

**EU Healthy  
Air Coalition**

**Policy Outlook:  
Strengthening Disease Prevention  
Through Clean Air Measures**



# Policy Outlook: Strengthening disease prevention through clean air measures

 28 January 2025

 12:00 - 14:00 CET

 European Parliament,  
Room SPAAK 7C50



Hosted by **MEP Javi Lopez**

The EUHAC secretariat is hosted by the Health and Environment Alliance (HEAL).

HEAL gratefully acknowledges the financial support of the European Union (EU) and the Clean Air Fund (CAF) for the organisation of this event. The responsibility for the content lies with the authors and the views expressed in this publication do not necessarily reflect the views of the EU institutions, CINEA and funders. The European Climate, Infrastructure and Environment Executive Agency (CINEA) and the funders are not responsible for any use that may be made of the information contained in this publication. HEAL EU transparency register number: 00/23043929-96.

The EU Healthy Air Coalition is an initiative supported by the Clean Air Fund (CAF).

**S&D**

**United  
for science-based policies  
to prevent air pollution**



**Welcome  
and  
opening remarks**



**Keynote**

The background image shows a city street scene. In the center, a tram with the number '2' on its destination sign is moving. To the left, a group of pedestrians is walking. In the background, there are buildings, including one with a dome and another with the word 'VICTORIA' visible. The sky is overcast. Three decorative, multi-colored (yellow, green, blue) cloud-like shapes are overlaid on the image: one on the left, one in the top right, and one in the bottom right.

# **Session 1: The health and economic burden of air pollution**

# Impact of air pollution on public health, public finances, and inequalities

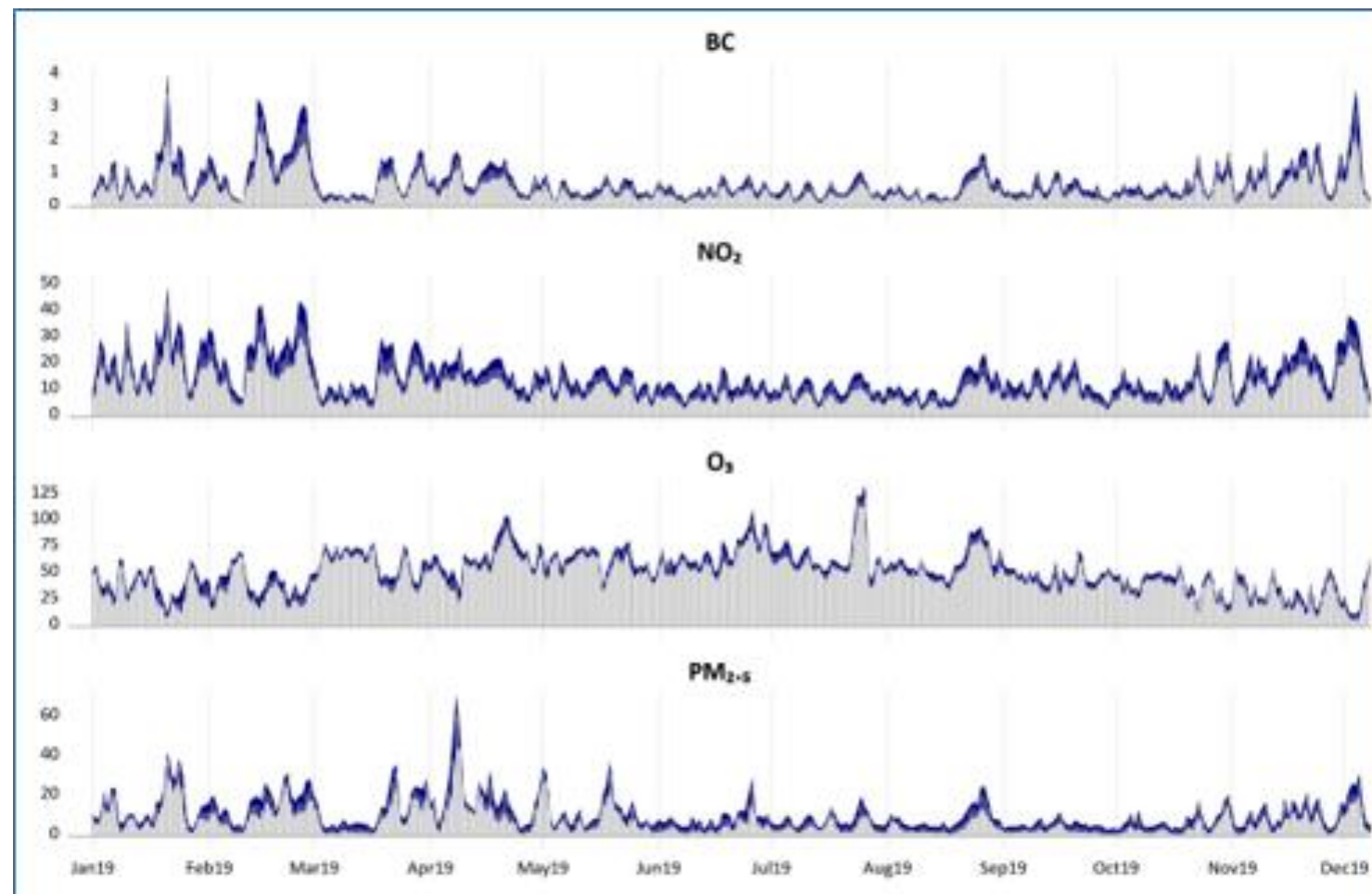
**Ludo VANDENTHOREN**

**Expert in economic and scientific matters, REPRESENTATION AND STUDIES**

# Agenda

- ✓ **Study 1** – Impact of air pollution on work incapacity
- ✓ **Study 2** – Impact of air pollution on healthcare use
- ✓ **Study 3** – Impact low emission zones on socio-economic inequalities
- ✓ **Key messages**

# Short-term exposure to ambient air pollution and onset of work incapacity related to mental health conditions



Pollution peaks contribute to an increase in the number of people recognized in **work incapacity** or who are absent from work for a long period of time due to mental disorders:

- ✓ An increase of 5 micrograms of nitrogen dioxide (NO<sub>2</sub>) per cubic meter of air increases the risk of work incapacity by 4.2%.
- ✓ An increase of 0.5 micrograms of black carbon (BC) per cubic meter increases the risk of work incapacity by 3.2%.



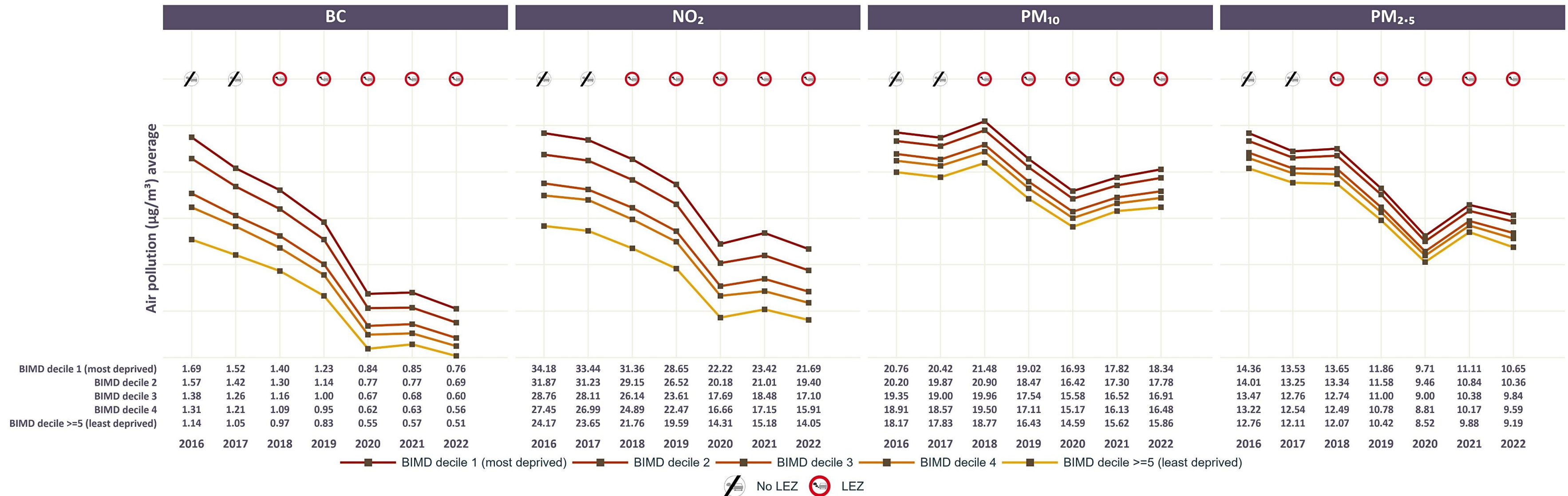
# Association of air pollution and green space with all-cause general practitioner and emergency room visits: A cross-sectional study of young people and adults living in Belgium

| <b>PM<sub>2.5</sub></b>       | <b>Average GP visits</b> | <b>Avoidable GP visits if PM<sub>2.5</sub> between 4.91 and 7.49 µg/m<sup>3</sup></b> |
|-------------------------------|--------------------------|---|
| 4,91-7,49 µg/m <sup>3</sup>   | 2,96                     |   |
| 7,50-9,99 µg/m <sup>3</sup>   | 3,10                     | 33.744  |
| 10,00-11,99 µg/m <sup>3</sup> | 3,20                     | 64.988  |
| 12,00-14,64 µg/m <sup>3</sup> | 3,30                     | 97.233  |

 € 43 million

Annually potentially avoidable cost of visit to the general practitioner and emergency room with around 37 million euros borne by health insurance funds and 6 million euros out-of-pocket payments.

