

The background of the slide features a soft-focus image of green leaves on a branch, with some leaves in sharp focus in the foreground and others blurred in the background. The overall color palette is a range of greens, from light lime to deep forest green.

Integration of air quality in the LCA of neighbourhoods

Rachna Bhoonah

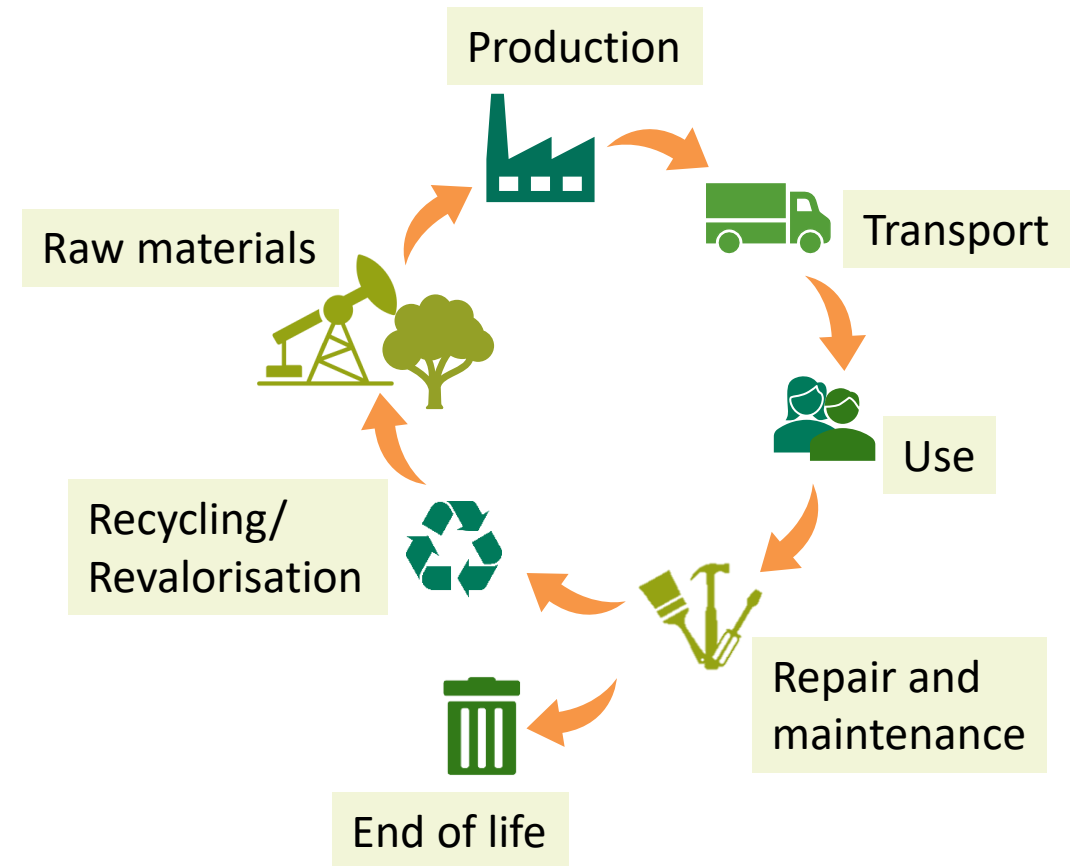
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Life cycle assessment (LCA)



Systemic and multicriterial approach to quantify **environmental impacts** (health, biodiversity, resources) over the lifetime of the studied system

