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July 30, 2008

Chairman May Nichols and the California Air Resources Board

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Submitted electronically to <http://www.arb.ca.gov/cc/scopingplan/spcomment.htm> and  
[ccplan@arb.ca.gov](mailto:ccplan@arb.ca.gov)

**RE: Comments on Climate Change Draft Scoping Plan**

Dear Chair Nichols and Members of the California Air Resources Board:

I commend your leadership in working with many stakeholders to put together a ground-breaking and visionary plan for reducing greenhouse gas emissions – and consequently improving health conditions – throughout the state of California. I am writing today to highlight specifically the potential impact of Climate Change Draft Scoping Plan on achieving health equity and ask that you take my recommendations into consideration as you move toward a final plan.

Health inequities are pervasive in Alameda County and across California. Studies reveal that these inequitable health outcomes are not adequately explained by genetics, access to health care, or risk behaviors, but instead are to a large extent the result of profoundly adverse social and environmental conditions. An examination of West Oakland, a community situated alongside the Port of Oakland and between two freeways, I-880 and I-580, illustrated this point.

Residents living West Oakland can expect to die, on average, more than a decade before residents of the Oakland Hills and, appallingly, this gap may be increasing. It is clear that one of the underlying causes of this disturbingly large health disparity is the extremely high rates of environmentally-linked disease in West Oakland. People living in West Oakland breathe in 3 times more diesel particles than other Bay Area residents. As a result of the exposure, West Oakland residents experience high rates of diseases such as cancer and asthma. As demonstrated in the West Oakland Health Risk Assessment, West Oakland residents experience 2.5 times greater lifetime risk of cancer than Bay Area residents in general and 80% of this excess cancer risk is attributed to diesel trucks. They have the highest rates of asthma hospitalization in the county – 2.3 times the average – and West Oakland children under five years of age have emergency department visits rates due to asthma nearly three times the county average.

The asthma rates among children are particularly alarming. Asthma is a chronic disease that can lead to irreversible changes in the architecture of the airways in the lungs. The irreversibility of these lung changes is one of the prime reasons that preventing asthma in children by reducing exposure to environmental triggers such as diesel is so critical to avoiding a life plagued by chronic disease. Additionally, asthma places a burden on the respiratory muscles and heart, therefore potentially

exacerbating heart disease, producing heart failure and ultimately increasing the likelihood of heart attacks, the number one killer of West Oakland residents.

The impact of the concentration of environmental hazards in West Oakland is particularly devastating to residents' health because of their social vulnerability. Due to high poverty levels and the prevalence of other psycho-social stressors, as well as a lack of access to healthcare, West Oakland residents are already at risk for poor health outcomes. Additionally, there is increasing recognition that multiple hazards interact and have a cumulative impact on residents.

It is because of the extent and urgency of the health problems plaguing West Oakland and the many other similar communities in Alameda County and across the state that we urge you to consider our feedback on the Climate Change Draft Scoping Plan.

### **1. Ensure protection for already over-impacted communities.**

Equity should be at the fore-front of all aspects of the plan, but most importantly, it must be central to measures that have the highest potential for inequitable implementation. As detailed in the draft scoping plan, California is joining the Western Climate Initiative and plans to implement cap-and-trade and carbon offset programs. I have several concerns regarding implementation of this plan and its impacts on low-income communities and communities of color, including those in Alameda County. Mitigation strategies such as cap-and-trade or offset programs must not exacerbate already existing health inequities in low-income communities. As demonstrated, such communities are already unequally burdened by extremely poor environmental conditions and poor health. The final plan must include adequate safeguards for these communities, such as:

- Provisions to prevent “leakage”, such as local emissions caps (in addition to regional caps), to ensure that high-impact communities do not experience increased emissions levels while other communities see improvements.
- Re-allocation of funds collected through pollution permits, so that high-impact communities benefit from the pollution permits sold in their areas.
- Technical assistance to ensure that small businesses, especially minority and women owned businesses, are able to reduce emissions without undue financial strain.
- Ensure offset activities take place in local “environmental justice communities,” such as tree-planting in areas currently without adequate green space.

