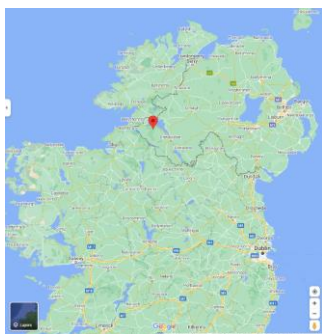


Creating a pathway towards the new WHO guidelines – what are the evidence gaps?

The updated World Health Organisation air quality guideline values are substantially lower than previous levels.



For fine particulate matter (PM_{2.5}), the new guideline value of 5 µg m⁻³ was exceeded in 2018 all AURN monitoring sites, with the exception of Lough Navar (Northern Ireland).



Air pollution is one of the biggest environmental threats to human health, alongside climate change.

Table 0.1. Recommended AQG levels and interim targets

Pollutant	Averaging time	Interim target				AQG level
		1	2	3	4	
PM _{2.5} , µg/m ³	Annual	35	25	15	10	5
	24-hour ^a	75	50	37.5	25	15
PM ₁₀ , µg/m ³	Annual	70	50	30	20	15
	24-hour ^a	150	100	75	50	45
O ₃ , µg/m ³	Peak season ^b	100	70	–	–	60
	8-hour ^a	160	120	–	–	100
NO ₂ , µg/m ³	Annual	40	30	20	–	10
	24-hour ^a	120	50	–	–	25
SO ₂ , µg/m ³	24-hour ^a	125	50	–	–	40
CO, mg/m ³	24-hour ^a	7	–	–	–	4

^a 99th percentile (i.e. 3–4 exceedance days per year).

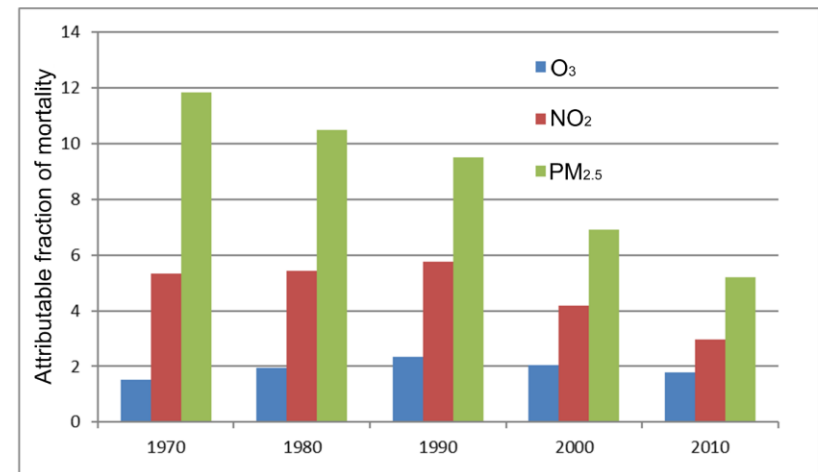
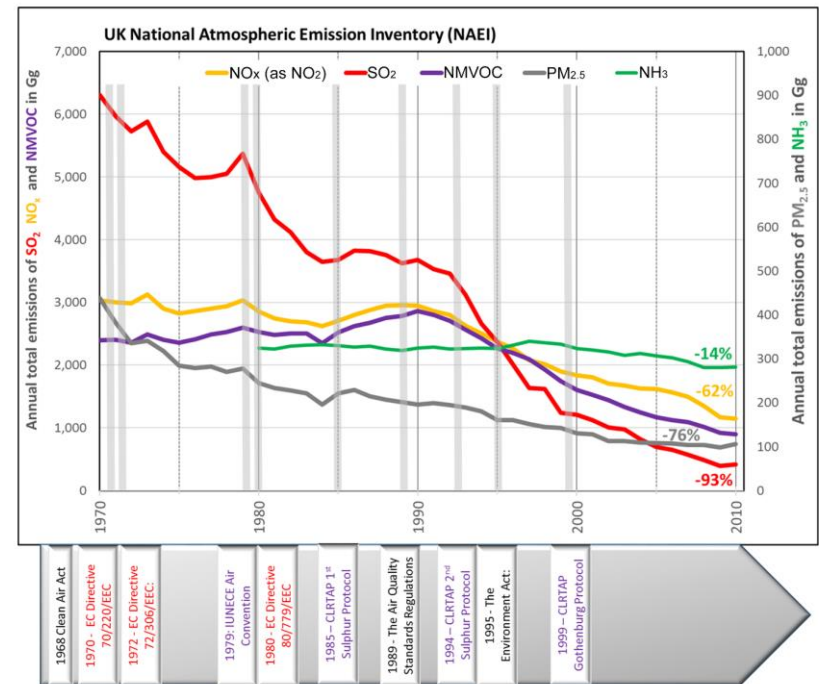
^b Average of daily maximum 8-hour mean O₃ concentration in the six consecutive months with the highest six-month running-average O₃ concentration.

The more we understand about the mechanisms from exposure to air pollution to adverse health effects, impacts are found even at levels (far) below current legal limit values

Long-term time series – from emissions to concentrations

- Cohort studies cover long time windows, with relevance of 'historic' exposures prior to the 1970s.
- Consistent, long-term air pollutant concentration datasets for epidemiological studies.

Carnell E, Vieno M, Vardoulakis S, Beck R, Heaviside C, Tomlinson S, Dragosits U, Heal M, Reis S (2019) Modelling public health improvements as a result of air pollution control policies in the UK over four decades – 1970 to 2010. *Environ Res Lett* 14 074001, <https://doi.org/10.1088/1748-9326/ab1542>



Evidence gaps regarding the role of atmospheric composition change, e.g.:

- Impacts of emission control scenarios on future inorganic secondary aerosol formation.
- Changes in the role of long-range transboundary air pollution in Europe/on UK air quality.
- Hemispheric atmospheric composition change and its influence on background levels of tropospheric ozone.
- Impacts of domestic NO_x/NMVOC emission reductions and UK tropospheric ozone formation under future climate scenarios.
- Contribution of natural/biogenic emissions to relevant AQ limit values in the view of further declining anthropogenic emissions.

