## **Climate Change and Air Quality**

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Welsh Air Quality Forum Fforwm Ansawdd Awyr Cymru

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The Mortality Effects of Long-Term Exposure to Particulate Air Pollution in the United Kingdom

A report by the Committee on the Medical Effects of Air Pollutants



• equivalent of 29,000 premature deaths due to breathing tiny particles released into the air (in 2008 data)

• the average loss of life was 6 months, (although the actual amount varies between individuals, from a few days to many years)

•'...air pollution may have made some contribution to the earlier deaths of up to 200,000 people in 2008, with an average loss of life of about 2 years per death affected...'

•Economic cost of the order of £8-20 billion per year (from IGCB)

Published December 2010

## Estimates of the impact of air pollution on health are developing as evidence on NO<sub>2</sub> strengthens





REGIONAL OFFICE FOR EUROPE

Health risks of air pollution in Europe – HRAPIE project





Associations of long-term average concentrations of nitrogen dioxide with mortality

A report by the Committee on the Medical Effects of Air Pollutants

### Possible Future European Summer Temperatures









### Integrated Assessment of Black Carbon and Tropospheric Ozone

Summary for Decision Makers





# **UK Climate Change Act 2008**

- The UK has set a target of 80% reduction in CO<sub>2</sub> equivalents by 2050 (on a 1990 base)
- Making the right choices to achieve the Climate Change Act target offers potentially the biggest air quality & public health improvements since the Clean Air Act of 1956
- BUT the policies need to be *carefully chosen* to avoid unnecessary adverse public health impacts – e.g. minimise diesel, biomass, CHP use in urban centres

#### AQ benefit

Flue gas desulfurization Three-way catalysts – petrol Particulate filters – diesel Energy efficiency Demand management Nuclear Wind, solar and tidal Nitrogen efficiency Hybrids, LZEVs CCS

Uncontrolled coal and oil fossil fuels in stationary and mobile sources Increase in 'uncontrolled' diesel Biofuels

Biomass Combined heat and power? Buying credits overseas CC benefit

# NIHR funded project



MRC-PHE Centre for Environment & Health



Scenario	Description	
Baseline	Baseline (no further carbon mitigation)	Nuclear phasing out
Reference	Same as Base + 30 GBP/tonne carbon price - increasing linearly from 0-30 GBP over the period of 2010-2030 (0-30 GBP) and then plateaued at 30 from 2030 onward; no constraints on nuclear	Nuclear expansion
Low GHG	80% reduction by 2050 + interim carbon budgets (through the 4th budget); no damage costs included for non-GHG air pollutants	In addition to 2010 and 2050, will look at an interim year (2030/5) to show the impact of the mid-term increase in residential biomass use for CHP
Nuclear – replacement only	LowGHG scenario + constraint on nuclear so that it can only maintain its current capacity levels.	Nuclear capacity capped at 10 GW (i.e. current levels)



# Hourly NO<sub>2</sub> concentrations – all GB sites













## Primary PM10 emissions don't decrease – non – exhaust emissions important (toxicity?)



# Health Impact Assessment method for long term exposure to PM<sub>2.5</sub> and NO<sub>2</sub>

### Full Impact methodology

- •Uses life tables of pop. and death in 2010 by single year age group
- •Follow life tables through for a lifetime 105 years to 2114, with new birth cohorts
- •Use EPA lag 30% effect first year, 12.5% years 2-5, 20% years 5-20
- •Results can be summarised as total Life Years and loss of Life
- Expectancy from birth
- •Impact of future reduction scenarios on Life Years and life-expectancy









#### PM<sub>2.5</sub> LGHG and NRPO scenario differences in life years per year from current climate change policy



### Exposure to NO<sub>2</sub>/deprivation stratified by Ward



# **Conclusions and Policy Messages**

- Urban levels of NO<sub>2</sub> should decrease significantly with corresponding improvements for public health and legal compliance
- PM concentrations should also decrease
- BUT in some scenarios, further policies to attain the CCA 2050 target may not give any additional public health benefit beyond policies already in place

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- The incentivisation of biomass could lead to an *increase* in exposure to *primary PM combustion products*, including carcinogens in the period 2030-2035
- Non-exhaust PM concentrations will probably increase – how toxic are they?
- Currently accepted metrics for long- and short-term ozone exposure change in *different directions* in future – more health effect evidence on a possible threshold is needed







At last we have signs that there is emerging dialogue between the two biggest atmospheric problems we face...