# Positive impact of the introduction of low-emission zones in Antwerp and Brussels on air quality, socio-economic disparities and health: A quasi-experimental study



•Controlling for the pre-LEZ value (in 2017), there is a **STATISTICALLY SIGNIFICANT DIFFERENCE IN THE CHANGE IN BLACK CARBON (BC) AND NITROGEN DIOXIDE (NO<sub>2</sub>)** over time across BIMD deciles | for BC there is a systematically slower decrease with lesser deprivation | for NO<sub>2</sub> there is a slower decrease for BIMD decile ≥5 | **MORE DEPRIVATION = MORE RAPID DECREASE**

•Controlling for the pre-LEZ value (in 2017) there is **NO STATISTICALLY SIGNIFICANT DIFFERENCE IN THE CHANGE IN PARTICULATE MATTER 10 (PM<sub>10</sub>) AND PARTICULATE MATTER 2.5 (PM<sub>2.5</sub>)** over time across BIMD deciles



## Key messages

- ✓ Air pollution is a risk for public health in Europe with an impact on our physical health, mental health, and work incapacity
- ✓ Reducing air pollution is protecting the financial sustainability of the social security system
- ✓ Policy on air quality needs a social and socio-economic dimension to tackle health inequalities

# Link to our studies



Environment International  
Volume 164, June 2022, 107245

Full length article

## Short-Term exposure to ambient air pollution and onset of work incapacity related to mental health conditions

Luk Bruyneel <sup>a, b</sup>, Wies Kestens <sup>a</sup>, Marc Alberty <sup>a</sup>, Günther Renata Van Woensel <sup>a</sup>, Christian Horemans <sup>a</sup>, Elke Trimpener <sup>a</sup>, Charlotte Vanpoucke <sup>c</sup>, Frans Fierens <sup>c</sup>, Tim S Nawrot <sup>d, e</sup>, Bianca Cox <sup>b</sup>

## HEALTH IMPACT RESULTING FROM THE INTRODUCTION OF LOW-EMISSION ZONES

A COMPARATIVE INTERRUPTED TIME SERIES ANALYSIS OF A NATURAL EXPERIMENT IN THREE BELGIAN CITIES USING INDIVIDUAL-LEVEL HEALTH OUTCOMES

dr. Luk Bruyneel  
Lead Scientific and Economic Matters, Independent Health Insurance Funds  
Guest Professor, KU Leuven

This project was developed with the support of Bloomberg Philanthropies



Environmental Research  
Volume 236, Part 1, 1 November 2023, 116713

## Association of air pollution and green space with all-cause general practitioner and emergency room visits: A cross-sectional study of young people and adults living in Belgium

Arthur Vranken <sup>a, b</sup>, Esmée Bijmans <sup>c, d</sup>, Christian Horemans <sup>a</sup>, Agnès Leclercq <sup>a</sup>, Wies Kestens <sup>a</sup>, Güngör Karakaya <sup>a</sup>, Ludo Vandenthoren <sup>a</sup>, Elke Trimpeneers <sup>a</sup>, Charlotte Vanpoucke <sup>a</sup>, Frans Fierens <sup>a</sup>, Tim Nawrot <sup>f, g</sup>, Bianca Cox <sup>h</sup>, Luk Bruyneel <sup>a, b</sup>

# Thank you!

**Additional questions? Contact me at  
[ludo.vandenthoren@mloz.be](mailto:ludo.vandenthoren@mloz.be)**

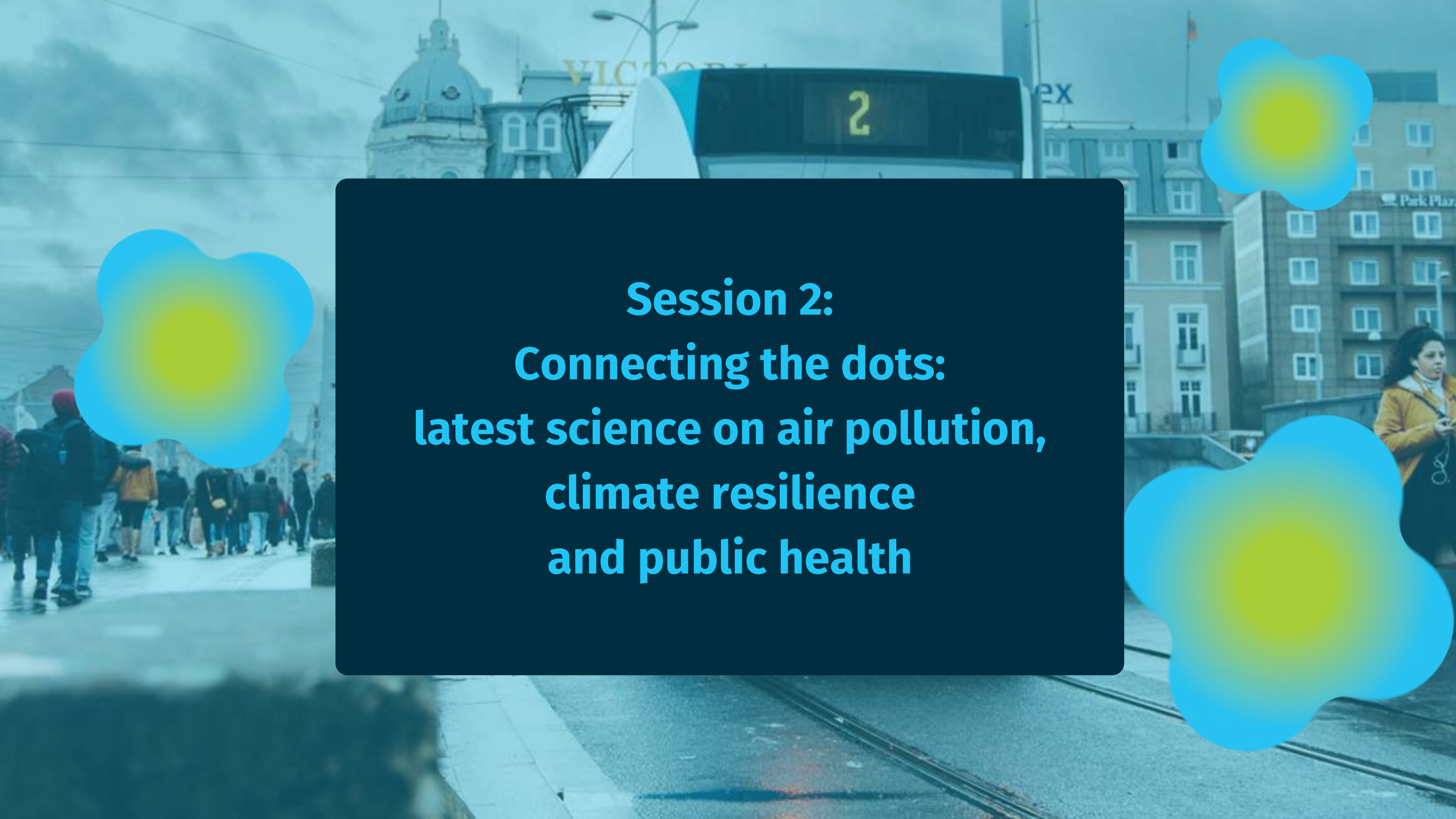
helan  Onafhankelijk ziekenfonds

 **freie**  
krankenkasse

part&namut  
Mutualité Libre

- **In addition to premature mortality, the impacts from living with air pollution related diseases are significant in Europe**
- **Doctors are more and more involved in air quality measures**
- **They still need more information and training to be able to inform their patients of the negative health impacts of air pollution but also of the health benefits of air quality measures**
- **CPME and national medical associations are also active**

- **Air pollution and climate change are inseparable issues**
- **European doctors have published policies and recommendations, e.g. on air quality, climate change, and commercial determinants of health**
- **We contribute to the EU clean air policy, e.g. by**
  - **providing policy briefs**
  - **participating in legislative processes (e.g. AAQD & NECD revisions)**
  - **informing and mobilising our member organisations**
  - **working with the other EU Healthy Air Coalition members**

The background is a photograph of a city street, likely in Victoria, British Columbia, as indicated by the 'VICTORIA' sign on a building. A tram with the number '2' on its destination sign is moving through the street. Pedestrians are visible on the sidewalks. The image has a blue color cast. Three decorative, multi-lobed shapes with a yellow-to-blue gradient are overlaid on the image: one on the left, one in the top right, and one in the bottom right.

