

# Health co-benefits of mitigation policies for air pollution

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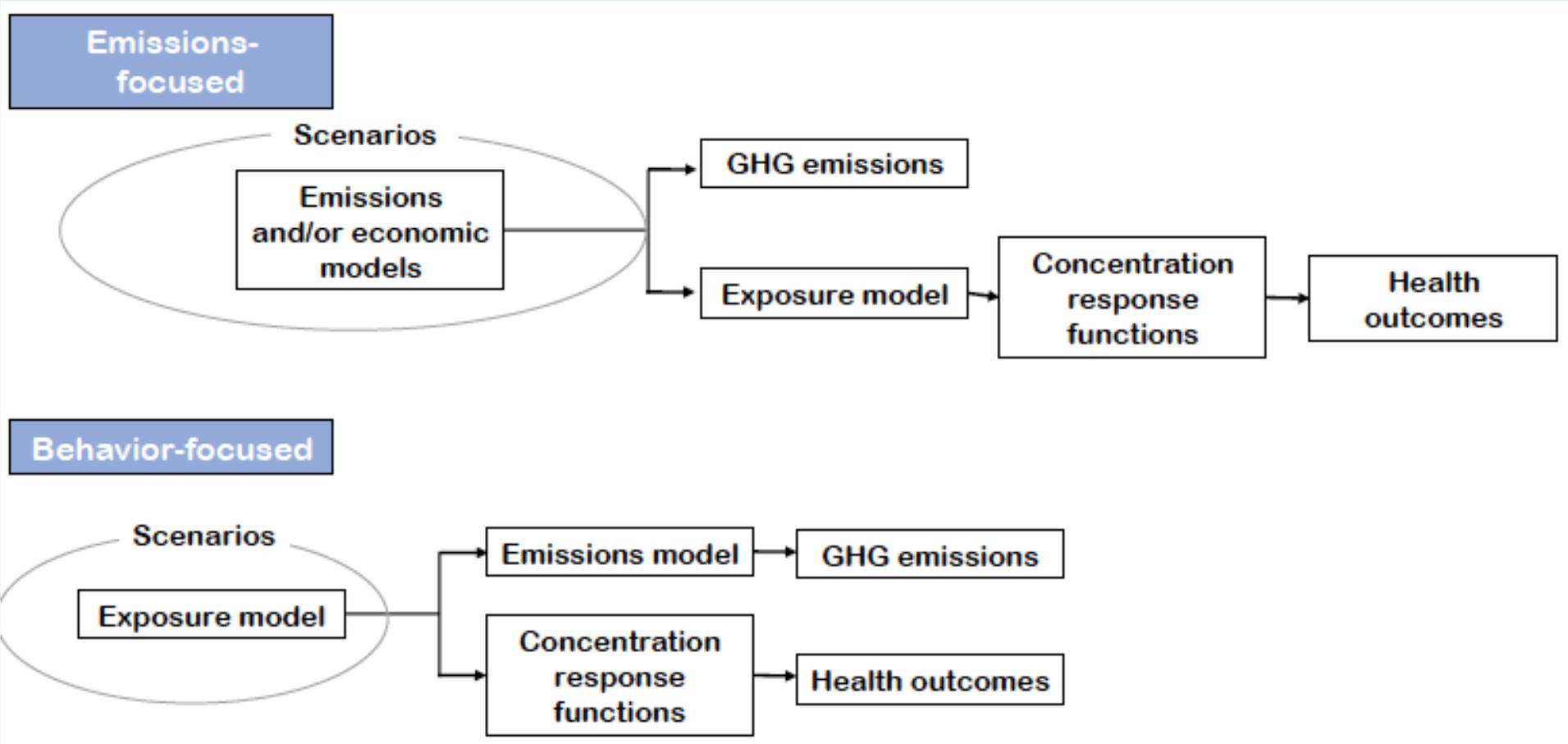
# IPCC 2007

