

TESTIMONY OF

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AMERICAN PUBLIC HEALTH ASSOCIATION

**BEFORE THE SENATE ENVIRONMENT AND PUBLIC WORKS
COMMITTEE**

CLEAN AIR ACT July 9, 1981

Mr. Chairman and Members of the Committee:

I am pleased to be here today to represent the 52,000 national and affiliate members of the American Public Health Association. APHA the largest association of health professionals in the World, is interested and involved in all issues affecting the health and quality of life of American citizens. Our membership includes health professionals involved in environmental health, health administration, laboratory science, health planning, occupational health, radiological health, mental health, and many other disciplines working through the 25 sections of the 109-year-old association.

Occasionally, there are insufficient solid health data to always make decisions based on known and proven facts. When in doubt, we feel strongly that decisions must be made on the conservative side so that the health of this and future generations is not unknowingly impaired. If we were to draw a line completely around the perimeter of this hearing room, and then intersect it with a single horizontal pencil mark, the width of the pencil mark might indicate the relative time that the human species has been subjected to pollution from an industrialized society. I use the analogy to point out that, as yet, we really do not know the full impact of many of the pollutants in regard to their sub-clinical, clinical, long-term, and genetic effects.

Even so, while we do not necessarily know all the adverse health effects of various pollutants, it would be ridiculous to wait another 30 years for further evidence as we did for smoking.

Many of the short-term effects of major pollutants are well-known and documented. I am sure these have been and will be furnished to you by other groups and other reports. However, let us remember that carbon monoxide causes dizziness, unconsciousness, or death; hydrocarbons react with NO_2 to form ozone or smog; lead affects blood-forming organs, kidneys and nervous system, and is suspected of causing learning disabilities in young children; nitrogen dioxide lowers resistance to

respiratory infections and contributes to acid rain; ozone irritates mucous membranes causing coughing, choking, and impaired lung functions, and aggravates chronic asthma and bronchitis; suspended particulates clog the lung sacs and can pass into the blood stream, and particulates often carry carcinogens and toxic metals; and sulfur dioxide is associated with coughs, colds, asthma and bronchitis, and contributes to acid rain.

Pollution also costs in terms of absenteeism, health care costs, corroded materials, sterile lakes, deterioration of visibility, damage to crops and property, efficiency, morale, comfort, quality of life, and insurance rates. These costs may be hidden and difficult to calculate, but are nonetheless real.

It continues to be a matter of serious concern to me that the human species sometimes seems more willing to suffer the health, social, economic, and environmental consequences of disease and pollution, rather than paying for environmental quality for this and future generations. Perhaps humans can slightly adapt to some degree of environmental degradation, but it is indeed alarming that the human might attempt to merely survive through adaptation rather than thrive in a quality environment.

Mr. Chairman, members of the American Public Health Association feel that the existing requirements of the Clean Air Act have been proper and effective as shown by the improvement in air quality in some areas of the Nation in recent years. As the Washington Star noted a short time back, "Millions are breathing cleaner air than they were a decade ago. By one estimate, more than 13,000 premature deaths have been avoided each year."

The heart of the Clean Air Act is the air quality standards set for major pollutants at levels needed to protect health. They must continue to be set at levels to protect all groups of the population, including the young, the old, and those with lung disease. The current method of setting standards should be maintained. We oppose attempts to re-design these standards to protect only the "average" citizen. The sensitive groups being protected are on the order of 10% or 20% of our total population. The ozone standards protect those with asthma or emphysema, and these people represent 5% of the national population, or 12 million persons. In the case of carbon monoxide standards, the population protected includes those with cardiovascular disease, which represents 10% of the population, or 25 million

persons. In the case of virtually all of the standards, the sensitive groups include the very young and the unborn, who, at some time or another, represent every person in the United States. Additionally, it is important that these groups not only be protected from risk, but that there be an additional adequate margin of safety. Historically, air quality standards have been made more stringent as we learn more about health effects.

We also oppose the addition of cost-benefit analysis to the standard-setting process. Cost-benefit analysis is appropriately considered in the development of strategies to implement the standards rather than in the development of the standards themselves. The goal of public health and clean air cannot change, but the methods and time-tables utilized to attain those standards can be varied for different conditions.

