

## EFA's response to the proposal for the Revision of the Ambient Air Quality Directive (Directorate General for Environment)

The European Federation of Allergy and Airways Diseases Patients' Associations (EFA) is the voice of over 200 million people living with allergy, asthma, and chronic obstructive pulmonary disease (COPD) in Europe. We bring together 45 national associations from 26 countries and channel their knowledge and patients' needs to the European institutions.

EFA considers the **revision of the EU Ambient Air Quality Directives as a crucial policy step** to correct existing shortcomings and gaps leading to disease and death, a position we have documented and voiced on multiple occasions in the past, including in our reaction to the Commission proposal in October 2022<sup>1,2,3</sup>.

In view of the upcoming debate and negotiations in the European Parliament and the Council, it is important to remind the expectations and requests from the allergy and respiratory patient community:

### 1. Refer to the dangerous health effects of air pollution

Air pollution remains the single largest environmental health risk in Europe, and a major cause of mortality responsible for more than 300.000 premature deaths per year<sup>4</sup>. Both short- and long-term exposure to air pollutants such as particulate matter (PM<sub>10</sub> and PM<sub>2.5</sub>), nitrogen dioxide (NO<sub>2</sub>), sulphur dioxide (SO<sub>2</sub>) and ozone (O<sub>3</sub>) aggravate a wide range of diseases, including asthma, chronic obstructive pulmonary disease (COPD) and lung cancers, or even be responsible for their onset<sup>5</sup>.

The effects of air pollution are more frequent in vulnerable populations such as pregnant women, children and the elderly<sup>6</sup>. People with allergy, asthma and COPD are also among the most affected, as chemical pollutants present in ambient air penetrate deep into the airways through breathing, causing further damage to an existing inflammation and compromised lung function.

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<sup>1</sup> European Federation of Allergy and Airways Diseases Patients' Associations, *EFA takes a Stand on the Fitness Check of the Ambient Air Quality Legislation*, 2017 <https://www.efanet.org/news/3202-efa-takes-a-stand-on-the-fitness-check-of-the-ambient-air-quality-legislation>

<sup>2</sup> European Federation of Allergy and Airways Diseases Patients' Associations, *Should the EU revise the EU Ambient Air Quality Directives? Patients Say YES!*, 2018 <https://www.efanet.org/news/3382-should-the-eu-revise-the-eu-ambient-air-quality-directives-patients-say-yes>

<sup>3</sup> European Federation of Allergy and Airways Diseases Patients' Associations, *European Commission strengthens air pollution levels but falls short on the protection measures recommended by WHO*, 2022 <https://www.efanet.org/news/news/4207-commission-revised-air-quality-standards>

<sup>4</sup> European Environment Agency, *Air Quality in Europe – 2022 Report*, 2022 <https://www.eea.europa.eu/publications/air-quality-in-europe-2022/health-impacts-of-air-pollution>

<sup>5</sup> European Environment Agency, *Air pollution: how it affects our health*, October 2022, <https://www.eea.europa.eu/themes/air/health-impacts-of-air-pollution>

<sup>6</sup> R. Sciaraffa et al., 'Impact of air pollution on respiratory diseases in urban areas: a systematic review', 2017 [https://academic.oup.com/eurpub/article/27/suppl\\_3/ckx189.117/4556899](https://academic.oup.com/eurpub/article/27/suppl_3/ckx189.117/4556899)

**EFA's recommendations:**

- EFA considers **the recitals of the new legislation should reflect the full spectrum of the impact of air pollution on health**, sound and clear. Air pollutants damage most organ systems and are linked to serious and debilitating diseases such as childhood and adult-onset asthma, cardiovascular diseases, chronic obstructive pulmonary disease, pneumonia, stroke, diabetes, lung cancer, impaired cognitive development, and dementia<sup>7</sup>.
- The revised Directive must include a concrete reference to the **vulnerable groups who are more likely to experience adverse health effects**, such as those with pre-existing conditions, pregnant women, newborns, children, and the elderly. It is necessary that EU measures target those most in need to be protected from the impact of air pollution.

**2. Match urgency with ambition: align with WHO by 2030**

The huge disease burden associated with air pollution implies that there is still a long way to go to ensure safe air. The updated WHO Air Quality Guidelines (2021 WHO AQGs) have identified harmful effects of air pollution even at levels previously considered 'safe'. On this basis, the WHO AQGs recommend pollutant limits that further widen the gap with the current EU standards<sup>8</sup>. In the meantime, scientific research has demonstrated considerable health damage when exposed even at very low levels of pollution<sup>9</sup>.

