

Indoor Air Quality Assessment and health impact with respect to household conditions in urban and rural Lucknow homes

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INTRODUCTION

INDIA AND AIR POLLUTION CRISIS

- **Two thirds** of the **deaths** and lost life years associated with air pollution on a global scale occur in **Asia**.
- About 340 million people are living in cities and by 2030 this is expected to reach 590 million.
- Outdoor air pollution in India contributes to more than **half a million premature deaths** each year at the cost of hundreds of billions of dollars (**Geophysical Research Letters**).
- Four Indian cities Gwalior (2), Allahabad (3), Patna (6) and Raipur (7) figured in the **top seven** most polluted cities in the world (WHO).
- **India** reportedly surpassed China early 2016 in the overall amount of **fine particulate matter** pollution its citizens are exposed to (**Greenpeace**).
- Centre for Science and Environment (CSE), India has declared air pollution as a "**national crisis**".
- The **odd-even scheme** was implemented by Delhi government in first and second fortnights of January and April last year as an "**emergency**" measure to tackle air pollution.
- In some of Indian cities air has particulate matter (PM) levels five times more than safety limits, nearly 52% cities at critical PM10 level (equal or more than 1.5 times limit).
- according to the **State of Global Air Report 2017**, a joint study by the Health Effects Institute in Boston, Massachusetts and the Institute of Health Metrics and Evaluation in Seattle, Washington. More than half of the deaths due to PM exposure occurred in India and China together.

A MATTER OF GRAVE CONCERN FOR NORTHERN INDIA

- Not a single city in northern India meets international air quality standards (**Greenpeace report**) that estimates air pollution kills more than 1 million Indians each year and takes 3% off the country's GDP.

URBAN AREAS



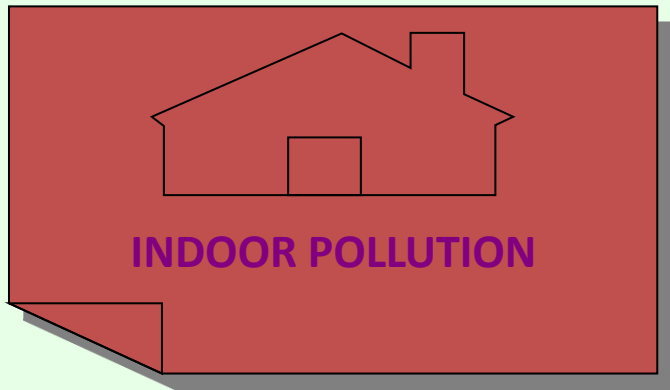
INDIAN RURAL SCENARIO

- **70% of the population** resides in **rural** areas or villages according to World Bank survey done in 2014.
- According to the **2011 Census**, an estimated **142 million** rural homes (almost 85% of total rural households in India) depend on traditional biomass fuel for cooking.
- **45 per cent** of total rural households do not have electricity. They use wood and kerosene to light up homes.
- **1.3 million deaths** are reported in India due to IAP every year from smoke from cooking, heating and lighting activities- WHO
- Biomass is used for cooking in 67 percent of all households in India, including 87 percent of rural households (CENSUS 2011).
- The use of biomass fuel associated with acute lower respiratory tract infection. In children with acute lower respiratory infection, 24.8% had pneumonia, 45.5% had severe pneumonia, and 29.7% had very severe disease.
- A recent Asian emission inventory has reported that the household biomass burning contributes to about 53% of the total PM2.5 emissions in India

RURAL PLEA



INDOOR AIR POLLUTION



US EPA – “Indoor levels of pollutants may be 2-5 times, and occasionally more than 100 times higher than outdoor levels.”

IAP one of the **four most critical global environmental problems** in developing countries (WHO).

In Southeast Asia, Indoor Air Pollution **ranked third** among risk factors in the report of the **Global Burden of Disease**

34 percent of the people who spend most of their time **indoors**, in offices and at homes, have various types of **respiratory diseases** because of the IAP - Artemis hospital

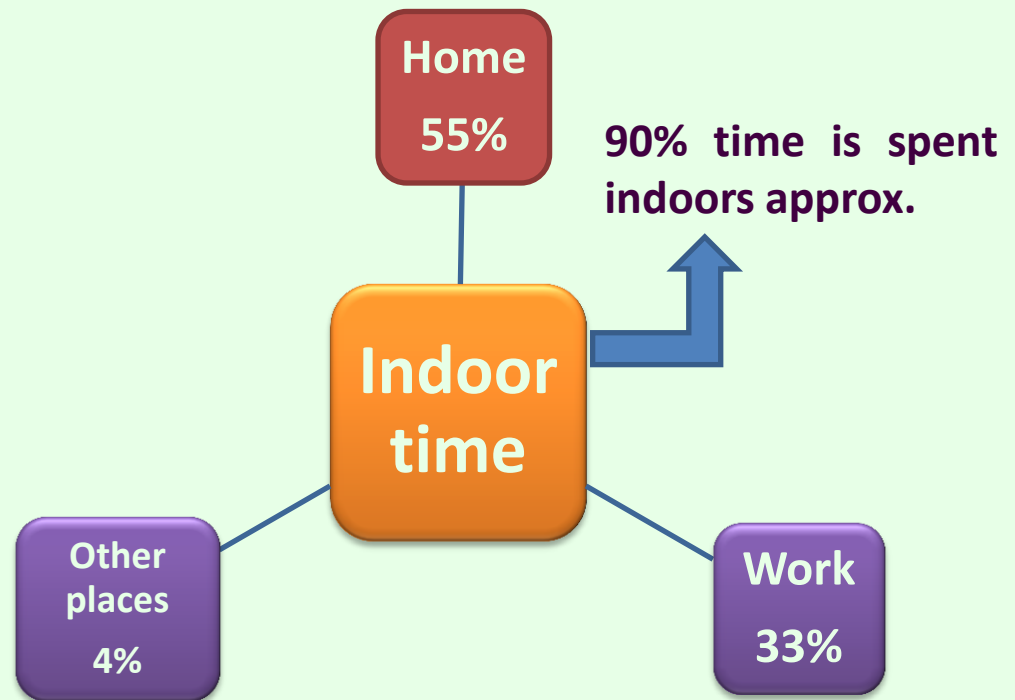
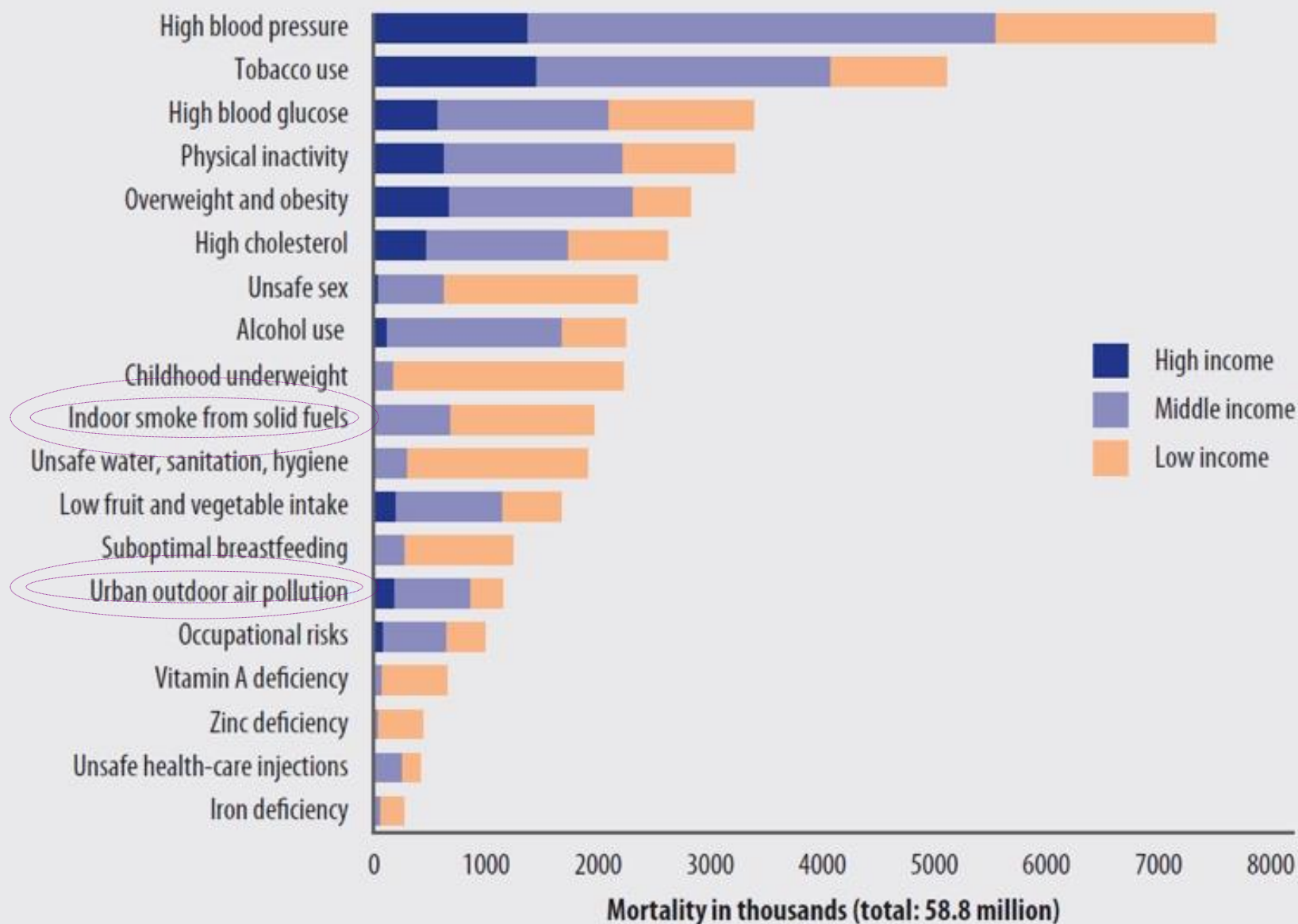
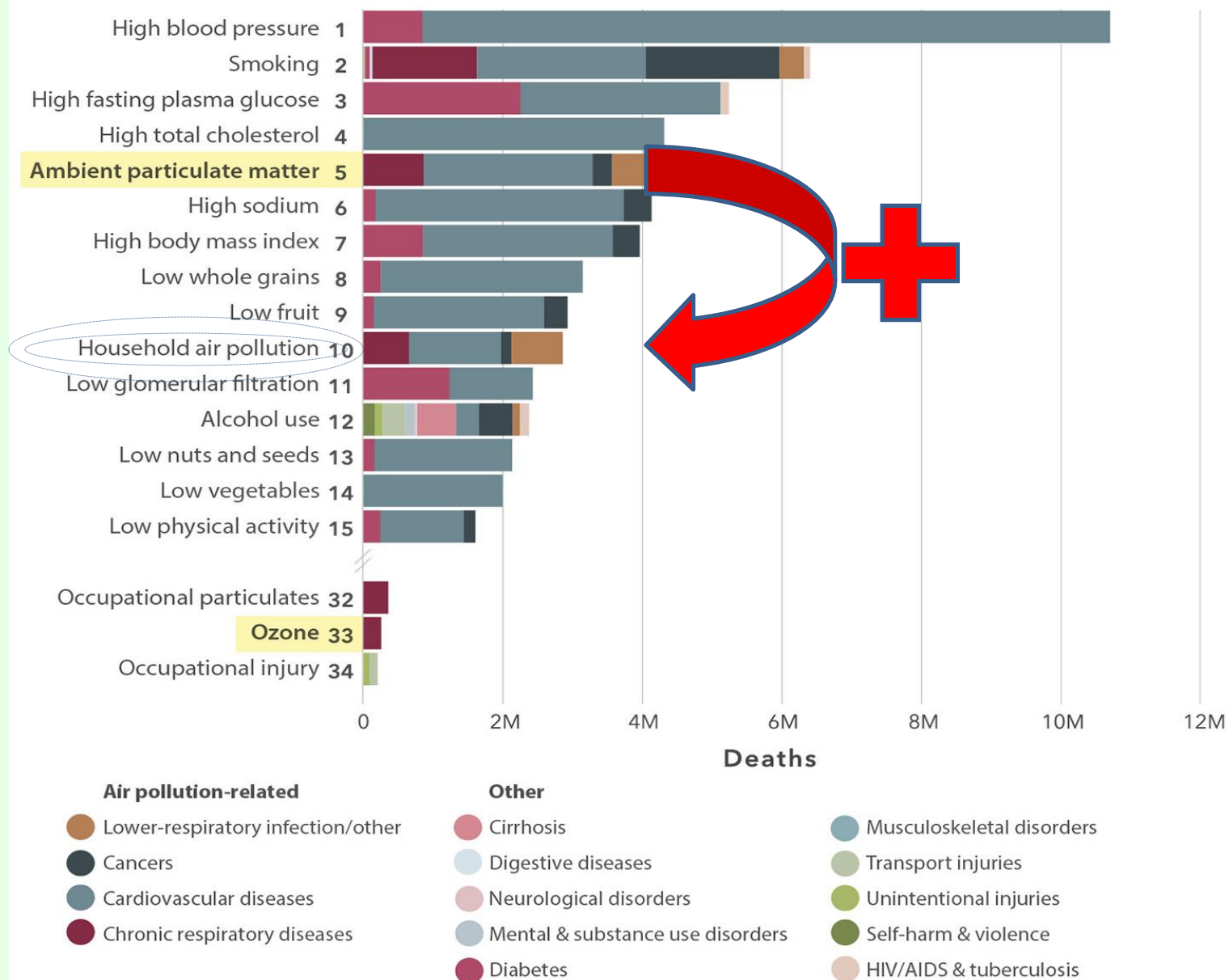


