

## **Environment, Climate Change and Land Reform Committee**

### **Inquiry into air quality in Scotland**

#### **Written submission from Royal College of Physicians of Edinburgh**

The Royal College of Physicians of Edinburgh (“the College”) is pleased to respond to the Committee’s call for views on air quality in Scotland. The College is an independent clinical standard-setting body and professional membership organisation, which aims to improve and maintain the quality of patient care. Founded in 1681, we support and educate doctors in the hospital sector throughout Scotland and the world with over 12,000 Fellows and Members in 91 countries, covering 30 medical specialties.

In order to inform our response, the College sought the views of Fellows working in respiratory medicine and in public health.

#### **General comments**

The College has welcomed the strategy to reduce the harmful effects of air pollution. The six areas in the strategy have attempted to cover all the issues related to the reduction of air pollution, and specific proposals such as the adoption in Scottish legislation of the WHO guideline for particulate matter (PM 2.5)<sup>1</sup> demonstrate the commitment to reducing air pollution.

Air quality is a public health issue: minimising air pollution is essential to protect public health. However it is important to note that air quality in Scotland has improved over recent years and is generally good. Breaches of the EU limit are mainly linked to pollution hot spots in heavily trafficked city centres.

#### **Does Scotland have the right policies (Clean Air for Scotland Strategy), support and incentives in place to adequately tackle air pollution?**

The College considers it vital that policies in the strategy around active transport and integrated public transport address not only outdoor air quality, but also the public health challenges of physical inactivity and obesity.

Fellows of the College have commented that the public health crisis related to physical inactivity, obesity and inequalities needs to be tackled by a whole system approach and the influence of the strategy in this area is significant: these aspects of the strategy could be further highlighted.

#### **How does the Scottish policy fit with the UK and EU policy on air quality?**

The current Scottish Government strategy on air pollution is largely consistent with WHO recommendations which emphasise the need to create integrated solutions with practical alternatives that make low pollution travel choices the easier choices for everyone.

#### **Are the policies sufficiently ambitious?**

The College considers them ambitious in general, however from a public health perspective Fellows

have commented that more focus could be made on incentivising active travel as this will create many health benefits in addition to improving air quality.

The strategy encourages the use of active transport (walking, cycling) but could go further. Incentives and facilities are important to enable people to adopt these healthier alternatives more easily. It is important to recognise that active transport, the use of public transport (ideally low polluting) and inner city green space, should tackle both Scotland's key public health challenges as well as those caused by air pollution. It would be a wasted opportunity for a national strategy which has an impact in health to not make improvements in those fields.

**Are the policies and delivery mechanisms (support and incentives) being effectively implemented and successful in addressing the issues?**

There should be a greater emphasis on targeting the specific high pollution areas particularly in town centres and cities – options to consider could include reducing the access of vehicles to areas of high density and particular areas of high pollution.

From a health perspective, a proportionate and incremental response is important with evaluation of measures (especially costly measures) undertaken. It is important that potential unintended consequences are considered. One example in CAFS is the link between air pollution and very slow car/bus speeds: yet slower speeds are related to fewer road traffic accidents and less serious injuries.

**Is Scotland on target to have a pilot low emission zone (LEZ) in place by 2018 and should there be more than one LEZ pilot?**

Low emission is important to work towards, however low emission zones (LEZs) are potentially very costly. Fellows have suggested that the 2018 LEZ pilot should be carefully evaluated before this programme is extended.

**Are there conflicts in policies or barriers to successful delivery of the air quality objectives?**

Another unintended consequence could arise from media reports and indeed official communications about the risk of outdoor air pollution. Too much focus on this could have the unintended consequence of further decreasing outdoor physical activity.

Communication of risk is a complex area – for professionals as well as the public. The Winton Centre for Risk and Evidence Communication based at the University of Cambridge has queried the number of attributable deaths from air pollution in the UK and how this has been reported in the media and used in reports<sup>ii</sup>. It is vital to keep policies in this area evidence based and proportionate to the challenges faced.

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<sup>i</sup> WHO factsheet: Ambient (outdoor) air quality and health- updated September 2016  
<http://www.who.int/mediacentre/factsheets/fs313/en/>

<sup>ii</sup> Does air pollution kill 40,000 people each year in the UK?  
<https://wintoncentre.maths.cam.ac.uk/news/does-air-pollution-kill-40000-people-each-year-uk>