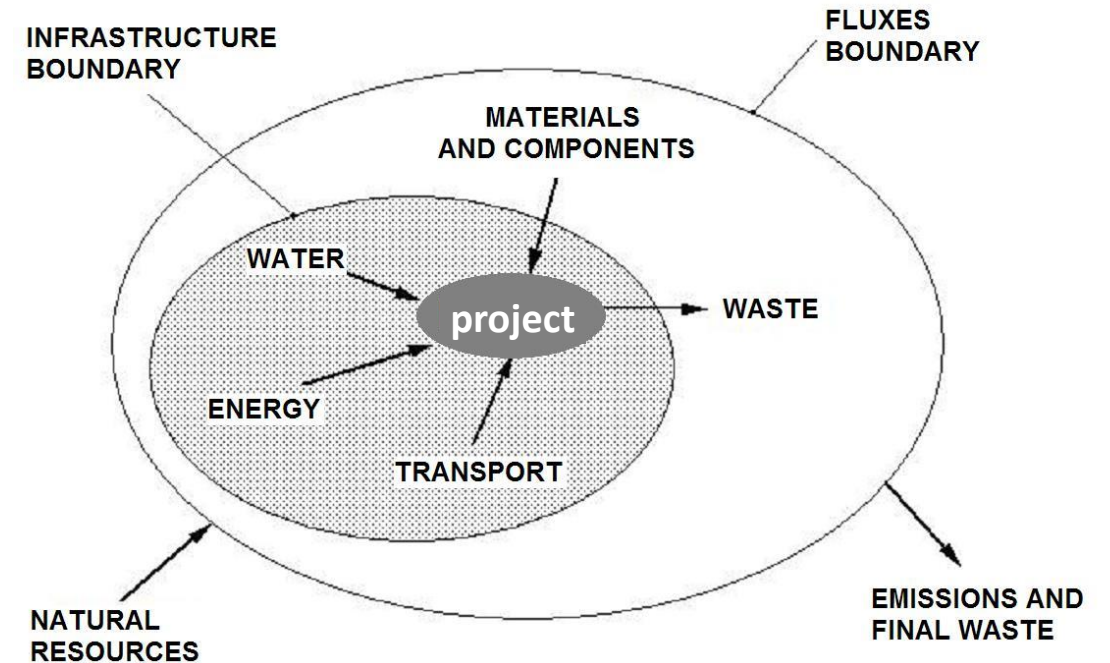
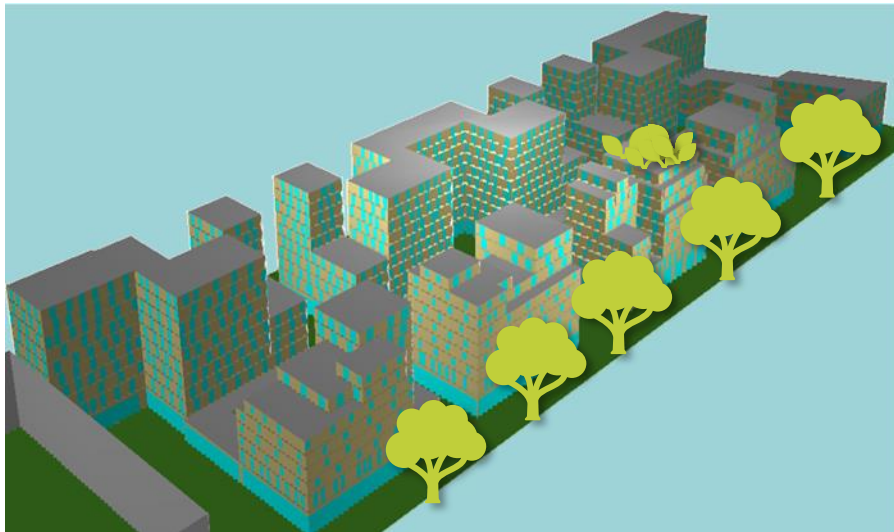
- Developed with a scientific approach, based on observations – reduce instinctive choices
- **Better traceability**: assess all life cycle steps, study origins of materials, energy mix...
- **Decision-making tool**: study different aspects of an object/service to improve its environmental performance, **right from its design**



