risk Communication provided to Military members and their family members.

3.1.2.1. Until further guidance is issued, documentation of Risk Communication for Civilian Employees and Family Members of Civilian Employees at NAF Atsugi will utilize the same process and forms as previously described in section 3.1.1.2.

3.1.2.2. NAF Atsugi will retain documentation of Risk Communication provided for Civilian Employees and Family Members of Civilian Employees.

3.1.3. Health Consultations for Active Duty and Family Members. The BMC Atsugi is responsible for conducting Health Consultations for every Service member and his family according to guidelines based upon length of stay at NAF Atsugi and the age of family members, but in general, all Service and family members will complete a Health Consultation at time of permanent change of station (PCS) departure from NAF Atsugi. The purpose of the Health Consultation is to review the environmental health risk status at NAF Atsugi and conduct a clinical medical assessment to determine the potential impact of the environment upon individual health.

3.1.3.1. Required Health Consultations

3.1.3.1.1. Health Consultations will be provided for all

individuals and family members who arrive at NAF Atsugi without having received a Health Consultation prior to departure from their previous Command and at the time of their medical overseas screening evaluation for suitability for assignment to NAF Atsugi. BMC Atsugi is responsible for reviewing the medical records as part of Command check in to determine whether the required Health Consultation was performed.

3.1.3.1.1.1. A special SF 600 overprint, signed by the health care provider and the Service member or family member over the age of 17, will document provision of Risk Communication and Health Consultation for NAF Atsugi as required.

3.1.3.1.1.2. If the special SF 600 overprint is not in the medical record at the time of arrival in NAF Atsugi, BMC Atsugi will notify the originating Command and schedule the Service member and family members for the required Health Consultation.

3.1.3.1.2. Health Consultations will be conducted for all individuals and family members prior to PCS departure from NAF Atsugi.

3.1.3.1.3. If a family has children under the age of 6 and is requesting retour at NAF Atsugi or extension of their current tour such that the total tour will exceed 36 months, the Service member and his family must complete a Health Consultation prior to exercising extension or retour at NAF Atsugi.

3.1.3.1.4. Any Service member or individual whose family members were over the age of 6 years during the time of assignment to NAF Atsugi must complete a Health Consultation if requesting a retour or extension of current tour at NAF Atsugi such that total stay time at NAF Atsugi will exceed 72 months.

#### 3.1.3.2. Elective Health Consultations.

3.1.3.2.1. Any individual assigned to NAF Atsugi who has health concerns related to environmental conditions at NAF Atsugi may schedule a Health Consultation at BMC Atsugi at any time.

3.1.3.3. Focused Health Consultations. BMC Atsugi will take a proactive position to identify individuals who may be more likely to experience health concerns or health effects

related to the environmental conditions at NAF Atsugi. These individuals will be offered Health Consultations.

3.1.3.3.1. Families with children under six years.

3.1.3.3.2. Pregnant or nursing women.

3.1.3.3.3. Individuals with chronic respiratory conditions.

3.1.3.4. Elements of the One-on-One Health Consultation.

3.1.3.4.1. Medical health care providers will read the background summary document entitled, Response to Environmental Conditions at Naval Air Facility Atsugi: A Review (See Appendix E). This document will prepare providers to review the environmental health risk at NAF Atsugi with the active duty member and his/her family.

3.1.3.4.2. Medical staff will provide a copy of the current NAF Atsugi Health and Environmental Fact Sheet (see Appendix F) to the active duty member and all family members over the age of 17 years.

3.1.3.4.3. Medical staff will document review of risk communication with the active duty member and family on a special overprinted SF 600 that summarizes the environmental health risk at NAF Atsugi (see Appendix G).

3.1.3.4.4. If the Health Consultation is performed at time of departure or tour extension at NAF Atsugi, the SF 600 will also document history on where service members and family members lived, worked, or attended school or day care while at NAF Atsugi.

3.1.3.4.5. One SF 600 overprint will be completed for each active duty member and each member of his/her family.

3.1.3.4.6. Medical staff will review current and past medical history, perform a physical examination if indicated, to document whether or not a condition exists which may be caused or exacerbated by the environmental conditions at NAF Atsugi. Any medical conditions identified that are potentially disqualifying for continued overseas assignment to NAF Atsugi will be recorded.

3.1.3.4.6.1. At present, chronic respiratory conditions, such as step 3 or step 4 asthma as described in section 2.2.2.1., are disqualifying for continued assignment to NAF

Atsugi. Other moderate to severe respiratory conditions should be evaluated on a case by case basis.

3.1.3.4.6.2. If disqualifying conditions are identified, the individual or family should be managed by referral to NAF Atsugi with recommendation that the Commanding Officer activate the Early Return of Dependents process.

3.1.3.4.6.2. Findings and recommendations will be discussed with the individual and family member with signature of provider and all persons over the age of 17 years required to document discussion of findings and recommendations on the SF 600 overprint.

3.1.3.4.7. All individuals age seventeen or older, including family members, will complete a Health Risk Appraisal "Fit to Win" evaluation.

3.1.3.4.7.1. The Health Risk Appraisal addresses the status of risk factors such as tobacco use, quality of diet, level of exercise, alcohol use, blood pressure and cholesterol levels.

3.1.3.4.7.2. Identification of risk behaviors will support medical counseling on healthy lifestyles and recommendations for risk factor reduction.

3.1.3.4.7.3. Identification of risk behaviors will provide valuable information on baseline health status and risk factors that an individual possesses at the time of the Health Consultation.

3.1.3.4.8. BMC Atsugi will maintain a proactive stance with all patients to ensure patients are aware of the health risk imposed by the environment at NAF Atsugi and understand the personal protective precautions that will minimize exposure.

#### 3.1.4. Health Consultations for Civilian Employees and Families of Civilian Employees.

3.1.4.1. Pending further guidance, NAF Atsugi and BMC Atsugi will offer to include these individuals in the Health Consultation process previously described for active duty members and family members.

3.1.4.2. There will be no payment required for the Health

Consultations conducted at the BMC Atsugi or offered as part of the medical overseas screening process for suitability of assignment through employment to NAF Atsugi.

3.1.4.3. The process and forms used to provide Health Consultations to civilian employees and family members will be as described in section 3.1.3.

3.1.4.4. BMC Atsugi will retain documentation of the Health Consultations provided to civilian employees and family members, pending further guidance.

