

Printed from

THE TIMES OF INDIA


IIT-Kanpur study to help review air quality standards for first time since 2009

TNN | Jun 20, 2022, 04.55 AM IST



NEW DELHI: A recent RTI reply from Central Pollution Control Board (CPCB) has revealed that a one-year study by IIT-Kanpur has been sanctioned to review the national ambient air quality standards (NAAQS) and any changes to the current national standards will depend on the findings of the study.

TACKLING POLLUTION WOES

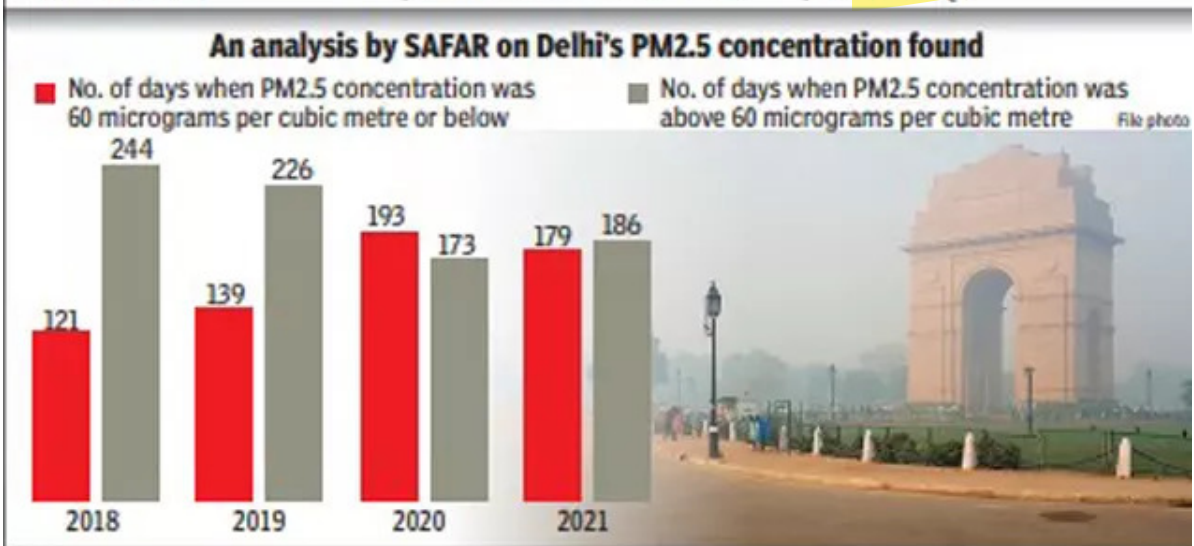
POLLUTANT 	Time weighted average*	NAAQS Industrial, residential, rural and other areas ($\mu\text{g}/\text{m}^3$)	NAAQS Ecologically sensitive area notified by central govt ($\mu\text{g}/\text{m}^3$)	WHO guidelines ($\mu\text{g}/\text{m}^3$)
Sulphur dioxide	Annual	50	20	40
	24 hours	80	80	
Nitrogen dioxide	Annual	40	30	10
	24 hours	80	80	25
PM10	Annual	60	60	15
	24 hours	100	100	45
PM2.5	Annual	40	40	5
	24 hours	60	60	15

*Duration considered to take out average

- > A study is being conducted to review national ambient air quality standards (NAAQS)
- > In India, NAAQS was last revised in 2009

- > The study will review existing standards for carbon monoxide, lead, oxides of nitrogen, ozone, sulphur dioxide, PM10, PM2.5, ammonia, benzene, Benzo(a)

- > pyrene, arsenic and nickel
- > India has 132 non-attainment cities, which means they don't meet NAAQS



India had last revised its NAAQS in 2009 and since WHO revised its guidelines last year, experts have been calling for revision of the standards. For instance, the annual national standard for PM10 and PM2.5 is still 60 and 40 micrograms per cubic metre,

respectively, as against WHO's safe limit of 15 micrograms per cubic metre for PM10 and 5 micrograms per cubic metre for PM2.5.

"Any changes to the NAAQS notified in 2009 shall be subject to the findings of the study. The project shall be executed by a joint team of health and air quality experts led by IIT-Kanpur under the overall supervision of a steering committee constituted for review of the NAAQS by CPCB. Further, draft report shall be uploaded for public and expert comments," said RTI reply.

Congratulations!

You have successfully cast your vote

[Login to view result](#)

According to an MoU, which was signed between CPCB and IIT-Kanpur in December last year, the expected outcomes from the study are health risk evaluation of pollutants, revised NAAQS, guidelines for determining non-attainment areas and cost benefit analysis of implementation of standards. The study will review existing standards for carbon monoxide, lead, oxides of nitrogen, ozone, sulphur dioxide, PM10, PM2.5, ammonia, benzene, benzo (a) pyrene, arsenic and nickel.



Avinash Chanchal, who filed the RTI query, said, “There is no ‘safe’ level of air pollution. There is substantial scientific evidence that even low levels of exposure to air pollution shorten lives and have serious effects on public health. Last year, revised WHO air quality guidelines also indicated that our current national ambient air quality standards are inadequate and need to be revised.”

He is also the campaign manager at Greenpeace India, which submitted over 10,000 postcards and signatures to CPCB in April demanding amendments to the air quality standards. “All non-attainment cities are still not meeting the current national air

quality standards. Such cities should express the ambition to move to the NAAQS first and then should have a time-bound plan to move towards the WHO guidelines,” said Chanchal.

He added, “The revised standards will be meaningless if they are not supported by clean air action by the government. It is high time to implement effective policies to reduce air pollution, including phasing out fossil fuels and prioritising clean energy and clean transportation.”

Anumita Roychowdhury, executive director, research and advocacy, Centre for Science and Environment, said, “It is important to review the standards in light of the new scientific and health evidences as well as the diverse air pollution situation in different regions of India. Some pollutants may require tighter benchmarks and improved measurement strategies to protect public health.”