# U.S. La a d A P :
# A Call to Action

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# I. EXECUTIVE SUMMARY

Air pollutants surround us wherever we are. On a daily basis, we are exposed to carbon, lead, nitrogen oxides, ozone, soot, and hundreds of other air pollutants emitted from our cars, factories, power plants, and heavy machinery. At certain levels, many of these pollutants become highly harmful to human health, especially for those living in areas with high concentrations of air pollution. Latinos are especially vulnerable because they live in regions with the worst air contamination.

The Hispanic population in the United States is increasing rapidly, surging by 43 percent from 2000 to 2010, dramatically outpacing the nation's growth rate during the same period.[1,2] Hispanics became the largest minority group in 191 metropolitan districts last year, with the highest expansion in areas of concentrated vehicle traffic, industry, and power plant activity.[3] Nearly one out of every two Latinos lives in the country's top 25 most ozone-polluted cities.[4]

## BREATHING DIRTY AIR HARMS HUMAN HEALTH

Air pollution puts human health at risk in numerous ways. Fragile lung tissue can be easily damaged by pollutants released by cars, buses, heavy machinery, factories, and power plants. These pollutants can lead to an increased risk of various respiratory diseases, including asthma, lung cancer, and chronic bronchitis, as well as contributing to premature death. Air pollution can be especially dangerous for people vulnerable to health problems, such as pregnant women and young children. Growing evidence shows that air pollution exposures in pregnancy and early childhood put children at higher risk of adverse health outcomes.[5]

Although air pollution is most commonly associated with respiratory illnesses, pollutants can travel long distances in the atmosphere, settle onto vegetation, contaminate bodies of water, and enter the food chain, putting our health at risk through various exposure pathways.

## PROTECTING OUR LUNGS THROUGH LIMITS ON SMOG

The Environmental Protection Agency (EPA) regulates air pollution under the Clean Air Act, which requires the agency to set National Ambient Air Quality Standards (NAAQS) for the six most commonly found air pollutants (criteria pollutants) and to update these standards when science shows that they are not protective enough of human health.[6] The six criteria pollutants include particle pollution (particulate matter), ground-level ozone (smog), carbon monoxide, sulfur oxides, nitrogen oxides, and lead. Other pollutants regulated by the EPA under separate statutory programs, such as mercury and air toxics, can also cause significant damage to human health.

The EPA reports that as of 2008, 127 million people—42 percent of the population—lived in areas that do not meet one or more NAAQS.[7] Most of these Americans live in areas that the EPA has deemed to have unhealthy ozone levels. Ozone is a colorless gas found in our air that, at ground level, is the primary component of smog and is the most threatening pollutant to human health. When ground-level ozone is found at high levels, it can diminish lung function, inflame airways, and aggravate asthma and other respiratory illnesses.

Latinos are highly exposed to ground-level ozone and its harmful effects. According to the Centers for Disease Control and Prevention (CDC), close to 50 percent of all Hispanic-Americans live in counties that frequently violate ground-level ozone standards.[8] Asian-Americans share this high risk. Because the 2008 smog standard used by the EPA for its estimate is outdated and non-protective of human health, one can reasonably conclude that even more Americans currently live in areas with ozone levels that the EPA and the latest science identifies as unhealthy.

In 2008, the EPA updated national air quality standards for ozone by limiting its concentration in the air to 75 parts per billion. In doing so, the agency's administrator at the time, Stephen Johnson, ignored the unanimous recommendations of the agency's science advisers, who had urged that a more

protective ozone standard be set within a range of 60 to 70 parts per billion. In order to properly protect particularly vulnerable populations, experts believe that the standard should be set at the lower end of that range.[9]

The EPA estimates that a truly protective ozone standard set at 60 parts per billion would prevent, annually, as many as 12,000 premature deaths, 58,000 asthma attacks, 21,000 hospital and emergency room visits, 5,300 heart attacks, and more than 2 million missed school days and 420,000 lost work days.

Despite repeated calls to strengthen the standard as required under the Clean Air Act, on September 2, 2011, the Obama Administration chose to delay a revision of the non-protective standard, capitulating to calls by industry that a health protective standard would pose an undue regulatory burden, leaving millions of Americans facing an unnecessary and undue risk.