**Session 2:  
Connecting the dots:  
latest science on air pollution,  
climate resilience  
and public health**





# Scientific Evidence on Health Impacts of Air Pollution

Why we need to act for clean air now

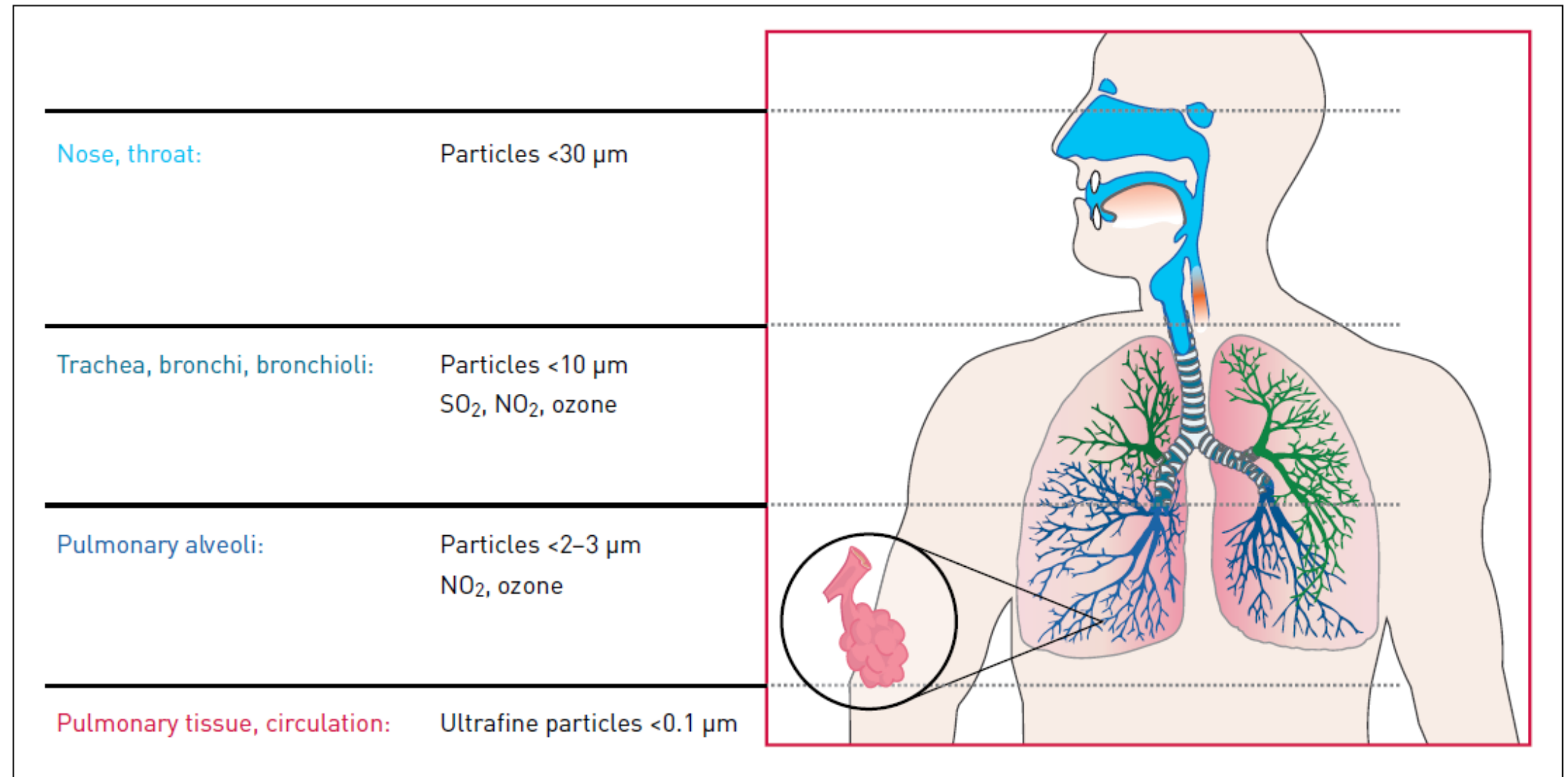
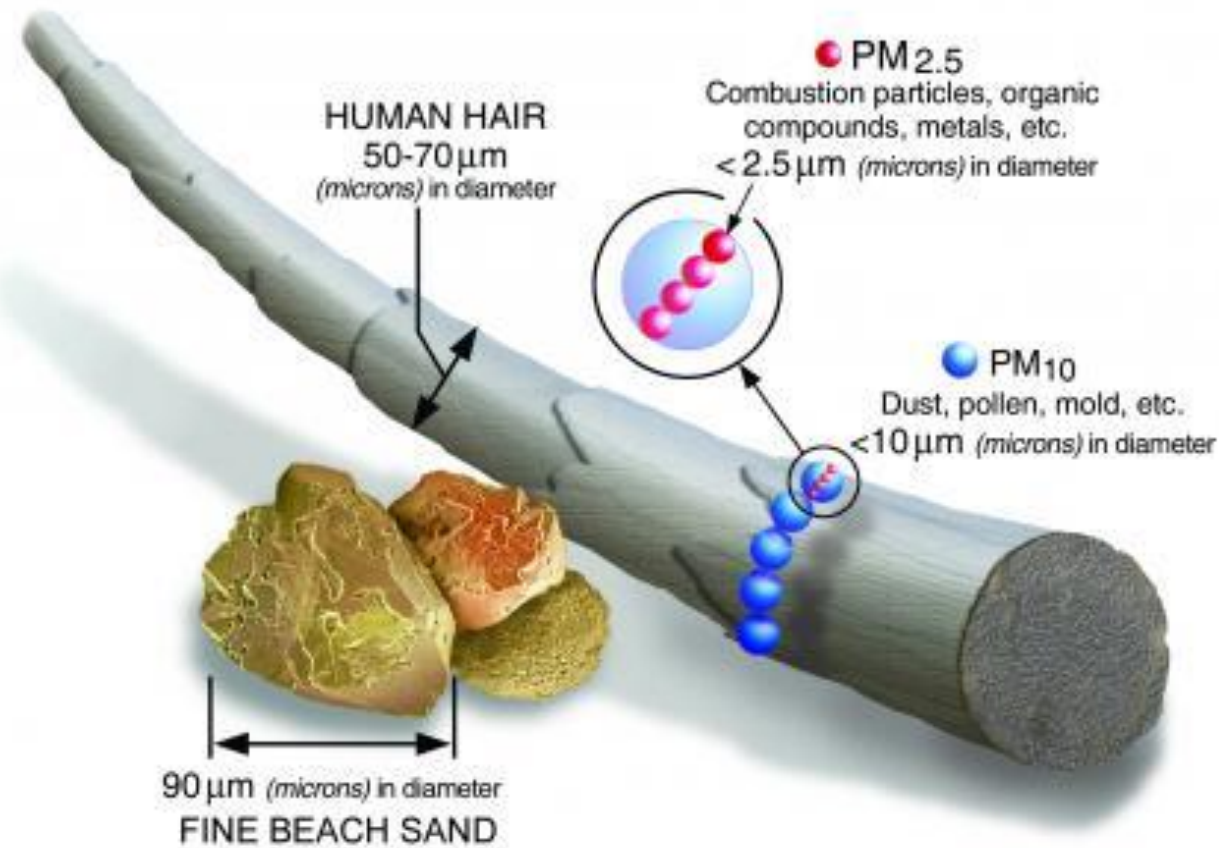