Figure 6: Deaths attributed to 19 leading risk factors, by country income level, 2004.





IHME

KEY FACTORS AFFECTING THE IAQ



Mold growing on a wooden headboard in a room with high humidity.

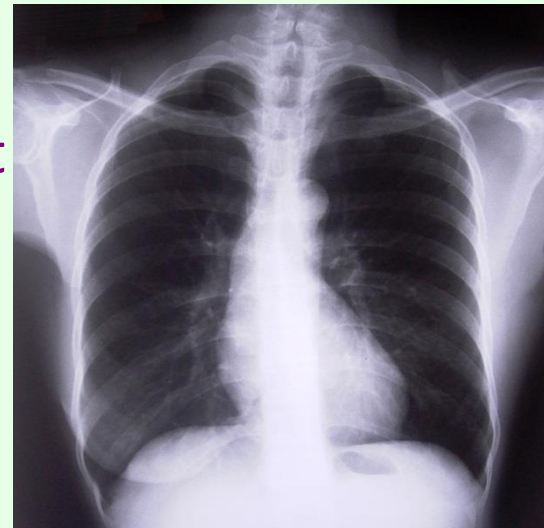


Are we affected by poor IAQ?

- The very young are at risk
 - Lungs are not fully developed
 - Faster breathing rate: more air volume/body weight
- The very old are at risk
 - Undiagnosed lung or heart disease
 - Pollution can exacerbate these conditions
- Persons with chronic illnesses: Respiratory, circulatory, or cardiac diseases
- ✓ **Yes, **EVERYONE!****
- Even healthy persons can be affected when they exercise outdoors, or if the concentration of pollutants is very high indoors

How are we Affected?

- We breathe in 6-10 liters of air per minute (15 -20 m³/d)
 - Harmful chemicals may be absorbed quickly without us being aware
- Air pollutants come into contact first with our respiratory system, so the lungs are most affected due to poor IAQ
- Indoor Air pollution may also affect
 - Heart
 - Circulatory system
 - Immune system



REASON FOR THE STUDY/MOTIVATION

Daily pollution on roads of Urban Lucknow

Occupants exposed to loads of RSPM by heavy Traffic & Road dust.



Increase in Vehicular Rush is the major cause of Pollution in Urban Lucknow



Open garbage burning is one of the major causes of Increased RSPM



pollutants being added to environment by diesel Motors





AIMS & OBJECTIVES

OBJECTIVES

Air Quality monitoring
(November 2014-
October 2015)

Health Risk
Assessment

AQI calculation

- SO_2 , NO_2 , CO_2 , CO , NH_3 and RSPM (PM_{10} and $\text{PM}_{2.5}$) IN URBAN AND RURAL ENVIRONMENTS
- Full day variation was studied in winter season
- Health risk assessment with inhalation of RSPM was done separately for adults and children using **Lipmann's method**
- was calculated for particulate concentration

LUCKNOW- THE CITY OF CULTURAL HERITAGE

- Lucknow city is located at **26°51'N and 80°55'E**.
- According to the Census of India population of Lucknow is 2815033 and present area (2011) of Lucknow is envisaged to be 310 sq km.
- The second largest city of North India and traditionally known for its rich cultural heritage.
- Recently added in the central government's list of "**Smart cities**" for the improving life style pattern.
- Metro rail project and a full fledged international cricket stadium are in the offing.
- The major industries in the Lucknow Urban Agglomeration include aeronautics, machine tools, distillery chemicals, furniture and chicken embroidery.
- It is among the top 15 cities of India by **GDP**
- Four **Indian National Highways** originate at Lucknow's Hazratganj intersection
- Multiple modes of public transport are available such as taxis, city buses, cycle, rickshaws ,auto rickshaws and compressed natural gas (CNG) low floor buses with and without air conditioning.

IS THE AIR OF CITY OF NAWABS SAFE FOR BREATHING?

- According to WHO, Northern cities **Allahabad, Kanpur and Lucknow-capital city of Uttar Pradesh** are some of the main offenders.
- About **1552695 (2014)** registered vehicles plying on the roads of city as per Road Transport Office, Lucknow records.
- AQI Index of Lucknow on two consecutive days i.e. **10th-11th December, 2015** projected it as the most polluted Indian city putting it in “**severe**” category.
- High levels of **PM_{2.5}** were observed in the month of December last year.
- The Central Pollution Control Board’s report on the **air quality index** has highlighted that conditions in **Lucknow** not only turned bad during 2015-16, but also went **beyond the safe limits**.
- In **May, 2016** the last leg of a workshop series (in collaboration with Research Triangle Institute USA and IIT Delhi) on **combating air pollution in Northern India**, was held in Lucknow with a special closing ceremony.

Global pollution: Top 20 cities



Lucknow at 18th spot

- Half of the world's 20 most polluted cities are in India, said a World Health Organization report, June 2016.
- Gwalior in Madhya Pradesh and Allahabad in Uttar Pradesh take the second and third spot, respectively.
- Capital City of Uttar Pradesh, Lucknow features at 18th Place.



Rural Sites- Arjunpur, Malihabad, Gaura, Kakori, Bijnour

INSTRUMENTATION

Contaminant	Concentration in air		Principal	Instrument used for measurement
	Outdoor	Indoor		
CO	5000	1000	Non Dispersive Infra-Red (NDIR)	YES-205 multigas monitor
CO ₂	02	01	Non Dispersive Infra-Red (NDIR)	YES-206 Falcon IAQ monitor
SO ₂	80	40	Improved West and Gaeke method	Handy Sampler
NO ₂	80	40	Jacob and Hochheiser modified (NaOH-NaAsO ₂) method	Handy Sampler
PM 2.5	60	25	Gravimetric	APM 550
PM 10	100	50	Gravimetric	APM 550