Having more than 300,000 dead a year in the EU due to air pollution is simply unacceptable and should be tackled as the most pressing priority on EU's environmental health legislation. However, the Commission proposal for mid-term targets by 2030 (Art. 13, Annex I), and the perspective for full alignment with WHO only post-2030 does not offer certainty. Such a timeline fails to capture the urgency of the health burden, leaving citizens exposed and unprotected to harmful air pollution, and replicating the same level of annual deaths.

**EFA's recommendations:**

- EFA urges co-legislators to translate science into law and ensure wide support to a **full alignment of EU air quality standards with the 2021 WHO AQGs**, covering all major air pollutants. Such an alignment must be based on purely health-related considerations, rather than political and economic calculations.
- EFA demands that **full alignment must be achieved by 2030 at the latest**, in order to facilitate a speedy adaptation and enforcement measures. Besides, EU standards must otherwise be reviewed in line with latest scientific evidence on the impact of air pollution on human health.

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<sup>7</sup> D. E. Schraufnagel, J. R. Balmes et al., 'Air Pollution and Noncommunicable Diseases', 2019 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6904854/>

<sup>8</sup> World Health Organisation, Global Air Quality Guidelines, 2021, <https://www.who.int/publications/i/item/9789240034228>

<sup>9</sup> B. Brunekreef, M. Strak et al. Research report: Mortality and Morbidity Effects of Long-Term Exposure to Low-Level PM2.5, BC, NO2, and O3: An Analysis of European Cohorts in the ELAPSE Project, Health Effects Institute, 2021 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9476567/>

### 3. Improve the access to public information on air quality

Access to public information on air quality is both a right and a prevention measure. As a right, it is enshrined in EU law by Directive 2003/4/EC on public access to environmental information, which adapts national laws to the Aarhus Convention<sup>10,11</sup>. Meanwhile, access to real-time air quality information can support prevention as it allows people to determine their behaviours accordingly.

However, getting information on air quality remains difficult across EU countries, largely due to a patchwork of data coming from different sources and governance levels. According to a Eurobarometer survey, 60% of people in Europe do not feel well-informed on air quality issues in their country<sup>12</sup>.

#### **EFA's recommendations:**

With the digital transition, there is plenty of room for improvement in ensuring timely access to air quality information. EFA strongly supports the relevant amendments put forward in the draft report of the Environment, Health and Food Safety committee (ENVI) of the European Parliament, in particular:

#### (a) Expansion of information thresholds to pollutants beyond ozone

According to their definition (Art. 4[32]), information thresholds are designed to protect the vulnerable population from air pollution, as they are meant to activate immediate and appropriate information once certain pollution levels are identified. However, the EC proposal falls short by applying information thresholds only to ozone.

- EFA fully supports the European Parliament ENVI proposal to **establish information thresholds for all major pollutants covered by the Directive**, including PM<sub>10</sub>, PM<sub>2.5</sub>, NO<sub>2</sub> and SO<sub>2</sub>.

#### (b) Introduction and functioning of Air Quality Indices

EFA applauds the establishment of national air quality indices (AQIs) with hourly updates for five main pollutants (Art. 22). However, if AQIs are to be fit for purpose, both as information and prevention tools, they need to offer health-relevant and harmonised information.

- EFA urges to **ensure that information generated by AQIs are accompanied with health-related messaging and advice**, including information on the health impacts of air pollution on vulnerable groups and the general population, in the short and long-term, and recommended behaviours to reduce pollution and exposure.
- EFA calls for **a harmonised EU framework for AQIs**, including common assessment methods, standardised classification of risk and harmonised messaging for the public<sup>13</sup>.

<sup>10</sup> Directive 2003/4/EC of the European Parliament and of the Council of 28 January 2003 on public access to environmental information and repealing Council Directive 90/313/EEC <https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=celex%3A32003L0004>

<sup>11</sup> Convention on Access to Information, Public Participation in Decision-Making and Access to Justice in Environmental Matters, 1998 <https://unece.org/DAM/env/pp/documents/cep43e.pdf>

<sup>12</sup> Special Eurobarometer survey, Attitudes of Europeans towards Air Quality, October 2022 <https://europa.eu/eurobarometer/surveys/detail/2660>

<sup>13</sup> According to a 2018 report of the European Court of Auditors, there are considerable differences in how AQIs are designed in various European cities, leading to divergent assessments for the same air quality levels, and therefore reduced credibility <https://www.eca.europa.eu/en/Pages/DocItem.aspx?did=46723>

#### 4. Facilitate the access to justice

EFA welcomes the new provisions on access to justice (Art. 27), whereby individuals or organisations can challenge public authorities of any decision, act or failure concerning the implementation of air quality rules. However, in view of the massive EU failure to enforce the existing air quality levels, **access to justice should be considered as an additional tool to improve air quality**, meaning that the implementation of the legislation should not be primarily the responsibility of individual citizens going to court, but of willingness and action by the Member States. In addition, given the complexity to singled out disease outcomes due to environmental exposure, access to justice for breaches on air quality should be simplified for citizens.

