

Fine particulate matter air quality targets

Q1. Question 1a: To what extent do you agree with the level of ambition proposed for the Annual Mean Concentration Target (AMCT)?

No Response

Q2. Question 1b: Please explain your answer

No Response

Q3. Question 2a: To what extent do you agree with the level of ambition proposed for the Population Exposure Reduction Target (PERT)?

No Response

Q4. Question 2b: Please explain your answer.

No Response

Q5. Question 3a: To what extent do you agree with the proposed arrangements for assessing PM2.5 levels and achievement of the targets?

No Response

Q6. Question 3b: Please explain your answer.

No Response

Q7. Question 4a: To what extent do you agree with the provision in the draft regulations to allow the subtraction of the 'natural contribution' to particulate matter where exceedances of a target are due in whole or in part to these natural contributions?

No Response

Q8. Question 4b : Please explain your answer.

No Response

Q9. Question 5: We have asked some specific questions. If you have any other relevant thoughts or comments on our proposals, please provide them here.

RSPH response to Welsh Government consultation - Fine particulate matter air quality targets

About RSPH

The Royal Society for Public Health is the world oldest public health charity, working across the UK and the world to influence public health policy and offer more than 100 industry-leading qualifications and courses. We are home to a global community of over 6,000 members working across a vast range of disciplines, professions, and settings to help the public lead healthier lives.

open consultation

Fine particulate matter air quality targets

Air pollution does not affect all communities equally. The health burden falls disproportionately on vulnerable groups and people from lower socioeconomic backgrounds, who are often more exposed due to where they live, work, and travel.

Socioeconomic inequality is a major driver of unequal exposure. People in more deprived communities are more likely to live near major road corridors, industrial sites, and other pollution sources, often due to housing affordability and historic planning decisions. 46% of the most deprived neighbourhoods have NO₂ levels above legal limits, compared with only 2% of the least deprived neighbourhoods. Economically deprived communities face higher exposure to pollution, greater susceptibility to its health effects, and fewer resources to cope with the consequences.

There is increasing evidence showing similar disparities for indoor air pollution exposure for deprived communities. These households face higher chances of poor indoor air quality due to living more often in overcrowded, damp, and under-heated homes with outdated appliances and inadequate ventilation.

Air pollution is a significant and growing threat to public health and it contributes to between 28,000 and 36,000 deaths a year in the UK. Between 2017 and 2025, the total cost to the NHS and social care of air pollution is estimated to be up to £5.56 billion. Mitigating against the rise of air pollution which will lower the burden on the NHS and boost productivity as fewer people are forced out of work by air pollution related health conditions.

In the UK air pollution is the fourth-biggest danger to public health and carries an estimated annual cost of £20 billion to health services and businesses. We also know that long-term exposure to air pollution can cause chronic conditions such as cardiovascular and respiratory diseases as well as lung cancer, leading to reduced life expectancy.

For people with a lung condition, breathing in air pollution puts them at risk of experiencing a life-threatening asthma attacks or severe flare-ups and living in the most polluted 10% of the UK could increase risk of heart failure by 27%. Fine particles also travel to the brain and can increase chances of stroke or developing dementia.

There is no safe level of air pollution, and research shows that long-term and chronic exposure to air pollution can have a detrimental impact on health outcomes and overall wellbeing. However, we also know that not everyone will be impacted in the same way. Groups most vulnerable to air pollution include babies and children, older people, pregnant women and people with long-term health conditions such as asthma and cardiovascular disease. Exposure to air pollution is the second leading risk factor for death in children under 5 in the UK. Long-term exposure in children can permanently stunt lung growth and increase the likelihood of developing long term health conditions.

We support the Welsh Government's target to reduce average population exposure by 25% by 31 December 2035 as this would have a significant, positive impact on public health, primarily by preventing hundreds of thousands of new cases of disease and reducing mortality. These measures are likely to cut the average gap in air pollution exposure between the most and least deprived areas in half, which will contribute to reducing health inequalities as reducing exposure will also improve life expectancy. We hope that this reduction can be a key step toward even more ambitious long-term goals to further improve air quality and prevent the health and economic costs to our health caused by air pollution.

Q9. Question 5: We have asked some specific questions. If you have any other relevant thoughts or comments on our proposals, please provide them here.

Key asks:

The Governments must encourage more development of green spaces and healthy environments with reduced air pollution which will contribute to greater air quality. The Government must focus on encouraging the development of more healthy environments so that people who already facing inequalities in health (and are more likely to live close to sources of air pollution, such as major roads or industrial sources) can live in areas which support their health.

The Government must also support the increased use of public transport along with more sustainable transport methods such as walking and cycling. Increasing the use of public transport, cycling, and walking is critical for reducing air pollution, as road transport accounts for 35% of nitrogen oxide and 12% of particulate matter emissions across the UK. By shifting to more modes of active travel this reduces car dependency, lowers emissions, and improves public health.

Submit your response

Q10. Please provide the first part of your home postcode e.g. CF10

[information redacted]

Q11. You are about to submit your response. Please ensure you are satisfied with the answers you have provided before sending.

Name *[information redacted]*

Organisation (if applicable) RSPH

Q12. If you want to receive a receipt of your response, please provide an email address.

Email address

[information redacted]

Q13. Responses to the consultation may be published. Your response will be anonymous.

However, if you would like your name to be published alongside your response, please tick the box.

No Response

Redacted information - regulation 13 - personal data.

