

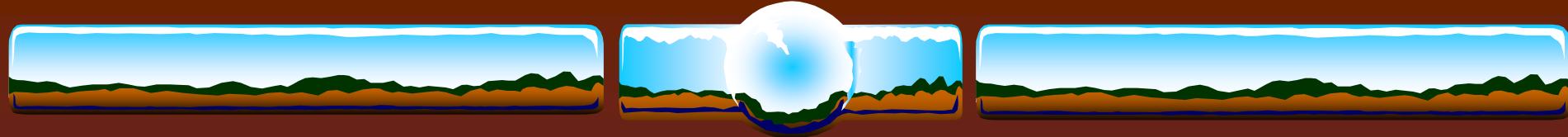


# Pollution Reduction Protocol and Proposed NSR Amendments

Presentation to BAAQMD's CI Working Group  
and CARE Task Force, 9/23/09

Bay Area Environmental Health Collaborative





# Member Coalitions

**Bay Area  
environmental  
Health  
collaborative**



- ❖ Environmental Justice Air Quality Coalition
- ❖ Immigrant Power for Environmental Health & Justice
- ❖ Contra Costa Asthma Coalition
- ❖ Regional Asthma Management and Prevention Initiative
- ❖ Environmental Law & Justice Clinic



# Some Key Allies

- ❖ Bay Area Clean Air Task Force
- ❖ Ditching Dirty Diesel Collaborative
- ❖ Bayview Hunters Point Health and Environmental Assessment Project
- ❖ Breathe California
- ❖ Pacific Institute
- ❖ Center for Environmental Health
- ❖ California Environmental Rights Alliance
- ❖ Central Valley organizations working on EH&J and AQ
- ❖ Southern Cal. organizations working on EH&J and AQ
- ❖ Environmental health organizations and advocates



# BAEHC Campaign

- ❖ Research & Technical Assistance
- ❖ Public Outreach & Education
- ❖ Grassroots Organizing & Mobilization
- ❖ Policy Development & Advocacy
- ❖ Cultivating Allies
- ❖ Building Community Capacity
- ❖ Building Capacity for Regional Change



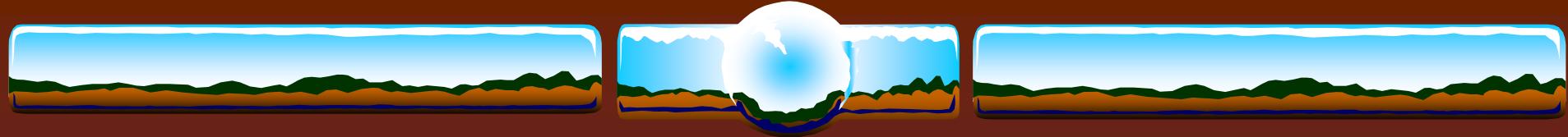
# BAEHC Policy Goals – Target: BAAQMD

- ❖ Incorporate cumulative impact criteria & precautionary approach into regulatory decision-making on air pollution
- ❖ Establish pollution limits by area
- ❖ Support pollution reduction & prevention
- ❖ Prioritize high impact areas & vulnerable populations
- ❖ Ensure access to public processes, meaningful public participation, responsiveness to community concerns
- ❖ Initiate leadership & collaboration with agencies



# Campaign Launch: Richmond, Feb. 2007





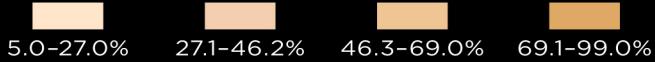
# Cumulative Air Pollution and Race in the Bay Area

PRODUCED BY THE  
BAY AREA ENVIRONMENTAL HEALTH COLLABORATIVE

DOWNLOAD THIS MAP: [WWW.BAEHC.ORG/MAP\\_CUMULATIVEBAYAREA5.PDF](http://WWW.BAEHC.ORG/MAP_CUMULATIVEBAYAREA5.PDF)

## RACIAL DEMOGRAPHICS<sup>1</sup>

PERCENT OF PEOPLE OF COLOR



## LARGE & SMALL INDUSTRIAL POLLUTERS<sup>2</sup>

### Large Industrial Polluters

OVER 2 TONS A YEAR OF ANY CRITERIA POLLUTANT (BAEHC CATEGORY) (E.G., PETROLEUM REFINERIES, CHEMICAL PLANTS, POWER PLANTS, CEMENT AND ASPHALT COMPANIES, GLASS FACTORIES).

