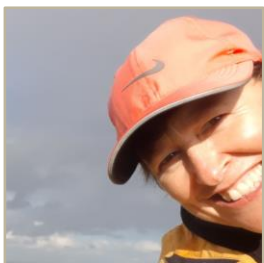


A person in a green jacket stands on a grassy ridge, looking out over a vast landscape. The foreground is a grassy hillside. In the middle ground, a large, calm lake stretches across the valley, with several islands and peninsulas. The background features a range of mountains under a sky with soft, warm colors from a sunset or sunrise. The overall mood is serene and expansive.

SOCIAL INEQUITY & AIR QUALITY IN AOTEAROA

A Preliminary Assessment

STUDY TEAM



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BSc/BA
MSc (Applied Statistics)

Environmental Health
Intelligence NZ

PRESENTATION OVERVIEW



air quality in NZ



what we did



what we found

AIR QUALITY 101

An anatomical illustration of the human respiratory system. The lungs are shown in a reddish-pink color, and the trachea and bronchi are in a light blue color. The rest of the body is shown in a darker blue color. The diagram is centered on a white background.



HOME HEATING (PM_{2.5})



ROADS (NO₂)



Clean air is a fundamental to life and health
and a basic human right (UN, 2022)



Does population exposure to air pollution, and associated health impacts, vary by socioeconomic deprivation in Aotearoa?



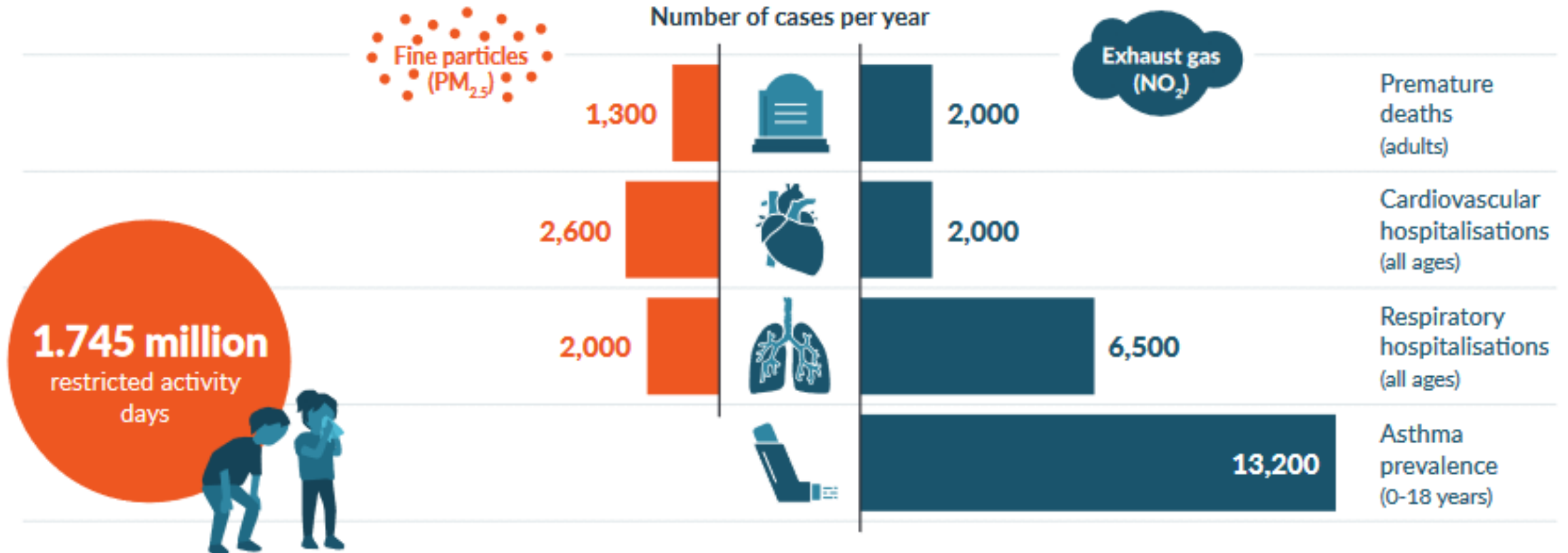


RNZ

AIR POLLUTION FROM CARS KILLING THOUSANDS OF NZERS YEARLY



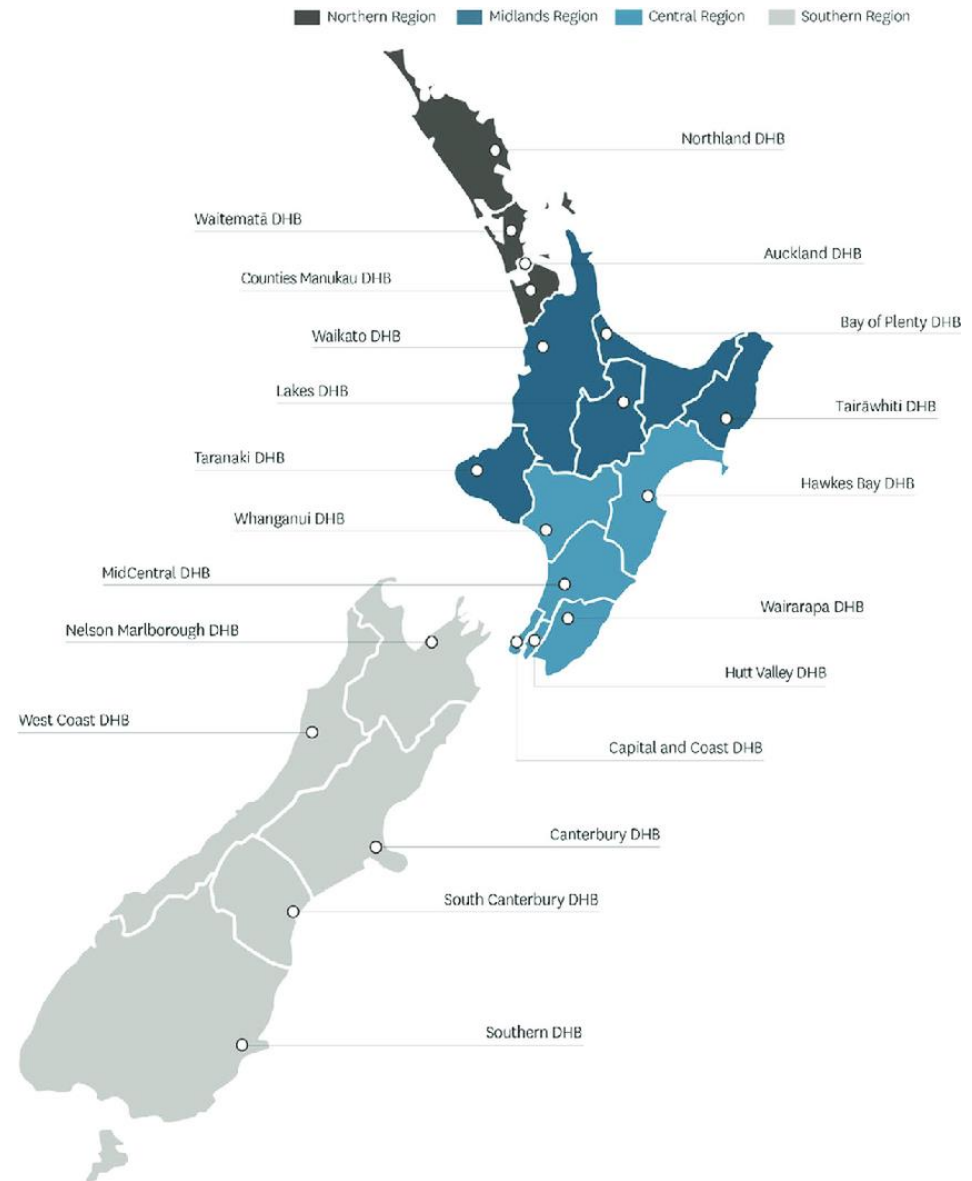
Health and Air Pollution in New Zealand (HAPINZ 3.0)