*There is high agreement and much evidence that mitigation actions can result in near-term co-benefits (e.g. improved health due to reduced air pollution) that may offset a substantial fraction of mitigation costs*

*Examples of actions with co-benefits include improved energy efficiency and cleaner energy sources, leading to reduced emissions of health-damaging, climate-altering air pollutants ...*

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# Two basic approaches to define scenario for health co-benefits study

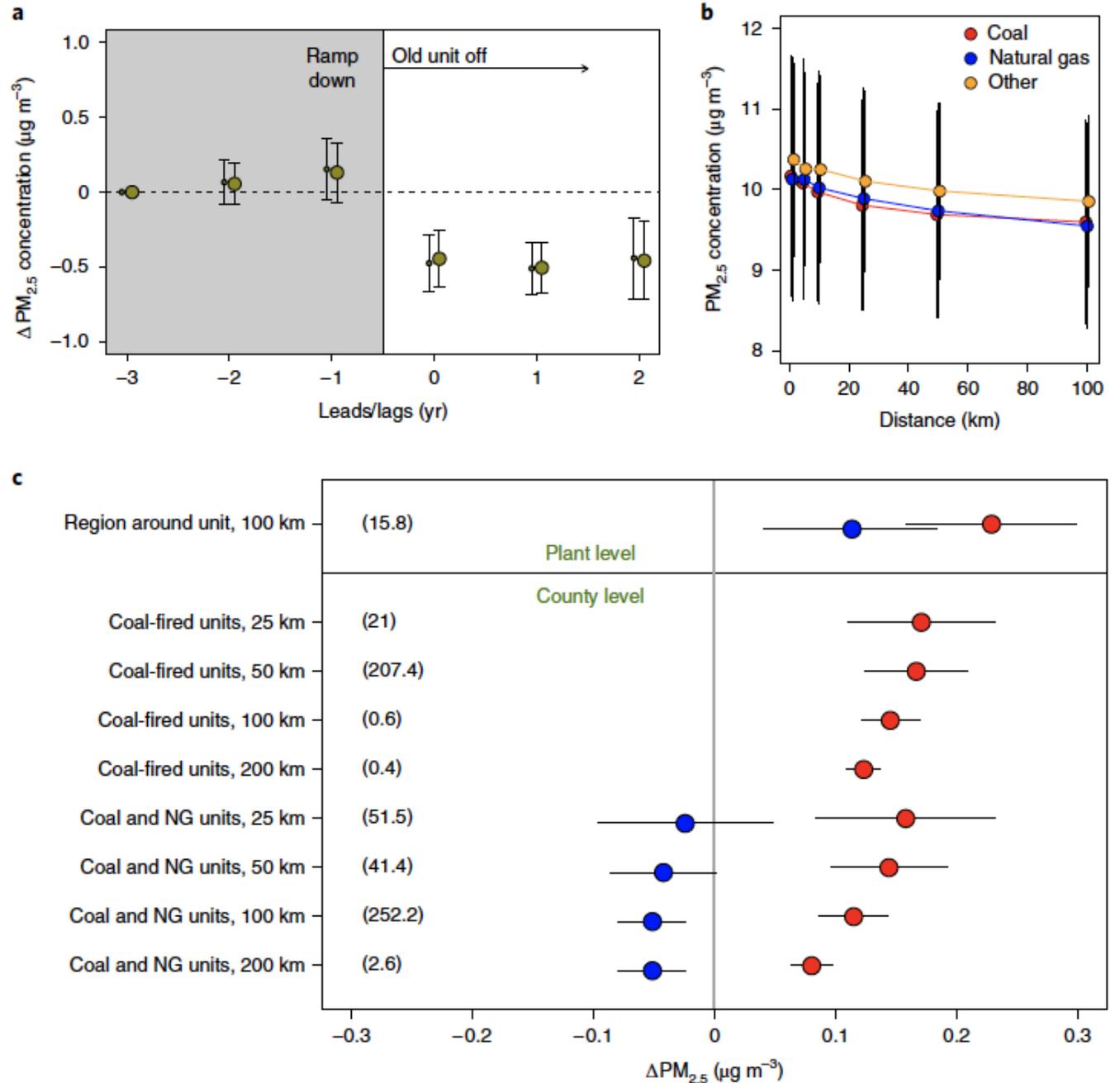


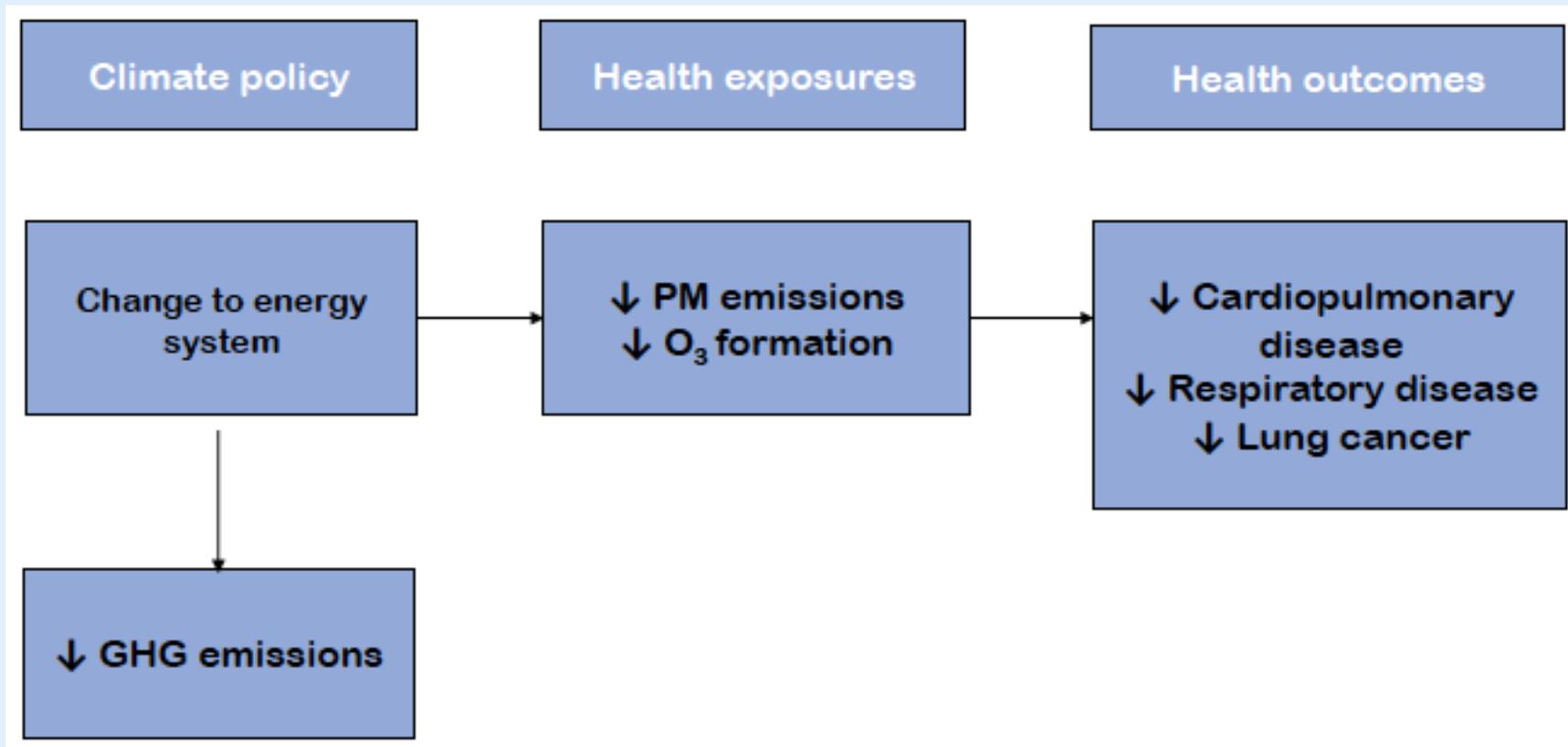
- Emissions-focused typical of studies of air quality
- Behavior-focused typical of studies of transport and diet