3.2. Risk Communication and Health Consultation at NAF Atsugi June/July/August 1998. In order to ensure that the population of NAF Atsugi and each Tenant command is afforded an opportunity to receive current information about the environmental issues at NAF Atsugi and the many activities underway to address those issues (See Forward), NAF Atsugi, assisted by BMC Atsugi, NEHC, and BUMED, will conduct Risk Communication sessions for the entire population. Health Consultations will be required for families with children under the age of six years, individuals with chronic respiratory conditions, women who are pregnant or breastfeeding, and any individual requesting tour extensions or retours in NAF Atsugi that would extend the total time of assignment/employment at NAF Atsugi to 72 months for individuals or family members age six or older or 36 months if there is a family member under the age of six.

3.2.1. A joint CINCPACFLT, BUPERS, BUMED message 042358ZMay98 directed that Risk Communication and Health Consultation would occur for everyone currently onboard NAF Atsugi or any of its Tenant Commands (See Appendix I).

3.2.1.1. Risk Communication.

3.2.1.1.1. These briefings were to be conducted as small group sessions with no more than 50 participants.

3.2.1.1.2. A Risk Communication Team, consisting of a representative from NAF Atsugi, BMC Atsugi, and BUMED/NEHC, would conduct these briefings between the months of June and August.

3.2.1.1.3. The briefings were to relate the nature and magnitude of health risks related to air quality, inform individuals of specific actions to reduce health risks, and describe the ongoing studies, including the full Health Risk Assessment and the medical epidemiology studies, that are attempting to further determine risk.



3.2.1.1.4. The briefings were to identify individuals potentially at greater risk for health effects related to environmental conditions at NAF Atsugi. These individuals were to be referred for a Health Consultation. Any person could request a Health Consultation.

3.2.1.1.5. At the time of the Risk Communication briefing each individual would document by signature on a page 13 entry that they attended the Risk Communication, did or did not request a Health Consultation, or elected to defer the decision on the Health Consultation.

3.2.2. NAF Atsugi released a GENADMIN 210900ZMay98 (see Appendix J) directing all Naval Activities onboard NAF Atsugi to participate in the mandatory Risk Communication Sessions.

3.2.2.1. The small group sessions of Risk Communication began on 8 June 1998, and are inclusive of all military and civilian personnel, age 18 and over.

3.2.2.2. The risk communication brief is followed by a poster availability session (see Appendix K) during which the Risk Communication Team is available to answer individual questions or concerns.

#### 3.2.1.2. Health Consultations.

3.2.1.2.1. Those individuals, potentially at higher risk for health effects and as described in section 3.1., were to be scheduled, at the time of the Risk Communication Briefing, for a subsequent Health Consultation at BMC Atsugi. Medical and personnel records were to be screened to identify persons in need of one-on-one Health Consultations.

3.2.1.2.2. Health Consultations began on 9 June 98 in the BMC Atsugi, conducted by the Occupational Health Team contracted by BUMED. Civilian employees and their family members are also offered the recommended or elective Health Consultation with no payment required.

3.2.1.2.3. The elements of the Health Consultation are as described in section 3.1.3.4.

3.3. Risk Communication and Health Consultation Prior to Permanent Change of Station Departure from NAF Atsugi and Tenant Commands. Prior to PCS departure from NAF Atsugi,

all Service members, civilian employees, and any of their family members must complete a Health Consultation at the BMC Atsugi. The PSD of NAF Atsugi and tenant commands must ensure that this required consultation is completed and documented prior to PCS departure of any family or individual completing an assigned tour at NAF Atsugi or any tenant commands. NAF Atsugi will make a page 13 entry to document completion of the required Health Consultation prior to PCS departure from NAF Atsugi.

#### 3.3.1. Risk Communication.

3.3.1.1. Risk Communication will be provided as an element of the Health Consultation conducted by the staff of BMC Atsugi.

3.3.1.2. Risk Communication will be documented on the SF 600 overprinted completed by medical at the time of the Health Consultation.

3.3.1.3. Each Service member or civilian employee and all family members over the age of 17 years will receive a copy of the most current NAF Atsugi Health and Environmental Fact Sheet.

#### 3.3.2. Health Consultation.

3.3.2.1. A one-on-one Health Consultation must be completed for each individual and family member prior to PCS departure from NAF Atsugi.

3.3.2.2. The Health Consultation will be conducted by the BMC Atsugi.

3.3.2.3. The elements of the Health Consultation are described in section 3.1.3.4.

3.3.2.4. The SF600 overprint completed at the time of the PCS departure Health Consultation (see Appendix U) will also document history on where service members and family members lived, worked, or attended school or day care while at NAF Atsugi.

4.0 Community Outreach Program at NAF Atsugi. The Community Outreach Program at NAF Atsugi is a multifaceted program conducted by NAF Atsugi in consultation with NEHC, BUMED, CNFJ, and CPF. The CINCPACFLT message 042358ZMay98 (Appendix I) directs that the Community Outreach Program at NAF Atsugi be broadened and intensified in accordance with the Comprehensive Plan for Risk Communication and Health Consultation at NAF Atsugi. The message also directs NAF Atsugi, with the assistance of BUMED, to develop a method of evaluating the effectiveness of the Community Outreach Program and Risk Communication.

4.1. Community Outreach Program Overview.

4.1.1. Goal. While the Navy has already conducted many community outreach actions to provide information and recommendations to the NAF Atsugi community members, an overarching plan will ensure that information continues to be regularly disseminated. The goal of the Community Outreach Program is to address health concerns and keep the community informed of the continuing actions the Navy is taking to assess the risk of the poor air quality at NAF Atsugi to health. The community must continue to be informed of actions to minimize exposure of the population to the poor air quality at NAF Atsugi. The community will be informed of progress in the ongoing diplomatic negotiations related to the operation of the adjacent Jinkampo Incineration Complex. The Community Outreach Program will provide information to current NAF Atsugi residents, individuals and families considering transfer to NAF Atsugi, and members of the media.

4.1.2. Objectives.

4.1.2.1. Provide information to individuals and families in order to assist them in making informed decisions regarding their stay at NAF Atsugi.

4.1.2.2. Relay information to those individuals considering NAF Atsugi as a duty station.

4.1.2.3. Actively solicit and be responsive to the concerns of our military families, civilian personnel, DODDS employees, and other involved individuals.

4.1.2.4. Ensure updated information is regularly provided to our military families, civilian personnel, DODDS employees, and other involved individuals.

4.1.2.5. Ensure information is clear, accurate, and

consistent.