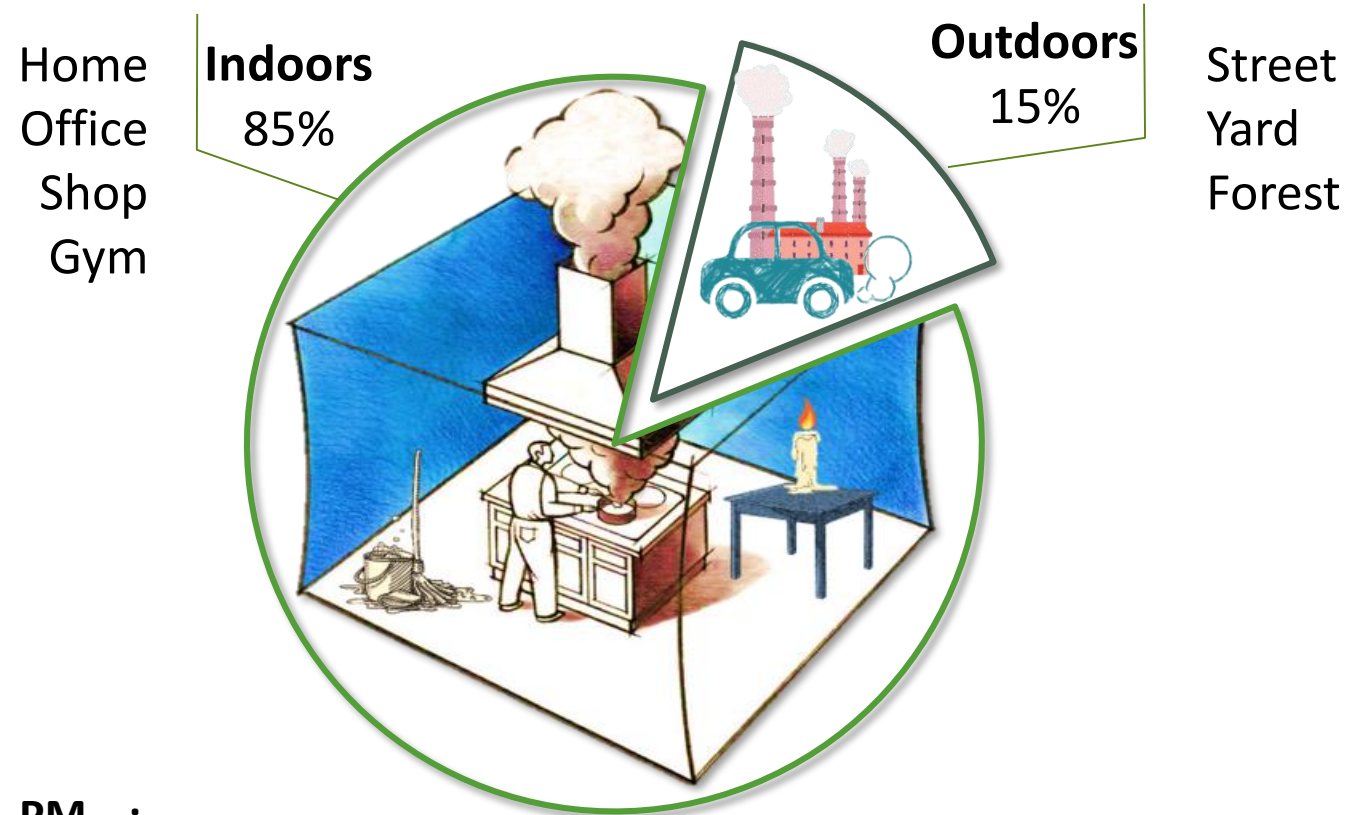
LCA of neighbourhoods



- Help integrate human health impacts due to atmospheric pollutants (indoors and outdoors) in the LCA of neighborhoods
- Help to integrate environmental benefits of urban greening
- Building energy simulation, LCA and urban planning tools -> help in decision-making



Air pollutants and their potential health effects



Health effects

Short-term

Dizziness, coughing, head aches
Skin, throat, eyes and lung irritation

Long-term

Poor cognitive capacities
Stroke
Chronic obstructive pulmonary disease
Acute lower respiratory infections
Skin/ nose/ throat/ lung cancer

PM_{2.5}:
1st cause of DALYs (Disability-Adjusted Life Years) in 2021: 231 million DALYs
1st cause of deaths in 2021: 7.8 million Household air pollution responsible for 3.2 million deaths in 2020, incl. 237 000 children <5 years (WHO)

O₃:
8.8 million DALYs in 2021

VOCs: Volatile organic compounds
PM_{2.5}: fine particulate matter <2.5µm
(heavy metals, black carbon...)
CO₂: carbon dioxide, O₃: ozone, NO_x: nitrous oxides

