RISK EVALUATION - POSTERS

RISK MANAGEMENT AND DIOXIN EMISSIONS FROM A MEDICAL WASTE INCINERATOR ON THE GILA RIVER INDIAN COMMUNITY IN ARIZONA

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Introduction

The Gila River Indian Community (ACommunity@ or AGRIC@) is the fourth most populous American Indian tribe in the United States. The Community includes members of the Akimel O=odham (Pima) and Pee Posh (Maricopa) Tribes. GRIC borders the city of Phoenix in Arizona, the sixth largest metropolitan area in the U.S. In order to encourage economic development, the Community created an industrial park along its border with Phoenix in the 1970's. In 1989, the industrial park accepted a medical waste incinerator as one of its forty-eight tenants. At this time, this facility is the only medical waste incinerator in the state of Arizona. Over the past five years, the environmental regulatory department of the Community has regulated dioxin emissions from the medical waste incinerator. The regulatory approach attempts to consider the current scientific information on risks from dioxin as well as the values of the Gila River Indian Community members as well as the interests and concerns of the surrounding jurisdictions.

Methods and Materials

The data gathered for this paper is part of the administrative record associated with the development of the Medical Waste Management Ordinance of the Gila River Indian Community. The air quality and outreach staff of the GRIC Department of Environmental Quality have participated in over 60 meetings over the past two years, many of them public meetings, concerning air quality at GRIC and the medical waste incinerator. These meetings have focused on member of the Gila River Indian Community but have also included a wide range of other stakeholders including elected officials, environmental organizations, other regulatory agencies and surrounding jurisdictions.

Results and Discussion

The GRIC Department of Environmental Quality is poised to issue emissions limits for dioxin at a medical waste incinerator based on a year of regulatory negotiation, discussion with stakeholders with unique values and lifestyles and research into the health effects of dioxin. The paper discusses the complexity of making policy in a constantly changing scientific risk assessment environment while integrating the values of the Akimel O=odham (Pima) and Pee Posh (Maricopa) peoples of the Gila River Indian Community.

References

1. Medical Waste Management Ordinance GR-04-93 (1993)

2. 40CFR (Code of Federal Regulations) Part 60, Subpart Ce (US EPA regulations for medical waste incinerators (1998)

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