### **2. Generate funds for government programs.**

Some cap-and-trade models allow polluting companies to recoup most of the financial benefits. However some models, such as cap-and-auction, require firms to buy pollution credits directly from the government, allowing the government to then spend that money on programs for the public good. The final Climate Change Plan must ensure that the system implemented in California allows the government to collect permit fees. Additionally, these funds should be redistributed to create public transit programs, improve walking and biking options, and compensate communities that continue to bear the brunt of pollutant emissions.

### **3. Land use and transportation policies must be strengthened.**

Creating walkable, bikeable, and transit-oriented communities will not only help reduce greenhouse gas emissions, but also decrease California's obesity and chronic illness rates. Encouraging active transport has never been more important than now, the first time in modern history the next generation is expected to live lives that are shorter than ours. Almost one-third of Americans who commute via public transit meet their daily requirement for physical activity (30 or more minutes per day) by walking as part of their daily life, including to and from the transit stop. By assigning stronger emission reduction targets to land use and transit policies, the Final Climate Change Plan can harness a critical opportunity to spur meaningful change in the built environment that will mitigate climate change and improve the public's health.

#### **4. Set strong local greenhouse gas reduction targets.**

Local greenhouse gas reduction targets both ensure that low-income communities do not receive the brunt of emissions while others benefit from reductions (“leakage”) and encourage local governments to pursue smarter land use planning that facilitates walking, biking, and public transit use. While cities and counties should have choice regarding how to meet these targets, they should prioritize measures that improve community health, especially in vulnerable communities. The final Climate Change Plan must provide both financial and technical support to local governments to achieve these changes.

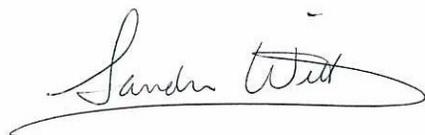
#### **5. Continue and improve public engagement in this process.**

Current adverse environmental conditions that disproportionately impact low income communities of color, and the resulting health inequities, are too often an indelible reflection of the way decision-making power is shared with these communities. Historical exclusion from decision-making venues has resulted in communities of color and low-income communities that are disproportionately burdened by an abundance of environmental hazards, including toxin-emitting power plants and other sources of noxious pollution. Decision-makers can begin to correct the ill health effects of systematic injustice by creating a truly empowering public process. CARB has already made a tremendous effort in this regard through this open comment period and the many community forums for feedback. We ask that you continue to create opportunities for meaningful engagement in this process as it moves forward into implementation and evaluation.

Thank you for your hard work on this plan and for your consideration of our comments. The extreme health threats of climate change and pollution facing California’s residents are numerous. Furthermore, in the U.S., low-income people and people of color are at particular risk in part because their health is already disproportionately compromised, they are more likely to be socially isolated, and they command fewer resources to prepare for and respond to extreme weather events. This was seen in the aftermath of Hurricane Katrina and Rita, as well as in the week-long Chicago heat wave of 1995, both of which are examples of extreme weather events that are expected to increase with climate change.

As a result, we must all accept the weight of this public health crisis and use every measure available to ensure that our decisions reduce health risks to the fullest extent possible. It is truly exciting to part of this process as we take bold steps in ensuring the future of our planet and our communities. We submit these comments, and strongly urge you to revise the Climate Change Scoping Plan accordingly, to ensure that the final product demonstrates California’s strong commitment to reducing health inequities at the same time as reducing global warming and wide-spread health risks. Thank you again for the opportunity to comment and please contact us with any questions or concerns.

Sincerely,

A handwritten signature in black ink that reads "Sandra Witt". The signature is fluid and cursive, with a long horizontal flourish at the end.

Sandra Witt, MPH, PhD  
Deputy Director of Planning, Policy and Health Equity  
Alameda County Public Health Department

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