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## EHP's Prepared Remarks Regarding CNX's Radical Transparency Claim, Made Before the Pennsylvania DEP's Citizens Advisory Council

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Good afternoon. My name is Alison Steele, executive director of the Environmental Health Project, a nonpartisan, nonprofit organization headquartered in Pittsburgh with the mission of defending public health in the face of oil and gas development. Thank you for the opportunity to make a few remarks about CNX's so-called "Radical Transparency" program and the corresponding report the company released last fall with the subtitle "CNX Natural Gas Development Poses No Public Health Risks."

If you have not had the chance to do so already, I encourage you to read my <u>submitted written</u> <u>comments</u>, which are more comprehensive than what I have the time to share now and focus on that report. They detail:

- The lack of scientific rigor in CNX's report including misleading statements, questionable methodologies, and premature conclusions
- The limitations of their approach including incorrect assumptions about what constitutes "safe" exposures to hazardous chemicals
- How CNX has downplayed and discredited the existing wealth of peer-reviewed research on the subject that clearly details a significant relationship between shale gas development activities and a range of adverse health outcomes

In short: site-specific data is critical in understanding human health impacts from the shale gas industry, but the limited information the company has gathered to-date, the assumptions they have made from cherry-picked data, and the apples-to-oranges comparisons they have made with a substantial body of epidemiologic evidence are insufficient to support any claim that the operations in question are "safe."

Frontline residents of southwestern Pennsylvania – families we work with on a regular basis – do not feel safe. They have seen very real and very concerning health impacts since the advent of fracking and related activities in their communities. These health impacts include poor birth outcomes, asthma exacerbation, heart failure and high blood pressure, stress and mental health issues, and cancer.

And these lived experiences track with what we see in the literature – <u>dozens of comprehensive</u>, <u>peer-reviewed</u>, <u>epidemiologic studies</u> (which are the gold standard of public health research) and <u>hundreds of other investigations</u> using data gathered around specific sites. There are roles for both epi studies and site-specific investigations, and together they paint a clear picture of (1) substances that are hazardous to human health, (2) realistic pathways of exposure, and (3) prevalence of expected health outcomes based on exposures to those substances.

There are a few specific things I'd like to note since Mr. Deluliis made some comments in his presentation about the importance of accurate interpretation and application of available data:

- The report uses selected criteria from just two wells and compares it to EPA standards
  that are reference levels, not safety levels from a health standpoint. The studies also
  cover a limited number of pollutants: PM2.5 and BTEX, which excludes other harmful
  compounds associated with shale gas development, including nitrogen dioxide and other
  harmful VOCs.
- The report indicates that 24-hour averages for the compounds they track fall below EPA standards, but the report fails to take into consideration intermittent <u>peaks</u>, <u>or spikes</u>, in <u>emissions</u>, <u>which can raise the risk of health harms</u>, especially for individuals in vulnerable populations like children, the elderly, and those who are pregnant or have pre-existing health conditions.
- CNX then implies with the title of their report that their limited findings at two highly scrutinized well pads indicate no risk to public health at any of their other 13-plus thousand active well pads across the state. This implication is nothing short of greenwashing.

It is irresponsible to allow a company with <u>an extensive history of regulatory violations</u> to make such unchecked assertions about the safety of its own operations. Some residents we work with have described this report and Governor Shapiro's tacit support of the plan as a "slap in the face" for communities that are counting on better protections.

If the goal here is truly health and safety for frontline communities, I encourage you, members of the Citizens Advisory Council, (1) to push for more comprehensive and meaningful community engagement when it comes to decision-making around shale gas activities within our borders; (2) to utilize healthy skepticism with reports like these and remember that there are legitimate health concerns and well-earned mistrust on the part of residents whose lives have been impacted – sometimes irreparably – by this industry; and (3) to understand that we already have a wealth of existing scientific information from unbiased sources pointing to very real health risks that are not being addressed by the "Radical Transparency" program.

Thank you again for this opportunity to share my expertise.