Vieno M, Heal M, Twigg M, MacKenzie I, Braban C, Lingard J, Ritchie S, Beck R, Möring A, Ots R, Di Marco C, Nemitz E, Sutton MA, Reis S (2016) The UK particulate matter air pollution episode of March-April 2014: more than Saharan dust. *Env Res Let* 11(4)

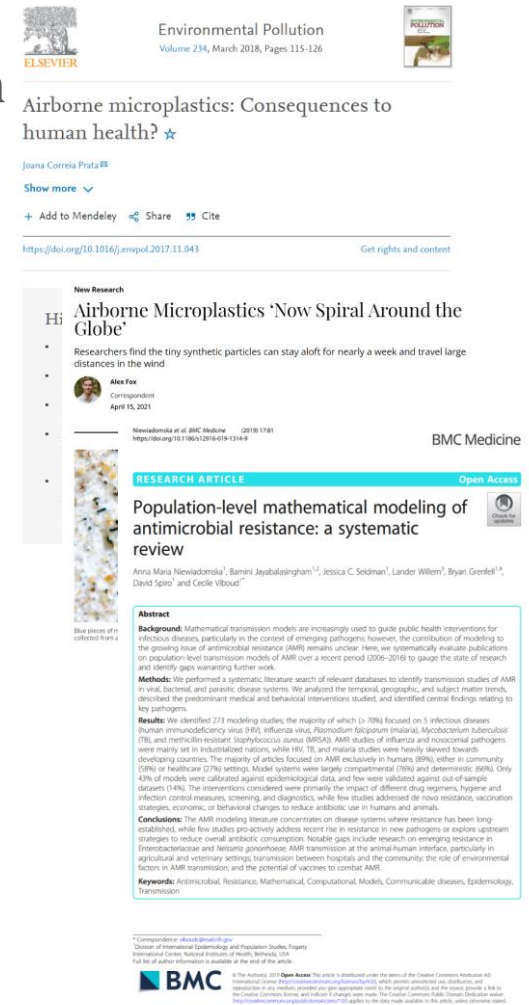
Vieno M, Heal MR, Hallsworth S, Famulari D, Doherty RM, Dore AJ, Tang YS, Braban CF, Leaver D, Sutton MA, Reis S (2014) The role of long-range transport and domestic emissions in determining atmospheric secondary inorganic particle concentrations across the UK, *Atmos Chem Phys* 14, 8435-8447, <https://doi.org/10.5194/acp-14-8435-2014>.

Vieno M, Dore AJ, Stevenson DS, Doherty R, Heal MR, Reis S, Hallsworth S, Tarrason L, Wind P, Fowler D, Simpson D and Sutton MA (2010) Modelling surface ozone during the 2003 heat-wave in the UK, *Atmos Chem Phys* 10 7963-7978, <https://doi.org/10.5194/acp-10-7963-2010>.



AQ evidence gaps beyond WHO targets?

- Multi-pollutant multi-effect assessments of health effects from air pollutant exposures.
- Emerging health impacts, e.g. cognitive/brain health.
- Airborne transmission of microplastics and other materials (e.g. AMR, metals, POPS, pathogens, ...)
- Integrating human and ecosystem health impact assessment of atmospheric threats – considering consistently whole-environment impacts vs. siloed approaches for human health and other impacts?
- Air pollution and climate change interactions, in particular in relation to human health and well-being (*incl. socio-economics, inequalities*) – highly spatially and temporally variable



James Allan

University of Manchester & National Centre for Atmospheric Science

How do we measure PM_{2.5} anyway?

- There are 4 MCERTS 'equivalent' PM_{2.5} measurements:
 - FDMS TEOM
 - Beta attenuation
 - FIDAS (optical)
 - Gravimetric analysis of filters (reference method)
- The certification process is designed around getting concentrations below 25 µg m⁻³ – agreement is less good at lower concentrations!
- Semivolatile material (e.g. ammonium nitrate) is sometimes difficult to measure, especially by the reference method!
- Other particle types difficult to measure (e.g. small particles in FIDAS)
- Challenge for the instrumentation and metrology communities



Secondary organic aerosols

- Major topic of research for over 20 years, still not solved
- Can form around half of $PM_{2.5}$ but formed from a mix of biogenic and anthropogenic precursors
- Predictive capability is better than it was but still not perfect
- How will yields be affected by reductions in NO_x ? (less peroxy termination)
- What about SOA from household products?
- How will biogenic emissions be affected under climate change?

Cooking

- Known to be a significant contribution to urban PM, but poorly represented in models
- Where are the sources and how strong are they?
- How long do cooking aerosols persist in the atmosphere given components (e.g. oleic acid) are semivolatile and/or chemically reactive?



Non exhaust emissions

- Brake wear, tyre wear and road dust resuspension are becoming the major primary particulate emissions from vehicles
 - Poorly constrained in terms of measurements and models
-
- What size are the particles ($PM_{2.5}$ vs PM_{10} vs TSP)?
 - How do we best measure them?
 - Can we mitigate these through technical developments?



Wood stoves

- Single biggest source of primary PM_{2.5} in the UK
- Emissions highly variable and uncertain
- Could be producing SOA, but again uncertain
- How much of a difference did the adoption of Ecodesign stoves and kiln dried wood make?
- How much emissions are caused by user behaviour, e.g. burning wet or waste wood, not operating the stove correctly, etc.?
- What emissions can we expect from novel manufactured fuels?
- Can technical developments continue to improve emissions?



Towards WHO guidelines

- Measurement challenge
- Mitigation challenge
- Equity challenge
- Prioritisation challenge

EPUK @ The Clean Air Futures Group,

Creating a pathway towards the new WHO guidelines, 20/1/22



About EPUK: Environmental Protection UK is a national charity, with a vision for a cleaner, healthier and more tranquil environment for all in the UK.

Our membership is mostly drawn from environmental professionals, bringing together policy-makers, business, local authorities, third sector groups and academics, to foster partnerships for environmental action.

We provide expert policy analysis and information, including guidance, briefing notes and leaflets, on air quality, land quality and noise. We share best practice and support our members to deliver effective environmental protection.

