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Testimony of Jeff Broberg for SF 68

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Why is Lewiston, MN the fish-kill capitol of Minnesota?

About every other year the area where I live has another major fish kill on a blue-ribbon trout stream. They are all the consequences of manure and pesticide applications before heavy rains, and they are all discovered a day or two the water levels have fallen and the fish are bloated and covered with flies.

I'm a geologist and an environmental consultant, and I have spent almost four decades on Winona County trout streams. I have personally witnessed six trout stream fish kills, five caused by farm field runoff.

The story is always the same: First the rush to apply manure and spray pesticides before it rains, then it rains killing all the trout, chubs, suckers and crawfish, the water falls and the bloated fish are reported days after the rain, agencies open an investigation and clam-up refusing to talk about the ongoing investigation and then months later we hear that "the rainfall killed the fish".

Today my oral testimony will focus on my experience with fish kills as a symptom of a much greater water disaster, the careless communications from the MPCA and fish kill investigators and how current practices are normalizing our drinking water crises in the karst region of Minnesota.

I wanted to supplement my oral testimonly with a highlighted excerpt from a 2020 report delivered to the Legislature by the Minnesota Department of Health just one month before COVID closed us down..

The 2020 report "The Future of Mn Drinking Water: A Framework for Managing Risk", by the Minnesota Health Department and the U of M cited three classes of future action related to twelve criteria for improving Minnesota's water governance. I served on this stakeholder focus group. I think the report provides important insight and recommendations. HF68 directly addresses several of the recommended actions. The bold and highlighting are mine.

From: Calow, P., Lewindowski, A., Levers, L., and Kerby, E., 2020, The Future of Minnesota Drinking Water: A Framework for Managing Risk, 2020, sec 2,2, pg 21-23, and pg 25. retrieved from: https://wrc.umn.edu/future-Minnesota-drinking-water

"2.2. New actions as they relate to criteria

The need for an integrated response to drinking water management makes it difficult to parse the individual criteria of the Government Assessment Farmwork (GAF) in making recommendations for future improvements.

On the one hand, we see the effectiveness criteria that focus on appropriate integration of the authorities and a sound statutory framework as driving good governance; on the other hand, we recognize that public engagement, and the trust that goes with it, is a firm foundation for any good governance system. Yet having a systematic approach for reviewing the GAF criteria provides a pragmatic basis for assessing the current state of governance in Minnesota and for making suggestions about improvements. We have taken the systematic approach in what follows

2.2.1. Effectiveness Criteria Actions

The effectiveness criteria of the GAF relate to the need for integrated management at appropriate scales (criteria #2) and more coherence across sectors (#3). At the state level much of this might be facilitated by rationalization of responsibilities across the many (up to eight) agencies involved with drinking water.

The roles and responsibilities of agencies are clearly defined but the split in responsibilities between them for the quality of source water (including groundwater) and that delivered by suppliers to the public can give the impression of incoherence.

We shall return to this in Section 3.2. Communities will also be key in furthering an approach to water management that integrates solutions across sectors and jurisdictions. Continued implementation of the One Watershed, One Plan approach by appropriate economic incentives from state funds and/or bonding should be considered as part of the drive for better integration. It will also be important to ensure that development and implementation of these plans supports integration of surface and groundwater management, and integration across jurisdictions and water resource concerns, including drinking water source water, water quality, and cumulative withdrawals. Water Safety Plans (see Section 3.5)

are another potential tool for facilitating integration of watershed activities from source to tap. Effective delivery at all levels depends on adequate professional capacity. There is much to applaud in this state about the professionalism of staff from agencies to suppliers. Yet our stakeholder panel identified weaknesses in professional capacity caused by workers being spread too thinly over diverse tasks, poor retention of staff, and resulting brain drain from small suppliers. These might be addressed by sharing professional staff across multiple communities or expanded accreditation of administration in all parts of the water supply, similar to that of the Public Health Accreditation Board (https://www.phaboard.org), but involving independent local organizations. There was also the suggestion that the state should consider a water system rating that would allow communities to benchmark the outcomes of their processes against each other and provide a roadmap for change. The GreenStep Cities Program (https://greenstep.pca.state.mn.us) has been mentioned as a possible model. Ensuring adequate staffing, with appropriate scientific backgrounds to handle the complexities of drinking water, will also be important

2.2.3. Trust and Inclusiveness Criteria Actions

Finally, turning to the criteria of trust and inclusiveness, we agree with our panel surveys that there is a need for more focus on the stakeholders and their concerns and on their involvement in making decisions about the inevitable trade-offs and priority choices that occur in drinking water management . ***Engagement needs to go beyond education, communication, and gathering input to empower individuals and communities****. Examples of actions that are empowering include*

(a) giving consumers access to information, especially in acute situations, so they can act appropriately and trust that suppliers and MDH are protecting their interests;

(b) allowing consumers and suppliers to influence definitions of risks, priorities, and goals; or

(c) giving community leaders power to influence messaging and the channels of communication around drinking water issues.