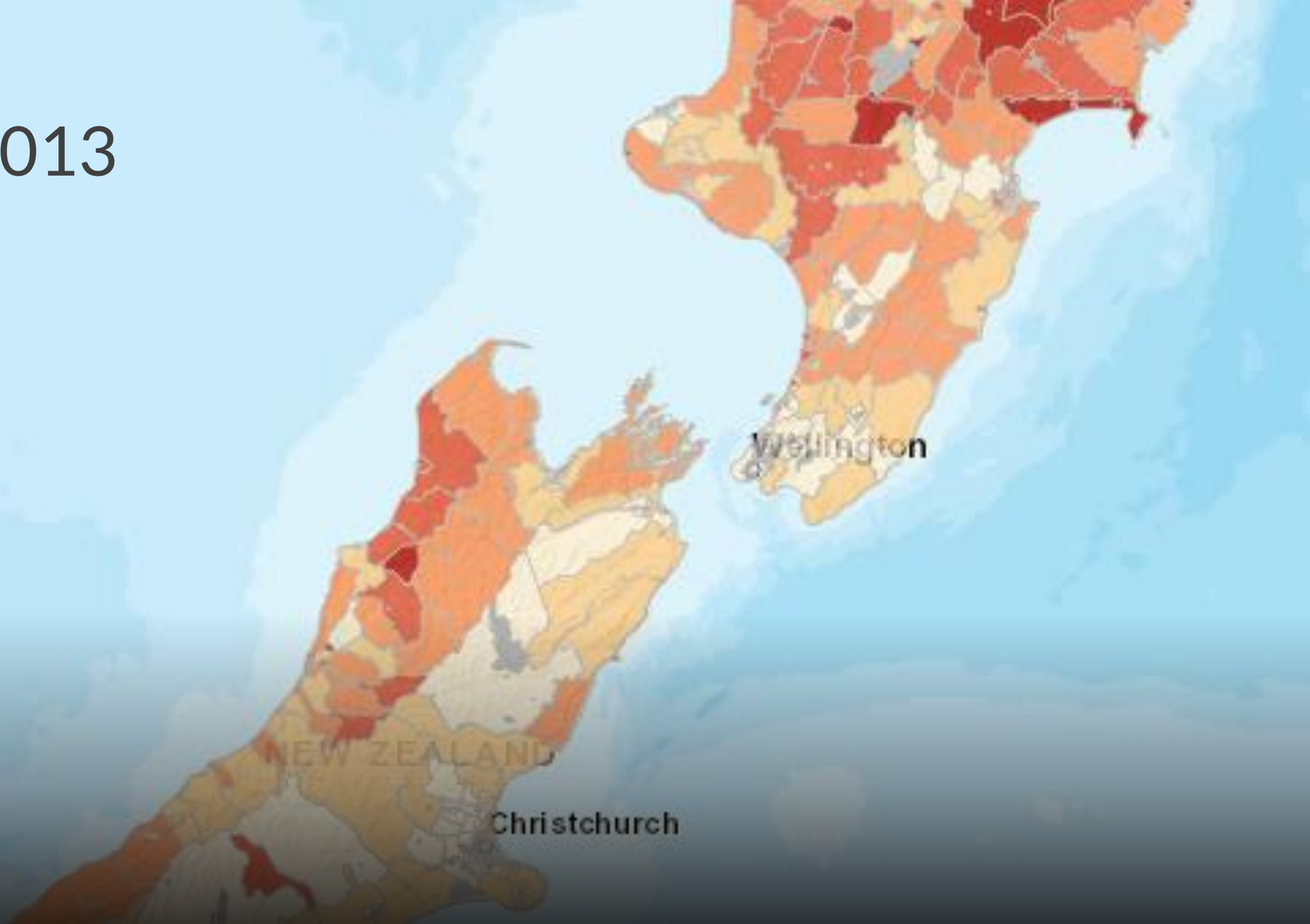
HAPINZ MODEL

<https://www.ehinz.ac.nz/projects/hapinz3/explore-publications-and-data/>

DHBS OF NZ



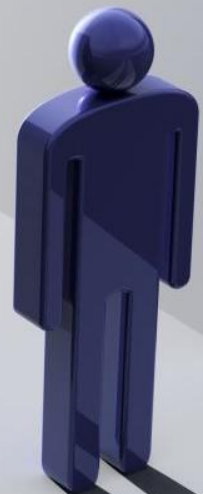
NZDep2013



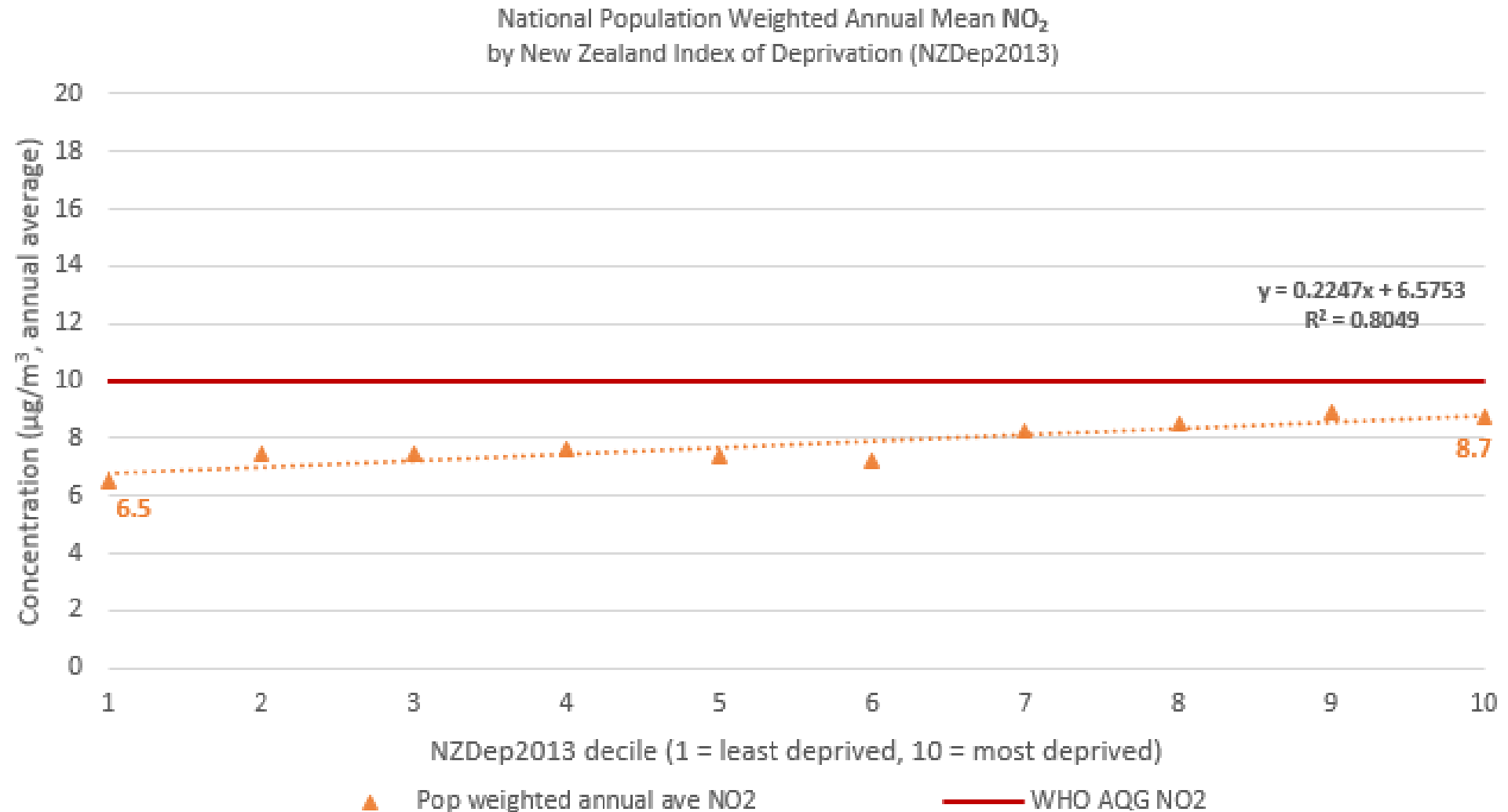


ETHNICITY

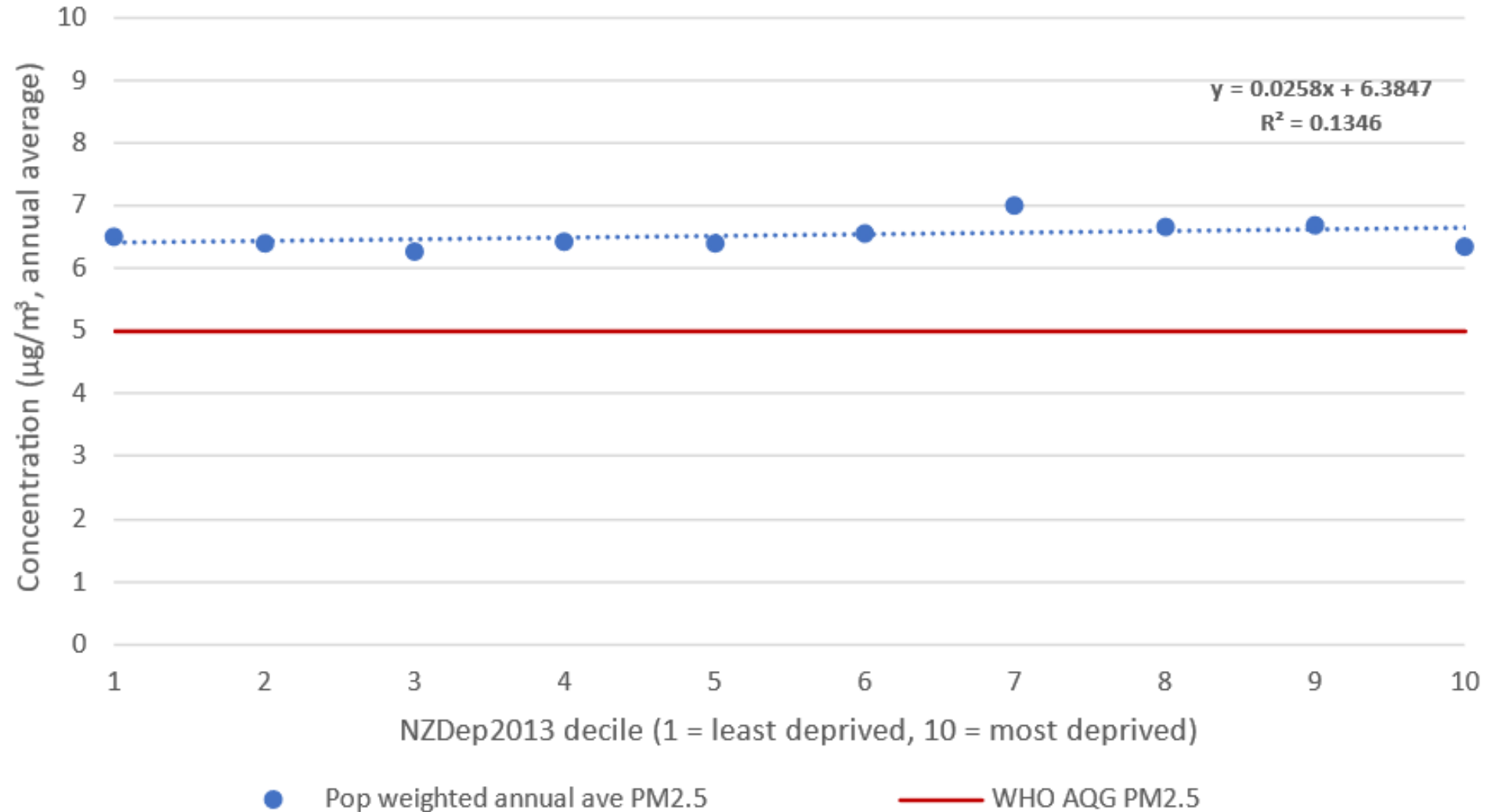
WHAT DID WE FIND?