Our current work includes a project on Air Quality & Climate Change interactions, focussing on the need for a coordinated approach and options for practical actions by local authorities and others; this project complements the recent & ongoing top-down work on air quality impacts of Net Zero.

Other work includes lobbying for effective environmental legislation and implementation, a robust Local Air Quality Management system, and supporting our Air Quality & Development Control planning guidance (produced with IAQM).

www.environmental-protection.org.uk
secretariat@environmental-protection.org.uk

EPUK @ The Clean Air Futures Group,

Creating a pathway towards the new WHO guidelines, 20/1/22



- We welcome the new WHO Guidelines for air quality. They show the urgent need for ambitious action to protect health, and should help drive this.
- We note that achieving the guidelines will be difficult. (Also that the existing limit values and objectives based on health and achievability are still exceeded)
- We need a narrative that strongly encourages action, without the guidelines seeming alienatingly impossible. This will be a fine line to tread. Air quality research will be key here.
- Looking forward to CAF/Imperial work and Defra work on pathways to achieving compliance with 2005 guidelines.
- Further query around whether the new guidelines (and any standards based on them) will change the priorities for action, and if so how? Are there measures (current or proposed) which we should or shouldn't pursue?
- There are opportunities to capture co-benefits (and optimise) for air quality with climate change action.

Sarah Legge, Chair of the Air Quality Committee, sarah@slhenvironmental.co.uk

Creating a pathway towards the new WHO guidelines – what are the evidence gaps?

Dr Matt Loxham

BBSRC David Phillips Fellow

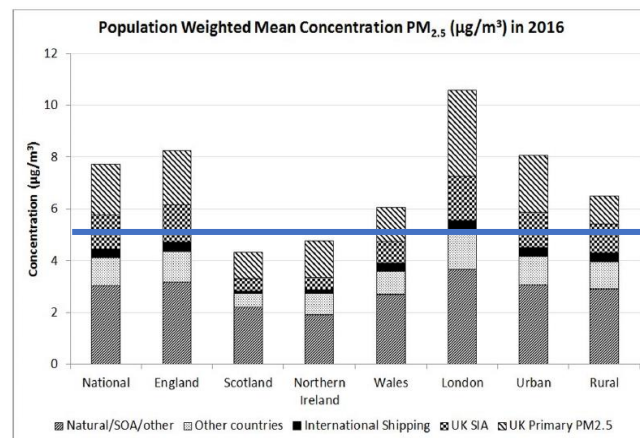
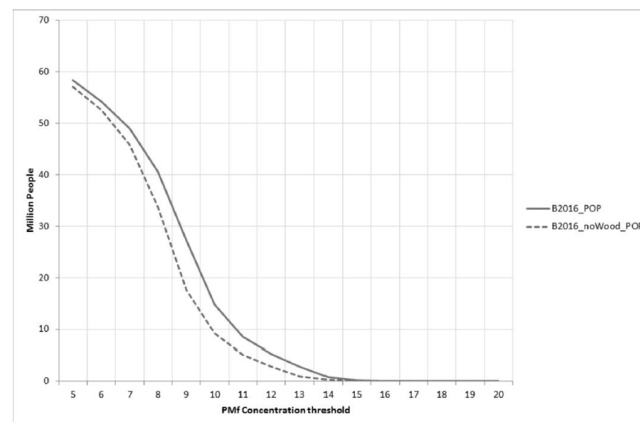
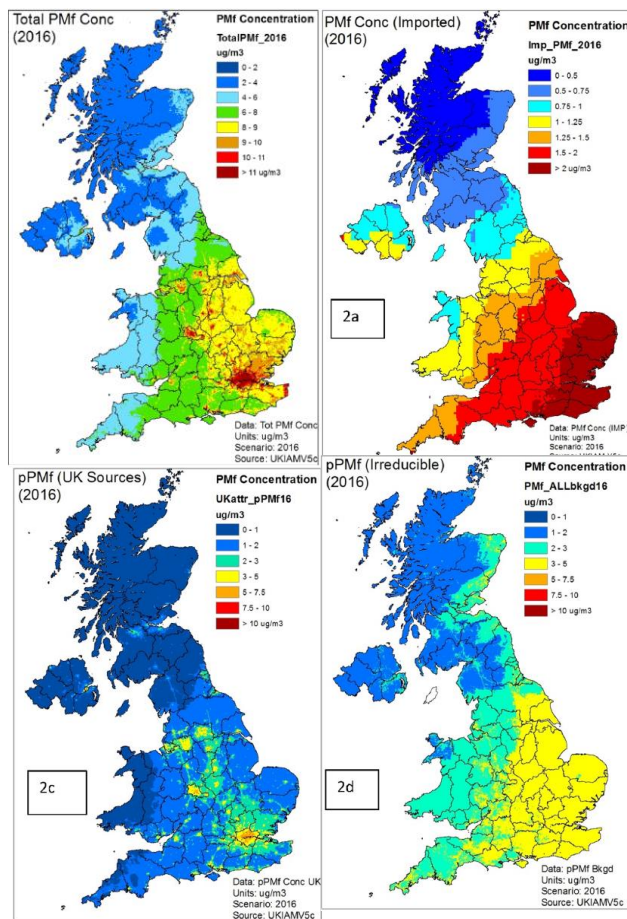
University of Southampton

20th January 2022

Where does PM come from?