### Small Industrial Polluters

(E.G., AUTO AND TRUCK BODY SHOPS AND REPAIR SHOPS, RECYCLING WASTE DISPOSAL FACILITIES, GAS STATIONS, DRY CLEANERS, PRINTING SHOPS, FURNITURE MANUFACTURING SHOPS, COMMERCIAL AND INDUSTRIAL BUILDINGS WITH DIESEL BACKUP GENERATORS, INCLUDING INTERNET SERVER DEPOTS).

## FREeways

## DIESEL POLLUTION<sup>3</sup>

DIESEL PARTICULATE, POUNDS PER DAY



## ASTHMA HOSPITALIZATIONS<sup>4</sup>

Highest rates: 13.8-78.3 per 10,000 people

1 Source: U.S. Census 2000.

2 Source: California Air Resources Board, California Emission Inventory Development and Reporting System (CEIDARS), 2005 Emissions Dataset.

3 Source: Bay Area Air Quality Management District (BAAQMD), Community Air Risk Evaluation (CARE) program database for year 2000.

4 Source: Community Action to Fight Asthma, California State Coordinating Office, June 2004. Asthma Hospitalization Rates (1998-2000, CA OSHPD data) by Zip Code. Oakland, CA.



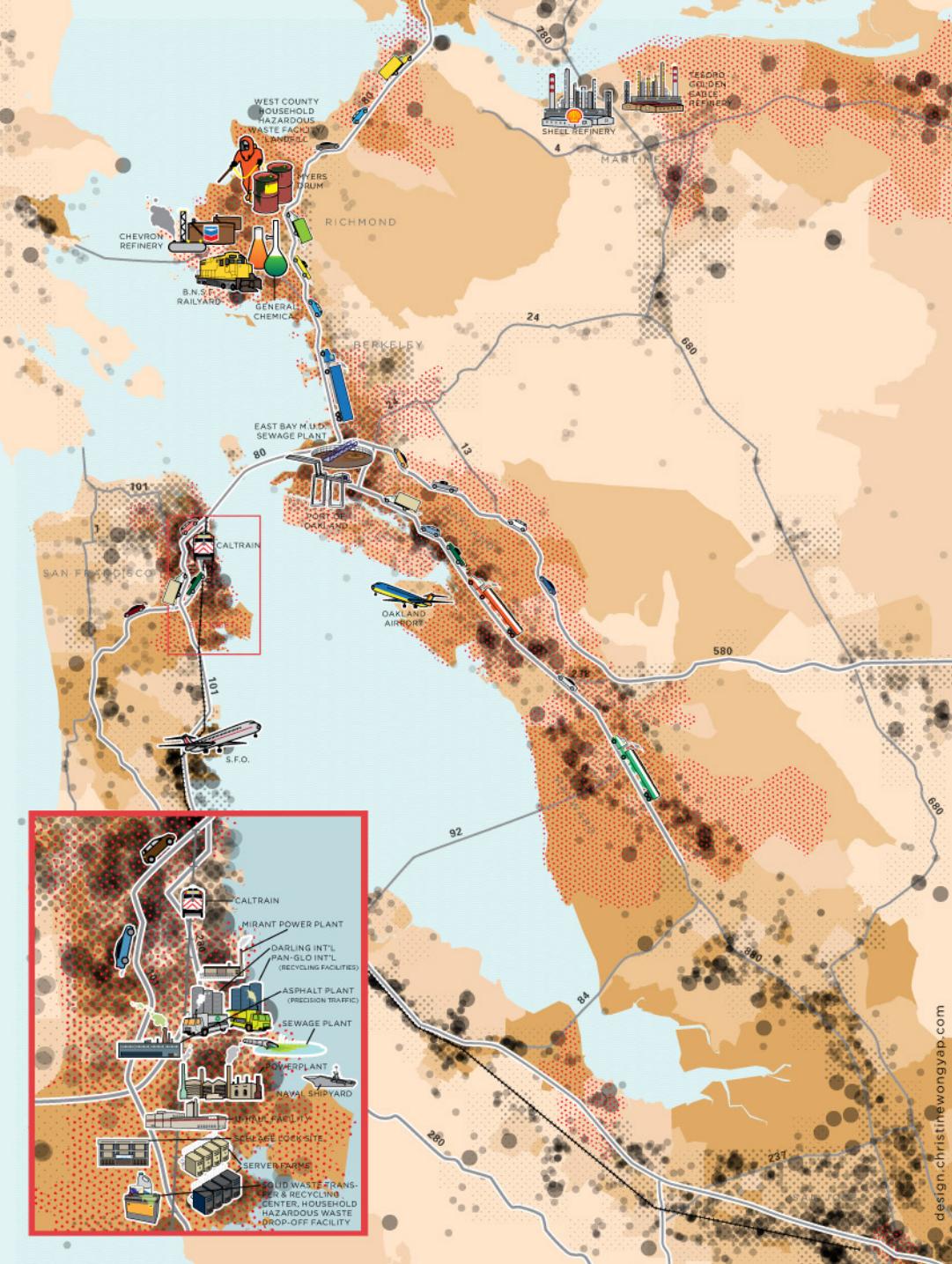
# Air Pollution, Race, and Asthma in the Bay Area