# Impacts of old and new coal- and natural gas-fired units on PM<sub>2.5</sub> concentrations in US

shut-down of coal-fired units associated with an average reduction of 0.5  $\mu\text{g}/\text{m}^3$

decommissioning of 334 coal-fired units at 138 facilities associated with an estimated 26,610 lives saved over 2005-2016

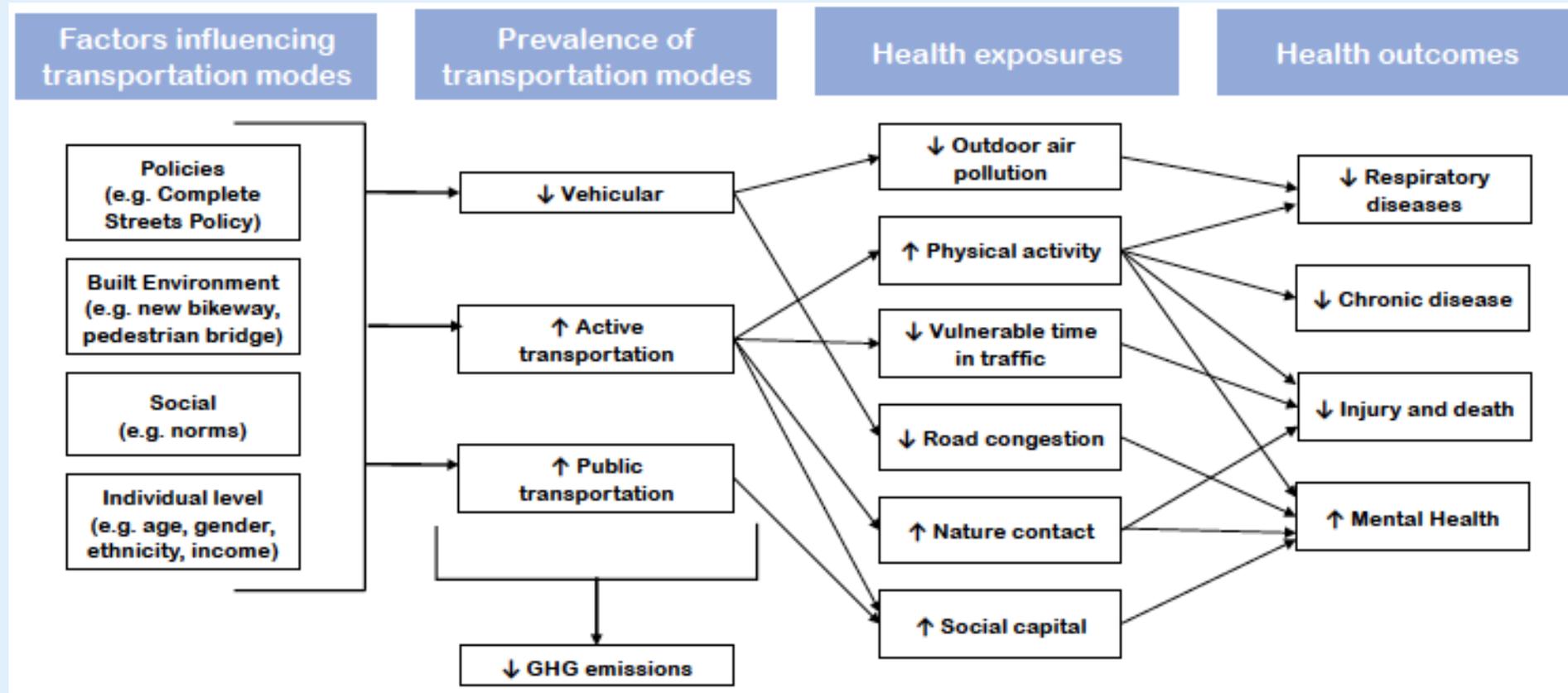




- **Combatting climate change can reduce air pollution by reducing the climate penalty on air quality and by reducing co-emitted air pollutants**
  - Power plants, certain industrial processes, mobile sources, & agricultural activities are sources of GHG emissions