NATIONAL EXPOSURE BY NZDEP2013: NO₂



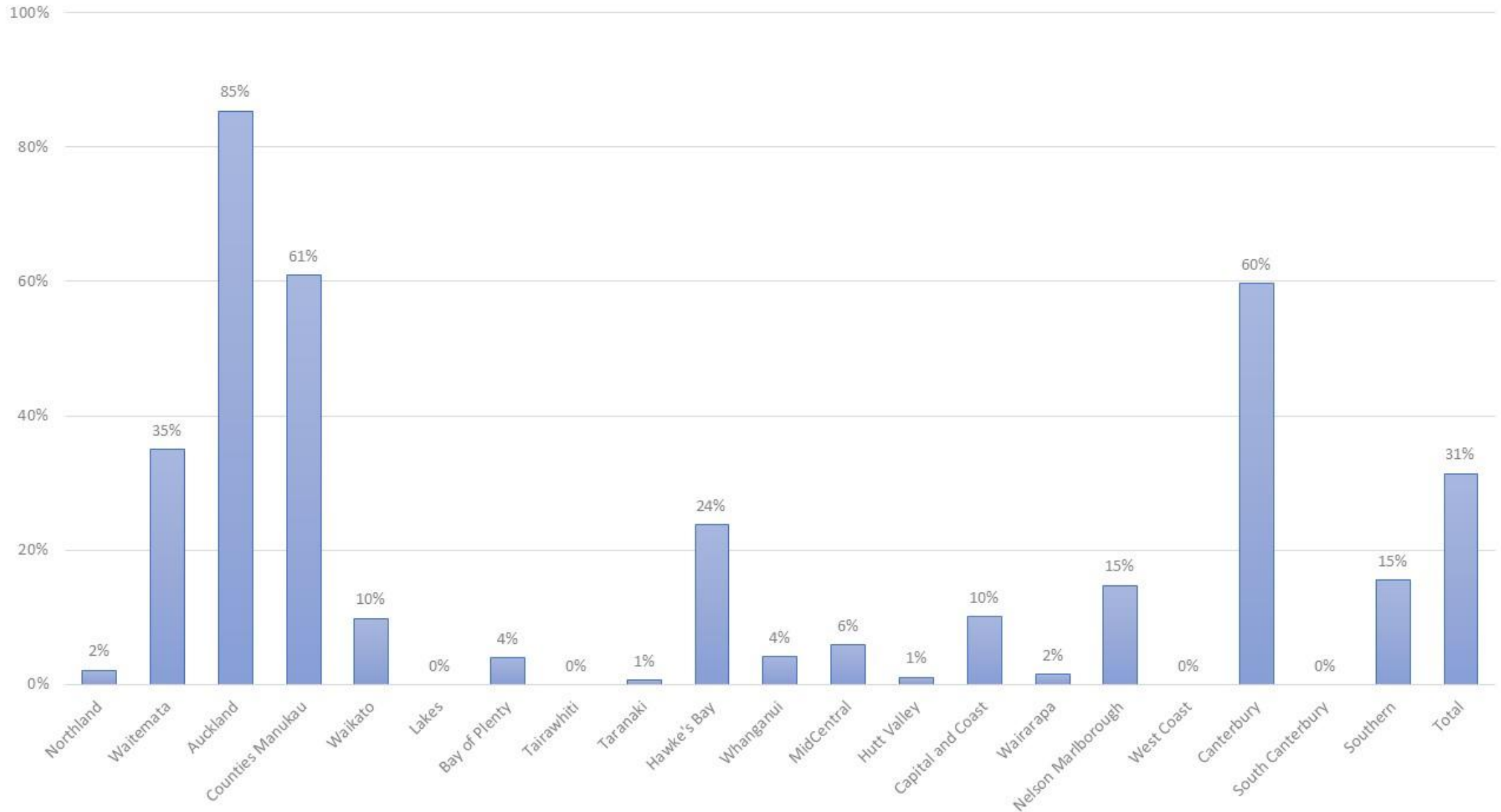
NATIONAL EXPOSURE BY NZDEP2013: PM_{2.5}



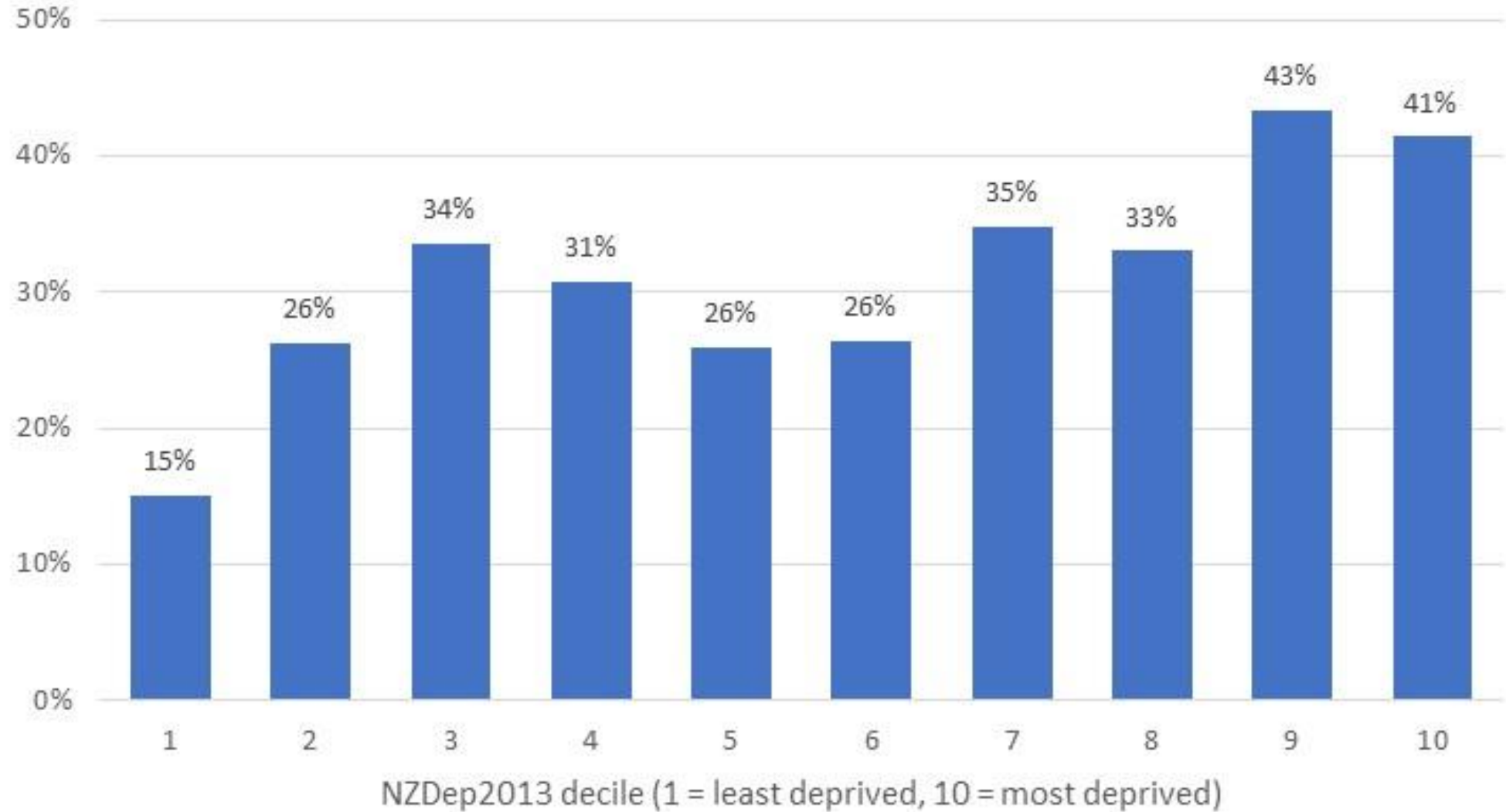
EXPOSURE BY DHB

District Health Board	Population (2016)	Population-weighted annual average concentration ($\mu\text{g}/\text{m}^3$)	
		NO ₂	PM _{2.5}
<i>WHO Air Quality Guideline (annual)</i>		10	5
Northland	176,310	4.3	5.2
Waitematā	588,355	8.5	5.6
Auckland	481,290	12.9	5.9
Counties Manukau	538,370	10.0	5.6
Waikato	402,005	6.2	5.8
Lakes	109,120	5.2	8.1
Bay of Plenty	232,805	5.7	5.0
Tairāwhiti	48,745	4.9	7.0
Taranaki	118,610	4.7	5.5
Hawke's Bay	166,790	7.6	7.3
Whanganui	65,040	5.4	5.8
MidCentral	176,385	5.6	5.7
Hutt Valley	149,550	5.9	5.5
Capital and Coast	307,375	6.6	5.7
Wairarapa	44,840	4.5	7.2
Nelson Marlborough	150,255	6.0	8.2
West Coast	32,920	3.9	8.0
Canterbury	540,950	9.8	9.1
South Canterbury	59,775	5.0	9.5
Southern	323,780	6.4	8.8
All New Zealand	4,713,270	7.8	6.5