**Dr. Ulrike Gehring**

Utrecht University, The Netherlands

Chair of the ERS Environment & Health Committee

# With every breath we inhale millions of particles that can penetrate deeply into our lungs

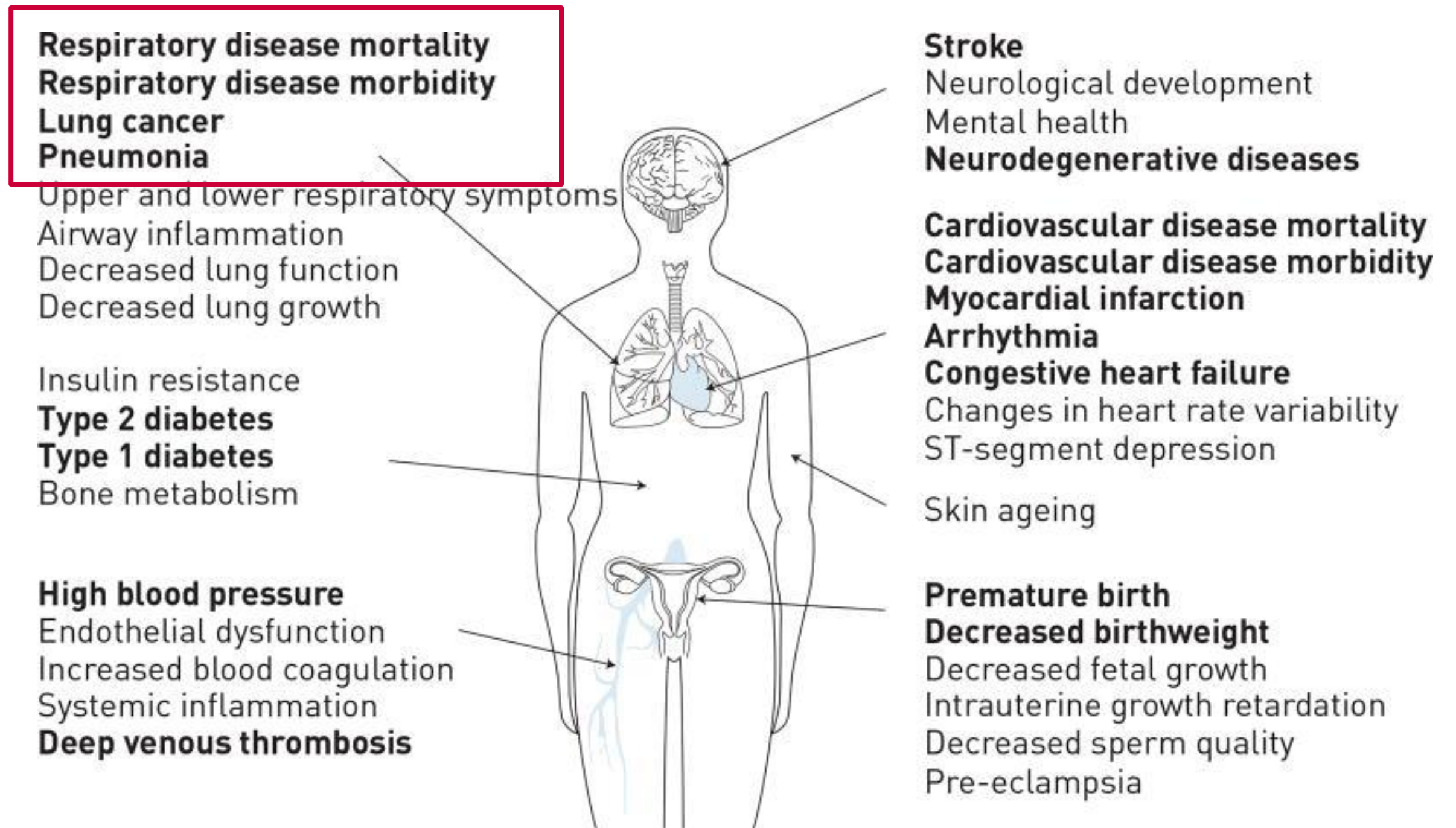


<https://www.epa.gov/pm-pollution/particulate-matter-pm-basics>

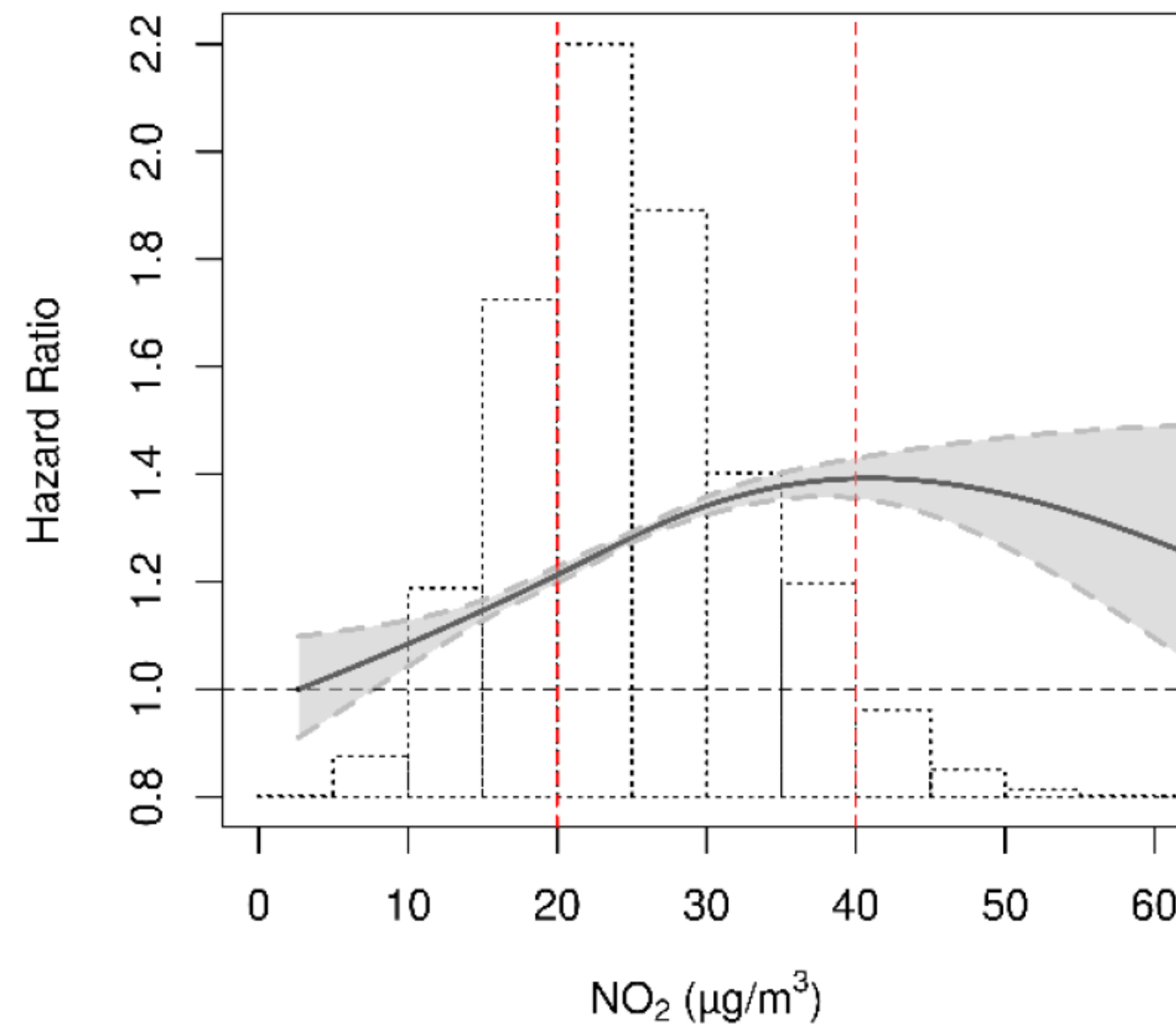
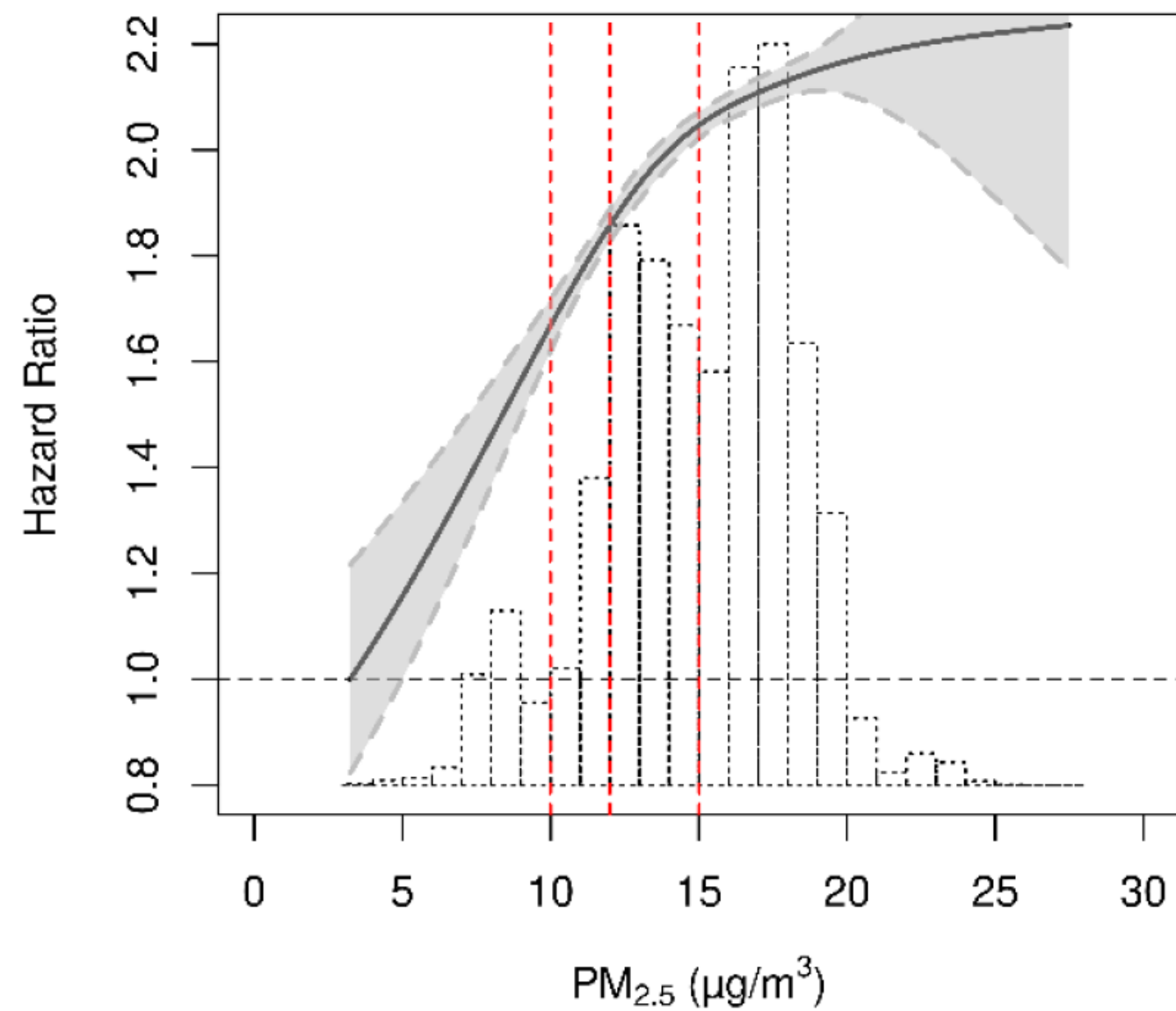
ERS. Air quality and health 2010