4.1.2.6. Ensure timely and regular release of all information.

4.1.2.7. Establish communication responsibilities.

4.1.2.8. Provide communication training appropriate to the level of responsibility of the communicator.

4.1.3. Program Elements. The Community Outreach Program will be conducted by NAF Atsugi and contains several elements.

4.1.3.1. History of Risk Communication Activities at NAF Atsugi. There have been many previous risk communication activities to address the dual issues of poor air quality and the risk to the health of individuals at NAF Atsugi. Risk communication is ongoing and newly arrived Service members, civilian employees, and all family members over the age of 17 are scheduled to attend a Risk Communication Session for New Arrivals shortly after PCS check in to NAF Atsugi or tenant commands. There are also ongoing diplomatic actions being conducted by United States Government representatives with the Government of Japan (GOJ) and Kanagawa Prefectural Government (KPG).

4.1.3.1.1. Past Risk Communication Activities.

4.1.3.1.1.1 NAF Atsugi has had the lead to communicate environmental risk information to residents.

4.1.3.1.1.2. Experts in health risk communication at the Navy Environmental Health Center (NEHC) have assisted the staff of NAF Atsugi and Branch Medical Clinic Atsugi with training in methods of effective risk communication and education. NEHC has also assisted NAF Atsugi staff with preparation of materials and presentation of risk communication activities. Risk communication has attempted to convey health risk in proper perspective as well as provide information on actions individuals can take to reduce their health risk.

4.1.3.1.1.3. NAF Atsugi has hosted the following formal events.

- Oct 95: Public exhibit.
  - The public exhibit (1) reviewed background and results of the 1995 Engineering Study and HRA in understandable language, (2) addressed health and

medical issues, (3) discussed base initiatives, and (4) discussed related political issues.

- Voluntary health screening was offered to concerned personnel.
- A plan to educate base personnel on sensible precautions to protect their health was addressed.
- Feb 97: Shirley Lanham Elementary School Teachers Brief.
- APR 97: Public exhibit.
- Apr 97: Shirley Lanham Elementary School 4<sup>th</sup> Grade Class Brief.
- Nov 97: Public meeting.
  - NAF Atsugi hosted a Public Meeting to update residents on ongoing efforts by the Navy to resolve the incinerator issue. Public exhibits and information booths with subject matter experts were set up to provide information on the nature of air pollution at Atsugi, related medical risk, and individual protective measures and engineering controls to reduce exposure to poor air quality and incinerator emissions.
  - The CO NAF Atsugi and representatives from CNFJ and NAVENVIRHLTCEN met with a group of concerned citizens to discuss specific issues.
- Jan 98: NAPRA (tenant command) safety stand down brief.
- Feb 98: Branch clinic sponsored training for Child Development Center, Youth Center and Family Home Care Providers.
- Mar 98: Branch clinic sponsored training for family members.

4.1.3.1.1.4. NAF Atsugi has hosted training sessions in Risk Communication. With the assistance of NAVENVHLTCEN, the following training sessions have been provided in support of personnel participating in the Risk Communication activities at NAF Atsugi. Training was conducted by Dr. Vincent Covello, the DOD expert consultant in methods of health and environmental risk communication.

- Jan 97: A three day off-site Health and Environmental Risk Communication Workshop was conducted for personnel at NAF Atsugi and USNH Yokosuka.
- Jun 98: A day and a half training session in Risk Communication was held at NAF Atsugi for personnel designated as participants in the scheduled risk

communication and health consultation activities planned for the summer of 1998.

- **Jun 98:** A two hour executive brief in techniques of effective risk communication was held for the invited senior leadership personnel at NAF Atsugi, CPF, USNH Yokosuka, and Branch Medical Clinic Atsugi.
- **Jun 98:** A one half day session of training in Risk Communication techniques was held for the remainder of the staff at Branch Medical Clinic Atsugi who were not designated as direct participants in the planned summer 1998 risk communication and health consultation activities at NAF Atsugi.

4.1.3.2. Communication Techniques. Several communication techniques will be used by NAF Atsugi to maintain two-way public dialogue. Appropriate use of these methods will ensure that the NAF Atsugi community is properly informed on health issues, educated in personal actions to take to reduce individual exposure to poor air quality, aware of the most recent findings of ongoing studies, and given the opportunity to ask questions and receive replies from Navy experts. Utilization of these techniques will also assist Navy leadership in remaining aware of changing community concerns. Communication techniques to provide a comprehensive public outreach program must inform the community and educate the community.

4.1.3.2.1. Informing the Community. NAF Atsugi will use several means of keeping the community informed of health issues and ongoing environmental studies related to the air quality at NAF Atsugi in order that individuals can make decisions as to whether they should remain at NAF Atsugi. Furthermore, the techniques used will ensure that the community members have adequate opportunities to ask and get responses to their questions concerning the various aspects of this issue. This section will address:

4.1.3.2.1.1. Process of Informing the Community.

4.1.3.2.1.1.1. Community members must continue to receive information in a timely manner. Building trust and credibility within the community will be clearly linked with the timeliness, clarity, and directness of the processes used to provide information to the community. In general, the less information people have, the more questions and concerns they will have.



4.1.3.2.1.1.2. Key community members and NAF Atsugi civilian employees will be identified and included in the process of channeling information to the NAF Atsugi community. Communications with these individuals will build and sustain awareness of the air quality assessment activities and ongoing activities to improve the air quality at NAF Atsugi.

4.1.3.2.1.1.3. Multiple channels and several techniques will be used to provide information to the military and civilian workforce, their family members, the media, and other interested individuals. NAF Atsugi Public Affairs Office will prepare and distribute information concerning ongoing environmental and medical epidemiology studies, recommendations for decreasing personal exposure to poor air quality, and, as appropriate, the status of governmental negotiations regarding incinerator operations. NAF Atsugi, through the Public Affairs Office, will coordinate distribution of information received from the Public Works Office, NEHC, CPF, CNFJ, and BUMED. All written questions and comments will receive a written response. The following communication techniques are or will be in use at NAF Atsugi.

4.1.3.2.1.1.3.1. Information Repositories.

4.1.3.2.1.1.3.1.1 Purpose. Information repositories will ensure that the public has regular access to information concerning NAF ATSUGI air quality issues.

4.1.3.2.1.1.3.1.2. Location. An information repository has been established at the NAF Atsugi Library.

4.1.3.2.1.1.3.1.3. Content. The information repository will contain the community outreach plan, public comments and responses to the comments, public notices, fact sheets, newspaper articles, reports of health and environmental studies, and videos of previous reports or interviews.

4.1.3.2.1.1.3.2. Public Notices.

4.1.3.2.1.1.3.2.1. Purpose. The primary purpose of public notices is to provide an official announcement of activities and plans concerning the air quality at NAF Atsugi.

4.1.3.2.1.1.3.2.2. Location. Public notices will be placed in the Skywriter (the NAF Atsugi newspaper), on the NAF Atsugi Website and on the Armed Forces Radio and Television Network (AFRTN).