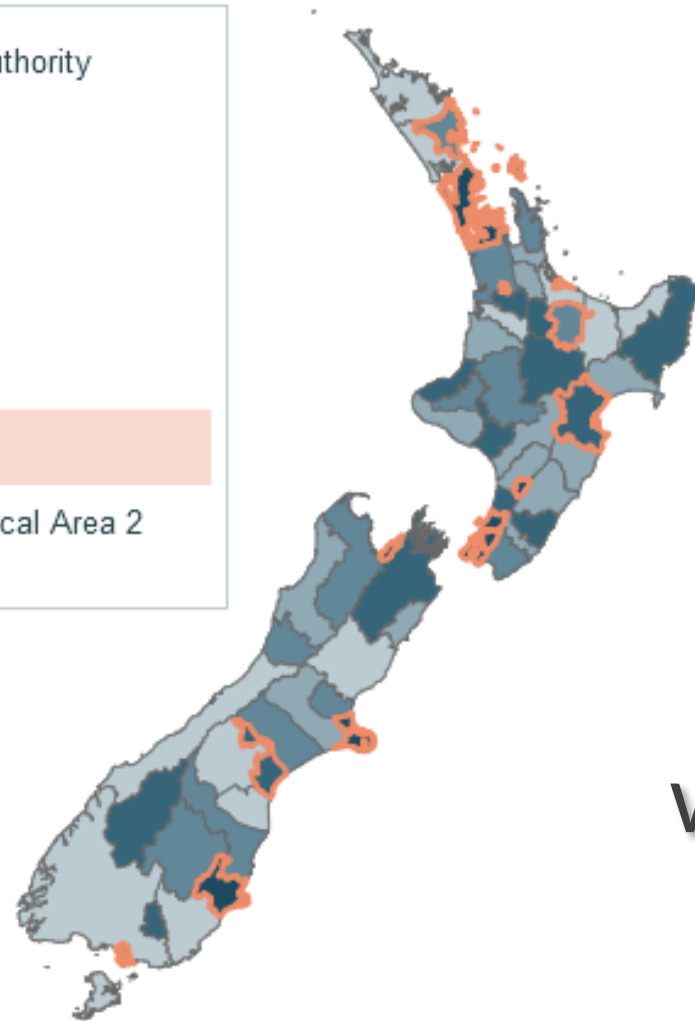
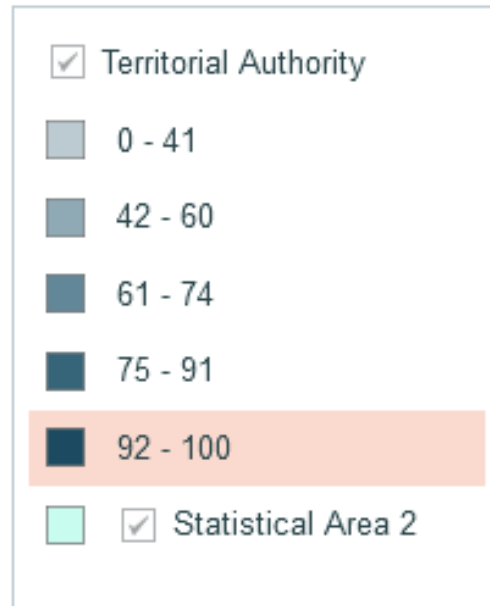
Percentage of the population living in areas where annual NO₂ levels exceed WHO AQG (10 µg/m³, y-axis) by district health board (x-axis) for year 2016



Percentage of population in each NZDep2013 decile exposed to annual NO_2 exceeding WHO AQG

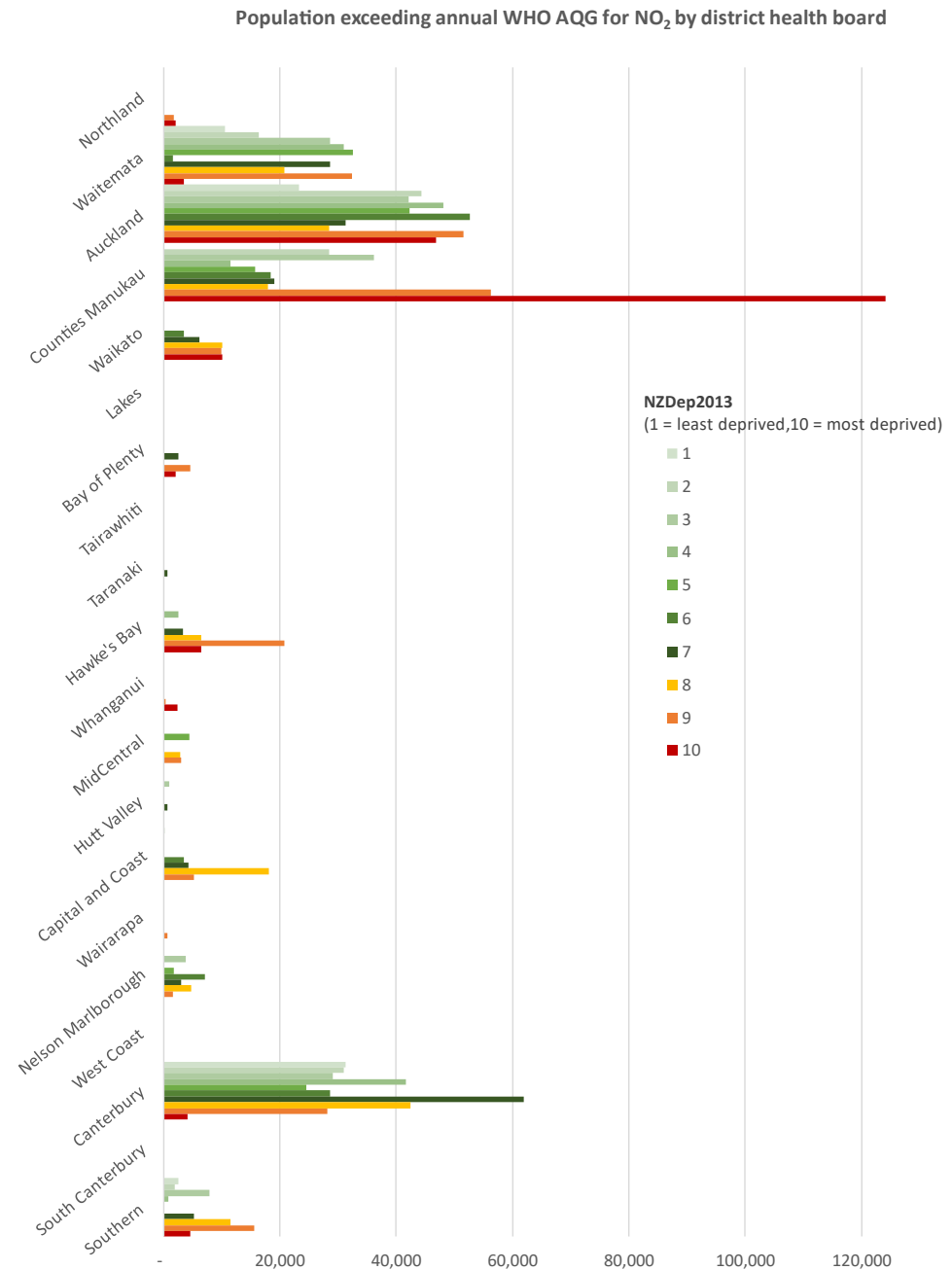


Health impacts from human-made (anthropogenic) air pollution | Premature deaths (among people aged 30+ years) | Premature deaths due to human-made PM_{2.5} and NO₂ | Number of deaths (2016)