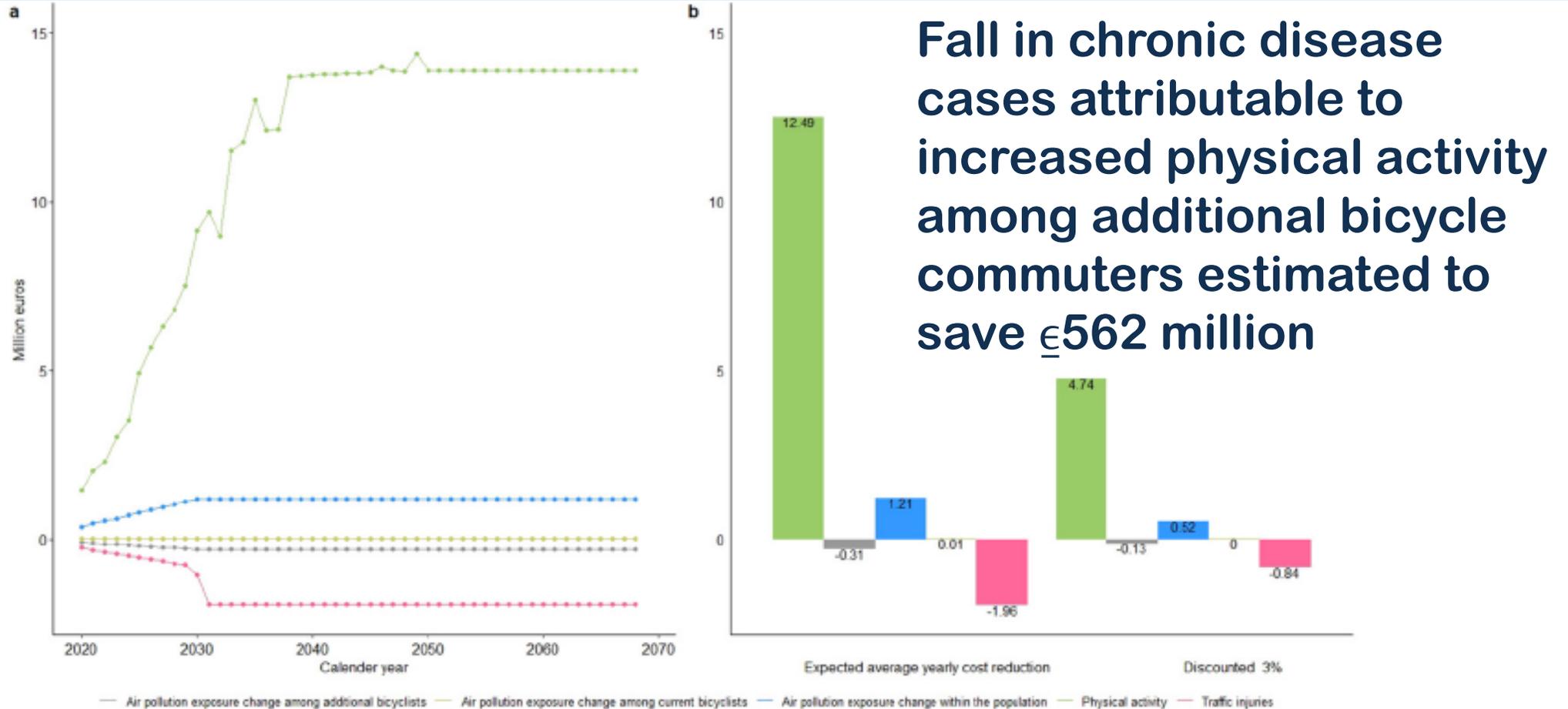
# 5<sup>th</sup> Assessment Report (AR5; 2014)

