



The Honourable Minister Dr P.A Motsoaledi

Minister of Health

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Copied to:

Ms Malebona Precious Matsoso

Director General

Department of Health

Per email: DG@health.gov.za

20 August 2018

Dear Honourable Minister

WHO's First Global Conference on Air Pollution and Health, 30 October - 1 November 2018

1. We address you as the Life After Coal/Impilo Ngaphandle Kwamalahle Campaign – made up of the Centre for Environmental Rights (CER), groundWork (gW), and Earthlife Africa (“Earthlife”).¹
2. We are writing to inquire as to whether the South African National Department of Health; and, in particular, the honourable Minister of Health, will be participating in the World Health Organisation (WHO)'s First Global Conference on Air Pollution and Health on 30 October – 1 November 2018. The theme of this first global milestone conference is “Improving air quality, combatting climate change – saving lives”.
3. We also write to let you know that the Life After Coal Campaign has been working on issues of air pollution and climate change for many years and has particular health and related expertise. We would welcome an opportunity to share our experience with you; either in preparation for the conference or at any other time.

¹ Website available at <https://lifeaftercoal.org.za/>. The Life After Coal Campaign works to: discourage the development of new coal coal-fired power stations and mines; reduce emissions from existing coal infrastructure and encourage a coal phase-out; and enable a just transition to sustainable energy systems for the people.

4. As you are no doubt aware, and as the WHO has confirmed, air pollution, both ambient and indoor, is one of the largest causes of death worldwide. According to reports of the South African National Department of Environmental Affairs,² confirmed by our own experience and analysis,³ air quality exceeds the South African ambient air quality standards (AAQS) on an ongoing basis; especially in the Highveld, Mpumalanga, and Waterberg-Bojanala priority areas.⁴ Despite two of these areas having been declared priority areas by then Minister of Environmental Affairs & Tourism more than a decade ago, with the express purpose of reducing air pollution to within the AAQS, air pollution remains high and at dangerous exposure levels for human health in both the Vaal Triangle Airshed and Highveld Priority Areas.
5. Ongoing exceedances of AAQS are closely correlated with non-communicable diseases. About a quarter of all heart attack deaths, and about a third of all deaths from stroke, lung cancer, and chronic obstructive pulmonary disease are due to air pollution exposures. Health impacts are largest among women, children, older people, and the poor.⁵ Although AAQS are intended to be health-based, there are no safe levels of exposure to several pollutants. In addition, many of South African AAQS are significantly weaker than the WHO's outdated 2005 guidelines (which are currently under review).
6. Industrial emissions, particularly from coal-fired power generation, are major sources of South Africa's air pollution – and its attendant health impacts; as well as being significant contributors to climate change. As you are probably aware, Eskom and Sasol are South Africa's biggest emitters of the regulated criteria pollutants, which through ambient concentrations, bioaccumulation, and/or deposition present a threat to health, well-being, and the environment.
7. In 2016, UK-based air quality and health expert Dr Mike Holland assessed the health impacts and associated economic costs of current emissions of just one type of pollutant from Eskom's coal-fired power stations (PM_{2.5}). His report, entitled "*Health impacts of coal fired power plants in South Africa*",⁶ estimates that the following impacts are attributable to these emissions:
 - 2 239 deaths per year: 157 from lung cancer; 1 110 from ischaemic heart disease; 73 from chronic obstructive pulmonary disease; 719 from strokes; and 180 from lower respiratory infection; 2 781 cases of chronic bronchitis per year in adults;
 - 9 533 cases of bronchitis per year in children aged 6 to 12;
 - 2 379 hospital admissions per year;
 - 3 972 902 days of restricted activity per year;
 - 94 680 days of asthma symptoms per year in children aged 5 to 19;
 - 996 628 lost working days per year; and
8. The total costs associated with these impacts exceed USD2 billion per year.

² See, for example, http://www.airqualitylekgotla.co.za/assets/2017_1.3-state-of-air-report-and-naqi.pdf

³ <https://cer.org.za/news/broken-promises-the-failure-of-south-africas-priority-areas-for-air-pollution-time-for-action>

⁴ These are South Africa's 3 priority areas, declared as such in terms of section 18 of the National Environmental Management: Air Quality Act, 2004 in order to address the high air pollution in the areas

⁵ See, for example: [http://www.who.int/news-room/fact-sheets/detail/ambient-\(outdoor\)-air-quality-and-health](http://www.who.int/news-room/fact-sheets/detail/ambient-(outdoor)-air-quality-and-health); <https://ehp.niehs.nih.gov/ehp299/>.

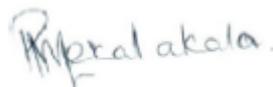
⁶ <https://cer.org.za/wp-content/uploads/2017/04/Annexure-Health-impacts-of-coal-fired-generation-in-South-Africa-310317.pdf>

9. It is important to point out that these numbers exclude the significant impacts from air pollution from mining (such as coal dust), transport of coal, and contamination of water (as well as the impacts from other pollutants emitted by Eskom stations).⁷
10. We are of the view that these are crucial issues that require urgent solutions. Given the nature of the emission sources and legislation involved, we have predominately engaged in the past with the Ministers of Environmental Affairs and Energy, respectively. However, we have also attempted, on a number of occasions through different forums, to alert the National Department of Health to this crucial health issue. The Department of Health is an integral role-player in addressing the devastating health impacts of air pollution in order to realise a safe and healthy environment as provided for in the Constitution.
11. We look forward to working with the Department towards this goal. Kindly let us know should you be available for a meeting to discuss these issues.
12. In the interim, we look forward to confirmation as to whether the honourable Minister will be attending the WHO Conference.
13. Please do not hesitate to contact us, should you have any queries in relation to this letter.

Yours sincerely



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⁷ <https://cer.org.za/news/air-pollution-from-coal-power-stations-causes-disease-and-kills-thousands-of-south-africans-every-year-says-uk-expert>