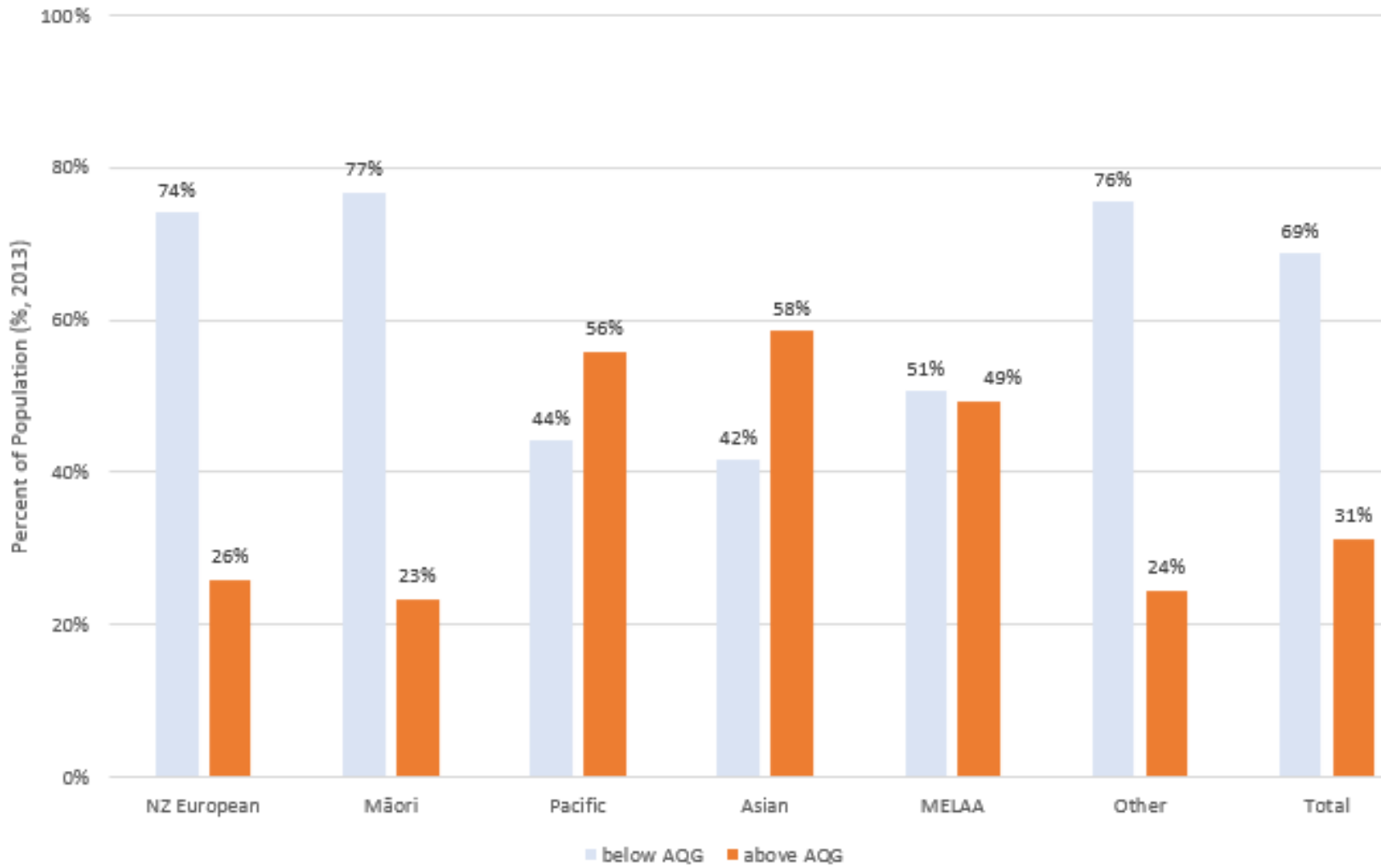
yeah? so what,
we already knew that

Number of people living in areas with NO₂ above WHO AQG in 2016, by DHB



NATIONAL EXPOSURE BY ETHNIC GROUP

Ethnic group (total response) ¹	Population-weighted ² annual average concentration ($\mu\text{g}/\text{m}^3$)	
	NO ₂	PM _{2.5}
<i>WHO Air Quality Guideline (annual)</i>	10	5.0
NZ European	7.3	6.6
Māori	7.1	6.4
Pacific	9.9	6.2
Asian	10.5	6.2
Middle Eastern / Latin American / African (MELAA)	9.9	6.4
Other	7.1	6.6
New Zealand Population Weighted Average	7.8	6.5



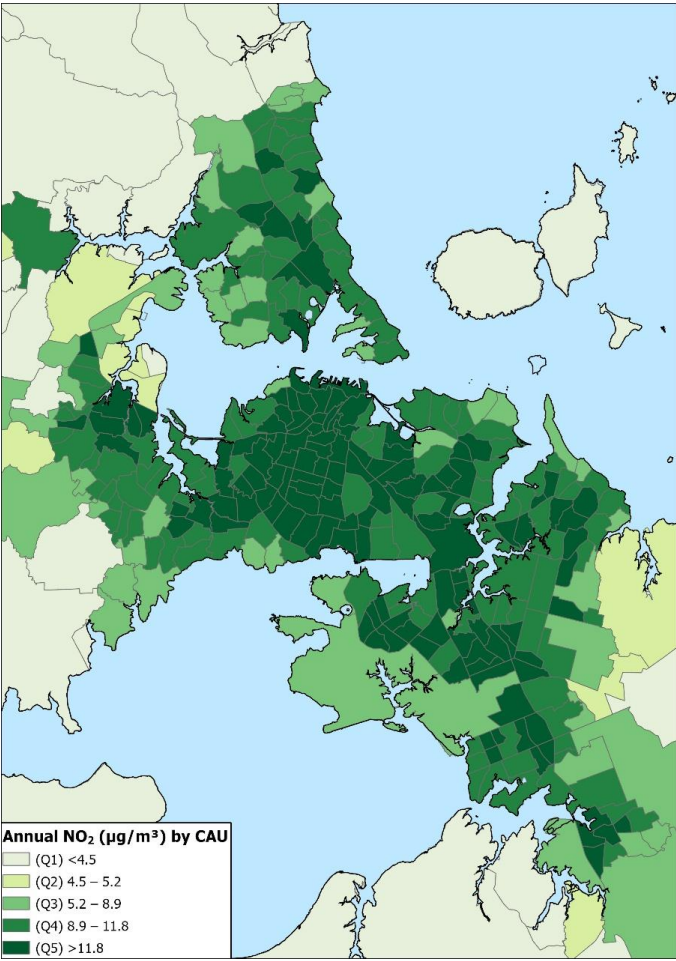
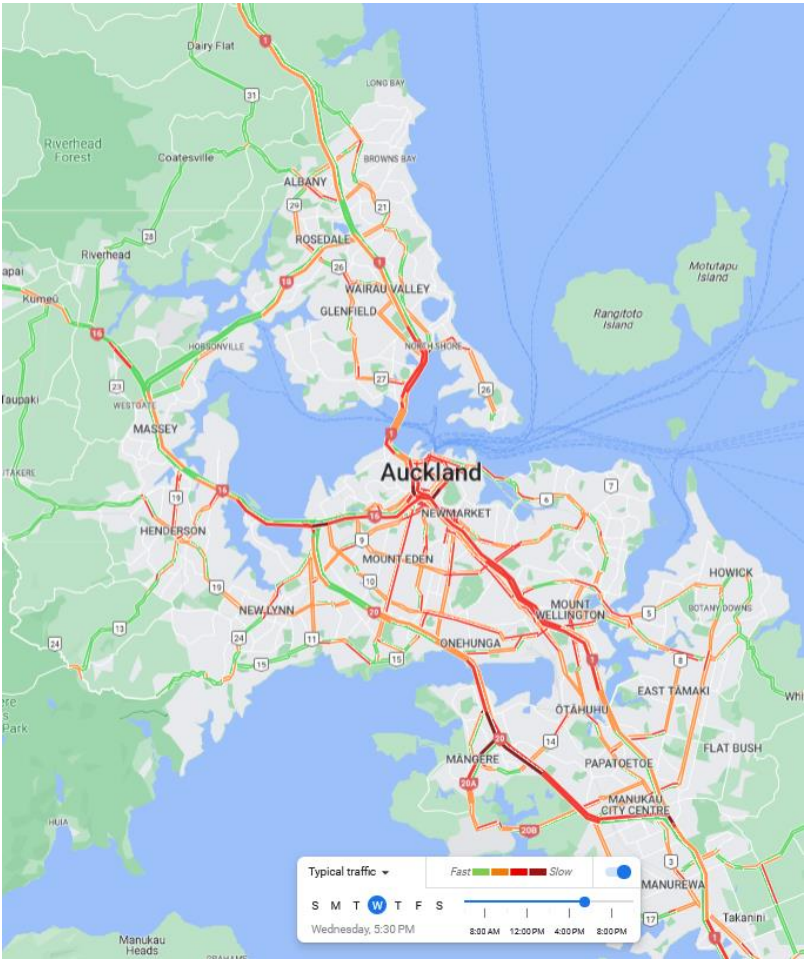
Percent New Zealanders exposed to annual NO₂ levels below and above the WHO AQG for NO₂ by ethnic group

