



March 4, 2022

Bonnie Holmes-Gen, Branch Chief
California Air Resources Board
1001 I Street
Sacramento, CA 95814

RE: Health Group Comments on the 2022 Scoping Plan Public Health Workshop

Dear Ms. Holmes-Gen,

On behalf of the undersigned health organizations, we write to comment on the 2022 Scoping Plan Public Health workshop hosted on February 15, 2022.

We appreciate CARB's progress in including eight additional health metrics, qualitative analysis, and new analysis tools. And we appreciate Dr. Balmes' commitment on behalf of the Board to integrate more robust health analysis into the implementation of the Scoping Plan after it has been adopted. But we again express our great concern and disappointment that CARB is not planning to incorporate a robust health equity analysis into the development of the Scoping Plan and its alternative scenarios.

Since 2009, our health organizations have engaged CARB on the Scoping Plan. We have advocated for the integration of health analysis into the design of the Scoping Plan to create an emissions reduction plan that will provide the greatest health benefits to California residents while reducing carbon emissions. In 2017, Board Resolution 17-46 directed the Executive Officer to "work with California Department of Public Health (CDPH), Office of Environmental Health Hazard Assessment (OEHHA), and other state agencies to establish a timeline and an action plan to better integrate health analysis broadly into the design and implementation of the State's climate change programs with the goal of maximizing health benefits." During last month's Board meeting, staff expressed that they have met their duty under the Board's resolution by expanding health metrics. Still, we fail to see how these new health metrics are included in the design of the plan and what role CDPH and OEHHA play in its development.

New health metrics are not the same as incorporating a comprehensive analysis of health benefits, health harms, and health equity impacts into the design of Scoping Plan.

Assembly Bill (AB) 32 calls for the design of the Scoping Plan “in a manner that is equitable, seeks to minimize costs and maximize the total benefits.” Developing the draft Scoping Plan without integrating comprehensive health and equity analysis into the plan’s scenario and strategies is a missed opportunity to optimize health benefits, reduce exacerbation of existing health inequities, and reduce health care and disability-related costs of averted adverse health outcomes that could derive from a health-optimized Scoping Plan. Without such an analysis, the plan will not necessarily minimize costs and maximize total benefits to communities.

We believe that CARB should provide increased attention to – and priority for – those strategies that can reduce local criteria pollutants and toxins. CARB should also focus on direct emission reduction measures and define the scale and structure of the Cap-and-Trade program within the overall Scoping Plan. In addition to the broad shift to zero-emission transportation, strong, trackable measures to reduce vehicle miles traveled must be included in the draft plan to maximize pollution reductions and increase health benefits: we are encouraged by the inclusion of active transportation health benefits in the workshop and look forward to the broader integration of these benefits into the analysis. Again, the development of the Scoping Plan comes down to the selection of measures to be taken and we believe that process must be informed by the potential to improve community health.

It remains unclear if or how staff intends to assess and utilize an analysis of “the health benefits of decarbonization by 2045 vs. status quo” to inform the Scoping Plan process. We know that decarbonizing our economy to meet our climate goals versus continuing to use fossil fuels will provide health benefit, but the plan needs to examine what scenarios and strategies will maximize health benefits and the difference between meeting statutory 2030 standards versus the 2045 goal. We encourage the staff to provide a more detailed plan for that analysis and its scope.

We will continue to engage CARB staff and Board to include health analysis into the design of the plan, as well as the evaluation and implementation phases, consistent with its legislative mandate. Thank you for hosting this workshop and taking our comments into consideration. Please contact Will Barrett with the American Lung Association at William.Barrett@Lung.org or Linda Rudolph with the Public Health Institute at Linda.Rudolph@phi.org for any additional information.

Sincerely,

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