



22 April 2022

Dear Sir/Madam,

The Department of Health welcomes the Department of the Environment, Climate and Communications' draft Clean Air Strategy for Ireland. Tackling air pollution requires cross-sectoral action, and the strategy's five strategic priorities represent excellent areas to focus on in order to improve the overall air quality in Ireland.

The public consultation set out 8 questions as a guide for drafting and preparing responses. Below are the Department of Health's answers to the questions included.

### Consultation Questions

#### **1. Do you agree with the five strategic priorities outlined in the draft strategy?**

Yes, however for number 5 –

“To promote and increase awareness of the importance of clean air.”

It is our view that this needs to be the number 1 priority. It also suggested that the action needs to be active and impactful. We suggest it should also include community engagement. Information and intelligence regarding air pollution must be more accessible to the public to foster citizen engagement.

It is important to highlight the impact of air pollution on human health, not just the environment. Public awareness of health impacts of air pollution is low, which leads to a lack of political prioritisation of this issue. It has been noted by a number of sources that Ireland has extremely high rates of respiratory illness, including the fourth highest incidence of Cystic Fibrosis in the world. The Environmental Protection Agency has reported an European Environment Agency figure of in excess of 1,100 premature deaths per year in the Republic of Ireland caused by respiratory diseases, strokes and heart disease, due to poor air quality<sup>1</sup>.

#### **2. Do you feel there are additional strategic priorities which should be included?**

The five priorities as identified meet the objectives of the strategy appropriately

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<sup>1</sup> <https://www.cso.ie/en/releasesandpublications/ep/p-sdg3/irelandsunsdgs2019-reportonindicatorsforgoal3goodhealthandwell-being/environment/>

### **3. How can pollutant emissions data be better used to inform actions at local and national levels?**

Routinely analysing data on hazards and exposures and their health impacts will allow targeted interventions and enable their evaluation to protect and improve health. Real data time data from HIPE could be used for measuring health impacts at a population level.

### **4. What do you feel are the most important current and emerging air quality issues in Ireland that require further research?**

Emerging evidence suggests air pollution is implicated in a wider range of diseases than previously recognised and the health effects are modified by both social and physical factors. Further research to understand the inequalities that exist in both exposure and susceptibility is essential in order to address these inequalities.

There may be opportunities to research health impacts of air quality using data from academic institutions – much of this data may already be collected. For example, data from cohort studies such as The Irish Longitudinal Study on Ageing (TILDA) could be compared to data from air quality monitoring stations in order to improve knowledge of health outcomes at a population level, as this is nationally representative sample with a plethora of health data available. Data such as these could be a rich source for measuring health outcomes if not already being used.

### **5. How can we better increase awareness of the health impacts of air pollution?**

Work with media outlets to raise awareness of health impacts of air pollution, in particular to ensure those that are in vulnerable groups are informed. This will require use of multiple communication routes to ensure broad reach.

Improve access to air quality forecast for the public. This will allow the public, particularly in those in vulnerable groups, to modify their behaviour as required and protect their health. Many of those in vulnerable groups may not have access to online media and therefore multiple communication routes should be used.

Ensure the public are well informed of what clear and practical actions they can take personally to improve air quality, e.g. reduce vehicle use.

### **6. What issues might a national clean air awareness campaign encompass and how could its impact be measured?**

It is essential to highlight the health impacts of air pollution. Its impact can be measured both from emissions data, but also from health outcomes at a population level. Again, longitudinal studies such as TILDA with both geographic data and health data available may be useful for assessing health impacts.

**7. What particular metrics or benchmarks do you think should be considered in tracking the progress of a Clean Air Strategy?**

Adoption of the more stringent WHO guideline targets for all air pollutants.

**8. Are there any other comments you have in relation to the draft national Clean Air Strategy?**

The alignment with EU objectives and the most recent Air Quality Guidelines published by the World Health Organization is welcomed. The WHO recommends the targeting of particulate matter and the focus on measures in this regard (Section 8.3) is particularly welcome from a health perspective, although as the Strategy notes, air pollutants come from a range of sources, necessitating action across a variety of policy areas.

Section 4.1 states “Ireland will commit to setting more stringent legal limits for ambient air quality by 2025 taking into consideration the new WHO guideline limits”. These guideline limits should be the target, rather than a consideration.

When describing each of the air pollutants in section 7, “Ireland’s Air Quality”, the Strategy could include a sentence or two for each of the pollutants on their specific impact on human health.

Specific measurable and targeted interventions and actions are required. Annual monitoring against targets is welcome, however many of the targets in this document are vague.

It would add value if at local level Directors of Public Health were involved with local authorities to promote the Clean Air Strategy. They could help provide clear evidence based and practical actions to communities to reduce their contribution and their exposure to poor air quality. For example, encouraging active transport. Directors of Public Health can also risk assess new developments e.g., industrial processes that may affect air quality.

As noted, a major cause of air pollution in Ireland is particulate matter from domestic burning of solid fuels. Department of Health therefore welcomes the forthcoming ban on sale and distribution of turf. We note however that there is no mention in the Strategy of indoor air pollution. Exposure to indoor air pollution (including that produced by the burning of solid fuels in residential open fires) is known to affect respiratory and cardiovascular health and possibly cognitive function.<sup>2</sup> With reference to the targets of the National Retrofit Plan, home energy efficiency measures can have negative effects on health if they result in increased dwelling airtightness. Although increasing airtightness can improve home warmth and provide protection against ambient pollutants, adequate

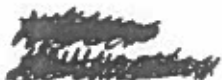
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<sup>2</sup> Maher BA [et al.]. Indoor particulate air pollution from open fires and the cognitive function of older people. *Environ Res.* 2021 Jan;192:110298. doi: 10.1016/j.envres.2020.110298.

compensatory ventilation will be necessary to ensure that indoor exposure to contaminants produced within (or underneath) the home is not increased.

Overall, the Department of Health welcomes the draft Strategy and looks forward to engaging further with relevant stakeholders on the Clean Air Strategy, including through the proposed National Clean Air Communications Strategy Group.

Yours sincerely,

A handwritten signature in black ink, appearing to be 'S. Williams', is written over a dark, rectangular redaction mark.

Health & Wellbeing Division  
Department of Health