

Addressing Household Air Pollution

What is the issue?

\n\n

\n

- The abysmal air quality in Delhi has confined the focus largely on ambient air pollution (AAP).

\n

- But it is essential also to pay attention to the single largest source of air pollution which is the pollution from homes.

\n

\n\n

What is the shortfall in the approach?

\n\n

\n

- The problem of air pollution and its ill-effects on people has gained significant traction in the media.

\n

- This is largely driven by the abysmal air quality in Delhi and the fact of Indian cities repeatedly topping global air pollution charts.

\n

- Naturally, this has led the conversation to be primarily about ambient air pollution (AAP), particularly in urban areas.

\n

- This has limited the focus to issues such as emissions from transport, crop burning, road dust, burning of waste and industries large and small.

\n

- But household air pollution is the invisible factor increasing ambient air pollution and is the single largest cause of AAP.

\n

- Burning of solid fuels such as firewood and dung-cakes, mainly for cooking, results in emissions of fine particulate matter.

\n

\n\n

Common Indoor Air Problems



Moisture



VOCs and Chemicals



Smoking



Dust



Pet Dander

\n\n

How serious is household air pollution?

\n\n

\n

- Over 11 lakh deaths were attributable to ambient air pollution (AAP) in 2015.
- Of this, as many as 2.6 lakh were due to household air pollution (HAP).
- About 26% of particulate matter AAP was caused due to combustion of solid fuels in households.
- HAP is a major cause of mortality and morbidity in the country on its own.
- HAP by itself (apart from its 26% contribution to AAP) contributed to about 10 lakh deaths in 2010.
- It thus remains the second biggest health risk factor in India (in comparison, AAP is seventh).
- A 2017 study found that the 5 leading causes of mortality and morbidity in India are, respectively -

\n

\n\n

\n

1. ischemic heart disease
2. chronic obstructive pulmonary disorder
3. diarrhoeal diseases
4. lower respiratory infection
5. stroke

\n

\n\n

\n

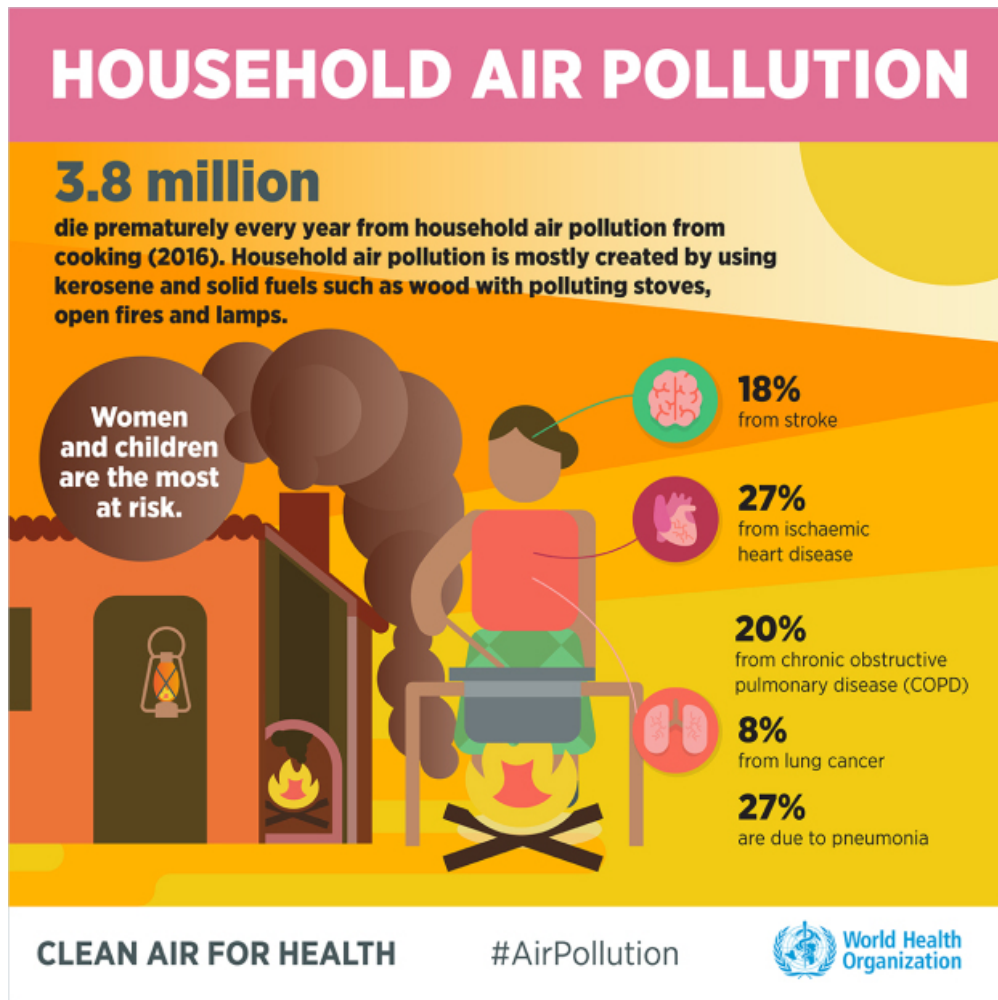
- Of these, there is strong and quantifiable evidence linking HAP to four causes, with diarrhoeal diseases being the exception.

\n

- So the overall health impacts attributable to HAP are more than half the health impacts attributable to air pollution.

\n

\n\n



\n\n

What does it call for?

\n\n

\n

- Households should predominantly use fuels that burn cleanly as even partial use of solid fuels can have significant health impacts.

\n

- On the policy and programme front, a scheme such as Ujjwala for providing LPG connections is welcome.

\n

- It is an important first step to tackle the problem, but it needs to be strengthened to improve affordability and reliability of supply.

\n

- However, going beyond LPG, consumers should be given a wider choice of clean-burning options.

\n

- Demand-side interventions are also critical -

\n

\n\n

\n

- i. to encourage people to switch to cleaner options
- ii. to address any behavioural or cultural barriers
- iii. to track HAP and associated health impacts

\n

\n\n

\n

- This requires a coordinated strategy involving multiple government agencies and programmes.
- It also requires setting well-defined targets for HAP and its associated health impacts, and having systems to monitor and publish them.

\n

\n\n

\n\n

Source: Indian Express

\n

