











Title: Greater effort for clean air for health urgently needed

Dear MEP,

During the upcoming plenary session of the European Parliament (24-25 March), you will be debating and voting on the López report on the implementation of the Ambient Air Quality Directives (AAQD): Directive 2004/107/EC and Directive 2008/50/EC(2020/2091(INI)).

In view of the urgency for cleaner air, the Health and Environment Alliance (HEAL), the International Association of Mutual Benefit Societies (AIM), the European Federation of Allergy and Airways Diseases Patients' Associations (EFA), the European Public Health Alliance (EPHA), the European Respiratory Society (ERS), and the Standing Committee of European Doctors (CPME), call on you to:

Support the full alignment of EU standards with WHO guidelines and latest available science

The current EU AAQD standards are the result of an outdated political compromise to the detriment of the health of many EU citizens, and do not reflect the latest science embodied in the WHO guidelines. Currently, WHO is revising its air quality guidelines, and the publication of the outcome of this thorough scientific process is expected for 2021. Thus, the EU legally binding limits for air pollutants should use and be as strict as these WHO regularly updated guidelines.

Broaden the scope of air quality standards

In the past years, the body of evidence has grown on how additional air pollutants that are currently not included in the AAQDs contribute to poor air quality and harm health. This includes mercury, black carbon, ultra-fine particles or ammonia. For those pollutants, air quality standards and monitoring requirements should be introduced.

Moreover, regulatory action should be put forward to address the highly fragmented area of indoor air quality and the growing problem of aeroallergens.

Improve awareness and public access to air quality information

Public awareness and access to air quality information is key for health promotion and disease prevention. The information requirements need to be strengthened and harmonised, to ensure that air quality information is accessible, timely and accurate, while the links between air pollution and adverse health

outcomes are highlighted. Information should also be tailored to specific vulnerable groups of the population, such as patients living with chronic respiratory, cardiovascular diseases and diabetes.

Ensure a swift legislative process reflecting the urgency to act

The completion of the legislative process by the European Commission and the EU co-legislators should result in the health benefits of the EU Green Deal being breathable by the end of the current legislature 2019-2024. In order to reflect the latest available science and answer the high public demand for effective policy action in air pollution prevention, we count on your support for making the health benefits of the EU Green Deal breathable by the end of your mandate.

This EP resolution is a crucial opportunity during your mandate to considerably improve health and quality of life for people across the EU by supporting increased ambition in tackling air pollution, and for protecting especially those that are particularly vulnerable to air pollution, including children, older people, those already sick and people living in poverty.

Air pollution is the number one environmental threat to health in the European region and globally. It is one of the <u>five main risk factors for chronic diseases</u> e.g. lung cancer, respiratory, cardiovascular and cerebrovascular diseases, diabetes, as well as for lower respiratory infections (LRIs), such as pneumonia, and neonatal deaths. Air pollution is estimated to cause about 19% of all lung cancers cases, 20% of all ischemic cardiovascular disease and diabetes cases, and neonatal deaths, 26% of all strokes, 30% of all LRIs, and 40% of all chronic obstructive pulmonary disease (COPD), which shows the huge prevention potential in improving air quality.

Furthermore, evidence on adverse effects of air pollution on diseases of the brain, including dementia and mental health are rapidly emerging, and will likely add to the increasing burden of air pollution. Evidence is also growing regarding the harmful effects of air pollution even at low levels, pointing to the fact that there is hardly any safe level of exposure.

The health burden from poor air quality in the EU is unacceptably high, with more than 400,000 premature deaths and hundreds of billions of euros in health costs each year. There is a large body of evidence on how air pollution harms health. In the past years, studies have especially pointed to children being particularly at risk of harm by polluted air, given that their lungs, heart, brain, respiratory, immune and nervous systems are still developing. Their health can already be affected before birth, with lifelong consequences. Recently, a landmark case in London, UK, is the first ruling of its kind globally. It has a major significance in acknowledging the severe health consequences of air pollution as it recognized that air pollution was a cause in the death of Ella Kissi-Debrah's, a 9-year-old severe asthma patient.

Air pollution is largely preventable and EU air quality standards – especially legally binding limit values – have proven to be instrumental in reducing pollution. The EU Ambient Air Quality Directives are the cornerstone of the EU's clean air policies, setting standards for air quality to protect people's health. They are also a key piece of legislation for disease prevention from environmental threats.

Many thanks in advance for your support.

Kind regards,

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