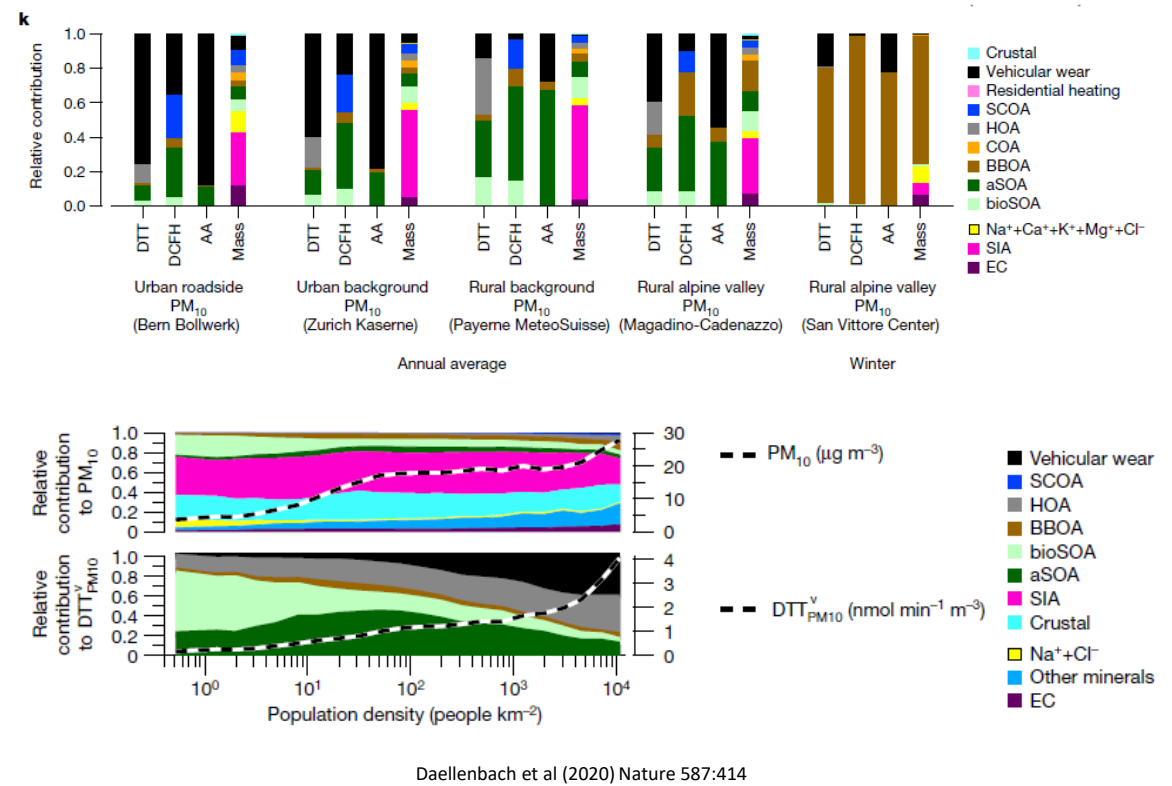
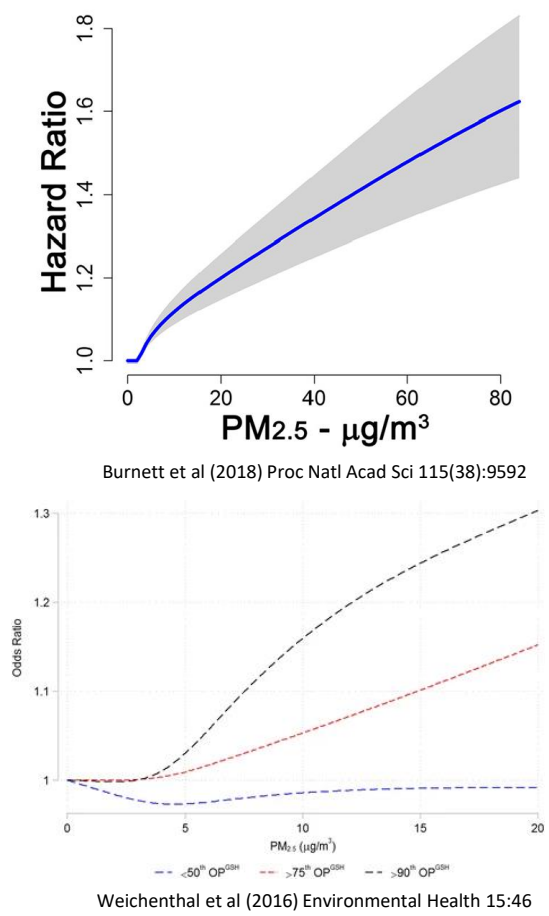
UK Integrated Assessment Model (UKIAM)

ApSimon et al (2021)
Environment International
153:106515



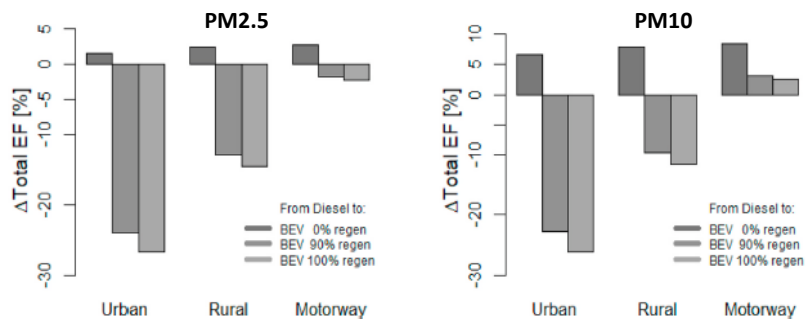
The majority of the UK population are exposed to PM_{2.5} > new WHO guidelines, but a significant portion of this not from UK primary sources.

Is PM mass the most appropriate metric?



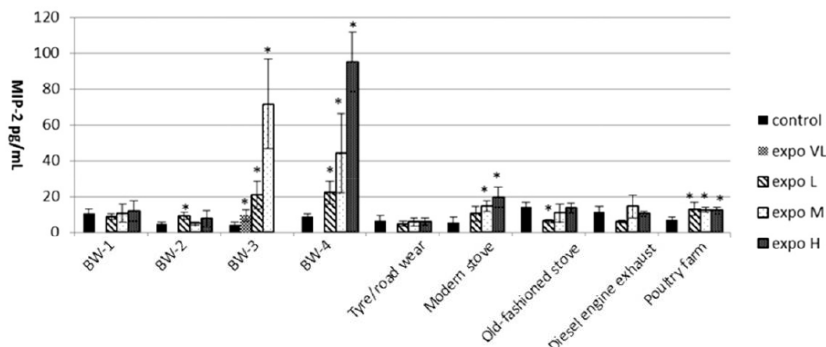
Contributors to PM10 mass and PM10 oxidative potential can be quite different