PRODUCED BY THE  
BAY AREA ENVIRONMENTAL HEALTH COLLABORATIVE

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## ASTHMA HOSPITALIZATIONS\*

 Highest rates: 13.8-78.3 per 10,000 people



\* Source: Community Action to Fight Asthma, California State Coordinating Office. June 2004. Asthma Hospitalization Rates (1998-2000, CA OSHPD data) by Zip Code. Oakland, CA.



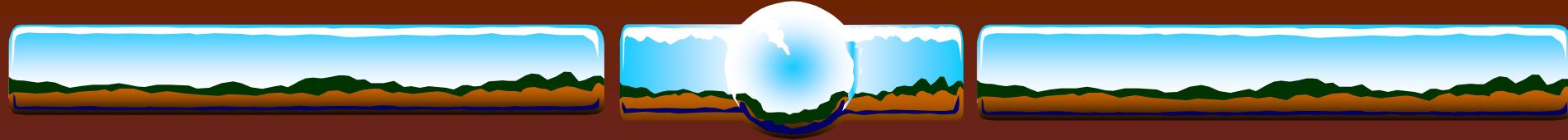
# *Some air pollution-related illnesses*

- ❖ Asthma
- ❖ Heart disease, hypertension
- ❖ Cancers
- ❖ Premature death
- ❖ Poor lung function, respiratory disease
- ❖ Low birthweight, stillbirth
- ❖ Eye, lung and skin irritation
- ❖ Neurological & reproductive disorders (air toxics)



# Cumulative Impact Resolution

- ❖ Adopted unanimously by BAAQMD Board in July 2008
- ❖ 1<sup>st</sup> time BAAQMD has acknowledged disproportionate burdens and impacts
- ❖ 1<sup>st</sup> time BAAQMD has publicly acknowledged adverse cumulative impacts
- ❖ Commits to exploring potential regulatory measures to address the problem – i.e., not just voluntary incentives and unenforceable measures, but rules and regulations...

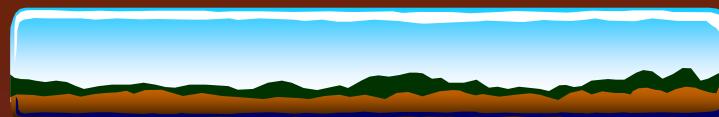
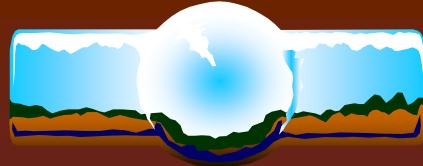
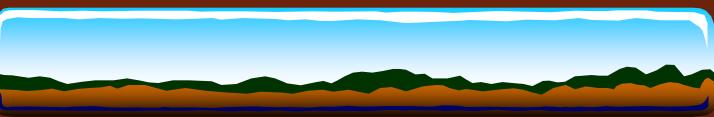


# Policy Recommendations to Reduce Cumulative Air Pollution

1. Using CI approach, categorize areas based on health risk; prioritize highest impact areas
  
2. In high hazard areas, prohibit new or modified pollution permits

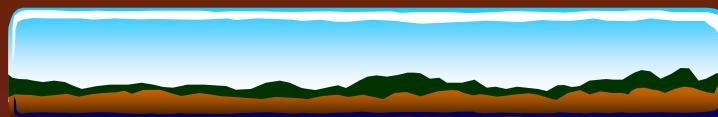
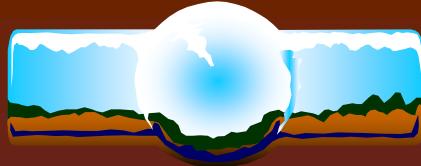
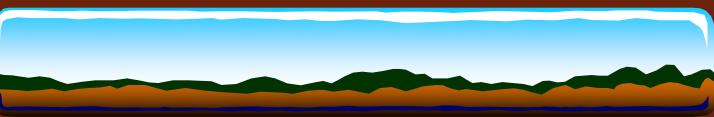
*Limited exceptions:*

