
SENATE COMMITTEE ON ENVIRONMENTAL QUALITY

Senator Allen, Chair

2021 - 2022 Regular

Bill No: AB 713
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Version: 5/24/2021
Urgency: No
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Hearing Date: 6/28/2021
Fiscal: Yes

SUBJECT: State Air Resources Board: greenhouse gas emissions scoping plan: comprehensive health analysis

DIGEST: Requires ARB to include a comprehensive health assessment (CHA) in future scoping plan updates, in collaboration with the State Department of Public Health (CDPH) and the Office of Environmental Health Hazard Assessment (OEHHA). Specifies certain contents of the CHA including specific topics, the role of quantitative and qualitative assessments, and the identification of data gaps.

ANALYSIS:

Existing law:

- 1) Establishes the Air Resources Board (ARB) as the air pollution control agency in California and requires ARB, among other things, to control emissions from a wide array of mobile sources and coordinate, encourage, and review the efforts of all levels of government as they affect air quality. (Health and Safety Code (HSC) §39500 et seq.)
- 2) Requires, under the California Global Warming Solutions Act of 2006 (also known as AB 32), ARB to (1) determine the 1990 statewide greenhouse gas (GHG) emissions level and approve a statewide GHG emissions limit that is equivalent to that level to be achieved by 2020; (2) ensure that statewide GHG emissions are reduced to at least 40% below the 1990 level by December 31, 2030 (i.e., SB 32); and (3) adopt regulations, until December 31, 2030, that utilize market-based compliance mechanisms to reduce GHG emissions (i.e., the cap-and-trade program). (HSC §38500 et seq.)
- 3) Requires ARB to prepare and approve a scoping plan to achieve maximum technologically feasible and cost-effective reductions in GHG emissions at least once every five years, as specified. (HSC §38561)
- 4) Establishes the Office of Health Equity (OHE), within CDPH, with the purpose of aligning state resources, decision making, and programs to, among other

goals, improve the health status of all populations and prioritize eliminating health disparities and inequities. (HSC § 131019.5)

- 5) Tasks the OHE with establishing a cross-sectoral strategic plan to eliminate health disparities and inequities, including recommendations based on specified factors, including but not limited to housing, environmental quality, accessible built environments, and health care. (HSC § 131019.5)

This bill:

- 1) Requires ARB to, in collaboration with DPH and OEHHA, conduct a comprehensive health analysis (CHA) in conjunction with the development of each scoping plan update and integrate the CHA therein.
- 2) Dictates certain components of the CHA, including:
 - a) A framework to provide an overview of the breadth of human health impacts, including specified factors from OHE's strategic plan, of the scoping plan.
 - b) A qualitative assessment of potential health and health equity impacts resulting from outcomes specified in the scoping plan.
 - c) Further quantitative assessments wherever nontrivial health impacts are identified in the above qualitative assessment.
- 3) Directs ARB to identify gaps in existing tools and methodologies that would serve the production of credible quantitative analyses of health impacts.
- 4) Directs ARB to afford the public and impacted communities opportunities to provide input and comments on the CHA, as specified.

Background

- 1) *Health impacts of air pollution and climate change.* Depending on exposure, air pollution alone can cause an increased risk of cardiovascular and respiratory illness, lung disease, cancerous tumors, birth defects, premature births, developmental disorders, central nervous system damage, intellectual disability, persistent memory impairments, epilepsy, dementia, and premature death.

A recent study by UC researchers in Berkeley and San Francisco reported that for every dollar the state has spent controlling air pollution (between 1990 and 2014) it has generated \$38 in benefits attributable to lower rates of illness, premature death and lost productivity attributable to air pollution.

Beyond the impacts on people's lungs, climate change is expected to affect health in all aspects of life. The World Health Organization conservatively estimates that climate change will cause some 250,000 additional deaths per year by the 2030s. The main health risks are more intense heatwaves and fires; increased prevalence of food-, water- and vector-borne diseases; increased likelihood of undernutrition resulting from diminished food production in poor regions; and lost work capacity in vulnerable populations. Uncertain but potentially more serious risks include: breakdown in food systems, violent conflict associated with resource scarcity and population movement, and exacerbation of poverty. Overall, climate change is expected to widen existing health inequalities, both between and within populations.

- 2) *Health equity impacts of air pollution.* Climate change exacerbates health inequities disproportionately harming the most vulnerable populations. Communities that have experienced systemic neglect and environmental racism have the least responsibility for climate pollution, but are the most affected. These communities have less access to the political, economic, and social resources that enable them to cope with climate threats and face potentially unmanageable pressures as the impacts of climate change mount.

For example, another joint UC Berkeley-UCSF study found that redlining—the discriminatory practice that began in the 1930s of denying home loans and other forms of investment in areas largely defined by the race and social class of their occupants—was still highly predictive of air pollution exposure in 2019. Their analysis of eight California cities showed that residents of historically redlined neighborhoods were still more than twice as likely as their peers to visit emergency rooms for asthma. Previously redlined neighborhoods also continue to exhibit significantly higher levels of diesel particulate matter in the air.

- 3) *Health in the 2017 scoping plan update.* In the 2017 update to the AB/SB 32 scoping plan, ARB discussed the anticipated health impacts of the proposed work. The scoping plan suggested that there were three primary results from the scoping plan that would affect health: (1) reduced PM, (2) reduced toxics pollution, and (3) the health benefits of increased physical activity that result from more active modes of transportation. Given that all three of these impacts stem in large part from the transportation sector, the scoping plan sought to include mobile source actions that would achieve health-based air quality standards by reducing criteria and toxics emissions as well as GHG emissions simultaneously. To analyze the policy scenarios presented in the scoping plan, the health metrics used were further simplified to consider mortality,

hospitalizations, and ER visits.