Specific source considerations



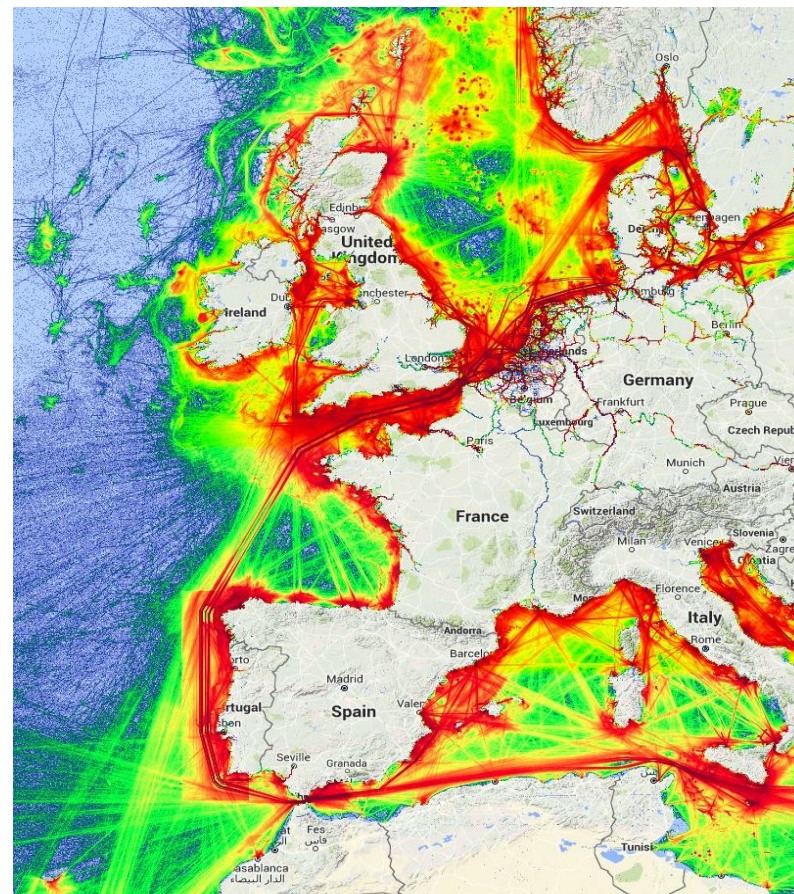
Beddows and Harrison (2021) Atmos Environ 244:117886

Anthropogenic PM → traffic-related PM → non-exhaust
PM → brakewear PM → specific brakepad type