A →



B ↓



C →

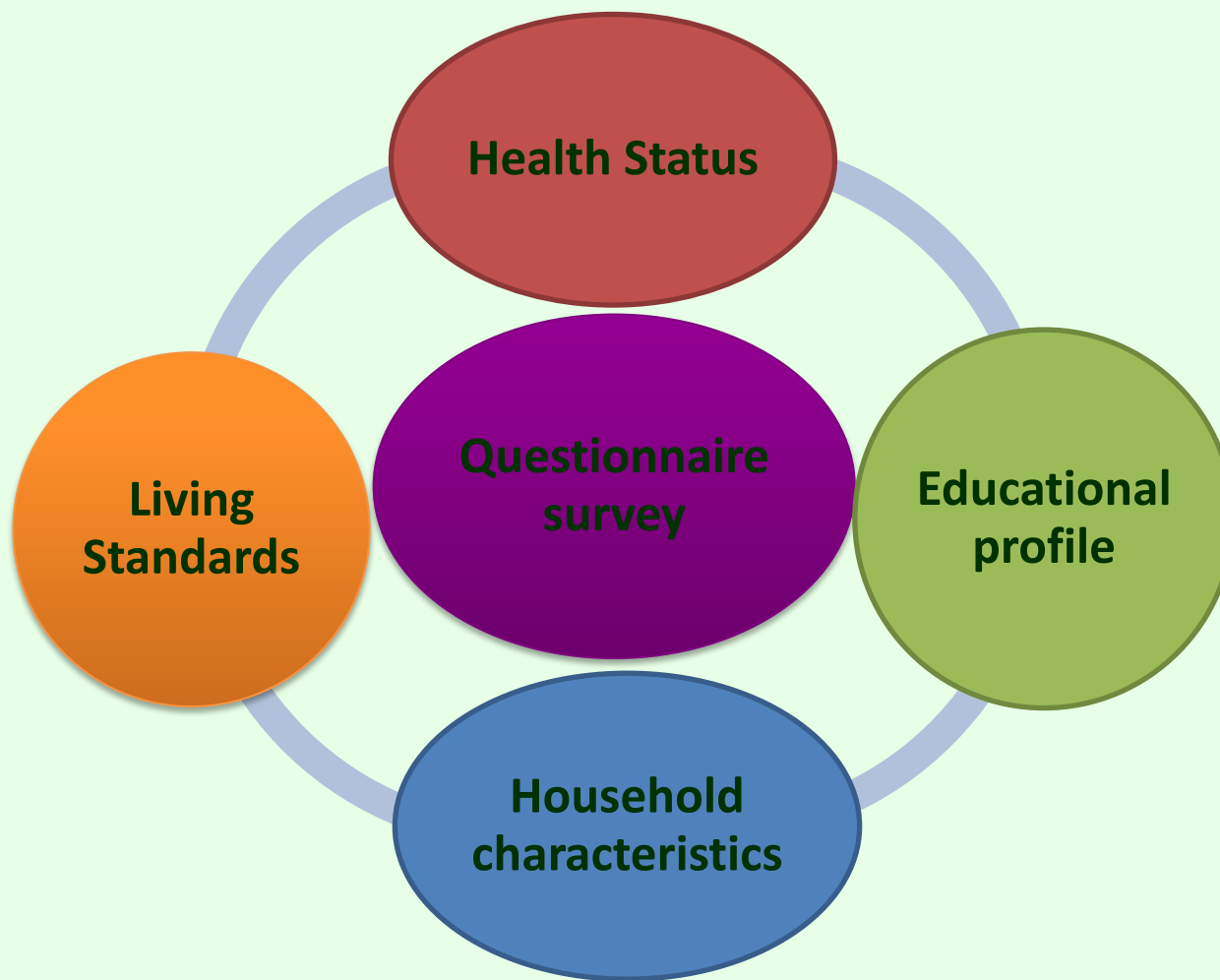


PRINCIPALS FOR USED TECHNIQUES

A= YES 205- Multigas Monitor, B=Handy Sampler, C= APM 550- Envirotech

QUALITY ASSURANCE

- Quality Assurance: In order to insure the validity of the data generated from the study and to meet the data quality objectives set forth by the study it is imperative to establish quality assurance and quality control measures in each aspect of the study.
- Every instrument was **calibrated** before and at the end of every monitoring period or 07 days whichever was less.
- Daily flow rate calculations (gas meter reading/ timer reading) of APM550 were made to make sure that the fluctuations in flow rate were within the range.
- Filter in the wind impactor was changed after 72 h of sampling
- The filter was immersed in 3-4 drops of silicon oil at regular intervals as per the need.



Survey was done in two phases

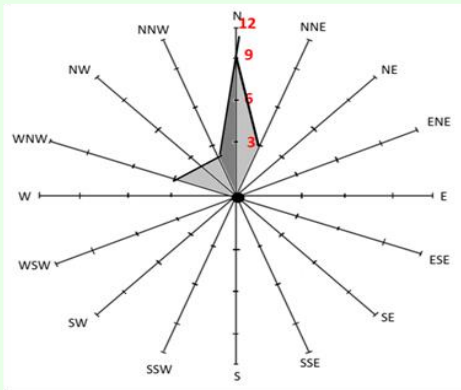
Survey results formed a basis of **HOUSE SELECTION**

Hospitals

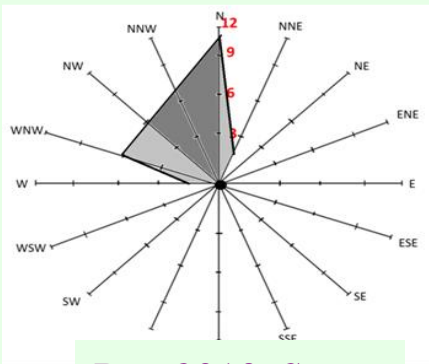
Houses



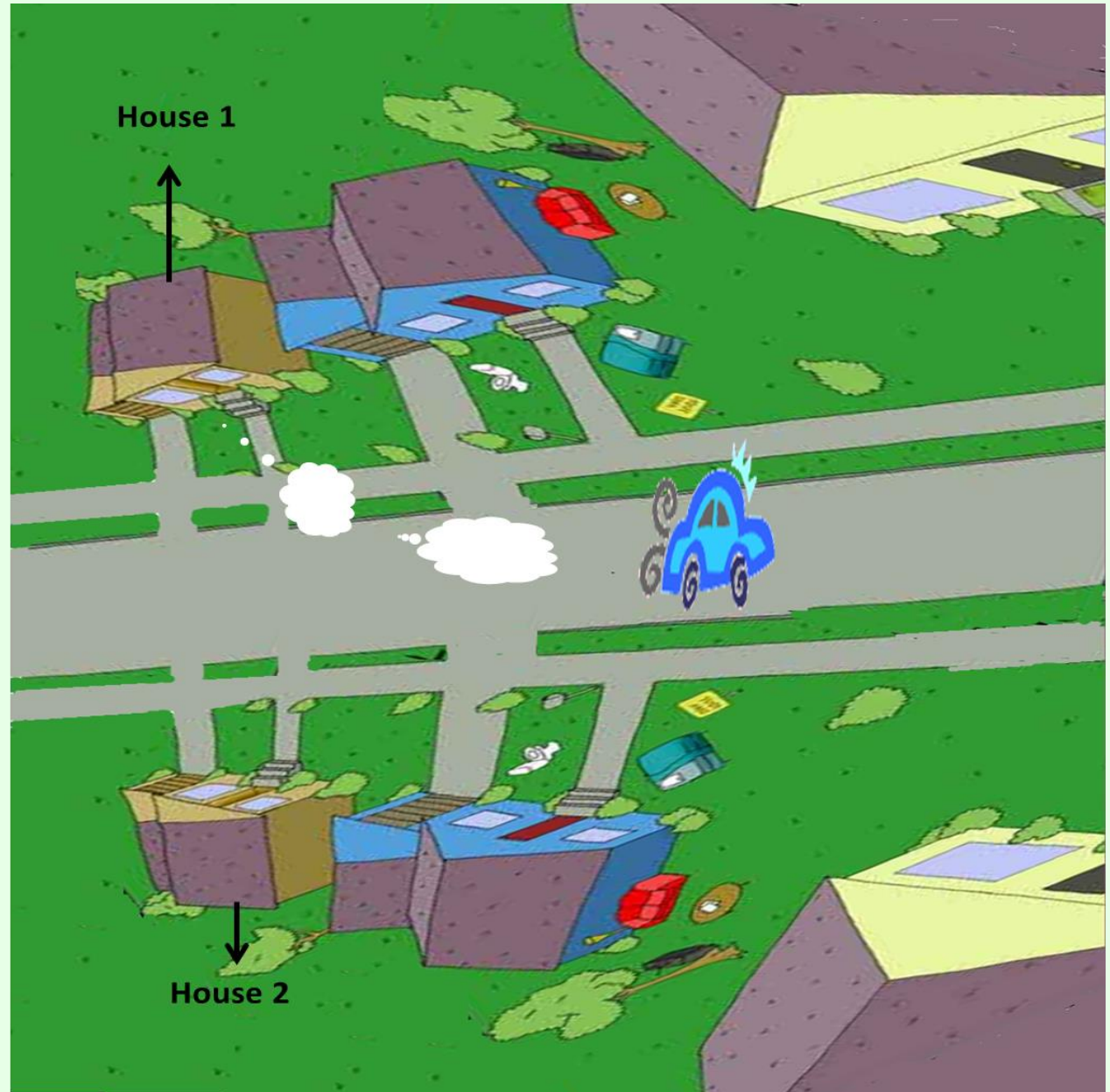
The Meteorological data was considered. The Wind profile along with the criteria for house selection is shown.