- *Mitigation scenarios reaching about 450 to 550 ppm CO<sub>2</sub>-eq by 2100 show reduced costs for achieving air quality and energy security objectives, with significant co-benefits for human health, ecosystem impacts, and sufficiency of resources and resilience of the energy system*
- *The benefits of reduced impacts to health and ecosystems associated with major cuts in air pollutant emissions are particularly high where currently legislated and planned air pollution controls are weak*



- The proportion of emissions accounted for by transportation increases as more renewable energy is used in other sectors
  - Road transport responsible for about 36% of GHG emissions in California and 40% in New Zealand
- 12 studies

# Promoting bicycling as active transport in Stockholm

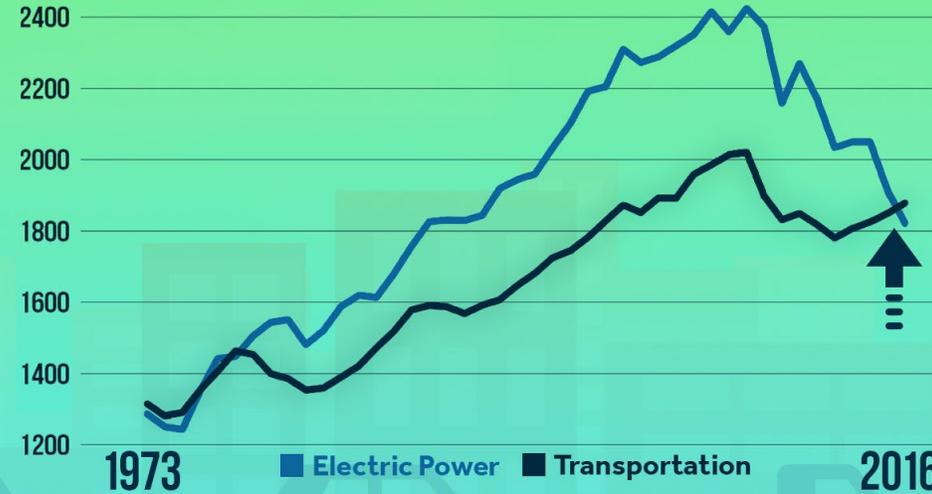


**Figure 2** Estimated yearly expenditure averted (in millions) in the healthcare sector due to increased physical activity, change in air pollution concentrations and risk of traffic injuries.

# EMISSIONS FLIP

Transportation is Biggest Source of U.S. Emissions

Million Metric Tons of Carbon Dioxide



Source: EIA, Annual Energy Review

CLIMATE CENTRAL



# IPCC SR1.5

- *The reduction of short-lived climate pollutants such as methane, aerosols black carbon, and co-emissions from vehicles provides health co-benefits by reducing air pollution and avoiding premature death*
- *This in turn enhances the institutional and sociocultural feasibility of such actions*
- *Interventions to reduce black carbon, for example, offer tangible local air quality benefits increasing the likelihood of local public support*
- *Most foreseeable climate policies, however, only slightly limit some sources of short-lived climate pollutants like traditional biomass indicating health benefits could be limited*

# Conclusions

- Most studies indicate significant, nearer term, local ancillary health benefits providing impetus for policy uptake & net cost savings
- However, studies are more suited to describing the interaction of climate policy & health & the magnitude of potential outcomes than to providing specific accurate estimates of health co-benefits
- Greater consistency in selected modeling choices across the health co-benefits of climate mitigation research could facilitate evaluation of mitigation options particularly as they apply to the NDCs & promote policy uptake

# EU Green New Deal