4.1.3.2.1.1.3.2.3. Content. Public Notices will notify the community of the time and location for Public Availability Sessions and other important events related to the issue of air quality at NAF Atsugi.

4.1.3.2.1.1.3.3. Fact Sheets. BUMED and the NEHC have developed fact sheets that provide information regarding health and the environment at NAF Atsugi (see Appendix F and L). Fact sheets will be updated as additional information is available.

4.1.3.2.1.1.3.3.1. Purpose. Fact Sheets summarize technical information and help to inform the public through a concise summary that can be read by all community members.

4.1.3.2.1.1.3.3.2. Location. Fact sheets will be provided and reviewed at the time of the Medical Overseas Screening of Suitability for Overseas Assignment, prior to arrival at NAF Atsugi. Fact sheets will be distributed at the NAF Atsugi Base Orientation and available at all community outreach events such as public availability sessions, exhibits, etc. The fact sheet will also be in the NAF Atsugi Base Library information repository and posted on the NAF Atsugi and NEHC web site.

4.1.3.2.1.1.3.3.3. Content. Fact sheets are brief summaries that use non-technical terminology to describe the risk assessment process for environmental pollutants, the pathways through which an individual may be exposed to pollutants, how health risks are determined, the status of the ongoing health risk assessment at NAF Atsugi, and recommendations for actions that may decrease an individual's exposure to air pollution. Fact sheets will also provide point of contact information if additional information is desired.

4.1.3.2.1.1.3.4. Newsletters. Newsletters ensure that community members have a regular means of receiving updated information and point of contact information.

4.1.3.2.1.1.3.4.1. Purpose. Providing frequent updates on the progress of multiple actions addressing the air quality situation at NAF Atsugi is essential to keeping the community informed.

4.1.3.2.1.1.3.4.2. Location. Following review and concurrence by NAF Atsugi, the newsletter will be distributed to the community through appropriate Base channels such as the Ombudsman program. The newsletter

will also be placed in the information repository at the NAF Atsugi Base Library. The first newsletter will describe the interim environmental sampling results of the full health risk assessment study. The projected distribution date is September 1998.

4.1.3.2.1.1.3.4.3. Content. NEHC will produce a newsletter every three months that will describe progress to date on the full health risk assessment and the medical epidemiology studies. NAF Atsugi will add local information concerning actions to decrease exposure of the base population to poor air quality and progress on diplomatic negotiations to effect modification of the Jinkanpo (Shinkampo) Incinerator operations, if appropriate. The newsletter format supports the use of maps or other graphics that will allow the community to receive some additional aids to assist their understanding of technical information.

4.1.3.2.1.1.3.5. Press Releases. In coordination with CNFJ, NAF Atsugi will continue to utilize press releases to provide timely information to the NAF Atsugi base population and surrounding community members.

4.1.3.2.1.1.3.5.1. Purpose. Press releases describe the actions being taken to address the concerns of the Navy and the community. Press releases for the media will commonly be used to announce community outreach activities, to report the results of public meetings/public availability sessions, and to describe significant interim findings in environmental surveys or in the ongoing full health risk assessment.

4.1.3.2.1.1.3.5.2. Location. Following established review and coordination procedures with CNFJ, NAF Atsugi Public Affairs Office will distribute press releases to the base newspaper, "The Skywriter", and the local broadcast media. Press releases can also be placed on the NAF Atsugi Base Information Channel.

4.1.3.2.1.1.3.5.3. Content. Press releases will be used to announce community outreach events, such as public availability sessions. Press releases will also describe key technical milestones and findings in the ongoing environmental surveys and health risk assessment processes.

4.1.3.2.1.1.3.6. Telephone Infoline (Commanders' Action Line or Health Risk Communication Office).

4.1.3.2.1.1.3.6.1. Purpose. It is important for the

public to have a relatively quick means of expressing their concerns directly to NAF Atsugi and getting questions answered.

4.1.3.2.1.1.3.6.2. Location. Interested individuals can call the Health Risk Communication Office or the NAF Atsugi Commanders' Action Line to leave a recorded phone message describing the questions or concerns. Individuals will receive a reply, by phone, within 24-48 hours. A phone log will be used to record all calls, questions asked, or response given.

4.1.3.2.1.1.3.6.3. Content. The Commanders' Action Line is an established process by which any resident, employee, or beneficiary can address any question or concern directly to the Command. While not a specific hot line for air quality concerns, the Commanders' Action Line is an established and familiar means through which any individual can directly address the NAF Atsugi Command and receive a prompt reply. The Health Risk Communication Line is a dedicated line through which any individual can express environmental concerns and questions.

4.1.3.2.1.1.3.6.4. Records. It is important to record the number of calls and the types of questions related to environmental exposure/health concerns that come to the Commanders' Action Line. This information will be a necessary component of the overall Community Outreach Program evaluation.

#### 4.1.3.2.1.1.3.7. Website.

4.1.3.2.1.1.3.7.1. Purpose. An NAF Atsugi website will provide information to current, future, and past NAF Atsugi residents concerning the Jinkanpo (Shinkampo) Incinerator issue.

4.1.3.2.1.1.3.7.2. Location. The NAF Atsugi website will be maintained by the NAF Atsugi Public Affairs Office. It can be found via the internet at [www.atsugi.navy.mil](http://www.atsugi.navy.mil). There is a link to Jinkanpo (Shinkampo) and to the NEHC.

4.1.3.2.1.1.3.7.3. Content. The NAF Atsugi website will provide information such as the status of negotiations with the Japanese, upcoming community outreach events, the number to the NAF Atsugi Commanders' Action Line, answers to frequently asked questions and any other pertinent information. The NAF Atsugi website will link to the NEHC website which will provide fact sheets and information

concerning the status of the health risk assessment and epidemiological studies.

#### 4.1.3.2.1.1.3.8. Questions and Answers.

4.1.3.2.1.1.3.8.1. Purpose. A Frequently Asked Question list will be used to address specific concerns at the community level of interest.

4.1.3.2.1.1.3.8.2. Location. NAF Atsugi has developed a comprehensive list of frequently asked questions. These questions and answers are posted on the NAF Atsugi web site and in the Information Repository at the NAF Atsugi Base Library. The Frequently Asked Questions (see Appendix T) were most recently updated in May 1998, and are also distributed at public exhibits and public availability sessions.

4.1.3.2.1.1.3.8.3. Content. While the development, editing, and distribution of the Frequently Asked Questions is the responsibility of NAF Atsugi, in future revisions NEHC will assist NAF Atsugi in providing responses to the questions, at the community level of interest. Close coordination between NAF Atsugi and NEHC will be essential to assuring that the responses are updated as additional information is acquired and that a clear and coordinated message is provided. Additional questions from the community can be gathered from ongoing monitoring of public availability sessions, Commanders' Action Line calls, and website inquiries.