# Air pollution affects not only the lungs, but nearly all organ systems

1. **Onset** of respiratory diseases
2. **Exacerbations** of existing respiratory diseases
3. **Increased susceptibility** of respiratory patients to development of other diseases



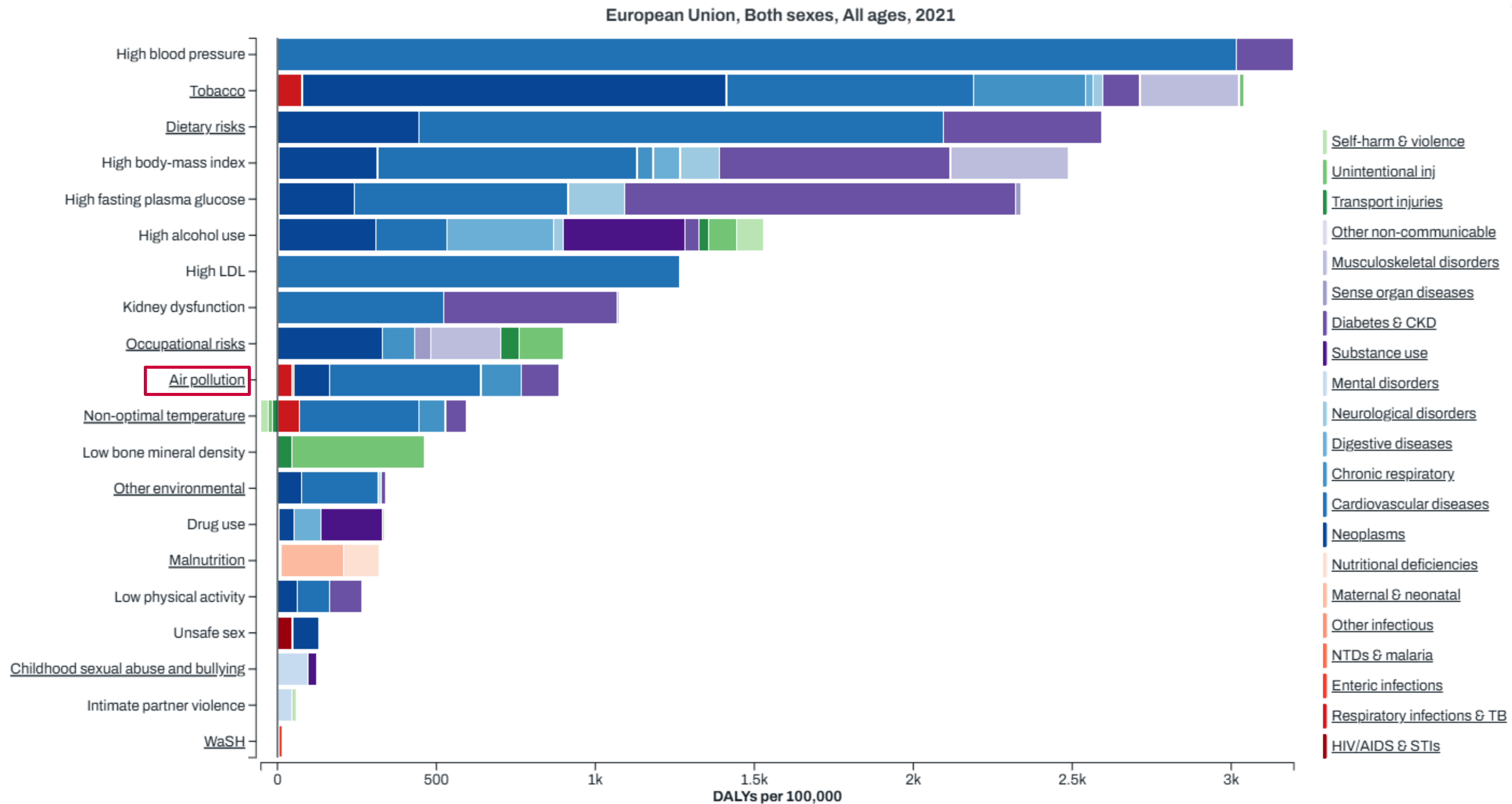
# There is no safe threshold below which no health effects occur