Looking forward, the scoping plan stated ARB would, beyond the 2017 update, work to explore how to better integrate health analysis and health considerations in the design and implementation of climate programs. In closing the health analyses section of the 2017 update, ARB admitted that, “Although health impact assessments have been used to inform CARB’s policymaking, these analyses have not been consistently integrated into the general up-front design of CARB programs.”

- 4) *ARB Board Resolution 20-13*. Adopted unanimously at the 4/23/2020 ARB board meeting, Board Resolution 20-13 directed ARB staff to, with input from the public and stakeholders as appropriate, (1) develop new quantitative and qualitative approaches to evaluate the health benefits of ARB's air quality and climate regulatory actions and programs; (2) explore and develop new methods for evaluating health impacts in disadvantaged communities that account for increased vulnerability and exposure to sources of pollution that impact communities; (3) update and expand the methodologies to analyze the health benefits from reducing emissions of ozone and secondary particle pollution and develop methodologies for additional pollutants; (4) evaluate and propose new approaches to evaluate and communicate the public health benefits of reducing greenhouse gases and improving community sustainability, resiliency, and quality of life; and (5) Investigate approaches to expanding health analysis to include a range of additional health outcomes linked to pollution exposure.

During discussion of the item, board member Dr. Alex Sherriffs stated, “I think it’s very timely. I think it represents a maturing of our understanding of the impacts of air quality... Obviously our current accounting underestimates the impacts and the benefits of our work.” He further emphasized the value to the Board and the public of better understanding the risks and benefits of air pollution through more robust analysis of these health impacts.

Comments

- 1) *Purpose of Bill*. According to the author, “With the Scoping Plan draft beginning next year and the health of communities like mine constantly being compromised because of air quality and GHG emissions, Assembly Bill 713 is urgently needed. If we truly care about addressing institutional racism in all aspects of society, and prioritizing overburdened communities of color, we need to start talking about the health impacts on these communities. Ignoring their health impacts allows us to be comfortable with the life of my constituents to be cut short and for us to be sentenced to a lifetime of chronic

diseases that can be prevented if we clean up our air and reduce our emissions. We know that climate change and greenhouse gas emissions have been a driver for negative health outcomes in California. We know that at minimum, asthma, heart disease and diabetes are several serious health issues that have been tied to greenhouse gas emissions in California. We also know that climate change has disproportionately impacted low-income communities of color which has only further compounded their impacts from the COVID-19 pandemic as well. In order to really have equitable benefits of climate solutions, policymakers should be fully informed about the health impacts of proposed climate solutions.”

- 2) *The state needs better health metrics in this scoping plan.* The public process for developing the 2022 scoping plan update began several weeks ago, on June 8, 2021 and is expected to conclude late in 2022. However, *de facto* implementation of aspects of AB 713 has already begun. In the presentation commencing the public process for the 2022 scoping plan update, ARB reported that they would include new health end points and use health economic valuation to better demonstrate policy intervention benefits. Though ARB has not referred to this work as a CHA, the stipulated contents of a CHA in AB 713 likely have some overlap with the new end points and valuations.

While ARB could be hard pressed to develop and incorporate an entirely new component to the 2022 scoping plan if directed by a bill taking effect 1/1/2022, the contents of AB 713 are not, on the whole, new ideas before ARB. The concepts undergirding this bill’s requirements were alluded to in the 2017 scoping plan update, have been requested for years by public health and health equity advocates, and received robust support from the entire Board in April of last year. In implementing AB 713, ARB has the opportunity to dovetail direction from the Legislature with invaluable work that is already underway and will give the state a much clearer picture of the stakes and benefits of climate action for health and equity.

Related/Prior Legislation

AB 197 (E. Garcia, Chapter 250, Statutes of 2016) required ARB to, among other provisions, consider social costs (defined as economic damages including, but not limited to, public health) when adopting GHG emission reduction regulations.

SOURCE: Author

SUPPORT:

1000 Grandmothers for Future Generations
350 Humboldt
350 Humboldt: Grass Roots Climate Action
350 Silicon Valley
Active San Gabriel Valley
Alliance of Nurses for Healthy Environments
American Lung Association in California
American Lung Association of California
California Alliance of Nurses for Healthy Environments
California Bicycle Coalition
California Health Care Climate Alliance
California Releaf
Center for Climate Change and Health
Center for Community Action and Environmental Justice
Central California Asthma Collaborative
Climate Health Now
Climate Plan
Climate Resolve
Coalition for Clean Air
Coaliton for Clean Air
Community Action to Fight Asthma
Elders Climate Action Nor Cal and Socal Chapters
Elders Climate Action, Norcal and Socal Chapters
Environmental Defense Fund
Environmental Defense Fund, Incorporated
Human Impact Partners
Medical Students for A Sustainable Future
Mothers Out Front California
Physicians for Social Responsibility - Sacramento Chapter
Physicians for Social Responsibility - San Francisco Bay Area Chapter
Prevention Institute
Public Health Advocates
Public Health Institute
Regional Asthma Management and Prevention (RAMP)
Safe Routes Partnership
San Francisco Bay Area Chapter Physicians for Social Responsibility
Sunrise Bay Area
The Climate Center

OPPOSITION:

None received

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