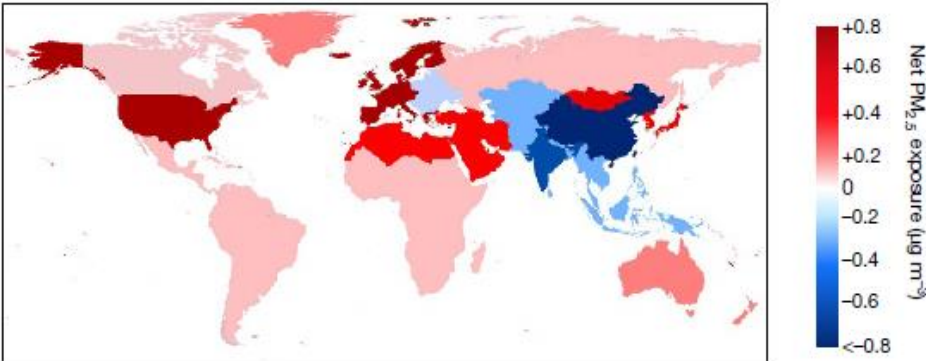


Gerlofs-Nijland et al (2019) Inhalation Toxicology 31(3):89

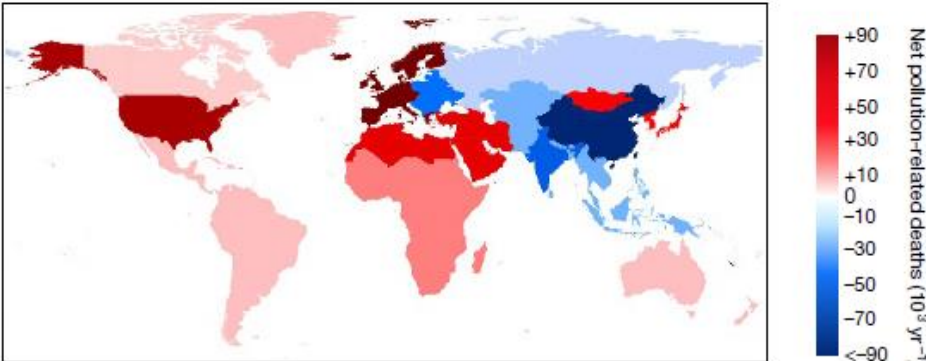
Shipping Movements



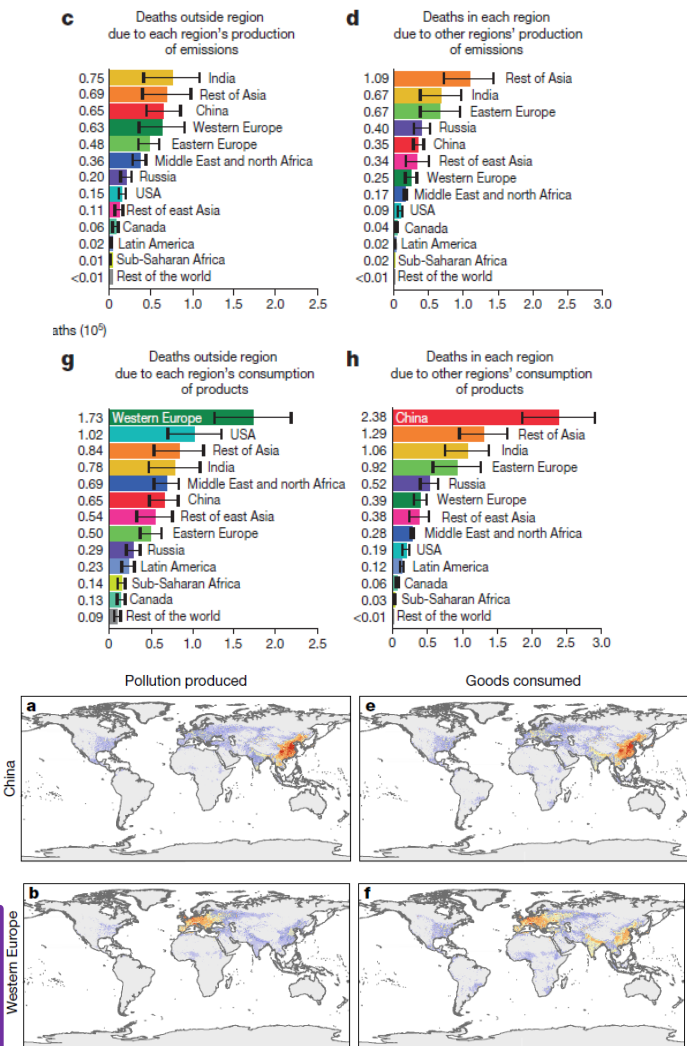
“Transboundary” impacts



Zhang et al (2017) Nature 543:705

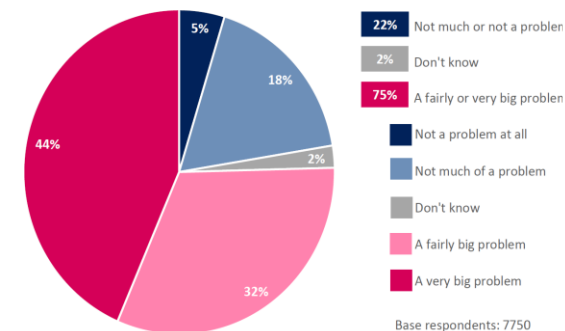


Air pollution can travel across borders (transboundary) but can also be “imported” and “exported” through differential locations of production and consumption of goods

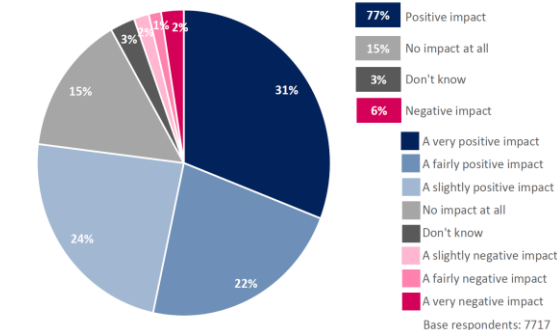


A local perspective

Question 1a. To what extent do you think air quality is a problem in Southampton?

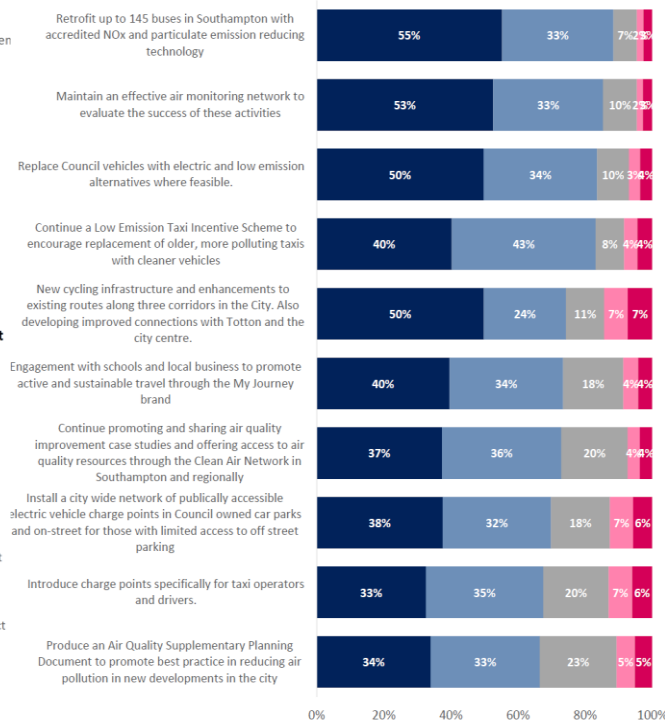


Question 11. What impact do you feel the preferred option for a Clean Air Zone might have on the following? Health impacts

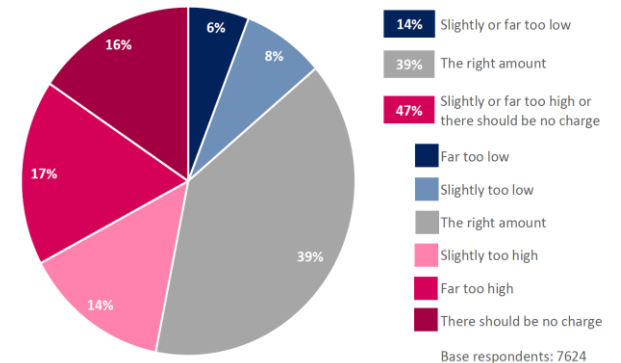


Southampton City Council (2018) Consultation feedback on proposals for a Clean Air Zone in Southampton

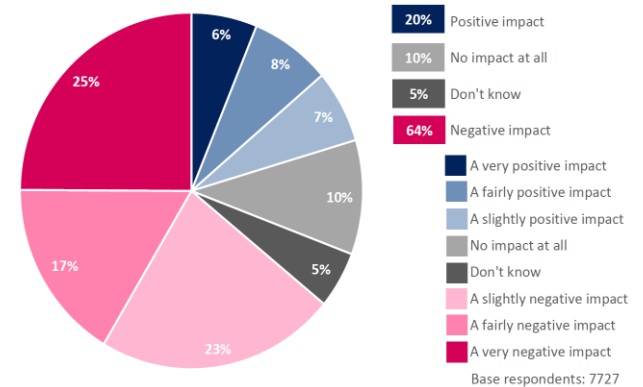
Question 10. To what extent do you agree or disagree that the following additional proposed activity will improve air quality in Southampton?



Question 6. What do you think about the proposed daily charges for non-compliant Heavy Goods Vehicles?