Leaving the current standard in place—the policy of choice of large, polluting industries—means more lives lost and more asthma attacks, suffering that Latinos will greatly bear. The EPA has proposed to update and strengthen this ozone standard to follow the latest science.[10]

## BRAIN TOXINS IN OUR AIR

In March 2011, for the first time, the EPA proposed standards to limit mercury, arsenic, and other air toxics from power plants. Mercury is a highly dangerous neurotoxin that can damage the brain, heart, kidneys, lungs, and immune system of people of all ages. This metal, which is released into the air by coal-fired power plants, is especially hazardous for young and developing children. Every year, coal-fired power plants emit 772 million pounds of toxic chemicals into the air we breathe—more than 2.5 pounds for every man, woman, and child in this country.[11]

With these health consequences in mind, adoption of a protective air toxics rule will prevent approximately 17,000 premature deaths, 120,000 asthma attacks, and 12,000 hospitalizations and emergency room visits every year.[12] As in the case of ozone, this rule would be especially beneficial

# II. LATINOS IN AMERICA: GROWING NUMBERS, GROWING RISKS

The Latino community in the United States is growing at a faster rate than any other population group in the country. Results from the 2010 Census indicate that 50.5 million people in the United States identify themselves as Hispanic or Latino, representing 16.3 percent of the total population.[1] Latinos are also the youngest community—with a median age of 27 years, which is nearly 10 years younger than the median age of the entire U.S. population (37.2 years).[2,3] By midcentury, Hispanics will constitute 30 percent of the U.S. population.

Seventy-five percent of the Latino population is concentrated in eight states, where their numbers reach or exceed 1 million. In these states, Latinos comprise a significant segment of the total population—California (37.6 percent), Texas (37.6 percent), Florida (22.5 percent), New York (17.6 percent), Illinois (15.8 percent), Arizona (29.6 percent), New Jersey (17.7 percent), and Colorado (20.7 percent).[4] Latinos are propelling a tremendous demographic shift in the country, highlighting the unique environmental challenges faced by the nation's largest minority and the protections necessary to safeguard their health.

## AT RISK AT HOME

Many Latino communities are on the frontlines of environmental pollution. A majority of them live in areas where the EPA has determined that the air is unsafe to breathe.[5] These communities face heightened risks for respiratory illness and other diseases. A recent report by the CDC highlights that Latinos and Asian-Americans are more likely to live in areas where air pollution fails to meet national standards.[6] This pollution is released into our air by vehicles, power plants, and other industrial sources, presenting health risks for communities exposed to them. The Sierra Club recently unveiled findings from a 2008 poll which found that 15 percent of Hispanics live within 10 miles of a coal-fired power plant.[7] Exposure to air pollution can aggravate preexisting health problems. For millions of uninsured Latinos, this can lead to additional emergency room visits in the absence of primary care.[8]

According to the CDC, "preventable hospitalizations" are those that could be avoided with primary care.[9] Between 2004 and 2007, African-Americans and Hispanics showed higher rates of potentially preventable hospitalizations than non-Hispanic whites. These numbers are particularly problematic for Latinos, whose capacity to manage health risks associated with air pollution are hampered by limited access to health care and language barriers.

## POVERTY AND INSUFFICIENT EMPLOYMENT OPPORTUNITIES AGGRAVATE RISKS

Latinos are less likely to have health insurance than any other racial or ethnic group; nearly one in every three (32.4 percent) Latinos lacks health insurance.[10] This may be largely due to the fact that one in four Latinos lives in poverty, and 40 percent of Latino workers earn poverty-level wages (wages earned by a full-time, year-around worker that do not keep a family of four above the federal poverty level).[11,12] These factors can exacerbate financial hardships for Latino and low-income communities as they try to cope with pollution-related health problems.

The employment situation can be difficult for Hispanics. In a 2009 report, the Economic Policy Institute (EPI) classified a "good job" as one for which earnings are at least 60 percent of the median household income and workers are provided with health insurance and retirement benefits.[13] The same report found that only 14.4 percent of Latino workers have good jobs, compared to 31.5 percent of white non-Hispanic workers, 28.1 percent of Asian workers, and 21.8 percent of African-American workers.

