

04-08

STATEMENT OF POLICY

Ambient Air Quality and Public Health

Policy

The National Association of County and City Health Officials (NACCHO) advocates for national, state, and local policies, regulations, research, and resources that will enhance local health departments' (LHDs') abilities to improve ambient air quality and protect public health. NACCHO supports the following policies and actions:

- Federal, state, and local governments should support building capacity for LHDs to monitor the health effects of air pollution and to respond to the health impacts caused by poor ambient air quality and the emission of greenhouse gases;
- The Environmental Protection Agency (EPA) should use the best-available science to establish and support National Ambient Air Quality Standards (NAAQS) that are sufficiently protective of the public's health, including sensitive sub-groups (e.g., people with cardio-pulmonary diseases, children, elderly);
- Federal, state, and local governments should develop and adopt air quality standards that reduce greenhouse gas emissions;
- Federal, state, and local governments should develop policies and programs to promote environmental justice¹ in addressing exposure to poor air quality;
- Federal, state, and local governments should support LHDs' involvement in land use and transportation planning and community design and development activities to promote and protect the health of communities (e.g., integrating health concepts into the built environment, directing federally funded infrastructure projects to involve state and/or local health officials);
- Federal, state, and local governments should support research on emerging health effects linked to air pollution;
- LHDs should educate the public about connections between individual lifestyle behaviors and exposure to and production of air pollutants, including the production of greenhouse gases;
- Federal, state, and local governments should develop policies to minimize the public's exposure to and production of air pollutants, including the production of greenhouse gases; and
- LHDs should connect and collaborate with state and local air agencies to broaden the public health preventive outreach and education to improve health outcomes.

Justification

Poor ambient air quality is a threat to public health. Air pollution can harm lung tissues in ways similar to second-hand tobacco smoke and trigger heart attacks and strokes. Furthermore, air pollution causes diseases like chronic bronchitis and lung cancer and contributes to asthma attacks and other respiratory illness in otherwise healthy people. The health effects of air pollution contribute to health inequities, posing a disproportionate risk



to populations in low-income areas where transportation, zoning, commercial, and industrial policies create increased exposure burdens.

The Clean Air Act (CAA) requires the EPA to set NAAQS for the six criteria air pollutants: carbon monoxide, lead, nitrogen oxides, particulate matter (PM₁₀ and PM_{2.5}), ground-level ozone, and sulfur oxides. The CAA also limits air pollution by requiring the EPA to establish National Emission Standards for Hazardous Air Pollutants (NESHAPs). Hazardous air pollutants (HAPs), or toxic air pollutants, are air pollutants that are not subject to NAAQS but that cause or may cause cancer or other serious health or environmental effects. The EPA currently recognizes 187 HAPs. NESHAPs regulate emissions of HAPs from industrial sources that emit at least one HAP in significant quantities.

However, in 2008 more than 175 million Americans (approximately 58% of the total population) lived in areas with particulate matter and ozone levels above NAAQS.² Also in 2008, approximately four million children and 11 million adults with asthma lived in areas with unhealthy levels of ozone, and over seven million people with cardiovascular disease lived in areas with unhealthy levels of year-round particulate matter pollution.³

In 2009, the EPA found that greenhouse gases that contribute to climate change endanger the public's health and welfare.⁴ Some of the effects of climate change include increased likelihood of more frequent and intense heat waves, increased wildfires, degraded air quality, increased flooding, increased drought, more intense storms, and harm to water resources and agriculture. These events might in turn lead to climate sensitive conditions and diseases, including heat stress and stroke; asthma and respiratory disease; heart and lung disease; vector-borne disease; malnutrition, starvation, and dehydration; and mental illness.⁵

In addition to their responsibility to respond to the population-based health impacts of air pollution, LHDs play an important role in efforts to improve air quality and in communicating the resulting public health benefits.

Record of Action

Adopted by the NACCHO Board of Directors

November 2004

Updated July 2010

1. NACCHO Policy Statement 00-07 Environmental Justice.
2. American Lung Association, *State of the Air Report 2010*. Retrieved June 14, 2010, from <http://www.stateoftheair.org>.
3. Ibid.
4. US EPA, *Federal Register*, Vol. 74, No. 239. (December 15, 2009) Retrieved June 14, 2010, from http://www.epa.gov/climatechange/endangerment/downloads/Federal_Register-EPA-HQ-OAR-2009-0171-Dec.15-09.pdf.
5. US EPA, *Climate Change and Health Effects*. Retrieved June 14, 2010, from http://www.epa.gov/climatechange/downloads/climate_change_health.pdf.