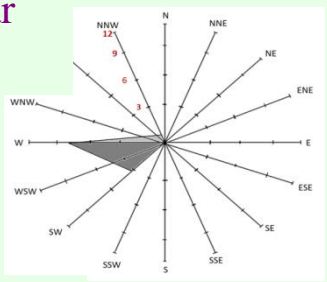
Nov 2013



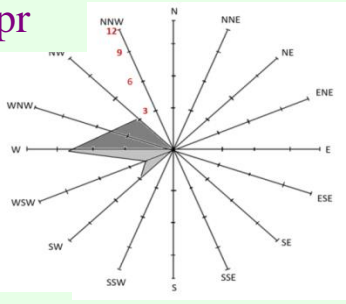
Dec 2013, Sep
2013



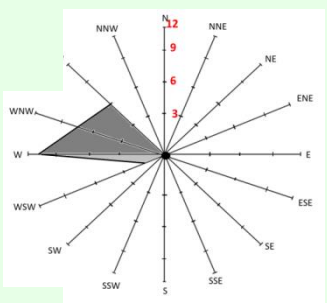
Jan, Mar
2013



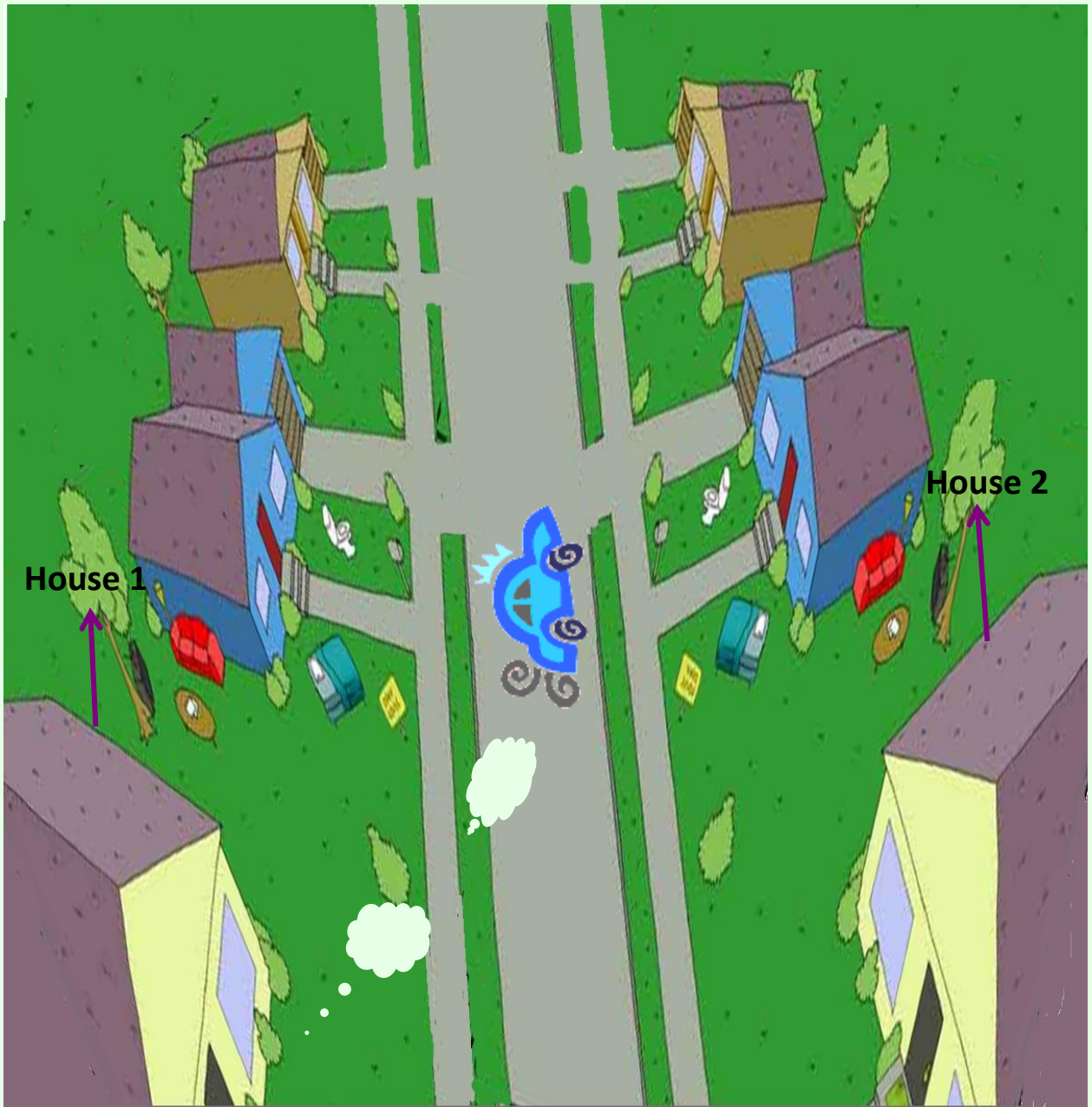
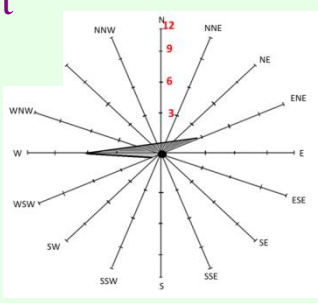
Feb, Apr



Jun, Jul
2013



Aug, Oct
2013



RESULTS AND DISCUSSION

AVERAGE YEARLY CONCENTRATION OF POLLUTANTS IN DIFFERENT ENVIRONMENTS

NOVEMBER 2014-OCTOBER 2015

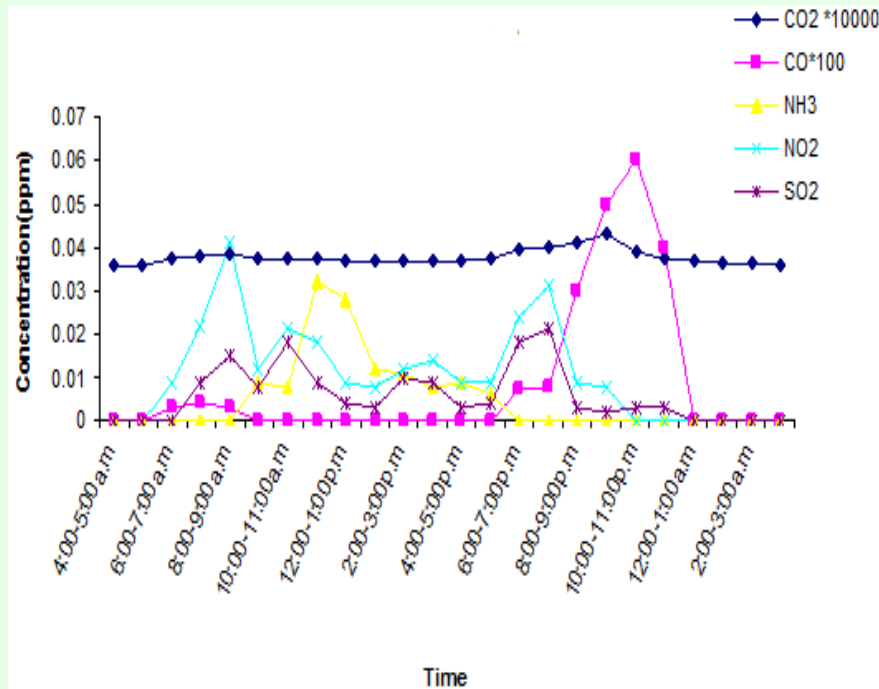
Pollutant	Summer Season	Rainy Season	Winter Season	Pollutant	Summer Season	Rainy Season	Winter Season
CO (ppm)	0.3±0.5	0.5±0.1	0.8±0.14	CO (ppm)	BDL	0.85±1.0	1.90±0.52
CO ₂ (ppm)	510±22	565±2	498±6	CO ₂ (ppm)	245±4	326±68	492±16
SO ₂ (ppm)	0.0367±0.002	0.0217±0.11	0.014±0.082	SO ₂ (ppm)	0.033±0.003	0.020±0.065	0.020±0.03
NO ₂ (ppm)	0.049±0.007	0.024±0.021	0.011±0.017	NO ₂ (ppm)	0.045±0.009	0.026±0.013	0.022±0.09
NH ₃ (ppm)	0.010±0.002	0.047±0.04	0.020±0.04	NH ₃ (ppm)	0.014±0.006	0.07±0.02	0.025±0.06
H ₂ S (ppm)	BDL	0.01±0.04	0.010±0.03	H ₂ S (ppm)	BDL	0.03±0.06	0.013±0.06
PM ₁₀ (µg/m ³)	215±36	145±40	280±19	PM ₁₀ (µg/m ³)	87±11	264±26	315±24
PM _{2.5} (µg/m ³)	160±13	84±9	85±18	PM _{2.5} (µg/m ³)	51±0.45	113±17	190±65

Urban

Rural

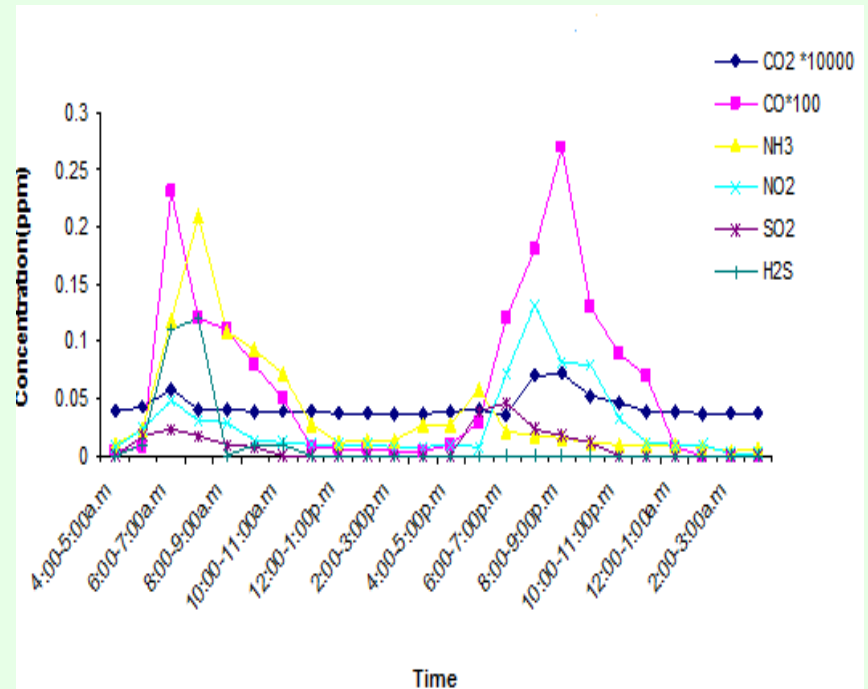
- Mean concentration of PM₁₀ and PM_{2.5}, at both sites (rural and urban) were higher than the WHO Indoor Air Quality Standards.
- Mean concentration of gaseous pollutants were within the threshold limit
- Comparatively lesser concentrations of pollutants in rainy season were attributed to wash out effect
- Winter season was more risky for rural population