Question 11. What impact do you feel the preferred option for a Clean Air Zone might have on the following? Economic impact on the port or city





InSPIRE

Innovating UK clean air policies
to prevent cognitive disorders

**InSPIRE's vision is for everyone in the UK to be able to breathe
clean air that promotes a healthy brain and cognitive life
regardless of where they live.**

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Small increases in air pollution linked to rise in depression, finds study

Exclusive: Cutting pollution levels may help to reduce rates of mental health problems, say scientists



Air pollution particles in young brains linked to Alzheimer's damage

Exclusive: If discovery is confirmed it will have global implications as 90% of people breathe dirty air



U.S. **INTERNATIONAL** CANADA ESPAÑOL 中文

The New York Times

Air Pollution May Damage the Brain

Tiny air pollutants may cause changes in brain structure that resemble those of Alzheimer's disease.

3 | The impact of air quality on brain health

Review

A critical review of the epidemiological evidence of effects of air pollution on dementia, cognitive function and cognitive decline in adult population

Juana Maria Delgado-Saborit ^{a,b,c,d,*}, Valentina Guercio ^e, Alison M. Gowers ^e, Gavin Shaddick ^f, Nick C. Fox ^g, Seth Love ^h

Reviewed 69 epidemiological studies – 2006 to 2019

Current evidence suggests:

- Air pollution is causally associated with cognitive impairment and dementia.
- A biological gradient most likely exists.
- The magnitude of exposure-response is often small but significant.