It is important not only from the viewpoint of public health, but should be important from the viewpoint of industry officials, that ambient air standards be established on a national basis. Without such national standards, we would quickly return to the days of the 1950s and 1960s when industry was confused by the multiplicity of standards and different jurisdictions, the multiplicity of designs needed, the multiplicity of officials with whom they had to work and what they termed ever "moving targets" of air pollution standards. This was also true in other fields of environmental health and in some cases standards were almost blatantly used as trade barriers, and in other cases industry would blackmail local officials by the threat that they would move their plants to a neighboring jurisdiction having less stringent standards. Neither the interests of the public nor the interests of industry were best served.

Interstate and long distance movement of pollutants pose another reason why air quality standards should continue to be set nationally rather than by each State.

In addition to the ambient air quality standards, the Association is concerned about other aspects of the Clean Air Act.

Prevention of Significant Deterioration

Prevention of significant deterioration is an important and complex provision of the Clean Air Act. While the provisions of PSD might be simplified, the major

elements of the program -- the requirement that new sources of pollution install best available pollution control technology, and that they not cause deterioration in air quality greater than specified increments -- must be retained.

Procedures for re-designating Class II areas to Class I areas are unclear, particularly with regard to the responsible party for the extensive accompanying environmental, economic and energy analysis. To eliminate upcoming conflicts between the federal land managers or local interests requesting a re-designation, Congress should require the institution or individual proposing the Class I designation to perform the analysis for state review and decision. Prevention of significant deterioration may well be more desirable for the economic vitality of the citizens of the western United States where so much of our economic base is related to recreation, tourism, ranching, and farming. Retention of pristine quality air is particularly important for our national parks, forests, monuments, and wilderness areas. The NCAQ Report points out that the current prevention of significant deterioration provisions, designed to protect air quality in relatively clean areas, would not hamper energy development and economic expansion through the mid-1990s, even assuming high levels of energy development. With strict controls we can have economic growth and energy` development without sacrificing air quality.

We have witnessed numerous incidents where necessary pollution control technology was not developed or utilized in the absence of regulatory pressure. This "technology forcing" concept is extremely important and should not be weakened.

Deadlines

The Act should continue to provide deadlines by which progress toward healthful air quality can be measured. Such deadlines provide the impetus for states to achieve clean air goals, and allow them to resist pressure to weaken air quality regulations.

Non-Attainment

The Clean Air Act should continue to require polluted areas to implement the major provisions of the non-attainment program. EPA should continue to have authority to impose sanctions against states that fail to adopt state implementation plans, but should have the power to impose such sanctions in a graduated manner.

Mobile Sources

The present program for controlling emissions from cars, trucks, and buses through the installation of catalytic converters and inspection and maintenance programs should be continued.

Acid Rain

The growing problem of acid rain is of increasing concern to our membership. Congress should develop new legislation which requires substantial reductions of emissions from major sources of sulfur and nitrogen oxides in order to reduce the national and international problem of acid rain.

Toxic Air Pollutants

The problem of control of toxic air pollutants needs to be addressed. While EPA has the authority to identify and control these pollutants, progress has been slow. The Clean Air Act should be amended to require EPA to screen, list and control air-borne toxic chemicals within a specified time.

Role and Relationships of the Environmental Protection Agency

While there have been problems with implementing some provisions of the Clean Air Act, the main problems have been with some of the implementation of regulations as promulgated by EPA. We feel certain that these administrative regulations can be improved and streamlined without in any way weakening or emasculating the provisions of the federal Clean Air Act.

At the administrative level, there is considerable duplication between state air pollution control agencies and the Environmental Protection Agency. This needs to be remedied through administrative action on the part of the EPA.

There should be legal deadlines for EPA to review and approve state implementation plans.

EPA should participate in all state implementation plan hearings, and be held to policy commitments made during the hearings.

EPA should concentrate on providing 1) strong technical support to the states in evaluating control techniques, visibility, property damage, effects on plant and animal life, etc., and 2) strong health-based ambient air quality standards.