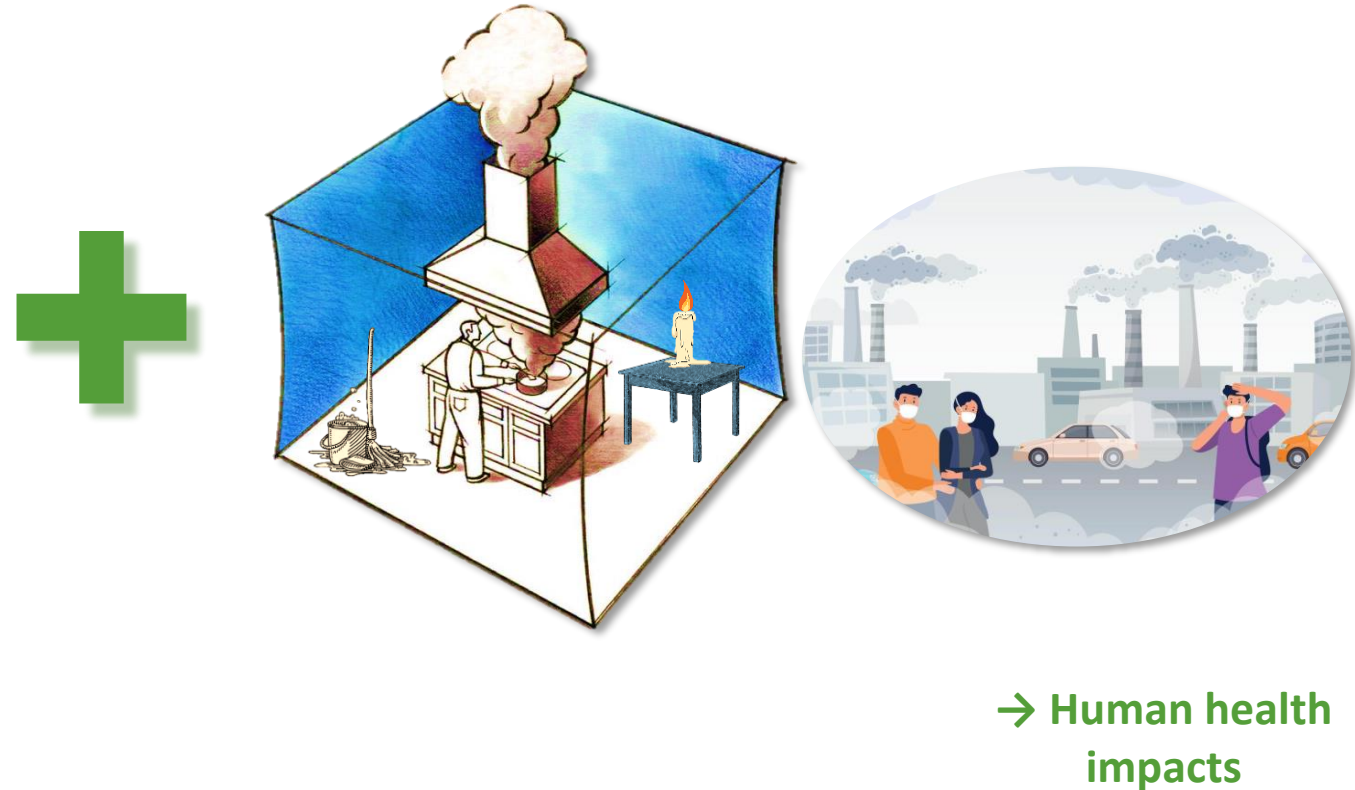
Objective



Life Cycle Assessment



Air Quality



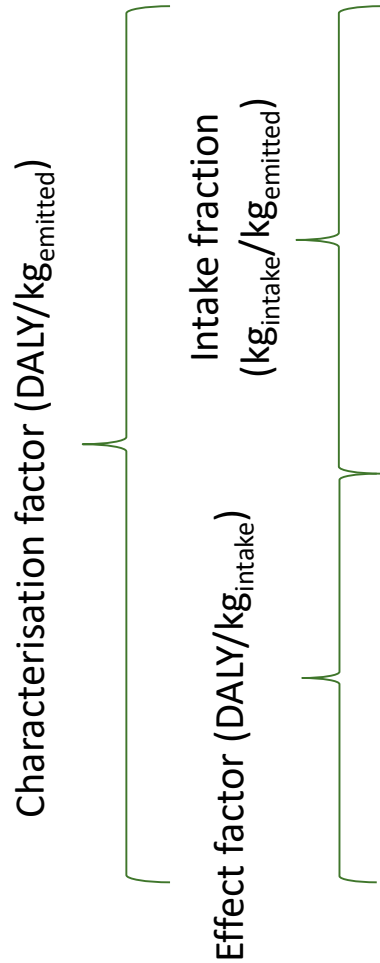
LCA + AQ decision-making tool in the building / urban planning sector