Taking a Healthy Streets Approach

Lucy Saunders

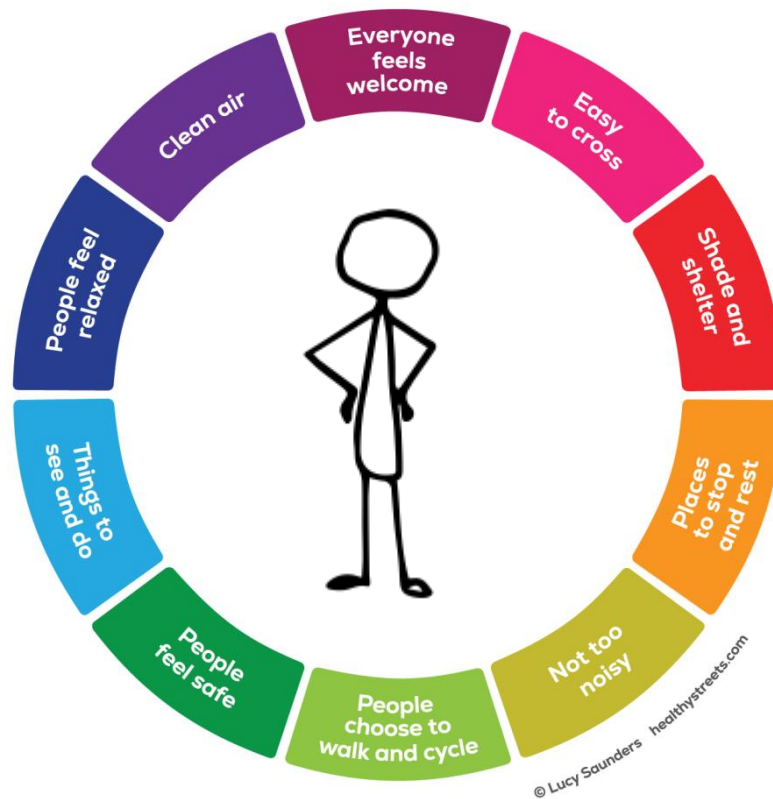
lucysaunders@healthystreets.com



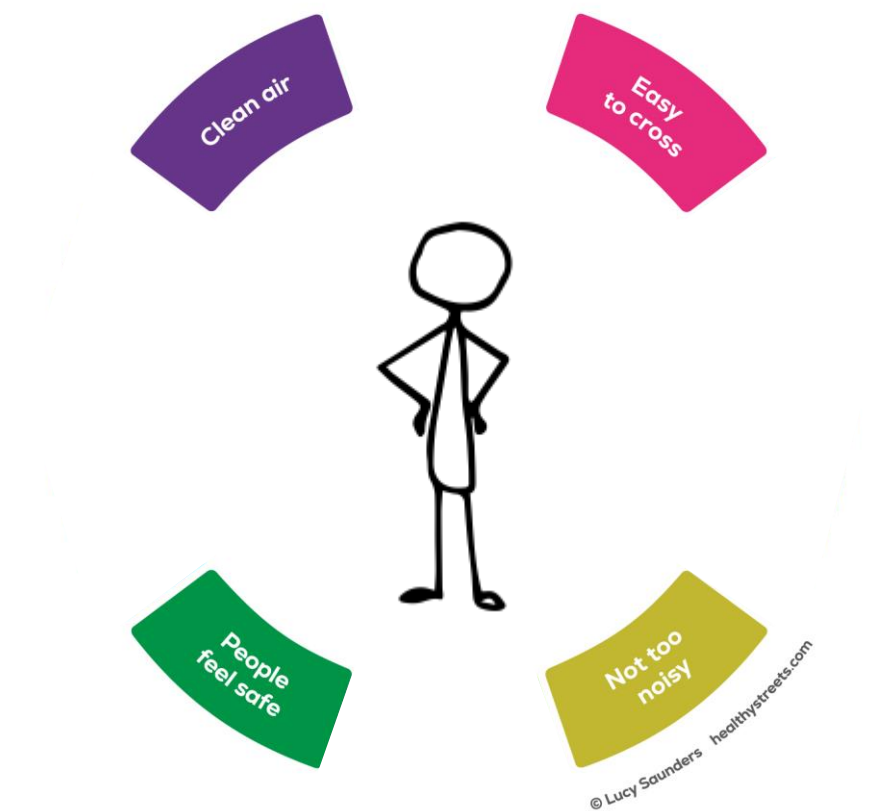
The 10 Healthy Streets Indicators



All these factors influence how people feel



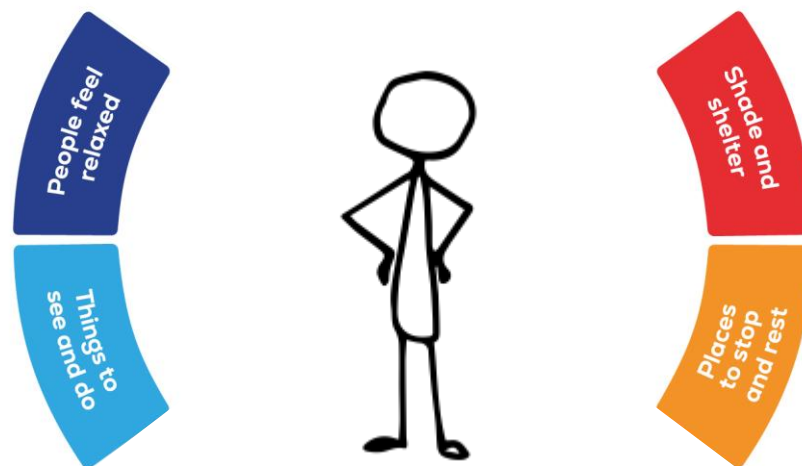
The big health impacts of urban transport



Everyone needs an accessible environment to be active everyday

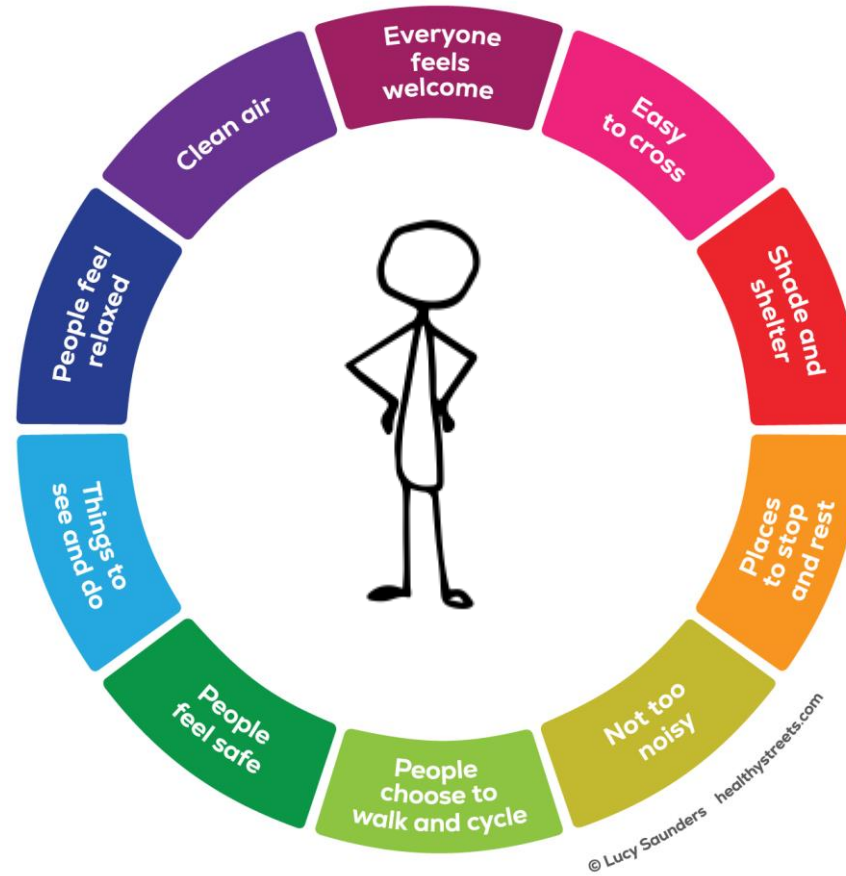


The environment needs to be pleasant too

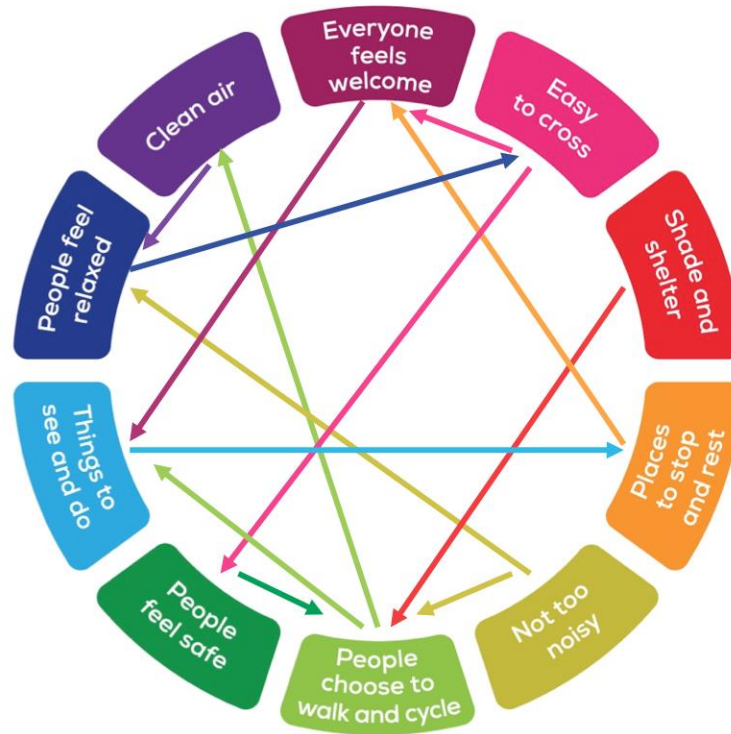


© Lucy Saunders healthystreets.com

Welcoming & accessible for all



The 10 Indicators are interdependent



Source: Lucy Saunders

The 10 Healthy Streets Indicators



Thanks

lucysaunders@healthystreets.com



www.healthystreets.com

Creating a pathway towards the new WHO guidelines

What are the evidence gaps

Ruth Calderwood

Air Quality Manager, City of London Corporation

cityair@cityoflondon.gov.uk
@_CityAir



Some evidence gaps

- Detailed source apportionment - localised
- PM characterisation / speciation eg metals, black carbon, nitrates
- Who has the levers to control emissions
- Where are the gaps in the above
- Where will net zero take us and when
- Are current PM_{2.5} analysers accurate enough to measure 5µg/m³
- How are the biggest health benefits obtained
- How will lower NO₂ impact on urban O₃