4.1.3.2.2. Educating the Community. A key objective in any communication effort is to ensure that people have continuous and ready access to information and can understand the technical aspects of the issue of concern. NAF Atsugi will use public meetings, public exhibits, public availability sessions, and community advisory panels as means of educating the community in order to assist the community members' understanding of the technical information being collected. Through education, the community members will be better prepared to make educated decisions regarding their health and the health of their family members.

#### 4.1.3.2.2.1. Process of Educating the Community.

4.1.3.2.2.1.1. Education activities must be timely and linked with completion of key activities such as the full health risk assessment or the medical epidemiology studies.

4.1.3.2.2.1.2. Education activities should include key community representatives as well as health or environmental experts.

4.1.3.2.2.1.3. Several forums will be used to educate the community and are described in the following segments.

4.1.3.2.2.1.3.1. Command Briefings/Community Meetings

4.1.3.2.2.1.3.1.1. Purpose. Command briefings or community meetings are meetings at which NAF Atsugi staff and other experts are available to present information and respond to questions/concerns. The residents are also offered the opportunity to ask questions, raise issues and receive feedback. This type of meeting should only be used as prelude to a public availability session immediately following the briefing.

4.1.3.2.2.1.3.1.2. Location. Public command briefings or community meetings will be scheduled by NAF Atsugi as new information becomes available through the ongoing medical epidemiology studies or the environmental studies and the full health risk assessment. The command meetings will be conducted in a NAF designated facility that can support movement of the community members from the larger community gathering to a nearby location housing the public availability session.

4.1.3.2.2.1.3.1.3. Content. NAF Atsugi designated representatives present summary information to the gathered community. General questions can be addressed, but the community is advised that additional experts can provide further detail and response to individual questions at the public availability session. NEHC and BUMED will provide representatives to address the findings of the full health risk assessment or the medical epidemiology studies at the request of NAF Atsugi.

4.1.3.2.2.1.3.2. Public Availability Sessions.

4.1.3.2.2.1.3.2.1. Purpose. Public availability sessions are designed as a follow on to public community meetings or command briefings or may be scheduled in place of large community gatherings in order to facilitate two way dialog between community members and topic experts. Public availability sessions provide an opportunity for individuals to ask questions and express concerns to those experts who are most knowledgeable in the area of interest. Public



exhibits such as poster presentations are often included in public availability sessions.

4.1.3.2.2.1.3.2.2. Location. Public availability sessions will be scheduled as an optional activity for any community member attending any command public meeting addressing any aspect of air quality actions at NAF Atsugi. The public availability session should be conducted in an area adjacent to but separate from the location of the command briefing or community meeting. All community members attending the public command briefing or community meetings will be invited to attend the public availability session.

4.1.3.2.2.1.3.2.3. Content. The public availability session will have a series of poster displays with visual aids that summarize ongoing activities and/or findings of ongoing investigational studies. Technical experts and NAF Atsugi command representatives will be available to discuss individual questions or concerns.

#### 4.1.3.2.2.1.3.3. Public Exhibits.

4.1.3.2.2.1.3.3.1. Purpose. Public exhibits are a convenient one-way communication tool that offer a means of maintaining public awareness. NAF Atsugi, with the aid of NEHC, will develop and display public exhibits periodically.

4.1.3.2.2.1.3.3.2. Location. Public exhibits can be placed at any common area such as the Family Service Center or the Base Library. There can be continuous public exhibits or periodic public exhibits when new information is available.

4.1.3.2.2.1.3.3.3. Content. Public exhibits utilize poster presentations with graphics and other visual aids to present summaries of current information concerning overall status of NAF Atsugi air quality issues. Point of contact information is also provided. Public comment can be solicited through written questions deposited in a central collection box. If public comment is invited, all comment or questions must receive a response from designated representatives. Other printed information such as fact sheets or newsletters may also be distributed at Public Exhibits.

#### 4.1.3.2.2.1.3.4. Small Community Group or Unit Briefings/Presentations.

4.1.3.2.2.1.3.4.1. Purpose. Individual groups, such as

Childcare Center Caregivers or Teachers, may request briefings or presentations in a smaller setting than the Command Brief or Community Meeting. NAF Atsugi will coordinate scheduling and staffing for these sessions. Responding to these requests for informational updates fosters coordination of community actions and provides an opportunity for open discussion of concerns and recommendations.

4.1.3.2.2.1.3.4.2. Location. These briefings are hosted by the group requesting the presentation and are conducted at the worksite. These briefings will be scheduled at the request of the individual group.

4.1.3.2.2.1.3.4.3. Content. In general, the content of the program will include an update of the ongoing activities occurring in response to air quality issues at NAF Atsugi.

4.1.3.2.2.1.3.5. NAF Atsugi Community Advisory Panel (Jinkanpo/Shinkampo Action Team).

4.1.3.2.2.1.3.5.1. Purpose. The purpose of the community advisory panel (CAP) is to create an opportunity for key NAF Atsugi community members to receive information and provide input regarding the many activities addressing the issues of poor air quality at NAF Atsugi. Any interested community member may attend.

4.1.3.2.2.1.3.5.2. Location. The NAF Atsugi Community Advisory Panel, called the Jinkanpo (Shinkampo) Action Team, meets regularly in an advertised location on base. The meeting is announced in the Base newspaper.

4.1.3.2.2.1.3.5.3. Content. The Jinkanpo (Shinkampo) Action Team is the CAP. The CAP is the responsibility of NAF Atsugi and is chaired by the Executive Officer of NAF Atsugi. Membership includes the NAF Atsugi Ombudsman, representatives from the Public Works Office, representatives from the school, representatives from Industrial units, representatives from Public Affairs Office, and any interested community members or tenant command representatives. The CAP meetings offer a forum for discussion of progress on the health risk assessment, medical epidemiological studies, or the ongoing negotiations with the Government of Japan and Kanagawa Prefecture regarding the operation of the Jinkanpo (Shinkampo) Incinerator. The Jinkanpo (Shinkampo) Action Team also reviews technical documents and provides advice about community concerns. Members also carry information to the

community. A fact sheet is being developed that will describe the functions of the Jinkanpo (Shinkampo) Action Team and emphasize that membership is available to any interested community member.