## CONCERNED AND TAKING ACTION

Although Latinos are underrepresented in the public debate on environmental issues, polls show that Latinos are aware, concerned, and willing to take action to address a range of environmental problems affecting their communities and the nation as a whole. A recent poll by the Public Policy Institute of California found that Latino voters in California—more so than any other racial or ethnic group in the state—assign high importance to the idea of controlling pollution through emissions reductions; 87 percent of respondents thought the government should regulate greenhouse gas emissions. Similarly, 81 percent of Latinos polled said they would like to see stronger air pollution standards for new passenger vehicles.[14] In a similar statewide survey of California residents, Latinos (24 percent) and blacks (27 percent) said that they consider air pollution a very serious health threat, a much higher rates than among white respondents (13 percent).

These findings are not new, nor are they limited to California. In 2008, a Sierra Club poll of 1,000 Latino voters nationwide found that 51 percent stated that air and water pollution was the most important environmental problem they faced. Forty-three percent ranked energy and global warming as the most pressing environmental issues.[15] A staggering 66 percent stated that they weren't aware of their proximity to a toxic site such as a freeway, factory, chemical plant, refinery, incinerator, or agricultural field. Of equal concern, 42 percent had personally endured health problems caused by environmental quality issues in the places they lived, and many of these problems were related to air pollution.[16]

This concern has begun to translate into action. Last year, California's November election became a battleground for clean air and clean energy. Proposition 23, a ballot initiative financed by Texas oil money, threatened to undermine California's landmark clean energy and climate laws, making it easier for the worse polluters in the state to continue their dirty business. Broad Latino support was crucial in defeating the anti-clean air ballot measure.[17]

Latinos appreciate the importance of environmental protections despite attempts by polluters to portray environmental regulations and proposals to curb pollution as job killers. A 2011 poll of Latino voters across five western states (Colorado, Montana, New Mexico, Utah, and Wyoming)

## AN OPPORTUNITY MISSED: A STRONG STANDARD WOULD HAVE PROTECTED HEALTH

The EPA currently limits the concentration of smog to 75 parts per billion. The agency's science advisors have unanimously recommended lowering that standard to a range from 60 to 70 parts per billion. Health experts, scientists, and organizations like the American Academy of Pediatrics, the American Lung Association, and others have

Across the United States, the number of people with asthma continues to grow. The Centers for Disease Control (CDC) estimates that one in 12 people (about 25 million, or 8 percent of the population) had asthma in 2009.[35] That's 25 million people who suffer from wheezing, shortness of breath, and coughing due to asthma. This illness can be devastating for families, and not only in terms of ill health effects—in 2008 alone, asthma accounted for an estimated 10.5 million lost days of school and work.[36] Nationwide, it is estimated that we spend over $20 billion dollars every year on health care costs and lost productivity due to asthma.[37]

An alarming one in 10 children in the United States has asthma.[38] For Hispanic children—particularly Puerto Ricans—the problem is even more pronounced. One in five Puerto Rican children living in the United States has asthma.[39] In fact, mainland Puerto Rican children have the highest nationwide prevalence of asthma, compared to other Latinos and non-Hispanic whites.

## LATINOS AND MERCURY EXPOSURE

A 2000 study by the CDC found that, on average, Latino children have higher levels of mercury in their bodies compared to non-Hispanic white children. Because consumption of fish is the primary source of mercury entering the body, Latino fishing and consumption habits significantly affect the likelihood of toxic exposure.[7]

## REDUCING MERCURY EXPOSURE

On March 16, 2011, the EPA took a critical step toward cleaner air by proposing the agency's first-ever toxic air pollution standards for power plants.[20]

Several mercury control technologies have long been available and proven to effectively capture mercury from coal-fired power plants. Numerous case studies—including one from Calpine, the largest independent power producer in the country—have proven that the technology to clean up mercury emissions from power plants is both highly efficient and cost effective.[21]

Scrubbers, which are most often installed on smokestacks to control sulfur dioxide and acid gas emissions, can also capture mercury.[22] Wet scrubbers use a specialized water spray that reacts with the exhaust and captures oxidized mercury (mercury that has chemically bound with oxygen). Dry scrubbers use a simple fabric filter to trap mercury.[23]