- Urgent community need
- Net onsite reduction in emissions and health risk



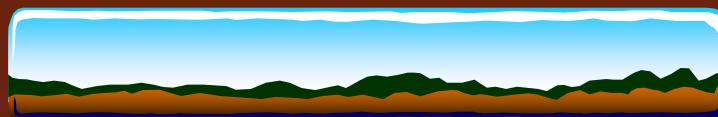
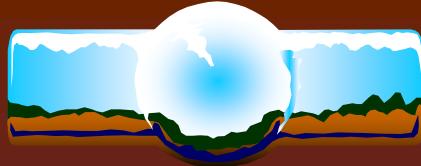
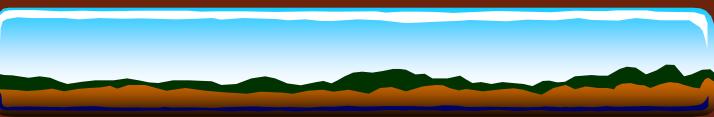
# Policy Recommendations to Reduce Cumulative Air Pollution

3. In medium and low hazard areas, and in areas with vulnerable populations, limit new emissions and prevent pollution levels from deteriorating to the next level zone
  
4. Participate in local land use proceedings by providing maps and guidelines and submitting comments consistent with Items 1, 2 & 3 above



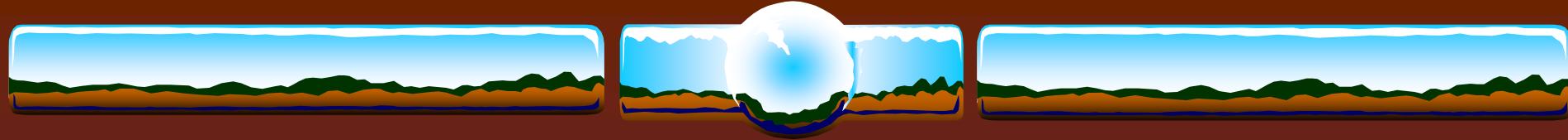
# Policy Recommendations to Reduce Cumulative Air Pollution

5. Develop comprehensive pollution reduction strategy, timeline and tracking system for high hazard areas and areas with vulnerable populations. Measures for consideration include:
  - ❖ Indirect source, existing source and source specific rules
  - ❖ Update/review thresholds of significance to include cumulative air risk and impact criteria
  - ❖ Require mitigation in high hazard areas
  - ❖ Require BACT for all existing sources



# Policy Recommendations to Reduce Cumulative Air Pollution

6. Develop and institute cumulative risk analysis in risk assessments that incorporates environmental justice criteria
7. Institute more extensive public notice, comment and hearing requirements and practices in overburdened communities



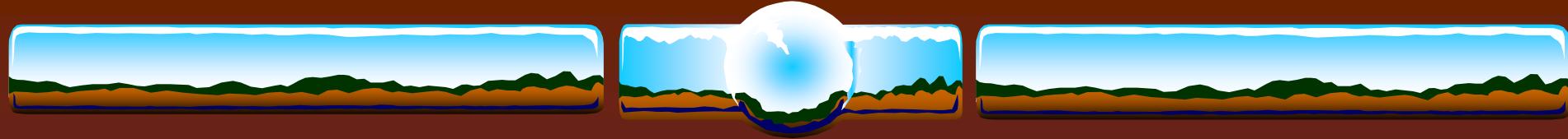
# Comments on Draft New Source Review Amendments

1. Support for the creation of more stringent pollution regulations for projects in overburdened communities and near schools, *BUT*
2. Proposed lower pollution thresholds merely slow the increase of cumulative pollution in overburdened communities, and do not act to fully protect the health of residents



# Comments on Draft New Source Review Amendments

3. “Acceptable risk” has already been exceeded on a cumulative level in high hazard areas
  
4. Permits that allow any increase in cumulative risk in high hazard areas should not be approved except for projects that meet urgent community needs



# Comments on Draft New Source Review Amendments

5. Mitigated permit approvals should reduce cumulative emissions and risk in overburdened communities through on-site offsets at a greater contemporaneous ratio than 1:1.2 and incorporation of TBACT
6. Child care centers should be given the same additional protections extended to K-12 schools





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