ELAPSE

Long-term effects  
on natural cause  
mortality

# Air pollution is a major risk factor to public health



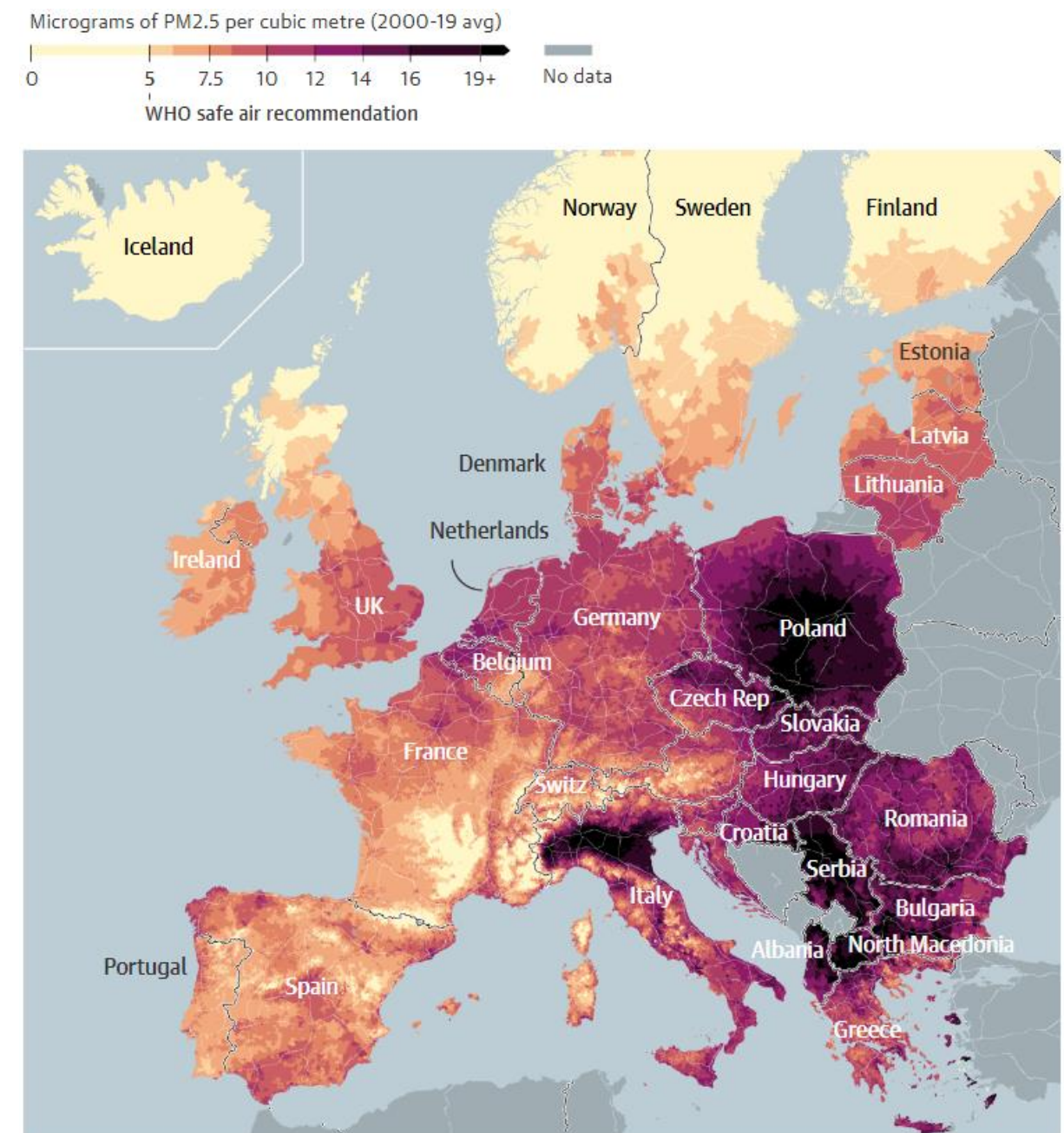
# What the science tells us

| Pollutants*              | 2021 WHO Guidelines  | EU old limit values  | EU new limit values  |
|--------------------------|----------------------|----------------------|----------------------|
| PM <sub>2.5</sub> (year) | 5 µg/m <sup>3</sup>  | 25 µg/m <sup>3</sup> | 10 µg/m <sup>3</sup> |
| NO <sub>2</sub> (year)   | 10 µg/m <sup>3</sup> | 40 µg/m <sup>3</sup> | 20 µg/m <sup>3</sup> |

**In Europe, 98% of people live in areas with PM<sub>2.5</sub> concentrations that exceed the WHO guidelines!**



**Above these levels serious health effects beyond reasonable doubt!**



Guardian graphic. Source: Expanse project; Guardian analysis

# Conclusions

- Air pollution causes a very large disease burden in Europe
- To protect the health of European citizens, air pollution levels need to be reduced to the WHO Air Quality Guideline values as soon as possible
- Air pollution reduction comes with large co-benefits for climate, economy and quality of life
  - **We need to act now!**





ERS

Thank you!



# Air Pollution, Climate and Health – EEA Perspective

Dr. Ian Marnane

January 28<sup>th</sup>, 2025

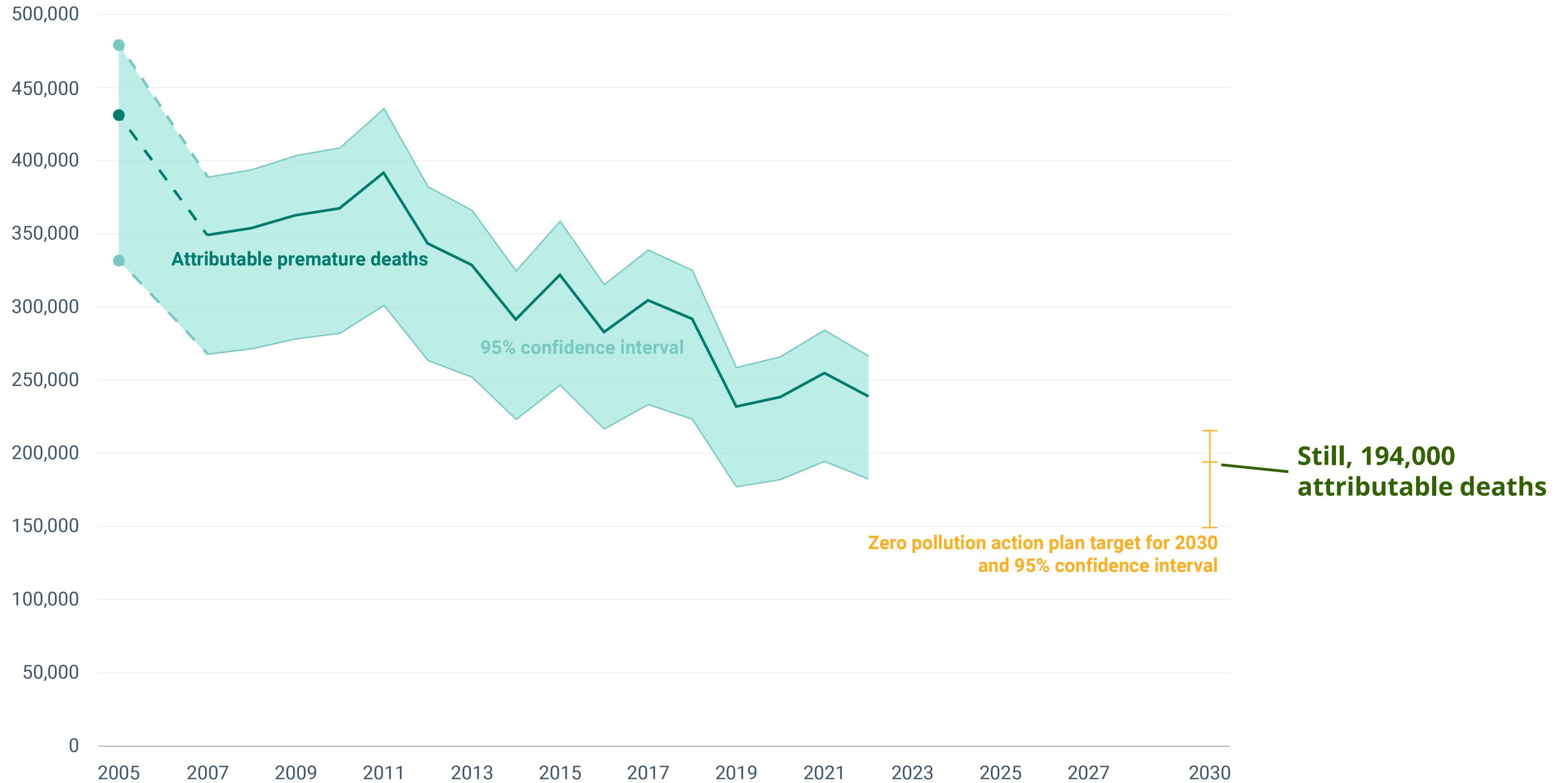
European Environment Agency



# Air Quality – current status and burden of disease

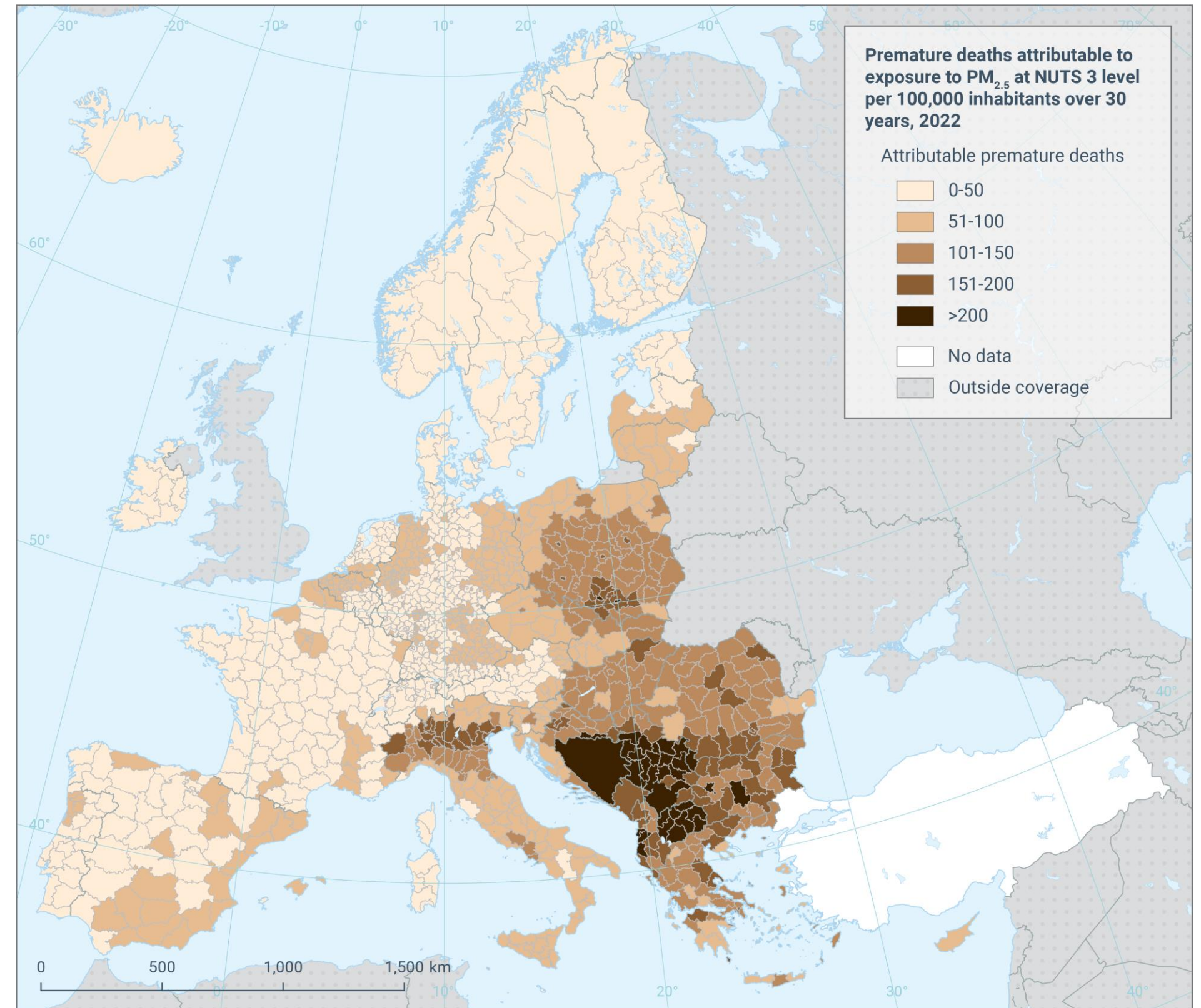
# On track to reach the ZPAP objective for 2030, but....