4.1.3.2.3. Evaluating Community Outreach Activities. The specific communication techniques being used to conduct the community outreach program will be evaluated for effectiveness in providing information to the community and addressing the community's concerns. NAF Atsugi and the tenant commands of NAF Atsugi are responsible for ensuring ongoing evaluation of the overall community outreach program with the assistance of the Jinkanpo (Shinkampo) Action Team and the Health Risk Assessment Coordinator. NEHC can assist NAF Atsugi with development of evaluation instruments and analysis of the evaluation findings. Evaluation results will be reported quarterly to CPF and BUMED. If specific products or communication techniques are not effectively addressing community concerns revision of the community outreach program must occur.

4.1.3.2.3.1. Meeting and Activity Evaluation Forms. A comment and evaluation form will be developed by NAF Atsugi to distribute to participants at appropriate public outreach events, such as small group meetings, presentations, public meetings, etc. to solicit feedback on what took place. These forms will be utilized by NAF Atsugi staff to monitor effectiveness of specific activities and to make any changes or revisions. A similar evaluation card will be used to evaluate fact sheets, exhibits, etc. which the respondents can hand back or mail to the NAF Atsugi PAO Office.

4.1.3.2.3.2. Monitoring Community Response. NAF Atsugi will develop mechanisms for evaluating the community response to outreach activities. Techniques will include (1) monitoring news coverage for number, length, and tone of reports; (2) monitoring specific public events (i.e., public meetings, presentations) for the number of people attending and the types of interests that the attending community express; (3) monitoring distribution of fact sheets and mailing cards for the number and location; and (4) monitoring phone calls for the number and tone. It is important to record the kind of questions the community is asking as well as how those change over time. Interviews may also be used to monitoring the effectiveness of public outreach activities.

4.1.3.2.4. Community Outreach Program Revisions. NAF Atsugi will revise the community outreach program as indicated by the results of the program evaluations. Revisions will occur as the multiple activities addressing air quality

issues at NAF Atsugi progress. Community concerns will change. Information obtained from community input at Jinkanpo (Shinkampo) Action Team meetings, the Commander's Action Line, and other forums for two-way communication will provide a means of assessing the type of community concerns. This information will be used to determine the need for specific community outreach activities. Additional public outreach activities may be developed as needed to address issues emerging from the health risk assessment or other activities being conducted. Public outreach activities that are not effective or no longer needed will be discontinued. Also, any information that may have changed (points of contact, addresses, phone numbers) will be updated.

**4.2. Approach for Ongoing Community Outreach With NAF Atsugi Residents.** NAF Atsugi will take the lead to issue information to current NAF Atsugi residents, as soon as possible, after technical findings from environmental and epidemiology studies are confirmed. Information will be provided in a clear and concise manner. The Navy Environmental Health Center will assist NAF Atsugi in their risk communication efforts. Branch Medical Clinic Atsugi is also engaged in day-to-day operations designed to communicate the status of the actions being taken to assess the quality of the air at NAF Atsugi, evaluate the potential health effects of poor air quality, and educate residents on effective measures to protect their health.

**4.2.1. NAF Atsugi Facility Personnel.** NAF Atsugi is the responsible agent for performing several actions.

4.2.1.1. NAF Atsugi will include attendance at a risk communication presentation as one of the required actions to be completed during the permanent change of station check in process. All newly arrived personnel and family members over the age of 17 will be required to attend a Risk Communication Session for Newly Arrived Personnel.

4.2.1.2. NAF Atsugi will designate a command representative to deliver the Risk Communication Brief given at the time of the required Risk Communication Session for Newly Arrived Personnel.

4.2.1.3. NAF Atsugi will provide education on methods to minimize exposure to incinerator emissions on days when base air quality is poor or questionable.

4.2.1.4. NAF Atsugi will provide education to minimize exposure to soot from incinerator emissions and other sources of poor air quality.

4.2.1.5. NAF Atsugi will maintain a base wide pollution advisory and alert system.

4.2.1.6. NAF Atsugi will hold small group briefings for local commands upon request.

4.2.1.7. NAF Atsugi will give one-on-one briefs to concerned base residents.

4.2.1.8. NAF Atsugi will provide input for frequent articles to be published in the Skywriter or the Stars and Stripes.

4.2.1.9. In consultation with NEHC, NAF Atsugi will monitor and evaluate the community response to community outreach programs.

4.2.2. Branch Medical Clinic Atsugi. BMC Atsugi will continue to provide community health care with a heightened awareness of the potential exacerbating effects of chronic exposure to the poor air quality at NAF Atsugi. Branch Medical Clinic Atsugi will conduct Health Consultations, both elective and required in accordance with the overall Comprehensive Risk Communication and Health Consultation Plan. Branch Medical Clinic staff will participate or have participated in the following activities.

4.2.2.1. Designated BMC Atsugi staff will be co-presenters, with NAF Atsugi representatives, of the general Risk Communication Brief given at the time of the Area Orientation Brief.

4.2.2.2. One-on-one Health Consultations will be scheduled for any NAF Atsugi personnel or family member who requests evaluation of the potential environmental impact on their own individual health.

4.2.2.3. As personnel, active duty or civilian employees, and family members report aboard NAF Atsugi, the Branch Medical Clinic staff will review individual medical records to ensure that Risk Communication and Health Consultation was received at the time of the medical overseas screening. If not, individuals or families will be scheduled for a mandatory Health Consultation appointment.

4.2.2.4. Personnel departing NAF Atsugi at completion of a 36 month tour or persons requesting tour extension will be scheduled for a mandatory Health Consultation.



4.2.2.5. Medical staff have conducted voluntary health screening physical examinations for concerned individuals and documented provision of risk communication on overprint SF 600's.

4.3. Approach for Ongoing Communications With Media Relations and Public Information. The program details the proactive approach for providing information to the local newspapers and broadcasting network.

4.3.1. Presentation Development. Following receipt of updated information from NAF Atsugi concerning the status of ongoing diplomatic negotiations for modification of Jinkanpo (Shinkampo) incinerator operation, environmental sampling and survey status, Command actions to mitigate exposure, and timeline for completion of the Full Health Risk Assessment, NAVENVIRHLTHCEN will develop a full presentation for use by members of the NAF Atsugi Health Risk Communication Team members. To ensure that information is presented correctly and consistently, as new information is obtained and validated NEHC will assist with interim presentation updates. NEHC can coordinate the training of NAF Atsugi designated presenters to who will deliver the brief or function as NAF representatives for media conferences.

4.3.2. NAF Atsugi Role in Media Relations And Public Information.

4.3.2.1. NAF Atsugi Public Affairs Office is responsible for developing a plan for media relations and public information.

4.3.2.1.1. NAF Atsugi Public Affairs Office will carry out the public affairs plan for interacting with the media and providing public information as directed by NAF Atsugi.