Activated Carbon Injection (ACI) is another control technology for mercury reduction, which can be even less expensive than installing scrubbers. ACI absorbs mercury in its gaseous form and converts it to a particulate that can then be captured. In states that have mercury programs, ACI systems already exist for one-sixth of the electricity-generation capacity.[24]

Coal plants that have already installed either or both of these control technologies may be able to meet federal air pollution standards without undertaking any further capital expenditures, according to the Brattle Group, an independent consulting firm that analyzes the capital costs for scrubbers and activated carbon injection technology.[25]

Further, many utilities agree that the EPA's proposed reduction in mercury and air toxics can be met without significant rate increases or a decline in electricity reliability. And many power plants are already well on their way to compliance. A recent report from the Clean Energy Group, an electric company coalition that makes 170,000 megawatts of the U.S. total electric generating capacity, reports that:

> *Nearly 60 percent of all coal-fired boilers that submitted stack test data to EPA are currently achieving the Utility Toxics Rule's proposed mercury emissions standard. Many states already impose more stringent mercury emissions limits on coal-fired power plants than have been proposed by EPA.*[26]

Finally, although cleaning up coal plants is an important first step, a real and achievable long-term solution to mercury contamination and other air pollution must involve gradually phasing out the amount of coal we burn for electricity. This can be achieved over time through the use of energy efficiency, advanced power storage technologies, and expanded clean, renewable energy projects and infrastructure.

## THE EPA'S ROLE IN MERCURY REDUCTION

The results of EPA's action to regulate mercury and other toxic emissions will be significant. Adoption of power plant standards for the mercury and air toxics rule will prevent approximately 17,000 premature deaths, 120,000 asthma attacks, and 12,000 hospitalizations and emergency room visits every year, according to EPA analysis.[27] Likewise, a study by the Economic Policy Institute (EPI) finds that EPA's new proposed regulations on mercury, arsenic, and other toxic air pollution from power plants will have no negative impacts on economic recovery, and would in fact positively impact job growth in coming years, leading to the creation of 28,000 to 158,000 jobs between now and 2015.[28]

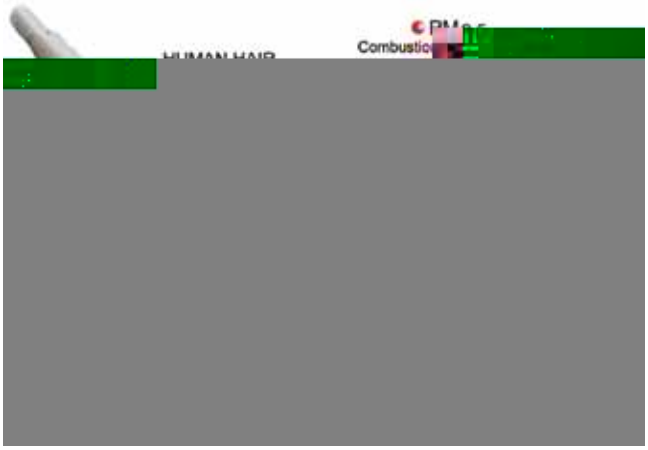
All air is not equal in the United States. Low-income and minority Americans tend to live and work in areas where they are exposed to pollution that harms their health. Families who are endangered by these toxins are paying the price. No one should be forced to choose between paying medical bills or living expenses, or risk losing their jobs to care for sick family members. Now is the time for the EPA to adopt strong mercury and air toxics standards to protect the health of all Americans.

# V. PARTICULATE MATTER

Particulate matter, often called "particle pollution," is made up of solids or liquid droplets that are so small in size that they can lodge deep into your lungs. Particle pollution can come from many different sources: smoke from factories, dirt and dust from roads, toxic compounds, metals, even pollen and mold.

The various particles that make up this pollution vary in size, but are generally smaller than 1/7 the diameter of an average human hair. There are three types of particle pollution: 1) coarse; 2) fine; and 3) ultrafine. Ultrafine particles are so small that they can pass through lung tissue and circulate through the blood.

Scientific evidence has linked exposure to particle pollution with health ailments including increased risk for cardiovascular disease such as artherosclerosis, increased heart attacks, increased emergency room visits for acute health events, birth defects, low birth weights, premature births, and increased rates of death.[1-9]




## WHERE DOES PARTICLE POLLUTION COME FROM?

Particle pollution can come from a variety of sources. Some particle pollution comes from mechanically breaking down materials into smaller parts. These processes mainly create coarse particulate pollution. Examples of this include construction, mining operations, and agriculture. These particles can also come from brake pad, tire, and road wear.