Number of premature deaths attributed to exposure to PM<sub>2.5</sub>



# ... we also need to close the inequality gap

- Inequalities in exposure
- Inequalities in impact
- Socioeconomic inequalities
- Small children and elderly are the main impacted groups
- Also increased risk from exposure to other environmental stressors

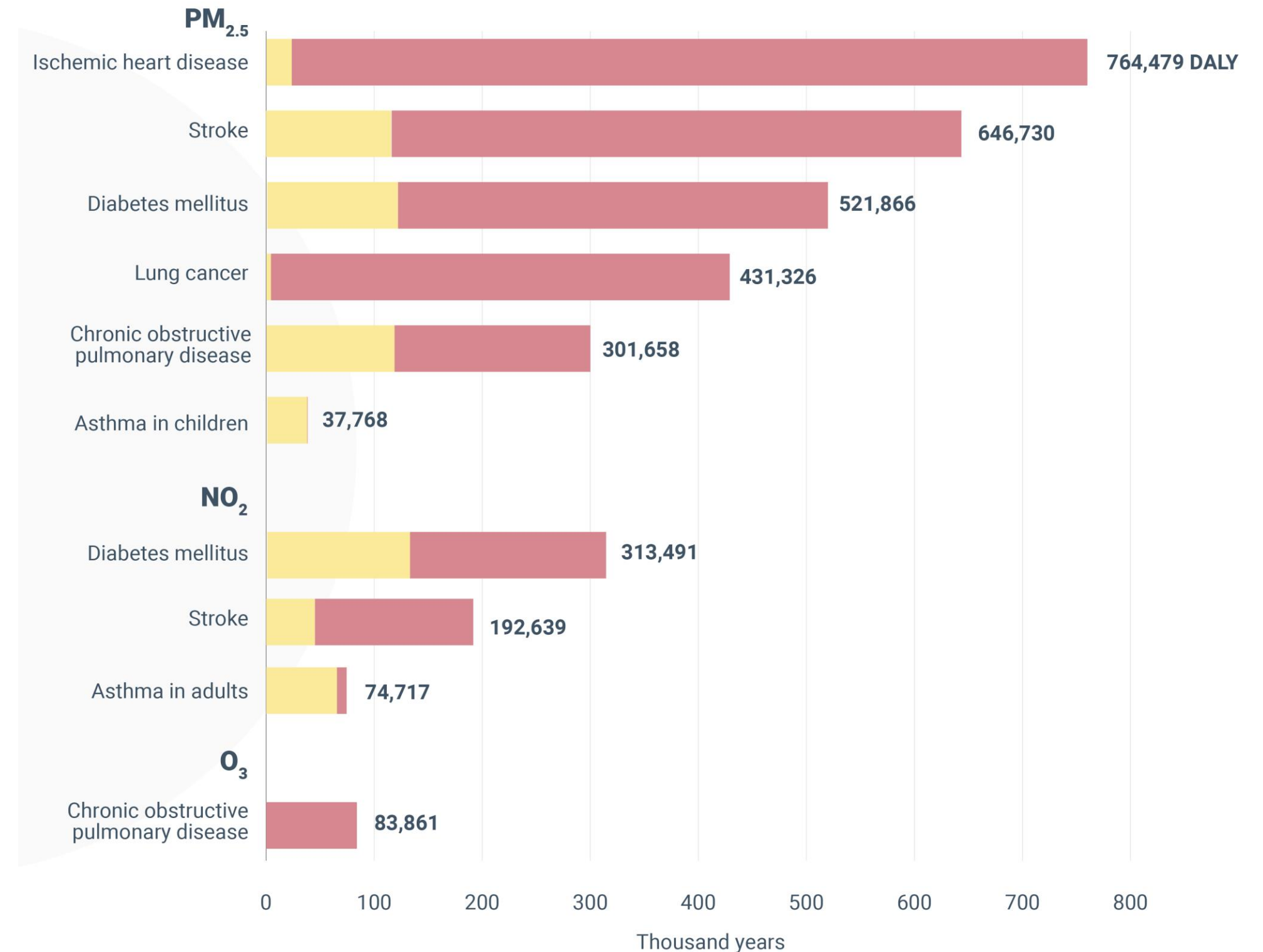


Reference data: © EuroGeographics, © FAO (UN), © TurkStat Source: European Commission – Eurostat/GISCO

# And it's not only about premature deaths

- Morbidity contribute to the burden of disease
- Reduced quality of life
- Increased healthcare costs
- Reduces resilience to other health risks

Disability-adjusted life years (DALY)    ● Years lived with disability (YLD)    ● Years of life lost (YLL)



How does climate change  
influence the health impacts  
of air pollution?

# EUCRA – Assessment of major climate health risks

Key issues related to air pollution:

- Combined impacts of heat and air pollution
- Air quality impacts of wildfires
- Impact on the healthcare system
- Increasing risk of ozone

**Table ES.3 Assessment of major risks**

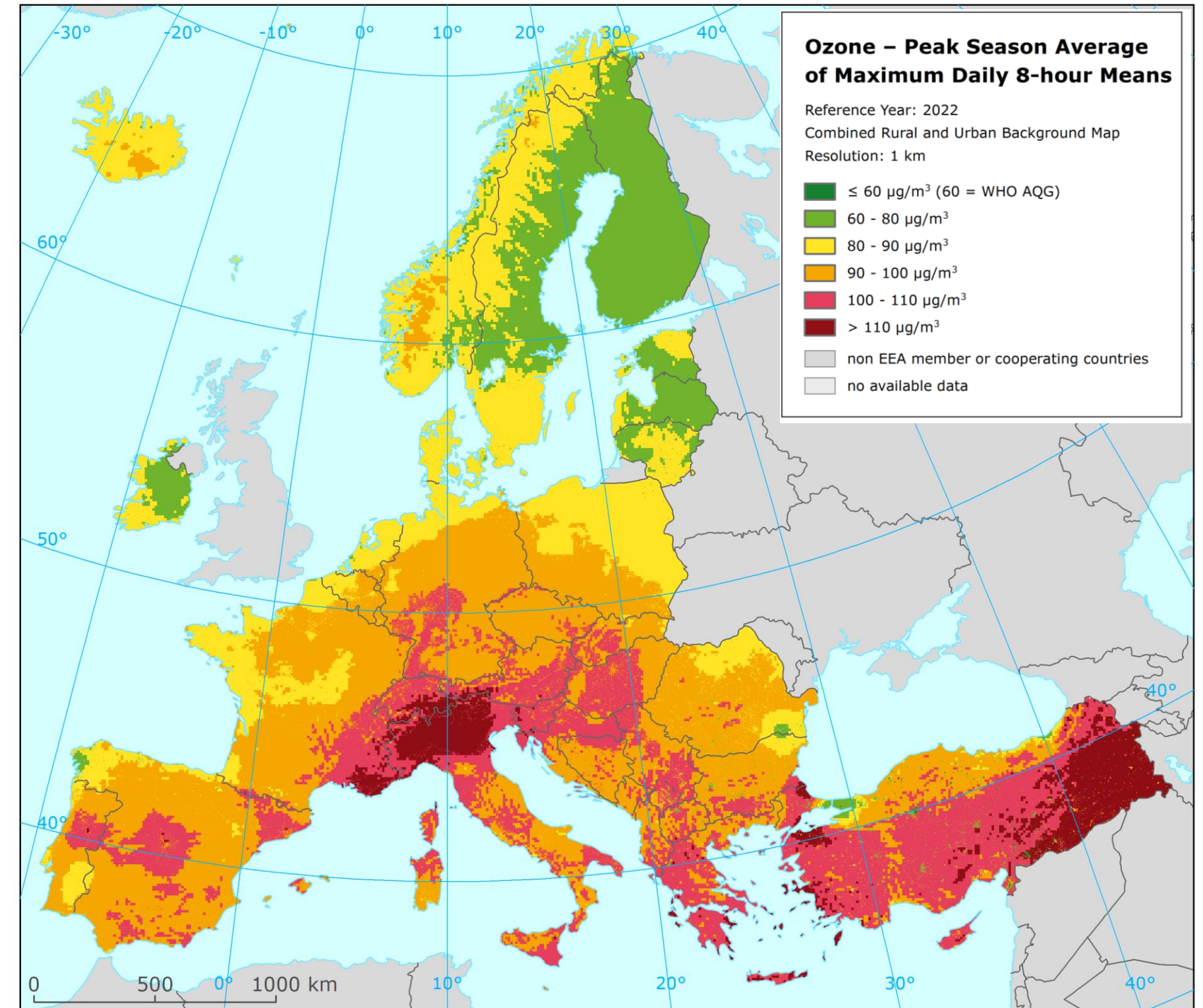
| Climate risks for 'Health' cluster  | Urgency to act         | Risk severity |             |  |
|---|------------------------|---------------|-------------|--|
|   |                        | Current       | Mid-century | Late century (low/high warming scenario) |
| Heat stress – general population  | Urgent action needed   | +++           | +++         | +++                                      |
| Population/built environment due to wildfires (hotspot region: southern Europe) | Urgent action needed   | +++           | +++         | +++                                      |
| Population/built environment due to wildfires                                   | More action needed     | +++           | ++          | ++                                       |
| Wellbeing due to non-adapted buildings (*)                                      | More action needed     | ++            | ++          | ++                                       |
| Heat stress – outdoor workers (hotspot region: southern Europe)                 | More action needed     | +++           | +++         | +++                                      |
| Heat stress – outdoor workers   | Watching brief         | +++           | +++         | +++                                      |
| Pathogens in coastal waters   | Further investigation  | +             | +           | +  |
| Health systems and infrastructure   | Further investigation  | +++           | ++          | ++                                       |
| Infectious diseases   | Sustain current action | +++           | ++          | ++                                       |