4.3.2.1.2. NAF Atsugi Public Affairs Office will coordinate review through existing chain of command.

4.3.2.2. Goal. In coordination with CNFJ and CPF, release timely, regular and accurate information to the media and the general public and ensure prompt response to all inquiries.

4.3.2.3. Objectives.

4.3.2.3.1. Provide Information. Provide information to reporters and editors that will assist their effort to convey the story to their audiences.



4.3.2.3.2. Open Communication. Maintain open communication with key reporters and editors.

4.3.2.3.3. Response. Respond to inquiries from the media and members of the public.

4.3.2.3.4. Release Information on Latest Developments to the Media. Issue press releases on significant findings, milestone events, etc. Present technical results in context to make it easy for reporters to understand the story behind the data.

4.3.2.3.5. Meet with Editorial Staff. Request meetings with editorial staff of local and regional publications, and television and radio stations.

4.3.2.3.6. Conduct Tours for Media Contacts. Invite reporters and editors to individually tour the site.

4.3.2.3.7. Address inaccuracies. Prepare letters and other responses to the media correcting inaccurate information in a polite, conciliatory, but non-defensive manner.

4.3.2.3.8. Publicize Community Outreach. Continue to publicize community outreach activities and scientific studies that are ongoing.

4.3.2.3.9. Provide Information. Make on-going technical data/environmental safety and health information available to reporters even when data is not considered surprising or "significant."

4.3.3. BUMED Role in Providing Public Information.

4.3.3.1. Responsible organization.

4.3.3.1.1. Navy Environmental Health Center will assist With development of products to be used in Risk Communication activities and Health Consultation activities directed by NAF Atsugi.

4.3.3.1.1.1. Products Already Developed.

4.3.3.1.1.1.1. Health and Environmental Fact Sheet (Dec 97) (Appendix L).

4.3.3.1.1.1.1.1. Addresses the environment at Atsugi and the cancer and non-cancer health risks determined from the screening HRAs.

4.3.3.1.1.1.1.2. Designed by professional health risk communicators and written at the community level of concern.

4.3.3.1.1.1.1.3. Was revised on 8 June 1998, (Appendix C) for use in the medical overseas screening process and ongoing Risk Communication and Health Consultation activities offered to the entire population of NAF Atsugi during the Summer of 1998.

4.3.3.1.1.1.1.4. Will be posted on the NAVENVIRHLTHCEN Website and made available to the community by NAF Atsugi.

4.3.3.1.1.1.2. Medical Provider Script (Dec 97) (Appendix M). Designed for the medical provider to communicate the health risk to the active duty member and his/her family members during the overseas medical screen or the one-on-one health consultation.

4.3.3.1.1.1.2.1. Replaced with a Medical Provider Background Document (April 1998) (Appendix E) that is offered as a preread for those providers who will be conducting the medical overseas screening evaluations for personnel and family members undergoing permanent change of station transfer to NAF Atsugi.

4.3.3.1.1.1.3. Overprint SF 600 (FEB 98) (Appendix N).

4.3.3.1.1.1.3.1. Designed to document delivery of the health consultation risk communication by a medical provider.

4.3.3.1.1.1.3.2. Revised in April 1998 (Appendix G) to support documentation of provision of Risk Communication and components of Health consultation.

4.3.3.1.1.1.4. Poster on Dioxin (Appendix O). Used in Nov 97 public exhibit. Designed to provide health information concerning dioxin, one of the major chemicals of concern with regard to soil and air pathways of exposure.

4.3.3.1.1.1.5. Poster on Risk Assessment (Appendix P). Designed to provide information concerning the process of risk assessment.

4.3.3.1.1.1.6. Risk Communication Briefing slides June 1998 (Appendix R). Complete briefing packet used in the basewide Summer 1998 Risk Communication sessions conducted by Risk Communication Team consisting of NAF Atsugi

representative, Branch Medical Clinic Representative, and NAVENVRNHLTHCEN/BUMED Representative.

4.3.3.1.1.1.7. Public Availability posters used in the Public Availability Session accompanying the Risk Communication Briefs during the Summer of 1998. (Appendix K).

4.3.3.1.1.1.8. NAF Atsugi Health Risk Assessment Progress Reports April 1998 (Appendix S) As started in April 1998, BUMED/NEHC will provide monthly technical reports to the Line on the status of the full HRA and the medical epidemiologic studies. A community progress report will be placed in the Information Repository at the NAF Atsugi Base Library approximately quarterly, or as soon as validated information is available.

4.3.3.1.1.1.8.1. As appropriate, information from the Monthly HRA Progress Reports and medical epidemiology studies will be posted on the NEHC home page.

4.3.3.1.1.2. The NEHC is available to provide assistance in health risk communication, including development/review of fact sheets, Qs&As, correspondence, posters, and other materials to be used in public outreach efforts; development/review of community educational materials; risk communication training for personnel involved with public outreach programs and assistance with providing expert staffing for public availability sessions.

5.0. Training in Health Risk Communication. Risk communication programs require different techniques and skills than those required in traditional communications. This is because risk communication addresses the emotional as well as informational needs of the community, and it assumes the difficult context of high concern and low trust. Risk communication principles are central to our community outreach plan. Risk communication training includes public involvement activities, public meeting participation or facilitation, community outreach initiatives, and media training.

5.1. Individuals to Receive Training. See Appendix Q for the schedule for risk communication training.

5.1.1. Workshops in Japan (Week of 1-5 June 1998).

- NAF Atsugi personnel conducting or participating in Risk Communication Brief or the Health Consultation process as well as others who participated in public meetings and/or provide responses to the NAF Atsugi community (e.g. environmental staff, PAO, JAG, etc. as determined by NAF Atsugi) attended a 1.5 day workshop on Risk Communication Techniques.
- NAF Atsugi Branch Medical Clinic (BRMEDCLINIC) personnel who were not designated briefers but have frequent contact with NAF Atsugi community participated in a 1/2 day Risk Communication Brief on 4 June 1998.
- DON Military and Civilian Executive Level Personnel participated in a 2 hour executive luncheon presentation of Risk Communication Principles and Techniques on 4 June 1998.

5.1.2. Workshops in Washington, DC.

- DON Military and Civilian Executive Level Personnel attended Power briefings (12-13 May 98).
- Detailers - All detailers who were located in Washington DC were offered Risk Communication training 11-12 May 98.

5.1.3 Training at Other Locations.

- Medical personnel conducting overseas pre-screening physicals will be offered Risk Communication Training

with the use of a 36 minute educational videotape made by Dr Vincent Covello in coordination with the Naval School of Health Sciences. The videotape was filmed on 11 May 98. By Sept 98, this videotape will be distributed for use by the medical staff in the following locations:

- 31 Medical Treatment Facilities.
- 100 BRMEDCLINICs.
- Detailers in Millington, Tennessee, were offered Risk Communication Training on 25 and 26 May 98, conducted by NEHC.

