In the case of magico-religious mercury exposure, this paradigm is inapplicable, because of the failure to engage stakeholders. Who are the stakeholders? The primary stakeholders are fetuses and small children. Secondary stakeholders are their mothers/parents. Next (tertiary stakeholders) are the Caribbean and Hispanic public health, medical, community and political advocates. Academic and governmental agencies round out the stakeholders. The sad fact is that neither the primary, secondary or tertiary stakeholders are significantly engaged on the issue of magico-religious mercury exposure. Therefore there is virtually no outrage factor. Government has not, does not, and will not respond without the stakeholders voicing their outrage. However, they must first perceive it, in order to express it.

A Public Health Approach to Environmental Protection

Washington Post on June 14, 1996, reporting on the release of our Draft Report, Risk Assessment and Risk Management in Regulatory Decision-making. The headline in The New York Times read "New System of Assessing Health Risks Is Urged." The six-step process begins with explicitly formulating a problem and putting it in public health and ecological context before launching into risk assessment and economic analysis to define options for action, and ends with an evaluation of the effectiveness of the action. Engaging stakeholders from the start of the six steps is essential. Not only do community stakeholders have a right-to-know; they often, we learned at bimonthly hearings around the country, have crucial knowledge about sources of exposure, cultural practices, and behavioral patterns that are omitted in standard risk-assessment models. Those omissions frequently lead to outrage when risk assessments and risk-based decisions are presented belatedly to such stakeholders. The hexagon below shows our six-step process, with the central role of stakeholders.

The Presidential/Congressional Commission on Risk Assessment and Risk Management