Q: How to improve the evaluation of **AQ impacts** in **LCA**?

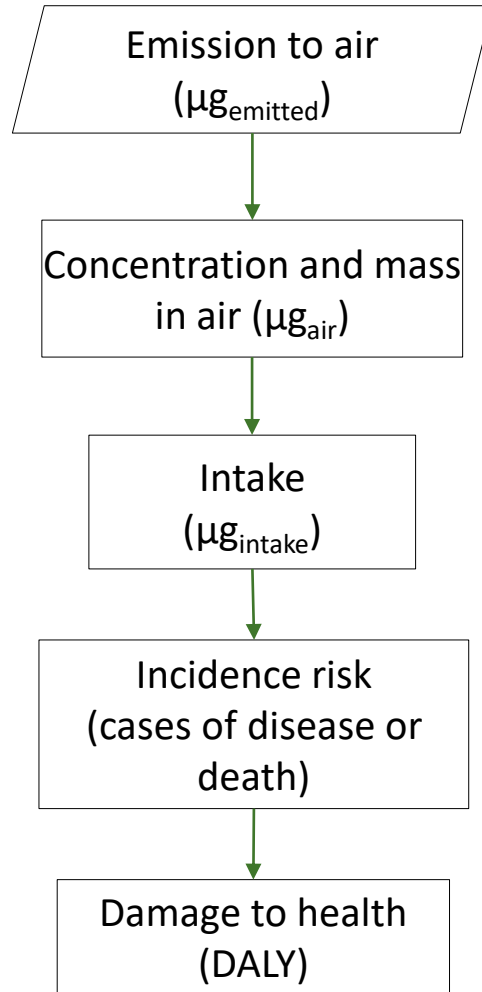
Impact assessment method



Metrics



Pathway



Factors influencing different steps

Emission

Activity duration
Emission rate ($\mu\text{g}/\text{h}_{\text{activity}}$)

Air renewal rate (h^{-1})
Room volume (m^3)
Particle size distribution

Exposure factor (h^{-1})

Breathing rates (m^3/h capita)
Room volume (m^3)
Number of occupants (capita)

Attributed disease/mortality

Epidemiological data
Mortality and diseases data
Ambient pollutant levels ($\mu\text{g}/\text{m}^3$)

Severity factors

(DALY/case)