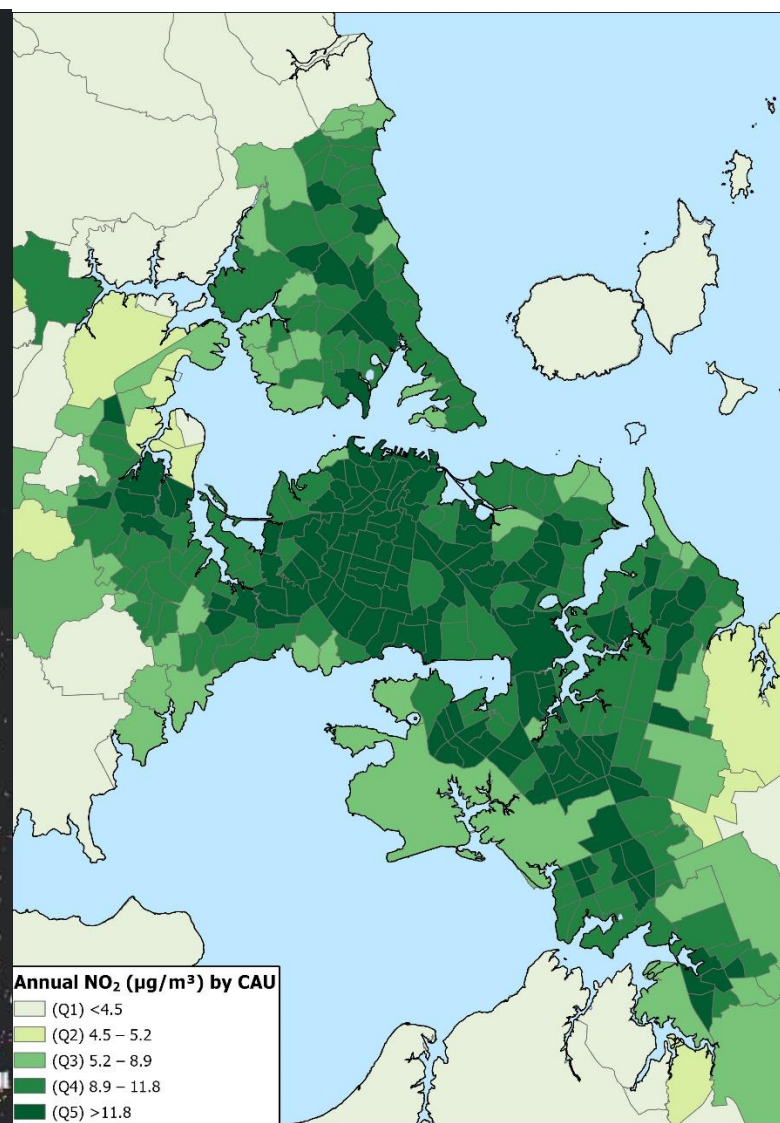
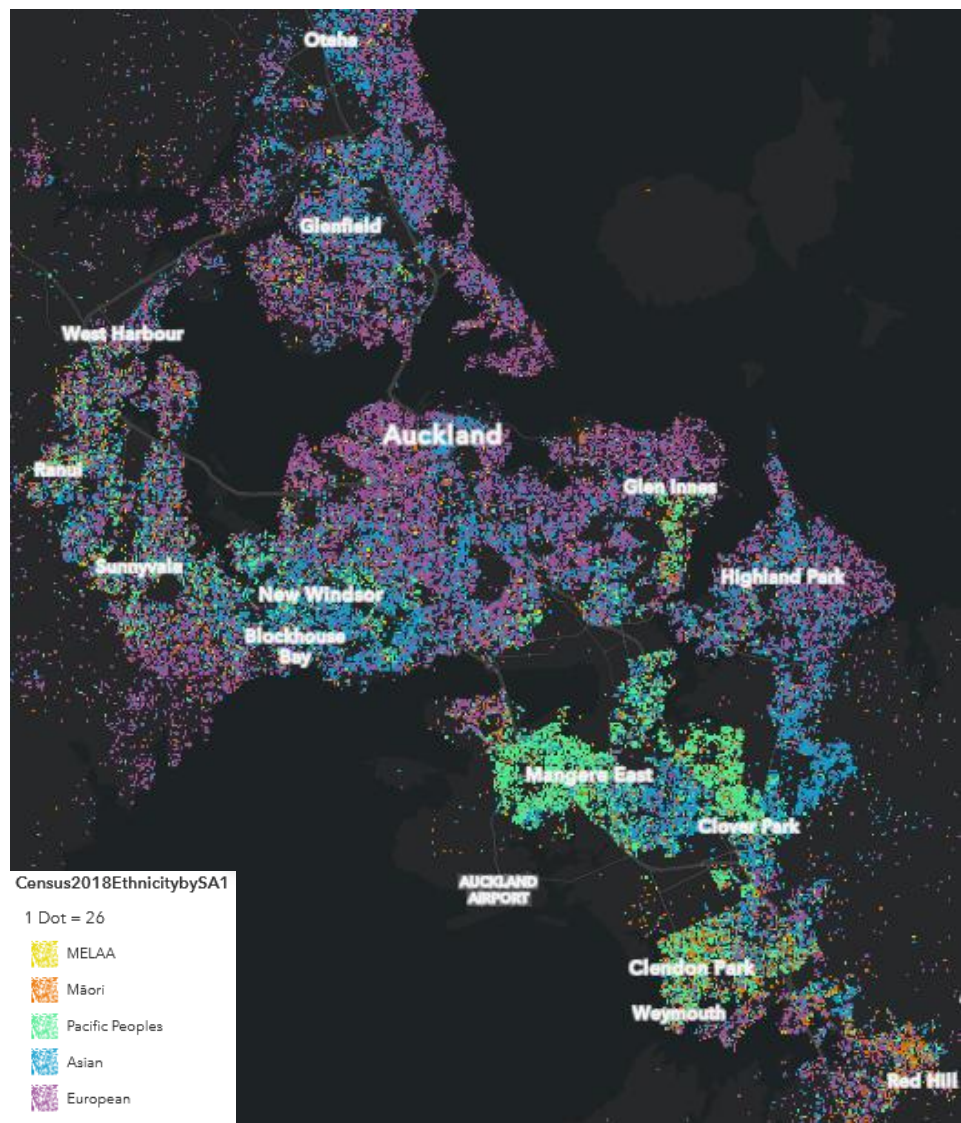
CASE STUDY: NATIONAL, URBAN & AUCKLAND NO₂

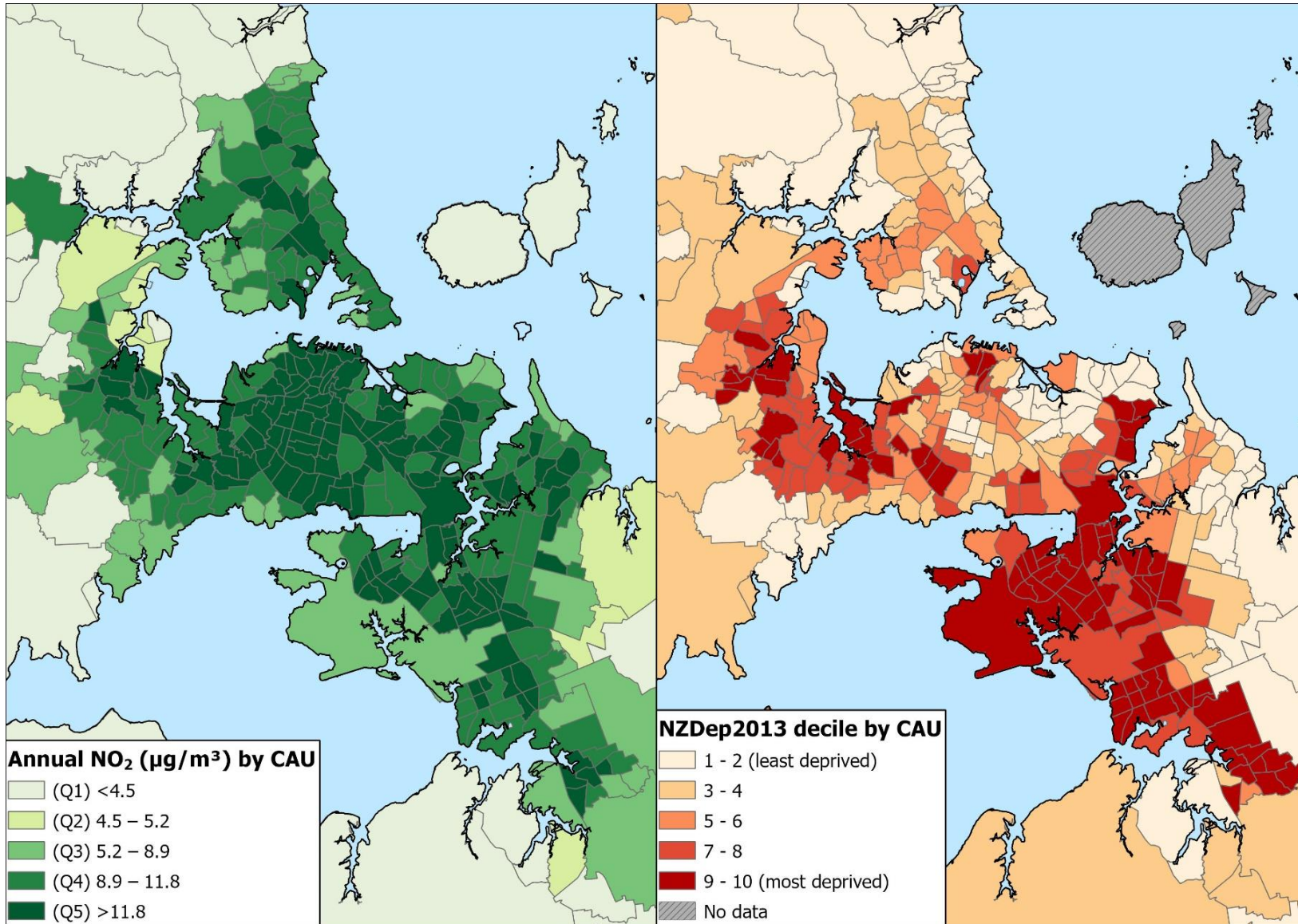
Ethnic Group	Population-weighted annual average concentration NO ₂ (µg/m ³ , 2016)		
	National	National Urban	Auckland Urban Airshed
NZ European	7.3	8.2	10.7
Māori	7.1	7.8	11.1
Pacific	9.9	10.1	11.7
Asian	10.5	10.7	11.9
MELAA	9.9	10.2	11.8
Other	7.1	8.1	10.8
Total	7.8	8.6	10.7