5.1.4. Levels of Risk Communication Training. Risk communication training will proceed on three levels.

5.1.4.1. Level One Training.

5.1.4.1.1. Level One training attempts to establish a fundamental understanding of why and how risk communication is more successful and how it differs from conventional communication approaches. Level One training will involve substantial emphasis on skill building exercises in order to afford the participants an opportunity to improve their competence when handling difficult public communication situations. Completion of Level One training will provide the basic skills required to effectively communicate health risks to the public. These sessions will be offered by Dr. Vincent Covello or the NEHC Risk Communication Coordinator.

5.1.4.1.2. Level One training was presented in a 1.5 day Risk Communication workshop presented at NAF Atsugi and a two hour session for Command leadership and CNFJ. It is intended for NAF Atsugi personnel who will be participating in public availability sessions or preparing fact sheets and/or newsletters, NAF Atsugi Branch Medical Clinic (BRMEDCLINIC) personnel dealing with day to day issues regarding health risks and conducting one-on-one health consultations, and NAF Atsugi, CNFJ and other personnel who are interacting with the media.

5.1.4.1.3. Level One training consists of:

- Orientation to Risk Communication Theory
- Answering Tough Questions
- Seven Part Communication Model
- Message Development
- Community Outreach Techniques

5.1.4.1.4. BUMED and NEHC are responsible for providing Level One training annually for personnel at NAF Atsugi.

#### 5.1.4.2. Level Two Training.

5.1.4.2.1. Level Two training will also establish an understanding of the fundamentals of Risk Communication theory and principles, but is provided in mostly lecture format with limited interactive skill building exercises. It is important that senior leadership understand the differences in Risk Communication techniques as compared to traditional communication approaches.

5.1.4.2.2. This training was conducted by Professor Covello in Washington, DC and at NAF Atsugi and/or CNFJ in a 2 hour "Power Luncheon" format for senior managers and executive level personnel.

5.1.4.2.3. Level Two training consists of:

- Introduction to Risk Communication Theory
- Implications of Communicating in High Concern/ Low Trust Situations
- Alternatives to Town Hall Public Meetings

5.1.4.2.4. BUMED and NEHC are responsible for providing Level Two training annually for designated personnel at NAF Atsugi.

#### 5.1.4.3. Level Three Training.

5.1.4.3.1. Level Three training is designed to provide a basic understanding of risk communication principles and theory.

5.1.4.3.2. Level Three training will be presented by NEHC staff personnel at various locations throughout the United States and consists of 1 to 4 hour training sessions for medical department personnel conducting NAF Atsugi pre-screening physicals and detailers.



5.1.4.3.3. Level Three training will be scheduled at the request of the MTF or Branch medical clinic. Level Three training will focus on preparing medical providers to conduct Risk Communication in the course of conducting a medical overseas screening evaluation for personnel assigned to NAF Atsugi.

5.1.4.3.4. Level Three training will consist of:

- Introduction to Risk Communication Theory
- Communication Pitfalls

6.0. Resource Requirements. Execution of this comprehensive risk communication and health consultation plan for NAF Atsugi will require resources above current operating funds. CINCPACFLT and BUMED have the lead to identify additional resource requirements to execute their respective responsibilities. Selected costs for specific programs are estimated (see Appendix V).

6.1. BUMED. BUMED has the lead to provide risk communication support and training and to conduct one-on-one health consultations.

6.1.1. Risk Communication Support and Training. Provision of risk communication support and training to non-BUMED activities and personnel will be handled on a reimbursable basis.

6.1.1.1. Risk Communication Support. NEHC has the lead to provide risk communication support to CPF and NAF Atsugi. NEHC negotiates with CINCPACFLT on an ongoing basis for reimbursement of services.

6.1.1.2. Risk Communication Training. NEHC has the lead to oversee provision of risk communication training to those involved in communicating the health risk of the environmental conditions at NAF Atsugi. Appendix provides cost estimates for provision of specific training sessions this fiscal year.

6.1.2. One-on-One Health Consultation. BUMED has determined that the branch clinic at NAF Atsugi will require additional personnel to conduct one-on-one health consultations and related risk communication for new arrivals, current residents, and those who are completing a permanent change of station departure from NAF Atsugi.

6.1.2.1. Permanent Branch Clinic Staff. BUMED will need to augment the permanent staff at the clinic with one active duty ambulatory care register nurse and one hospital corpsman.

6.1.2.2. Contractor Support. BUMED entered into a personal services contract for Occupational Health Team Services at Naval Air Facility Atsugi, Japan. This team of health professionals conducted the mandatory one-on-one health consultations from June to August 1998 at NAF Atsugi. Appendix V gives an estimate of the duration and cost of the contractor which is dependent on the final workload.

6.2. CINCPACFLT. CINCPACFLT has the lead to oversee execution of the risk communication plan at NAF Atsugi. Details on additional resource requirements will be forthcoming.

## 7.0. Appendices.

Appendix A. Detailer Script

Appendix B. Detailer's A Text for Orders to NAF Atsugi and Tenant Commands.

Appendix C. Overseas Screening for NAF Atsugi, Japan 26 Feb 98 BUMED message.

Appendix D. Updated Guidance on Overseas Screening for NAF Atsugi and Tenant Commands 7 July 98 BUMED message.

Appendix E. Medical Providers Background Document

Appendix F. NAF Atsugi Health and Environmental Fact Sheet

Appendix G. Overprint SF 600 for One-on-One Health Consultation and Risk Communication.

Appendix H. NAF Atsugi Page 13 used for Summer 1998 Risk Communication Briefings.

Appendix I. Joint CINCPACFLT/BUPERS/BUMED message May 98.

Appendix J. NAF Atsugi Message May 98.

Appendix K. Poster Availability Session Summer 1998.

Appendix L. December 1997 Fact Sheet.

Appendix M. February 1998 Medical Provider Script.

Appendix N. February 1998 SF 600 Overprint.

Appendix O. Poster entitled "What is Dioxin?"

Appendix P. Poster entitled "What is Risk Assessment"

Appendix Q. Schedule for Risk Communication Training

Appendix R. Risk Communication Brief Summer 1998.

Appendix S. Sample Technical HRA Progress Report.

Appendix T. Frequently Asked Questions (FAQ) Fact Sheet/ NAF Atsugi Spring 1998.

Appendix U. Draft SF 600 Overprint for PCS Departure Health Consultation.

Appendix V. Estimated Cost for Contract Health Consultation  
Team at NAF Atsugi Summer 1998.