An important step in improving trust and inclusion is for MDH and suppliers to expand their partnerships. This begins with defining key communities, identifying their leadership structure and communication Future of Drinking Water preferences, and working with the leaders to learn their priority concerns,

and identify the key messages that MDH and suppliers want to share with each community. *Examples of distinct communities identified by the panels include*

(a) Some communities of color in urban areas who have distinctive perceptions of risks of tap water and prefer bottled water;

(b) Well owners who may have a more independent attitude toward government than other populations;

(c) Renters who may never see water quality and utility information; and

(d) indigenous communities who identify as water protectors.

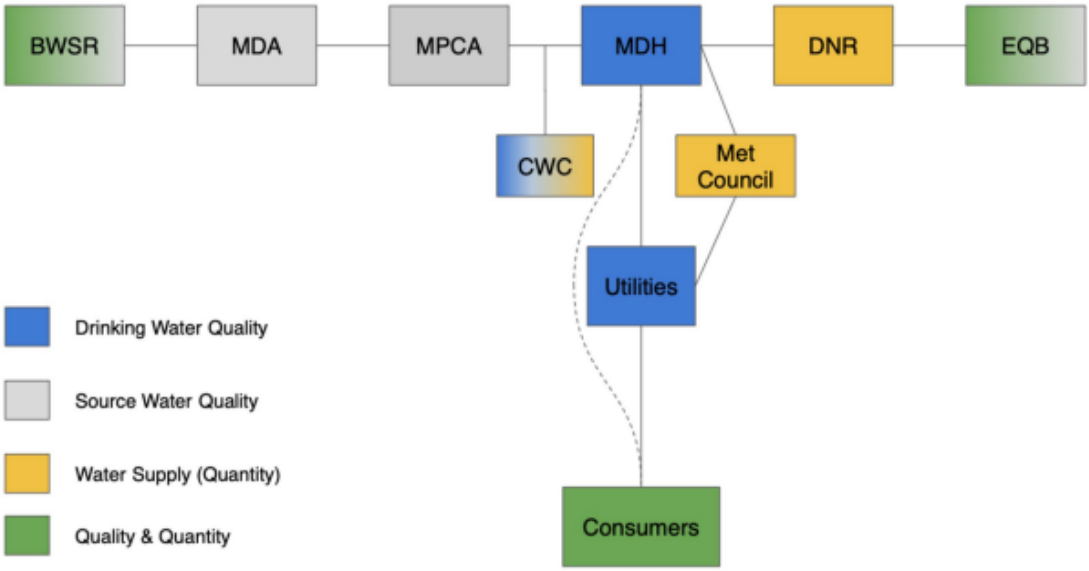
Health professionals were identified as one of the highest priority groups. Establishing two-way communication with this community could be especially fruitful for distributing information and identifying concerns and barriers*. Parents are receptive to the messages for protecting children's health. Pediatricians and other health providers may be able to provide information or facilitate water sampling. Broader engagement of consumers and suppliers opens the door to involve them in key steps of comparative risk assessment (CRA), i.e., prioritizing which concerns to analyze and setting values for alternatives.*

Broad engagement addresses the challenge of explicitly integrating public concerns assessment with technical risk assessment in a way that recognizes the benefits and costs, and makes explicit the equity issues of interventions. Another opportunity for engagement is involving consumers in monitoring – both the collection of data, such as at the tap, and decisions about what is important to monitor. This would raise new challenges for quality control and data privacy.

A final opportunity for broader engagement is to involve suppliers and consumers in the GAF-based auditing of the trust and inclusion criteria. Diverse communities can help scrutinize the achievement of GAF criteria as they relate to public engagement, and also participate in defining criteria and setting goals. Drinking water communication – from both MDH and suppliers – is a balance of raising understanding of issues without prompting over reaction, and addressing parallel tasks of managing acute events alongside long-term engagement and water protection. While MDH and suppliers have done extensive work in these areas, there is room for expanding and further leveraging media, social media, phone apps, or other novel approaches."

Figure 13: Horizontal and Vertical Relationships of Water Governance in Minnesota

This figure shows relationships between the main actors in drinking water governance, indicating primary responsibilities of each actor. It is not intended to comprehensively describe every responsibility of each actor. From left to right: Board of Water and Soil Resources (BWSR), Minnesota Department of Agriculture (MDA), Minnesota Pollution Control Agency (MPCA), Minnesota Department of Health (MDH), Minnesota Department of Natural Resources (DNR), Environmental Quality Board (EQB), Clean Water Council (CWC), and Metropolitan Council (Met Council).



MNWOO's interest and concern for private well owners needs heath advice from the Health Department, not from MPCA, DNR, MDA or BWSR. A public health campaign to alert nearby residents of the hazard, and to test their wells in sensitive areas is a needed step.