Air pollution’s lethal toll
The evidence is indisputable. Ambient and household air pollution pose a catastrophic threat to public health, exacting a toll of 7 million lives yearly from noncommunicable diseases including respiratory, cardiovascular and pulmonary diseases, and cancer. Besides years of living with laboured breath, punctuated by asthma attacks, or clouded by cataracts, mounting evidence links air pollution to various health outcomes like low birth weight, diabetes, cognitive impairment, and mental health impacts.

Interconnected global challenges
Air pollution is part of a web of global challenges, converging on health. The combustion of fossil fuels in transport, energy and industry sectors, the lack of clean, sustainable energy for households and health-care facilities, emissions from agriculture or mismanagement of waste and unsustainable land-use planning result in high levels of air pollution, intensifying the climate emergency and consequently ill health. It is a social, environmental and health crisis.

Far-reaching consequences
Reductions in air pollutants directly improve people’s health in the near- and long-term. Policy actions to protect public health and well-being by addressing air pollution across sectors also positively impact the environment, economic prosperity, job creation, children’s well-being and gender equity, leaving an enduring legacy in countries and cities across the globe.

Triple-win solutions
Addressing air pollution by implementing well-known and readily available solutions will improve health, drive sustainable economic development and mitigate climate change. Polluted air is a collective problem, it knows no borders, it requires collective action across nations and sectors to identify and implement evidence-based policies, innovative financing mechanisms and delivery models.

Intersectoral cooperation offers an opportunity to harness synergies, and ensure policy coherence and cost savings when implementing policies. International, and regional cooperation is fundamental to ensure clean air worldwide, with millions of lives saved and reduced global warming as a result.

Solutions
For example, shifting away from coal-fired power plants to renewable energy in Ontario, Canada, led to significant public health improvements – particularly among children suffering from asthma, strengthening the health system’s resilience and creating new economic opportunities in communities formerly choked by smog. The European Union passed stricter limits and target values for several pollutants by 2035, aligning EU rules with the WHO Global Air Quality Guidelines, harmonizing air quality indices and ensuring that all EU countries have air quality roadmaps to protect public health. The Convention on Long-Range Transboundary Air Pollution (LRTAP) established the first multilateral system for monitoring and assessment of transboundary air pollution in Europe and North America.

Enhanced public transport systems and a shift to cleaner fuels in Medellin, Colombia, led to a healthier population due to cleaner air, increased physical activity, less congestion and fewer traffic injuries, all while reclaiming usable public spaces.

Shifting to solar energy in health-care facilities in Somalia is leap-frogging progress towards universal health coverage, enhancing emergency preparedness and minimising the health sector’s environmental footprint while improving the local communities’ air quality.

In Kenya, smart meter technology to increase the affordability of clean cooking is improving health by reducing household air pollution, decreasing the risk of burns or injuries from collecting firewood, and saving time for productive activities and education. The country has set the ambitious goal of training 130,000 community health workers on household air pollution and education.
Spotlight on solutions:
Conference aims and expected outcomes

The Global conference on air pollution and health: Accelerating action for clean air, clean energy access and climate mitigation will highlight policy actions for air pollution and lack of energy access; and catalyse evidence-based, multi-sectoral actions in cities, countries and regions.

Key objectives of the conference include:

• Share the latest evidence on health risks of air pollution and energy poverty, assessment tools and resources for decision-making.
• Take stock of global progress since 2015 after the WHA resolution was passed and the start of the Sustainable Development Goals.
• Showcase health, climate, gender and equity co-benefits of air pollution and energy action.
• Mobilize, value and empower health professionals to ‘prescribe’ clean air for health.
• Iterate strategies to mitigate the health sector’s environmental footprint.
• Harness climate and development finance to tackle air pollution and ensure a just energy transition.
• Leverage health arguments to drive country cooperation and financial commitments.
• Countries, regions and cities join BreatheLife and commit to air pollution reductions by 2030 and beyond.

Who should be there?

Experts, key stakeholders and representatives of Member States are being consulted through a collaborative process in advance of the conference.

Participants include Ministers of Health, respective Ministers of Environment, Energy and officials of national, intergovernmental and development agencies; health professionals; mayors, local authorities and planners; critical sectors such as energy, transport, industry, waste and land-use; and delegates from research, academia and civil society.

Attendance is by invitation only.