##### EFA recommendation:

- Access to justice should be enforced with a **straightforward, adequate, and effective legal procedures and redress mechanism**, including injunctive relief as appropriate, unhindered for both individuals and organisations.

#### 5. Facilitate access to compensation for health damage due to air pollution

EFA welcomes the introduction of compensation in the case of health damage from air pollution (Art. 28). As with access to justice, the provisions on compensation for damage to human health also 'have the objective to avoid, prevent and reduce harmful effects on human health and the environment from air pollution'. As per a 2022 [ruling](#) of the European Court of Justice, the previous version of the Air Quality Directives (2008/40) did not confer rights on individuals which they can invoke to demand compensation from Member States. Introducing these provisions must be coupled with a solid framework that allows for swift and non-burdensome legal pathway for citizens to claim compensation, including the shift of the burden of proof to the public authorities.

##### EFA recommendation:

- The compensation for damage to human health provision **shall place the burden of proof on public authorities to prove that the health impact is in fact not due to air pollution**, without placing the burden on individuals.

#### 6. Add premises for pollutants of emerging concern

Whilst the proposal foresees some mandatory monitoring for 'pollutants of emerging concern' (Art. 10), such as ultrafine particles, black carbon, EFA believes that the new obligation falls short on the dimension of the problem, as the monitoring obligation remains partial and linked to loose requirements and criteria (e.g. only in 'monitoring supersites'). Moreover, EFA urges the Commission to allow for fast-track revision of EU air quality premises beyond the applied pollutant-based scope, and to allow including limit values to other air pollutants not covered by the present directive, as those pollutants can worsen allergy and respiratory symptoms and impair lung function capacity.

Regarding volatile organic compounds (VOCs), EFA draws the attention to pollen and the inclusion of aeroallergens into the areas that require further research according to the latest WHO AQG. There is

already robust evidence that higher ambient carbon dioxide concentrations arising from human activity and warmer temperatures result in increased pollen production.<sup>14</sup> Particularly, air pollution emissions induce climate change and impact pollen, extending the pollen seasons, increasing the pollen loads during the seasons, and increasing the pollen allergenicity overall<sup>15,16,17</sup>. The effect pollen has on airways diseases is far from negligible, as it is estimated to affect about 40% of the population in Europe<sup>18</sup>. Given the effect of air pollution on pollen, EFA strongly encourages that the revision of the air quality framework pays attention to this pollutant.

#### **EFA recommendations:**

- **Establish a stricter monitoring framework for emerging pollutants**, at least in terms of monitoring, putting them on equal footing with the main pollutants.
- **Consider pollen as a source of air pollution** harming human health, and establish a resourced pollen monitoring network across the EU to formalise the sampling, study and information currently developed by civil society organisations.
- Reinforce pollen monitoring across the EU through the establishment of **an EU-wide real-time information system**, ensuring timely dissemination of and access to information to citizens with pollen allergies.

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<sup>14</sup> C. S. Barnes et al., 'Climate Change and Our Environment: The Effect on Respiratory and Allergic Disease', *J Allergy Clin Immunol Pract.*, 2013 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3654689/>

<sup>15</sup> L. Ziska et al., 'Temperature-related changes in airborne allergenic pollen abundance and seasonality across the northern hemisphere: a retrospective data analysis', 2019 [https://www.thelancet.com/journals/lanplh/article/PIIS2542-5196\(19\)30015-4/fulltext](https://www.thelancet.com/journals/lanplh/article/PIIS2542-5196(19)30015-4/fulltext)

<sup>16</sup> J. U. Ahlholm, M. L. Helander, J. Savolainen, 'Genetic and environmental factors affecting the allergenicity of birch (*Betula pubescens* ssp. *czerepanovii* [Orl.] Hämet-ahti) pollen', *Clin Exp Allergy*. 1998 <https://pubmed.ncbi.nlm.nih.gov/9824411/>

<sup>17</sup> A. Damialis, C. Traindl-Hoffmann, R. Treundler, 'Climate Change and Pollen Allergies', *Biodiversity and Health in the Face of Climate Change* [https://link.springer.com/chapter/10.1007/978-3-030-02318-8\\_3](https://link.springer.com/chapter/10.1007/978-3-030-02318-8_3)

<sup>18</sup> I. R. Lake et al., 'Climate Change and Future Pollen Allergy in Europe', *Environmental Health Perspectives*, 2017 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5332176/>