Most fine and ultrafine pollution result from burning fossil fuels—coal, oil, diesel and gasoline—or wood. Old coal-fired power plants, industrial boilers, diesel and gas-powered vehicles, and wood stoves are some of the worst culprits. High-temperature industrial processes such as metal smelting and steel production are also significant sources.

## LATINOS AND PARTICLE POLLUTION

When you inhale, you breathe in air along with any particles that are in the air. Millions of Latinos live in many of the most polluted areas in the country, including those areas most polluted by particle pollution. As a result, they can breathe in large amounts of harmful particulate pollution. For example, studies from Southern California provide evidence that Hispanics are more susceptible to mortality from exposure to particulate pollution.[10]

While exercising, particles can travel deeper into the lungs. This means that children and people who exert themselves naturally breathe in more particulate matter. Both PM10 (big) and PM2.5 (small) particles can cause health problems; specifically respiratory problems in the lungs and airways. PM2.5 can have worse health effects than the bigger PM10 because the smaller PM2.5 travels deeper into the lungs and is generally made up of more toxic compounds (like heavy metals and cancer-causing organic compounds). Exposure to particulate matter can lead to health effects including coughing, wheezing, shortness of breath, aggravated asthma, respiratory disease, and even premature death. The American Lung Association has compiled multiple studies[11] on the health effects of particulate matter, including significant associations between fine particles and death,[12,13] an increased risk of ischemic strokes—those caused by a blood clot (due to PM 10),[14] and elevated blood pressure,[15] to name a few.

## POLLUTION CONTROLS SAVE LIVES

EPA has taken significant actions to protect the public from particulate matter over the years, which has resulted in thousands of saved lives and medical ailments prevented. Over the past decade, EPA has adopted a series of dramatically cleaner emission standards for new diesel engines in trucks, heavy equipment, locomotives and ships. The recently finalized Cross-State Air Pollution Rule, will dramatically reduce harmful smog and soot pollution from power plants that travels across state lines.[16]

Many primarily Hispanic neighborhoods are located in industrial areas where pollutants are constantly poured into the air by factories, or are located next to major highways on which polluting diesel trucks travel day and night. In these communities, limits on particulate pollution from power plants and vehicles can mean the difference between respiratory disease and living a healthy life. Given the enormous health benefits from cleaning up particle pollution, however, there is more that can be done. EPA needs to take stronger action to protect the millions of people that live near major roads, and take further steps to clean up particle pollution near roadways.

Air pollution controls have existed for close to half a century in the United States, preventing hundreds of thousands of premature deaths. Although national laws on air pollution have been in place since 1955, the Clean Air Act of 1970 set the stage for federal air pollution standards and programs that have protected the health of millions of Americans over the last four decades.

Under the Clean Air Act, the EPA is required to set limits on certain pollutants to protect the health of all Americans and especially vulnerable populations such as children, the elderly, and pregnant mothers. Maintaining the strength of the Clean Air Act and the EPA is critical in order to safeguard our quality of life from the harmful effects of air pollution.

## WHAT THE EPA AND CLEAN AIR ACT DO

The EPA implements a variety of programs under the Clean Air Act to protect human health and the environment by reducing air pollutants that cause smog, haze, acid rain, and other environmental hazards. The EPA is authorized to set

Air pollution is a human issue. In communities affected by air pollution across the country, local activists work to create a healthier, safer place for future generations to flourish. But despite their efforts and the efforts of those who came before them, Latino families continue to bear the burden of our fossil fuel and pollution-based economy.

Current efforts to weaken clean air protections designed to protect the most vulnerable among us are a direct attack on our families' health and well-being. Our leaders can and should wield their power to pass regulations that will generate positive economic and health outcomes rather than burden Americans. Critical to any effort is the recognition that environmental regulations make sense, prevent costly medical care, and save lives. Preventing these impacts saves lives and money. We know that mitigating pollution can create jobs. It's time to stop putting polluters before people.