FULL DAY VARIATION OF GASES IN WINTERS



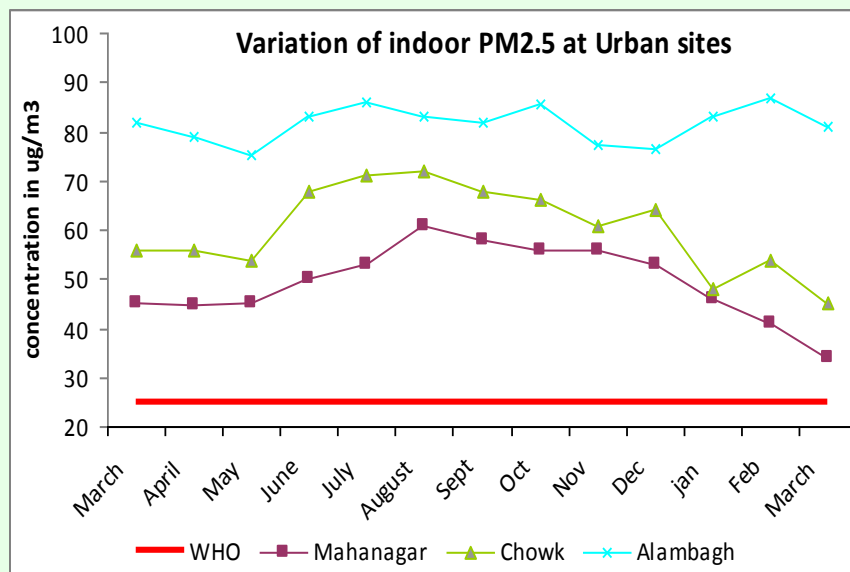
Urban

- ✓ NO_2 and SO_2 are dominant ranging between 0.1 to 0.8ppm (average 0.29ppm) and 0.1 to 0.5ppm (average 0.2) respectively.
- ✓ Constant indoor CO_2 concentration obtained

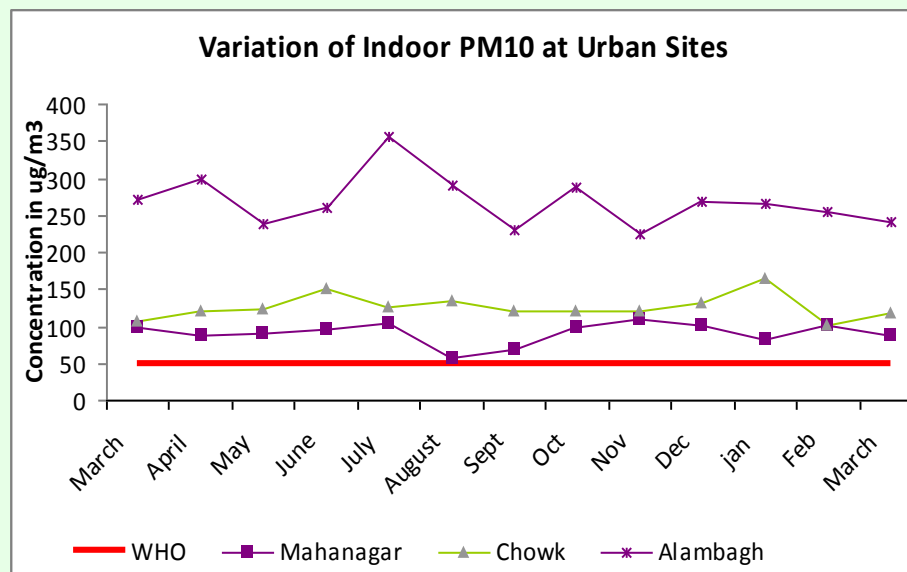


Rural

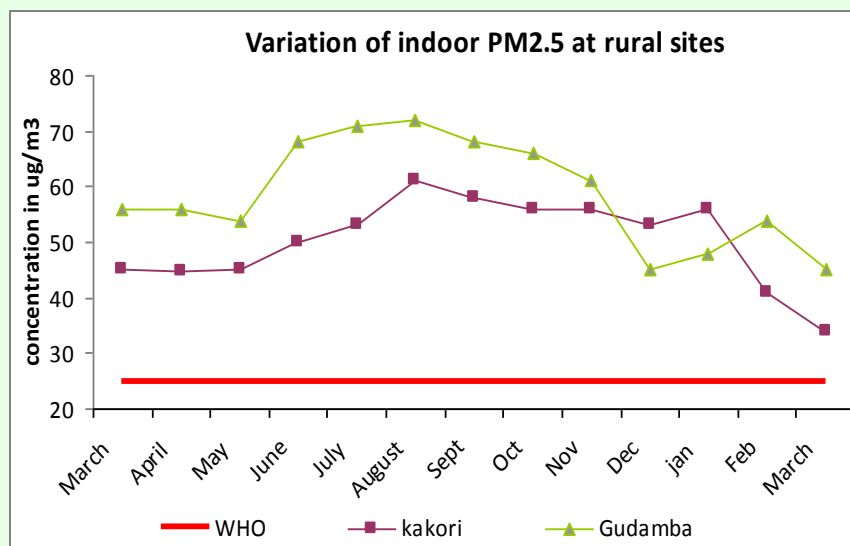
- ✓ CO_2 ranged from 358 to 628ppm with an average of 440ppm
- ✓ Indoor CO ranged from 0.3 to 2.7ppm with an average of 1.2ppm
- ✓ H_2S also has significant peaks
- ✓ Crude fuel consumption increased to combat cold home conditions.



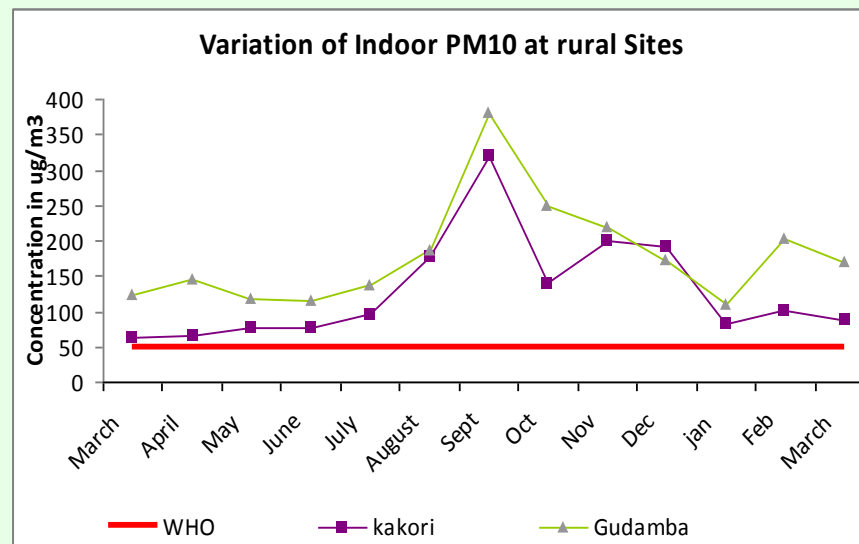
(a)



(b)



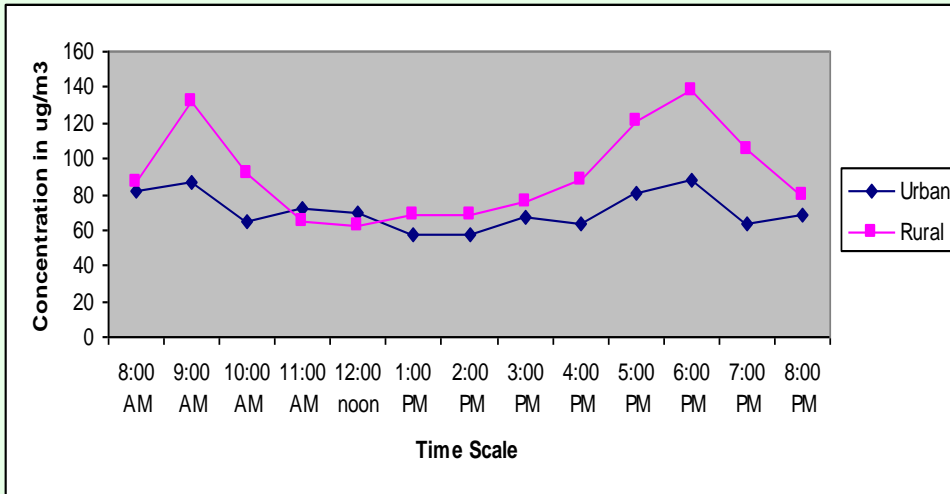
(c)



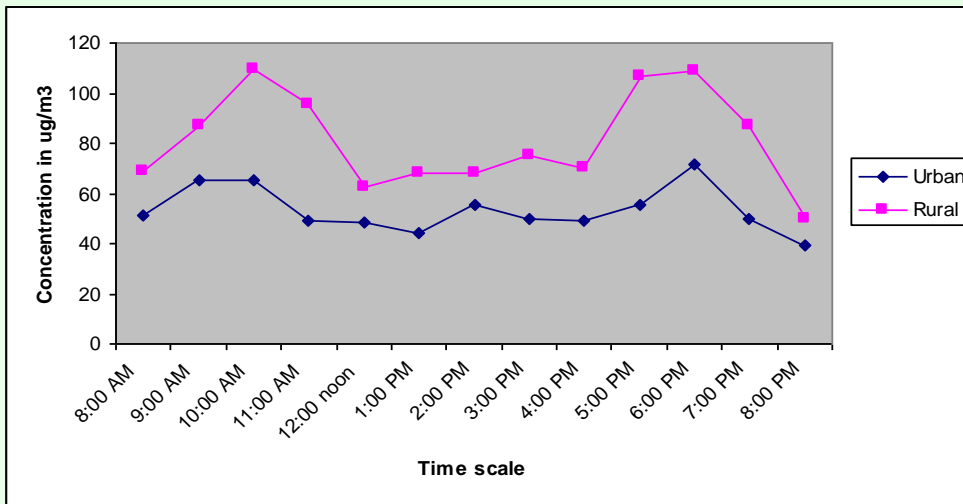
(d)

INDOOR VARIATION OF PM 2.5 AND PM 10 IN URBAN AND RURAL MICROENVIRONMENTS

FULL DAY VARIATION OF PARTICULATE MATTER



(a)



(b)

Full day variation of (a) PM₁₀ and (b) PM_{12.5} at urban and rural sites

- PM₁₀ and PM_{2.5} were found to be higher in rural indoor environment as compared to urban environment
- Concentration very dangerous in winter season
- Highest values being obtained at day time when cooking was in progress
- Use of solid fuel like wood/ coal/ cow dung for cooking and heating was related with the high particulate emission indoors
- In urban indoor environment major source of particulate emission was vehicular emission

CALCULATED INHALATION RATE OF PARTICULATE MATTER

Pollutant	Summer Season		Rainy Season		Winter Season	
	Adult (70 kg)	Child (2year old)	Adult (70 kg)	Child (2year old)	Adult (70 kg)	Child (2year old)
PM ₁₀	490.27	139.5	439.40	137.6	478.6	165.3
PM _{2.5}	326.19	77.1	325.7	81.45	316.36	89.8

For adults inhalation rate of RSPM was highest in summer season mainly due to infiltration.