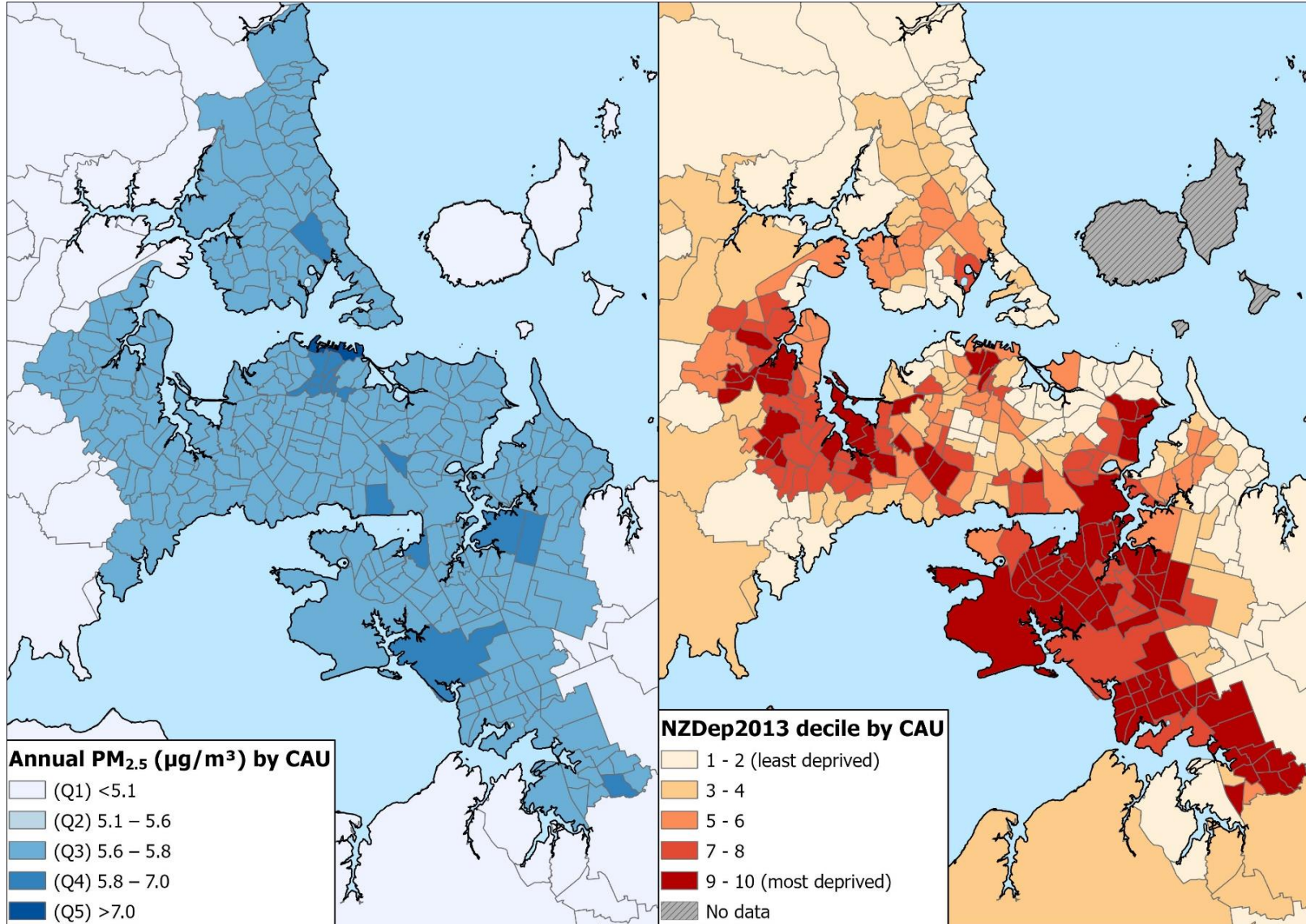
WHO Guideline = 10 µg/m³

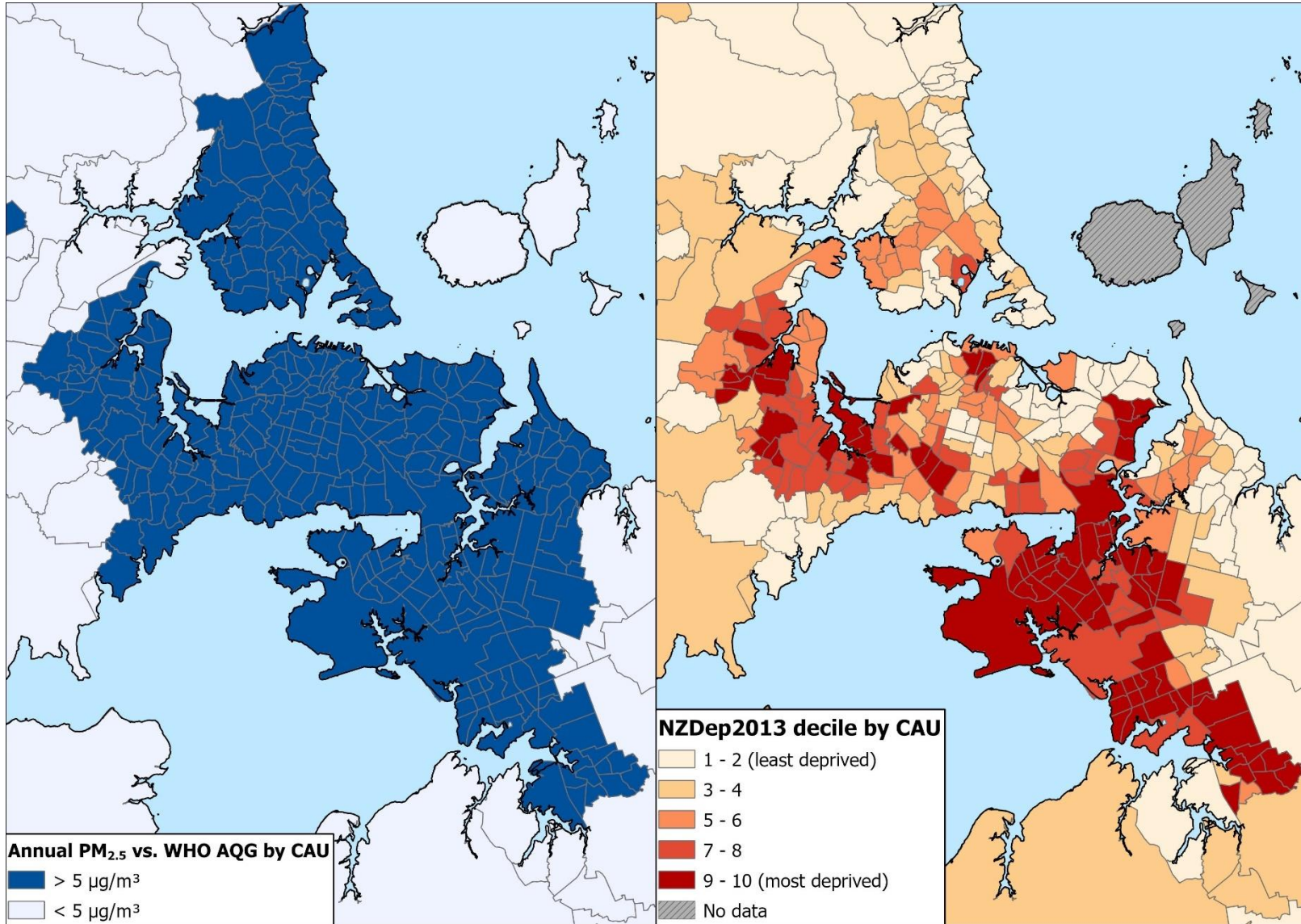
CASE STUDY: AUCKLAND NO₂





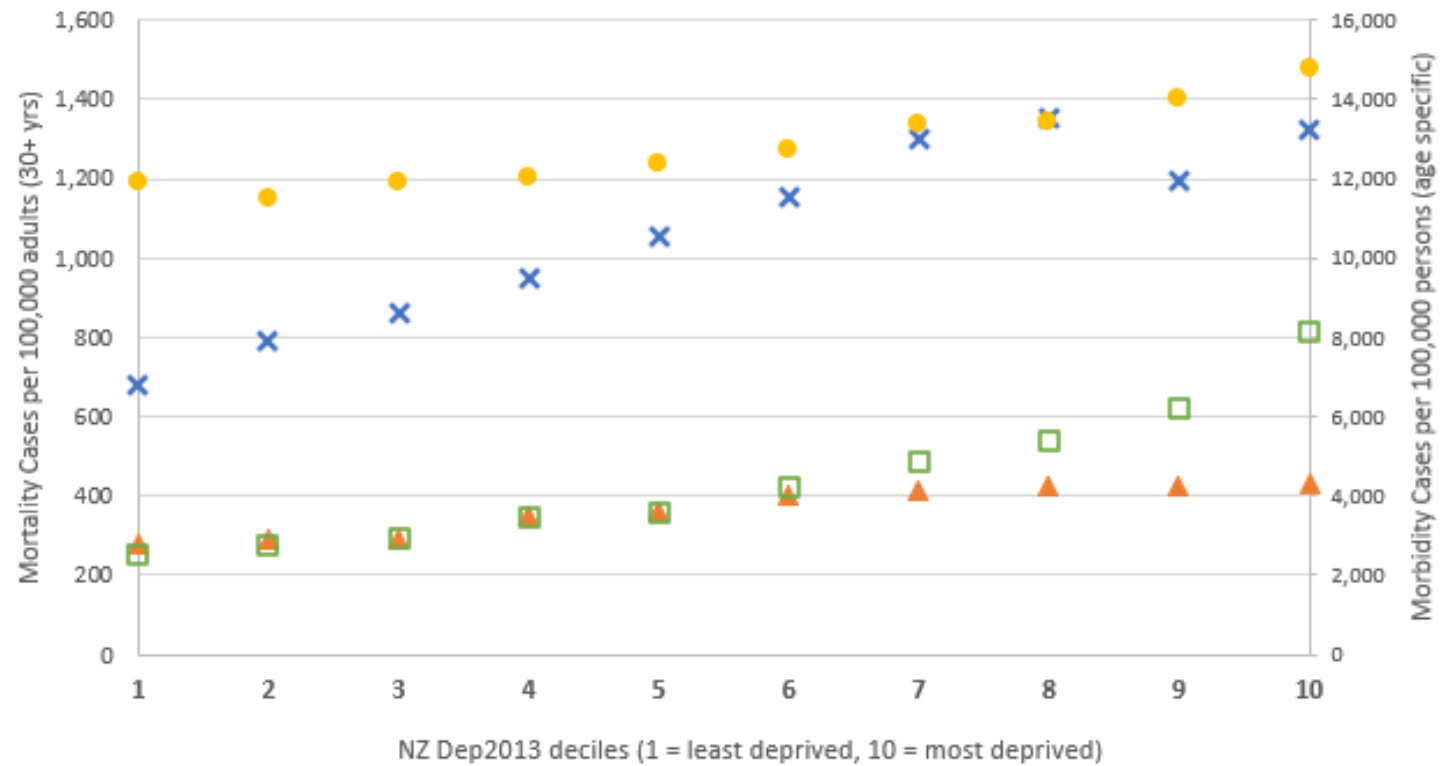








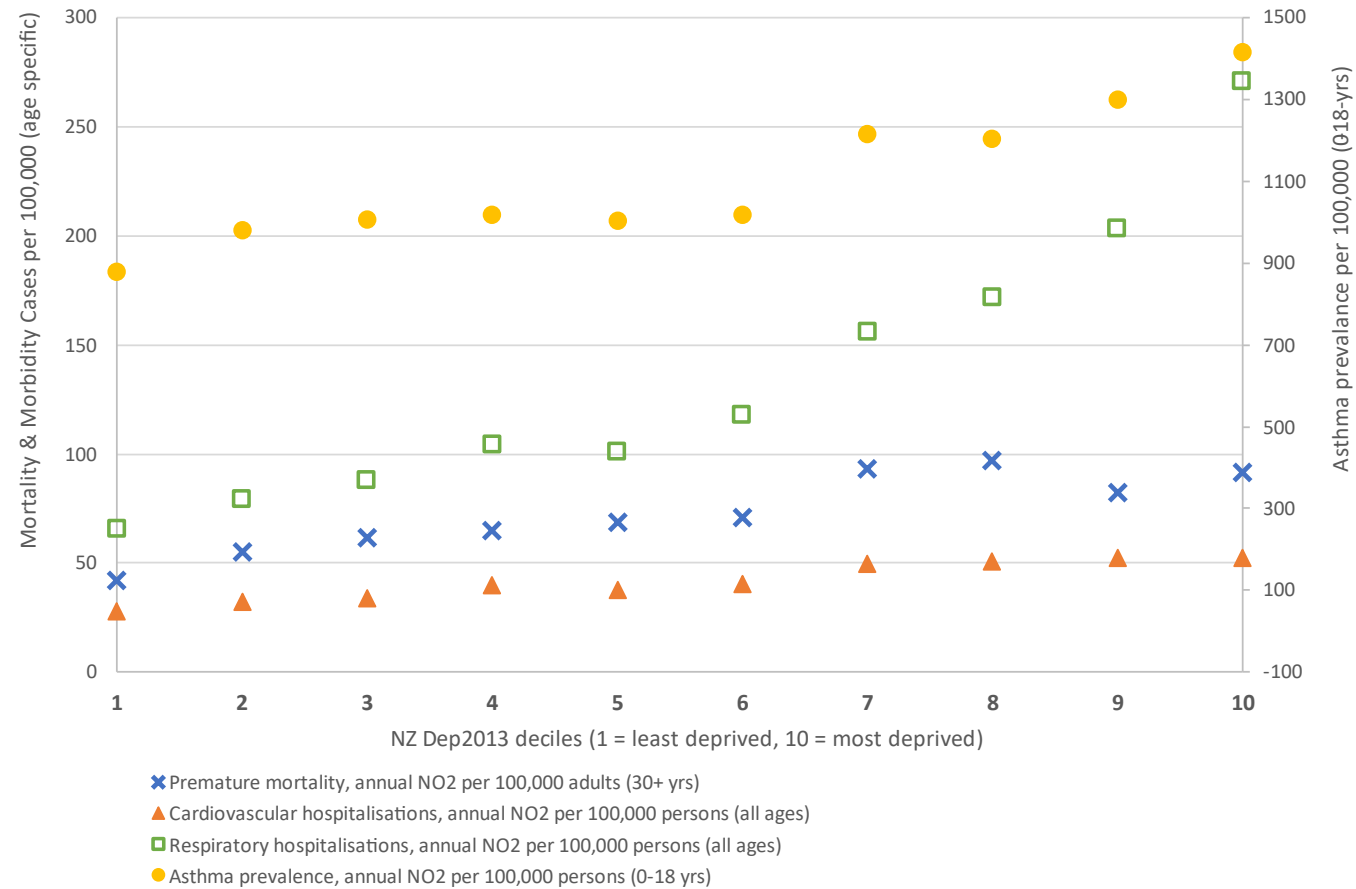
BASE INCIDENCE HEALTH STATISTICS (2016) BY NZDEP2013



- × Mortality rate per 100,000 adults (30+ yrs)
- ▲ Cardiovascular hospitalisation rate per 100,000 persons (all ages)
- Respiratory hospitalisation rate per 100,000 persons (all ages)
- Asthma prevalence per 100,000 persons (0-18 yrs)

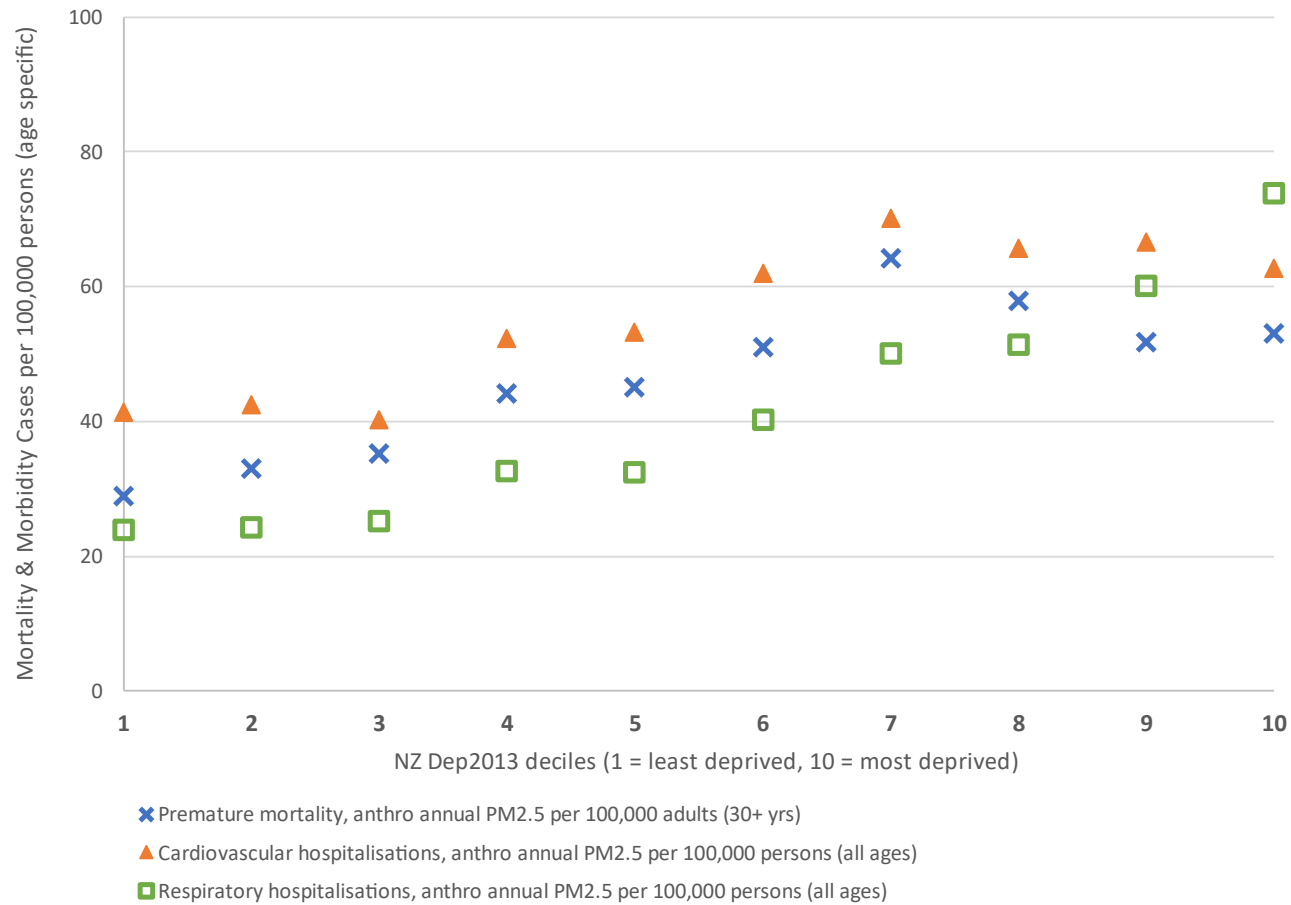
ESTIMATED IMPACTS ANTHROPOGENIC NO₂ BY NZDEP2013

Estimated Cases Associated with Anthropogenic Annual NO₂ by NZ Dep2013



ESTIMATED IMPACTS ANTHROPOGENIC $PM_{2.5}$ BY NZDEP2013

Estimated Cases Associated with Anthropogenic Annual $PM_{2.5}$ by NZ Dep2013



**DECILE 10
VS
DECILE 1**

- rate of premature mortality (30 years +) associated with exposure to NO_2 and $\text{PM}_{2.5}$ is **two times higher**
- rate of cardiovascular hospitalisation associated with exposure to NO_2 and $\text{PM}_{2.5}$ is **1.7 times higher**

**DECILE 10
VS
DECILE 1**

- rate of respiratory hospitalisation associated with exposure to NO_2 is **four times higher**
- rate of respiratory hospitalisation associated with exposure to $\text{PM}_{2.5}$ is **three times higher**
- rate of asthma prevalence in 0–18-year-olds associated with exposure to NO_2 is **1.6 times higher**.



CONCLUSIONS

Chronic population exposure to NO₂ in New Zealand is elevated in:

- Auckland, Counties Manukau, Waitematā, Canterbury and Hawke's Bay DHB areas
- Asian, Pacific peoples, MELAA ethnic groups (in part driven by urban area effect)
- People living in more deprived areas



CONCLUSIONS

Health impacts from air pollution are much higher in more deprived areas due to higher baseline incidence of disease and higher levels of pollution.

A photograph of a traffic jam on a city street. Several cars are visible, with exhaust smoke rising from their tailpipes, creating a hazy atmosphere. A green traffic light is visible in the distance. The image is overlaid with a semi-transparent dark blue box containing white text.

Our findings mean that policy that targets air pollution improvements in more deprived areas would deliver bigger health benefits.



Our findings mean that policy that targets air pollution improvements in more deprived areas would deliver bigger health benefits.

Especially policy that reduces motor vehicle emissions.

In Aotearoa, New Zealand clean air is a taonga for Māori.
Shouldn't we be striving to achieve this basic human right?





THANK YOU / NGĀ MIHI

NGĀ PATAI / ANY QUESTIONS?

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