## ADDRESSING DISPARITIES THROUGH ADEQUATE INVOLVEMENT

In the Natural Resources Defense Council's 2004 report, *Hidden Danger: Environmental Health Threats to the Latino Community*, we called on federal, state, and local governments and the EPA to address the inequities in pollution-related health problems and the adequacy of community inclusion affecting U.S. Latino communities and proposed solutions to reverse the problem. While some progress has been made in evaluating and addressing disparities, much remains to be done. High unemployment rates in the community aggravate health impacts on this already heavily impacted population, and a lack of proper engagement of non-English-speaking and low English proficiency individuals hinders proper community involvement. Programs removing communication barriers that hinder integration, like those being developed by the Department of Labor, are a step in the right direction.

Here we reiterate some of our original calls to action while adding some critical and urgent recommendations that can and should be tackled today.

To begin addressing the disparities regarding air pollution in Latino communities,

The U.S. government—specifically the EPA, the Office of Minority Health, and other relevant agencies—must continue to fund the study of respiratory disease and other air pollution-related conditions in Latino and other minority communities.

State health departments and environmental agencies should establish programs to inform the Latino community about the general health effects of air pollution, the specific hazards posed by conditions in their community, and ways to reduce their health risks. These agencies should be required to work with stakeholders and use both English and Spanish media outlets to reach Latino populations.

State and local governments should actively encourage or require polluting industries in or around residential neighborhoods to disclose, and act to minimize, their environmental impacts; remove communication barriers that limit the engagement of non-English-speaking community members and facilitate the involvement of community-based organizations in decisions regarding new sitings.

## ADOPTING STRONG, HEALTH PROTECTIVE STANDARDS NOW IS CRITICAL

The EPA has historically been a line of defense between big polluters and the public, especially for Latinos and other at-risk populations. In order to continue this work, the agency must be allowed to act swiftly to evaluate and update air pollution standards that are critical to protecting the environment and safeguarding public health—and our leadership needs to let EPA act.

## THE OZONE DEBACLE: WHAT'S NEXT?

On September 2, 2011, the president blocked the Environmental Protection Agency from updating and correcting the current unprotective smog standard.

As discussed in the ozone section of this report, the

President Obama's decision to ask the Environmental Protection Agency to drop the ozone standard left hundreds of millions of people in the United States facing an unacceptable level of risk from the air we breathe. We cannot simply ignore the fact that with each breath, one out of every two Latinos in America increases his or her risk of asthma, bronchitis, or even death due to poor air quality.

The president should have followed the mandate of the Clean Air Act and the Supreme Court and allowed EPA to do its job.

Our growing population—like so many others in the U.S. today—cannot bear the burden of the additional unforeseen costs that come from asthma attacks, medication, hospitalizations, or school or work days missed due to high ozone levels. Our country needs healthy people in order to thrive.

## MERCURY AND AIR TOXICS

To begin addressing the problem of mercury in Latino communities:

The EPA must finalize its first-ever mercury and air toxics standards to sharply reduce toxic emissions from power plants.

The EPA should require power plants to employ a variety of technologies that already exist to effectively capture mercury and other toxic emissions from coal-fired power plants.[2]

The Food and Drug Administration should make available or require the posting of bilingual (English and Spanish) fish consumption advisories in grocery stores and Latino markets. State health departments should provide bilingual fish consumption advisories to public clinics.

State health departments and departments of environmental protection should post clear bilingual warnings about fish contamination in local bodies of water and popular urban fishing areas.

## SAVING ENERGY SAVES MONEY AND LIVES

The importance of EPA regulations to control air pollution like ozone, particulate matter, mercury, and other air toxics cannot be underestimated. Real and achievable cost-saving solutions exist today that can mitigate these harmful pollutants, while also providing multiple benefits to Latino communities and all Americans.

Energy efficiency and expanded clean, renewable energy projects and infrastructure will help limit the amount of toxic emissions we release into our air, fight climate change, and build a clean energy economy. For U.S. Hispanics, this is truly a win-win solution. Saving energy also saves money, while reducing the amount of harmful pollution in our air and water, and creating much needed job and business opportunities for Latinos.

For example, energy efficiency requires the type of labor that is not easily outsourced. Latinos who previously saw their construction job(F)4on job(F) m0(equir)siy.i

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