Urban

	Summer Season		Rainy Season		Winter Season	
Pollutant	Adult (70 kg)	Child (2year old)	Adult (70 kg)	Child (2year old)	Adult (70 kg)	Child (2year old)
PM ₁₀	473.3	127.5	432.30	129.2	503.22	187.4
PM _{2.5}	267.4	59.4	301.2	71.2	345.49	102.3

In winter season inhalation rate of RSPM is more in rural homes due to excessive crude fuel combustion

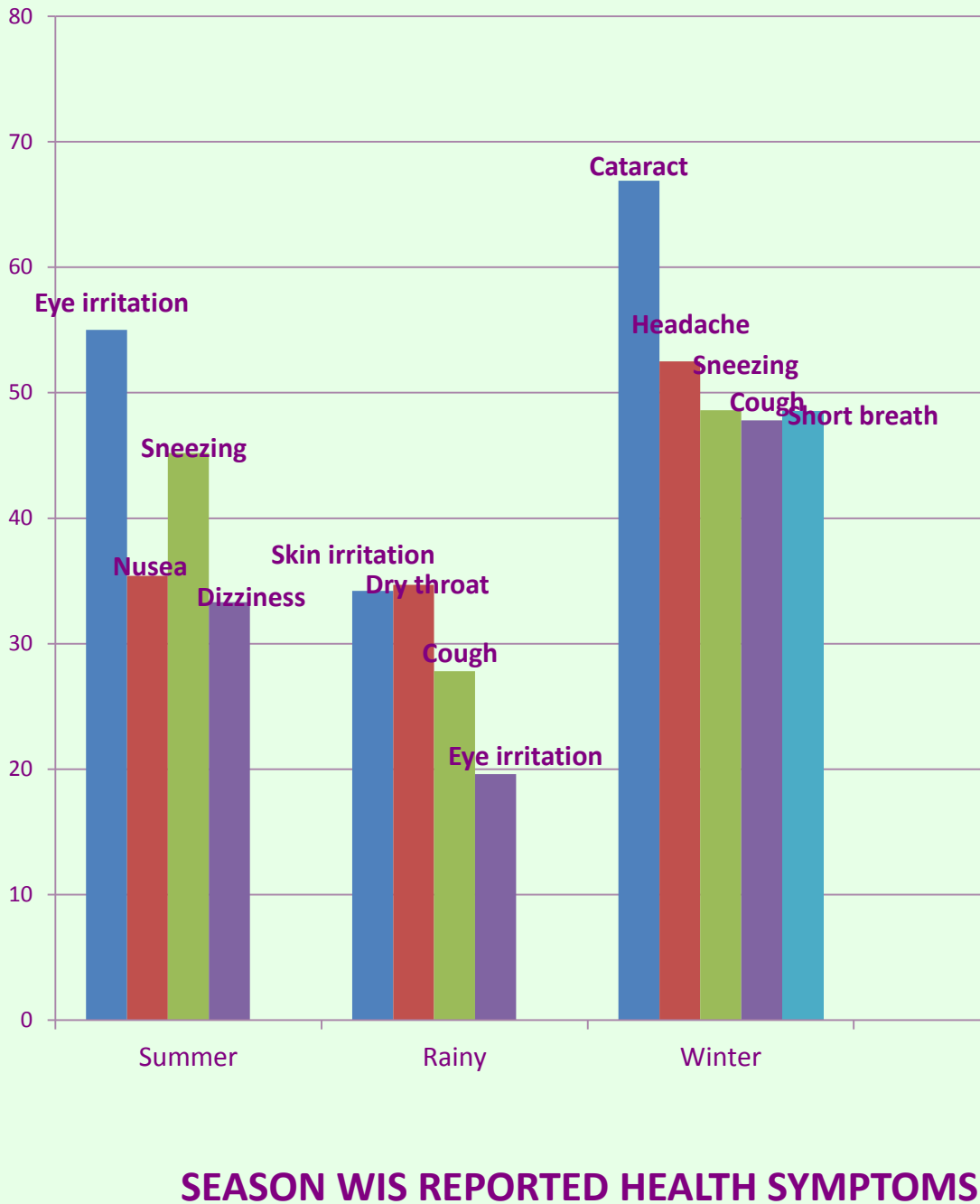
Rural

Intake= µg/day

REPORTED HEALTH SYMPTOMS

Health problem	Summer (%)*	Winter (%)*	Rainy (%)*
Eye irritation	76 (55.0)	35 (25.4)	27 (19.6)
Dry throat	15 (12.7)	62 (52.6)	41 (34.7)
Head ache	51 (36.7)	73 (52.5)	15(10.8)
Sneezing	66 (45.2)	71(48.6)	9 (6.2)
Skin irritation	14 (12.6)	59 (53.1)	38 (34.2)
Shortness of breath	29 (41.4)	34 (48.5)	7 (10.0)
Cough	28 (24.3)	55 (47.8)	32 (27.8)
Dizziness	47 (33.3)	74 (52.3)	20 (14.2)
Nausea	51 (35.4)	75 (52.1)	18 (12.5)
Cataract	36 (25.9)	93 (66.9)	10 (7.2)

- A total of 120 urban and 125 rural houses were surveyed and visits to top medical colleges were made to register symptoms related to poor IAQ.
- Complaints of headache, sneezing, skin irritation, shortness of breath, cough, dizziness, nausea, cataract etc. were most **prevalent in winters** which may be linked to the increase inhalation of **PM₁₀ and PM_{2.5}** especially in rural dwellers
- In winter season, due to **inadequate ventilation** accumulation of pollutants increased in rural homes
- **Poor drainage** conditions exacerbated the situation further
- Women, children and elderly are at major risk



Swachh Bharat should include Swachh air

A roadmap for cleaner urban centres can be merged into the smart cities framework



DEATH BY BREATH
ANUP SINGH'S SERIES
PART-8

PHOTO: PANKAJ



ANUP SINGH'S SERIES

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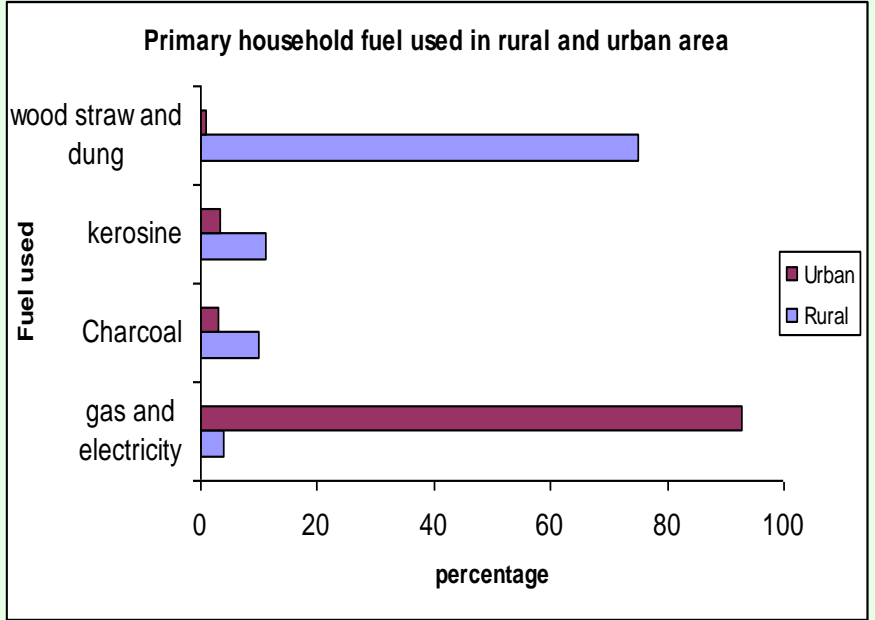
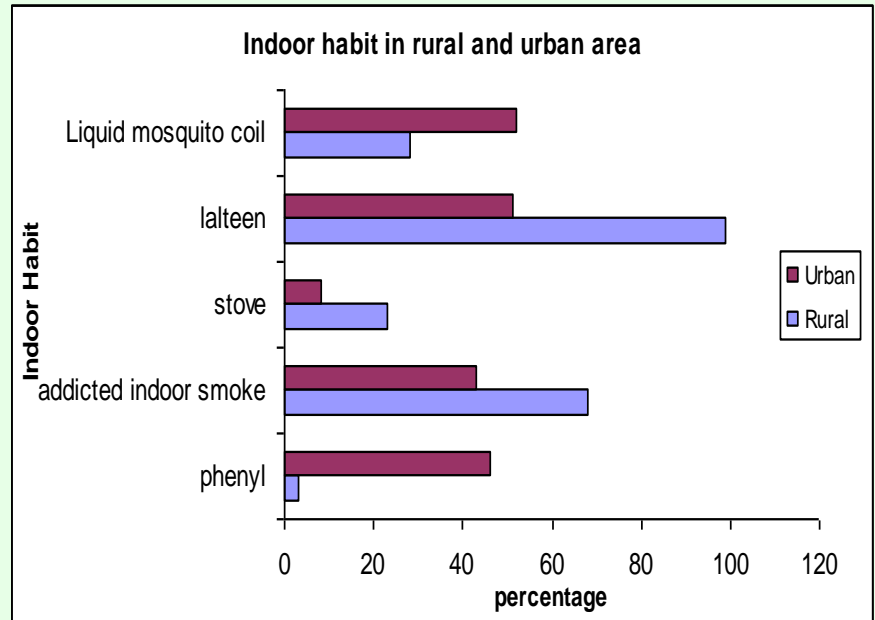
ANUP SINGH'S SERIES

PART-8

PHOTO: PANKAJ

ANUP SINGH'S SERIES

QUESTIONNAIRE FINDINGS



URBAN DWELLINGS

CHARACTERISTICS	INDOOR HABITS	OUTDOOR CHARACTERISTICS
Leaky roofs	Cooking/ indoor smoke	Heavy Traffic flow
Broken doors and windows	Smoking	Garbage burning
Peeling paint and wallpaper	Excessive Incense burning	Livestock in vicinity
Crack/holes in plaster	Sweeping	Poor roads conditions
Carpeted floor	Mosquito coil burning	Mining activities
Natural ventilation	use of deodorizers	Construction work

RURAL DWELLINGS

CHARACTERISTICS	INDOOR HABITS	OUTDOOR CHARACTERISTICS
Kuchha, semi pacca houses	Cooking on earthen chullahs	Moderate Traffic flow
Poor drainage system	Cow dung burning	Garbage burning
No specific space for cooking	Sweeping	Muddy narrow roads
Improper ventilation	Use of beedis, chillums	Abundant greenry
Poor sanitary conditions	Incense burning	Wind mills
Heaps of cow dungs	Wood stacking	Agricultural fields

ARE THE RURAL DWELLERS ENERGY POOR?