**Legends and notes**

|                        |                      |                   |  |
|------------------------|----------------------|-------------------|--|
| <b>Urgency to act</b>  | <b>Risk severity</b> | <b>Confidence</b> |  |
| Urgent action needed   | Catastrophic         | Low: +            | (*) Urgency based on high warming scenario |
| More action needed     | Critical             | Medium: ++        |  |
| Further investigation  | Substantial          | High: +++         |  |
| Sustain current action | Limited              |                   |  |
| Watching brief         |                      |                   |  |

# Ground level ozone impacts

- First time the impact of long-term ozone exposure calculated
- 70,000 deaths attributable to ozone > WHO guideline
- Ozone concentrations will be influenced by climate (heat)
- Southern Europe particularly impacted





Thanks!

European Environment Agency



# PUBLIC HEALTH PERSPECTIVE ON CLEAN AIR AND HEALTH EQUITY

*"For a stronger Europe, we need to work together to reduce air pollution and tackle the health inequities it fuels."*

**Raymond Gemen, Head of Policy**  
raymond.gemen@epha.org



The logo for Ephra, featuring the word "ephra" in a stylized, lowercase font. The letters "e", "p", "h", and "r" are in a dark purple color, while the "i" and "a" are in white. The "i" has a small white circle above it, and the "a" has a small white circle to its right, suggesting a human figure or a stylized 'a'.

the voice for  
better health  
for all in Europe

# WHO ARE WE?

*We advocate* for better health

*We convene* public health voices in Europe

*We focus on legislative action* to create living environments for people to flourish





# Air pollution impacts us **all**, but *not equally*

- Pregnant women
- Children
- The elderly
- Low-income families
- People living in poorer regions





## **OUR APPEAL: KEEP CLEAN AIR AMBITION HIGH!**

- It's the right thing to do
- It's a health and economic investment
- It strengthens our societies
- It reduces health inequities and healthcare costs
- It safeguards the health and productivity of Europe's workforce, ensuring a strong and prosperous Europe

# Thank you for your attention.


**Contact:**

Raymond Gemen, Head of Policy  
raymond.gemen@epha.org

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 @EPHA\_EU  European Public Health Alliance

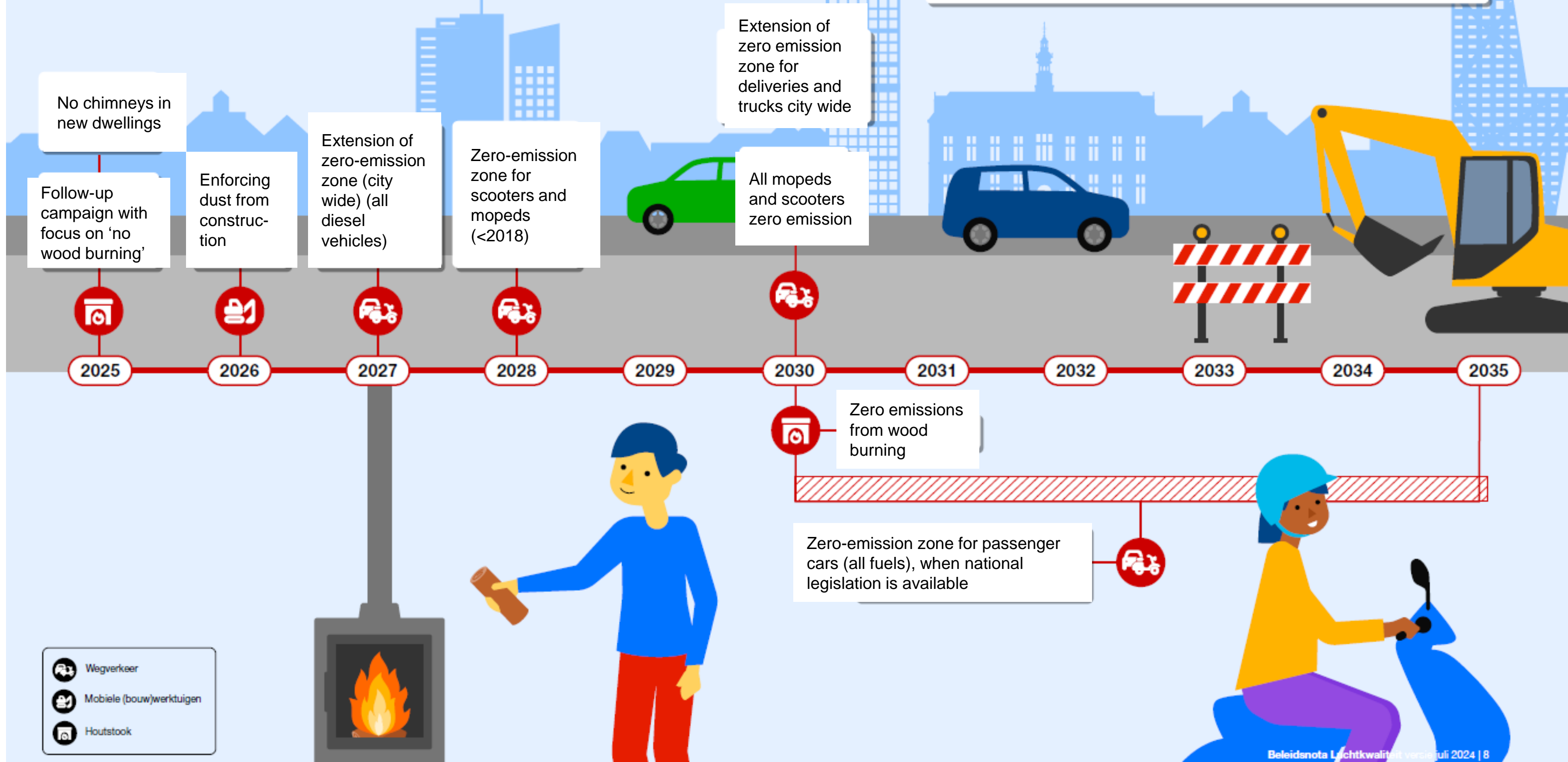
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**Session 3:**  
**Discussion on the way forward for  
policies in the EU**

# Utrecht ambition: Zero emission city

Our goal: healthy air that meets WHO guideline values of 2021

| Stof              | Luchtvervuiling Utrecht 2022 | EU-grenswaarden      | WHO-advieswaarden 2021 (ons doel) |
|-------------------|------------------------------|----------------------|-----------------------------------|
| NO <sub>2</sub>   | 22,1 µg/m <sup>3</sup>       | 20 µg/m <sup>3</sup> | 10 µg/m <sup>3</sup>              |
| PM <sub>2,5</sub> | 10,3 µg/m <sup>3</sup>       | 10 µg/m <sup>3</sup> | 5 µg/m <sup>3</sup>               |
| PM <sub>10</sub>  | 18,3 µg/m <sup>3</sup>       | 20 µg/m <sup>3</sup> | 15 µg/m <sup>3</sup>              |





# Find out more

Healthy Air for Healthy People

[healthyaircoalition.eu](https://healthyaircoalition.eu)



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*HEAL EU transparency register number: 00723343929-96*

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