Characteristic	Category	Percentage
Stove used for cooking	Traditional	96.62
	Modern	3.38
Source of energy	Firewood/coal/cow dung	65.80
	Kerosene	23.45
	Gas and Electricity	10.75
Appliances used for house heating	Traditional	68.30
	Modern appliances	31.70
Electricity connection	Yes	43.80
	No	56.20
Use of electricity in house	For lighting	76.33
	For warming/heating space	23.67
Willing to change from traditional to modern energy sources	Yes	58.65
	No	41.35

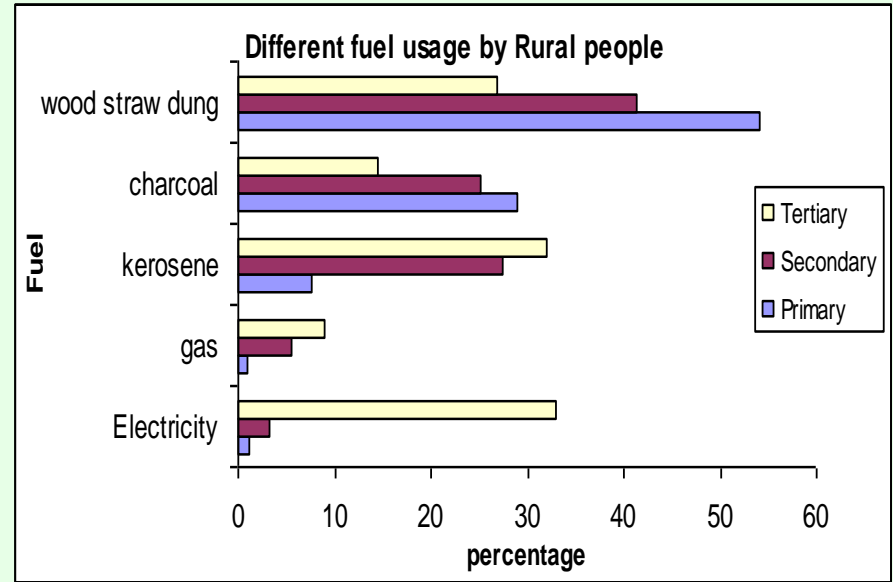
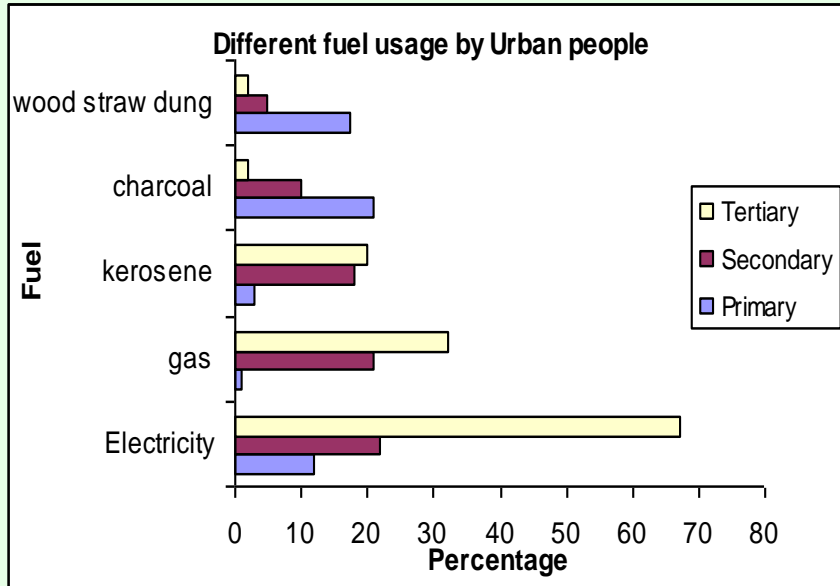
About 96% rural population used earthen stoves for cooking which are highly polluting.

Only 37.8% of the population availed electricity connection

Use of BIOMASS FUEL was prevalent because of no monetary value

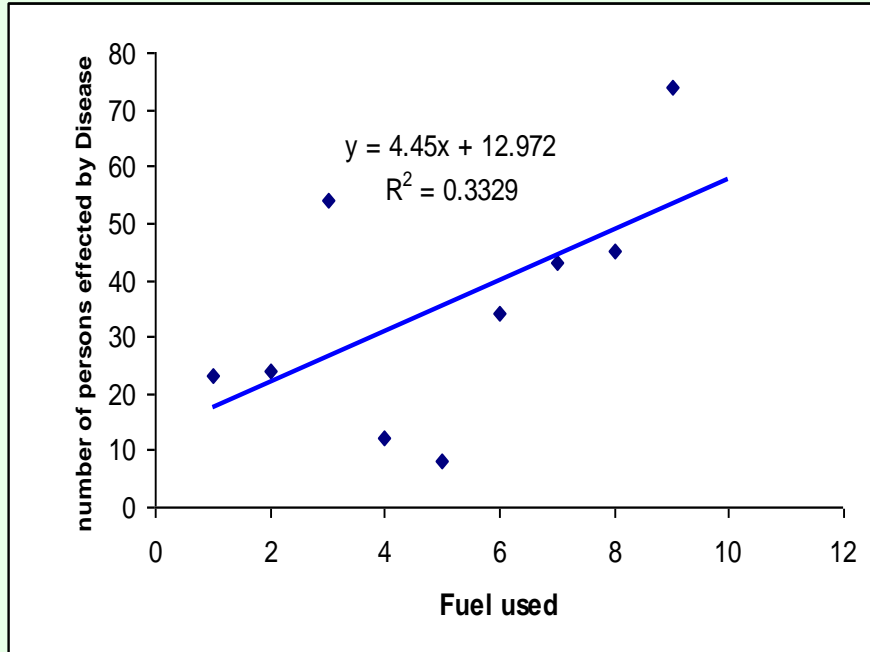


EDUCATIONAL STATUS AND FUEL CHOICE

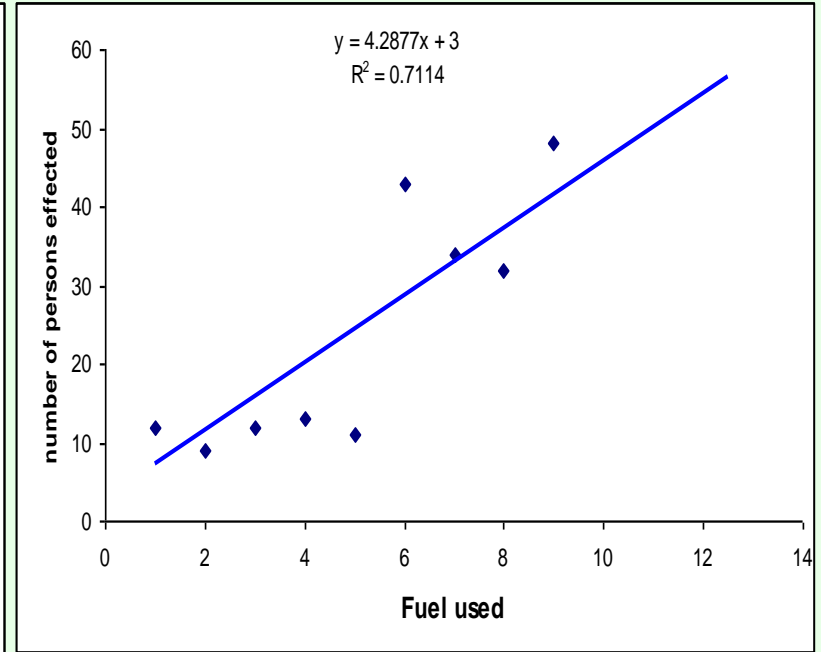


- In urban areas use of low polluting fuel was more than in rural areas
- Rural people having no formal education or with primary education are the ones using maximum percentage of solid fuels
- Hence the educational level directly influences the living standards

OVERALL HEALTH IMPACT OF BIOMASS FUEL USAGE IN RURAL INDOOR ENVIRONMENT



Regression line establishing a relationship between number of persons affected by disease and type of fuel used at urban sites



Regression line establishing a relationship between the number of people affected by diseases and type of fuel used at rural sites

- Statistical analysis established a between respiratory diseases faced by the rural population and the type of solid/liquid fuel used.
- Such positive extrapolation was not found in case of urban areas
- Logistic regression was applied to show association between different variables.

AIR QUALITY INDEX

- The AQI focuses on health effects experienced as a function of time (i.e. few hours or days) after breathing polluted air.
- **AQI for RSPM** (PM_{10} & $PM_{2.5}$) was calculated as other pollutants were within the threshold limits.
- **Highest** value of AQI recorded in **URBAN ENVIRONMENT- Chowk-302, Alambagh-209**
- Values at rural sites were in the range of 150 to 200

AQI VALUES AND ASSOCIATED HEALTH EFFECTS

Descriptor	AQI	Risk Message
Good	0 - 50	No message
Moderate	51 - 100	Unusually sensitive individuals (ozone)
Unhealthy for Sensitive Groups	101 - 150	Identifiable groups at risk – different groups for different pollutants
Unhealthy	151 - 200	General public at risk; groups at greater risk
Very Unhealthy	201 - 300	General public at greater risk; groups at greatest risk

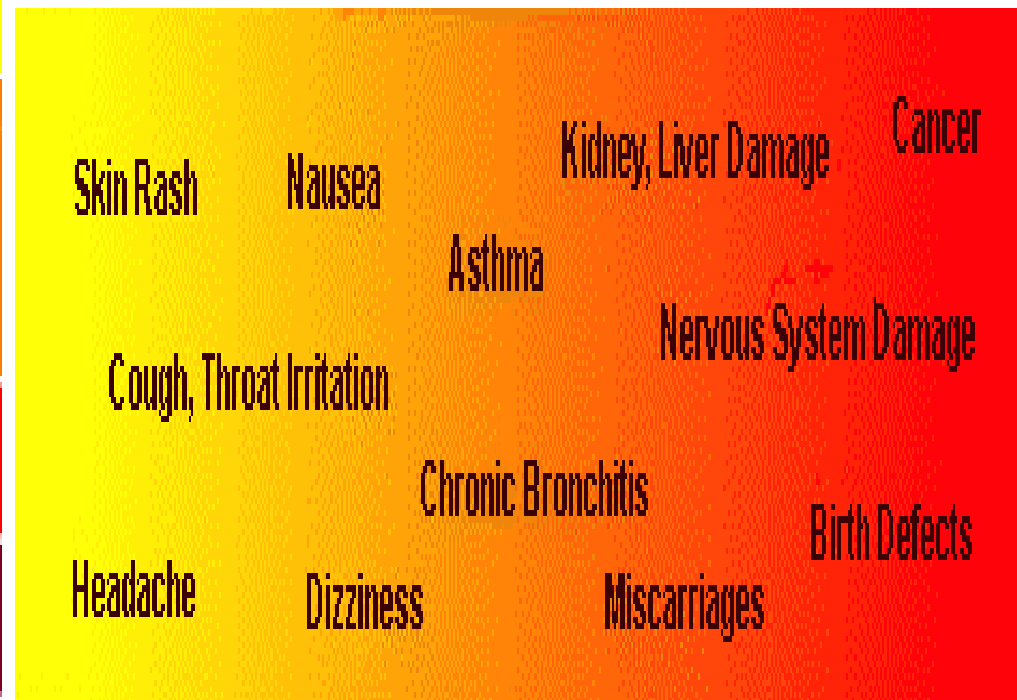
Less Serious

reversible
not debilitating
not life-threatening



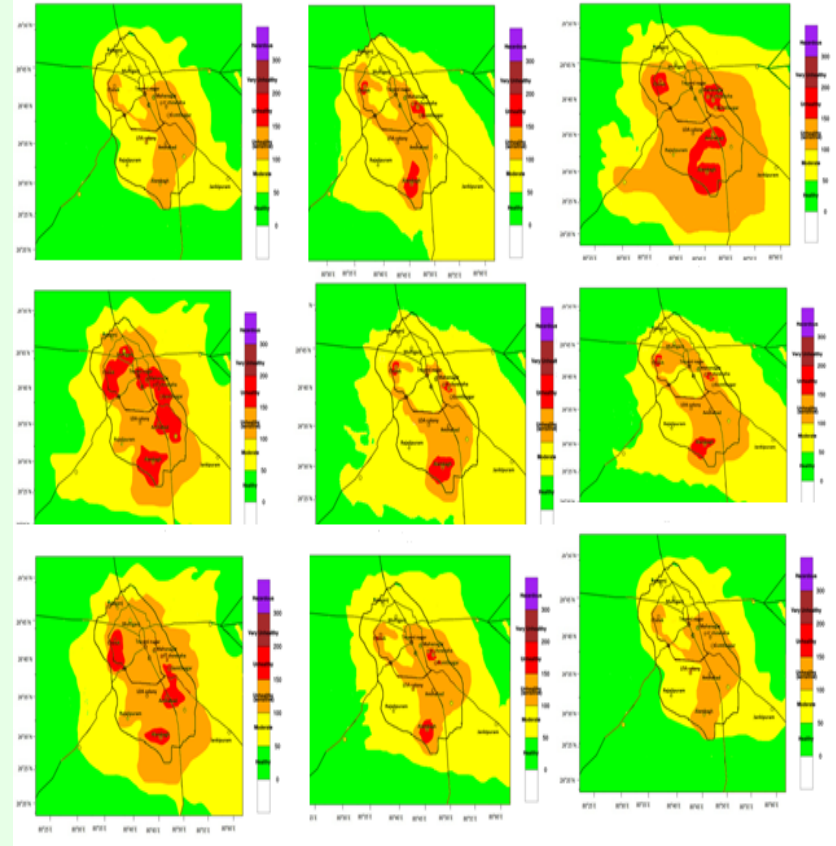
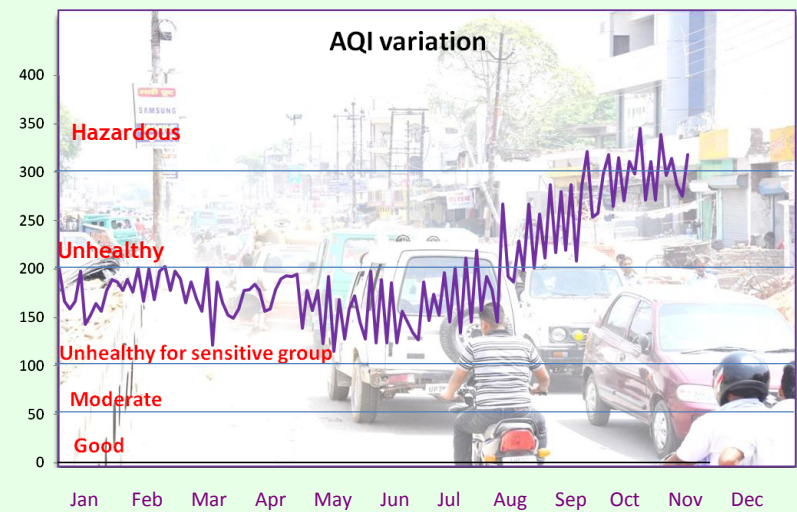
More Serious

irreversible
debilitating
life-threatening



Pollutant	Microenvironment	Summer Season	Rainy Season	Winter season
PM 10	Well Planned	147	134.5	193
	Densely Populated	185	170	205
	Roadside	218	165	215.5

AQI PREDICTION WITH RESPECT TO PM_{10} IN URBAN MICROENVIRONMENT



MONITORING IN URBAN ENVIRONMENT



MONITORING SET UP-RURAL



CONCLUSIONS

- **AVERAGE CONCENTRATIONS OF PM₁₀ AND PM_{2.5} WERE HIGHER THAN THE WHO LIMITS AND HIGHEST VALUES WERE OBTAINED IN RURAL HOUSES.**
- **SO₂, NO₂, NH₃, H₂S, CO AND CO₂ WERE BELOW PERMISSIBLE LIMIT OF WHO IN BOTH URBAN AND RURAL HOUSES.**
- **FULL DAY VARIATION SHOWS SIGNIFICANT CHANGE IN RURAL ENVIRONMENT DUE TO EXCESS CONSUMPTION OF POLLUTING FUEL.**
- **INDOOR AIR QUALITY IN RURAL HOUSES IS ALSO VERY ALARMING**
- **USE OF SOLID FUEL AND LACK OF FORMAL EDUCATION SIGNIFICANT FACTORS RESPONSIBLE FOR THE DETERIORATING INDOOR AIR QUALITY IN RURAL HOUSEHOLDS.**
- **WOMEN ARE AT GREATER RISK TO RESPIRATORY TROUBLES**
- **LOW VENTILATION RATES ENHANCE THE RISK OF TRAPPING OF RSPM INDOORS FOR A LONGER TIME.**
- **STANDARDS OF LIVING DIRECTLY RELATE TO INDOOR AIR QUALITY**
- **EXPOSED POPULATION WAS LARGELY UNAWARE ABOUT THE HAZARDS ASSOCIATED WITH POOR AIR QUALITY.**

Is the air in your home clean?

Study shows heavy RSPM presence, concentration of metals in air of many city homes

Hindustan Times (Lucknow) 16 Apr 2015 HT

Correspondent
ko if: hasImage

Many people have inadequate knowledge about pollution sources like furnishing materials, moulds and bacteria from dampness, animal hair and other items.

/ko
The launch of air quality index by Prime Minister Narendra Modi has once again highlighted the problem of the ever increasing air pollution in India. And the major cause of concern is that apart from outdoor pollution, the air quality within the confines of one's house is also poor.

Alfred Lawrence, assistant professor, department of chemistry, Isabella Thoburn College conducted a study on indoor air quality of urban Lucknow homes for a period of two years--- 2012-2014. The study highlighted that indoor pollution was a common phenomenon in houses, though people remained unaware of it...



Urban air pollution & its assessment in Lucknow City — The second largest city of North India

Alfred Lawrence^{a,*}, Nishat Fatima

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<https://doi.org/10.1016/j.scitotenv.2013.10.106>

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Highlights

- Indoor air quality is an issue of major concern in developing countries like India.
- The study deals with urban pollution monitoring.
- The work was done in Lucknow City, 3rd most polluted city of India according to WHO.
- By calculating indoor/outdoor ratio we found which one of both is dominant.
- I/O correlation was established and the effects of IAQ on human health were studied.

Abstract

Investigations were carried out during the summer season (March–June 2012) to observe the quality of indoor air by monitoring the levels of some selected air pollutants at 15 different houses covering the urban areas of Lucknow City. Concentrations of CO₂, CO, PM₁₀, PM_{2.5}, SO₂ and NO₂ were monitored indoors and outdoors simultaneously and I/O ratios were calculated. Regression analysis for I/O relationship was performed to assess the contribution of outdoor sources to indoor air quality. Air Quality Index (AQI) for indoor air was also calculated to have an idea about the quality of indoor air and their health effects. In collaboration with the medical college doctors of the city, we surveyed 197 persons to find out different diseases/symptoms being faced due to indoor air pollution. Results of the study revealed that the average levels of PM₁₀ and PM_{2.5} were above the permissible limits laid by WHO at





Thank You