Intake

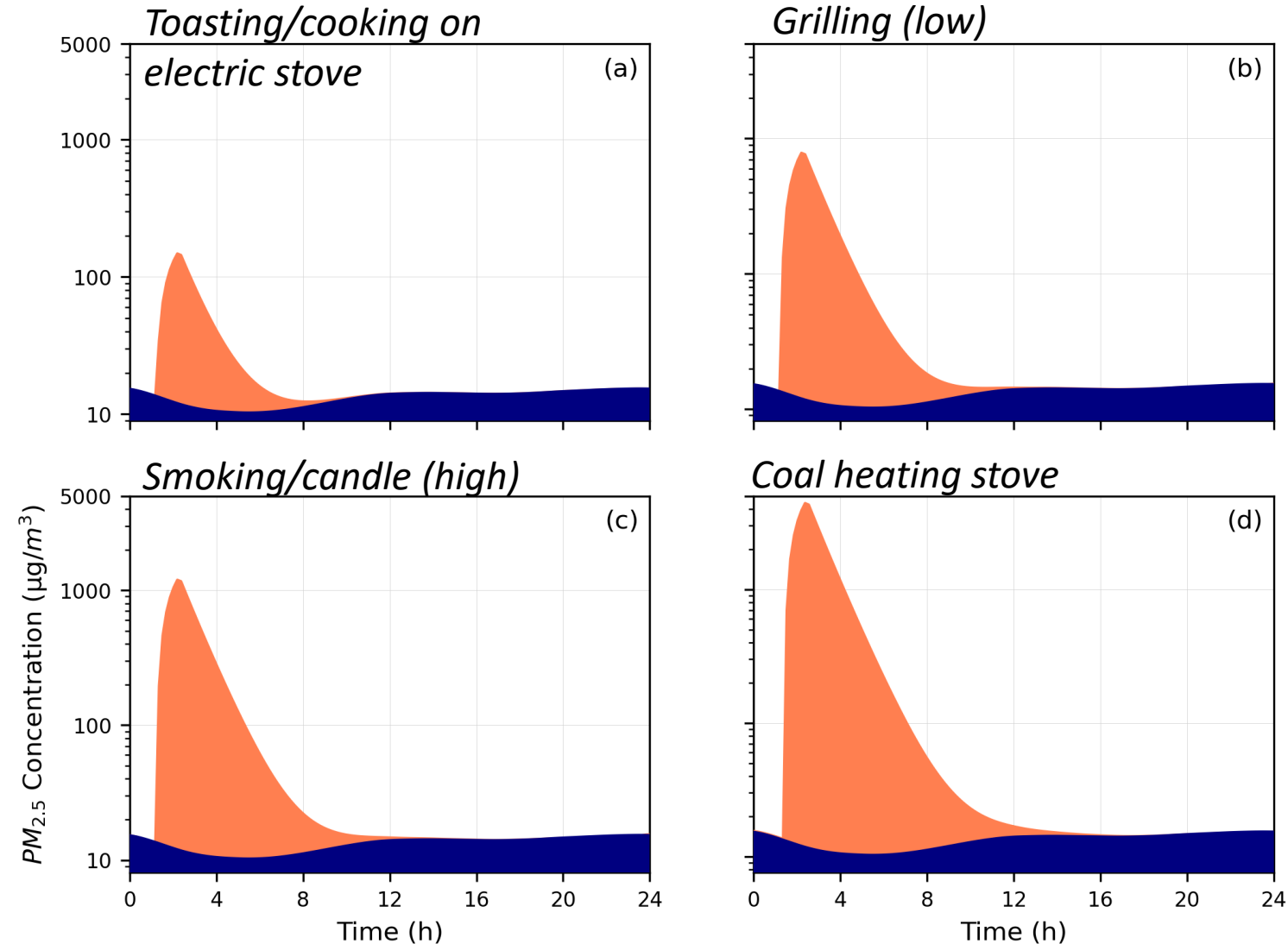
$$M_{in} = IR \int_{t=0}^T C(t) dt$$

USEtox model

Global Burden of Diseases approach

Building ecodesign

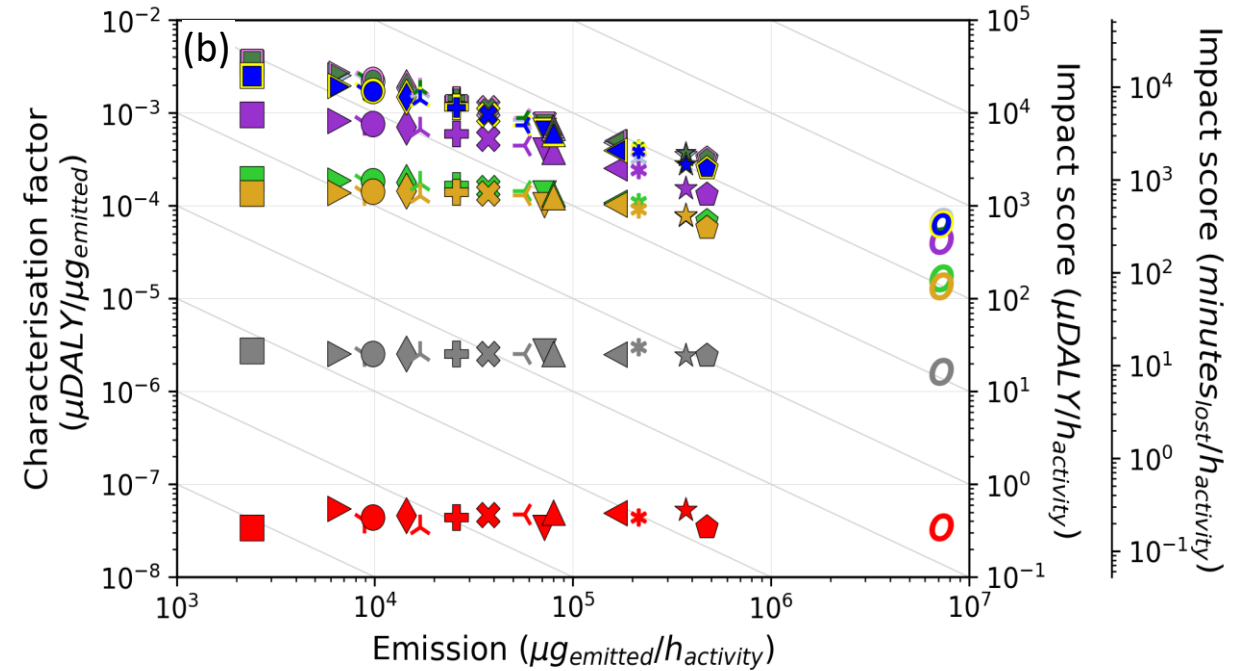
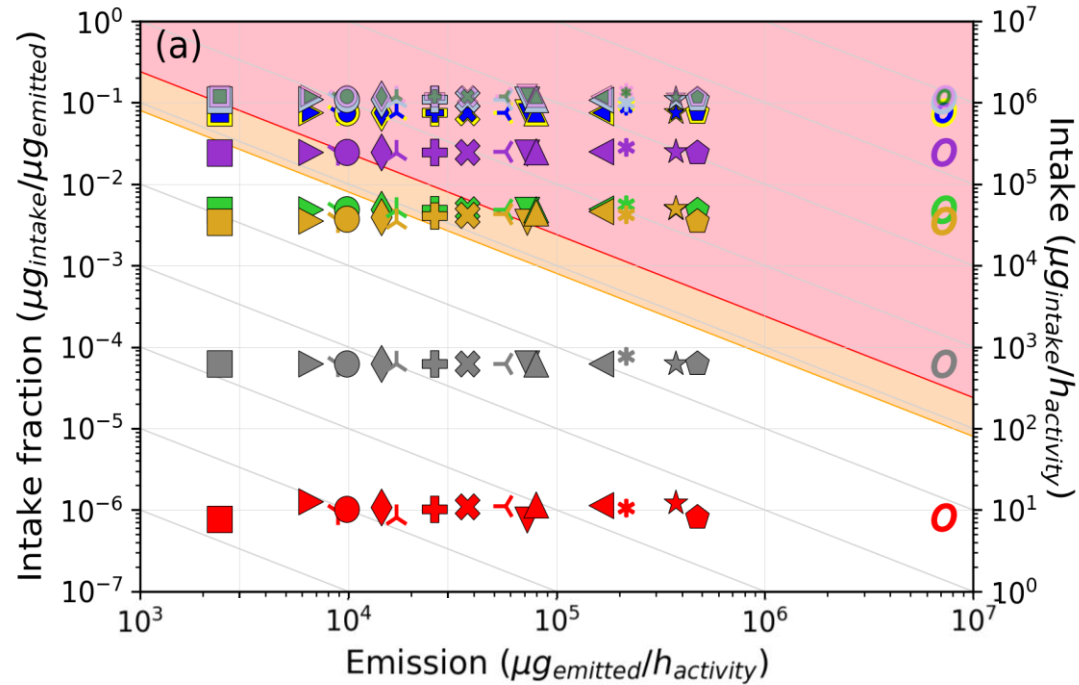
Indoor concentrations



Indoor PM_{2.5} concentrations from outdoors (navy) and increment from one hour activities (orange) over 24 hours at 0.6 ACH

- Concentrations modelled with **INCA-Indoor**
- Input: emission rates ($\mu\text{g}/\text{h}$)
- Based on outdoor concentrations (dynamic)
deposition rate (dynamic)
room volume (30 m^3)
ventilation rate (0.6 ACH)

Fine particulate matter from indoor activities



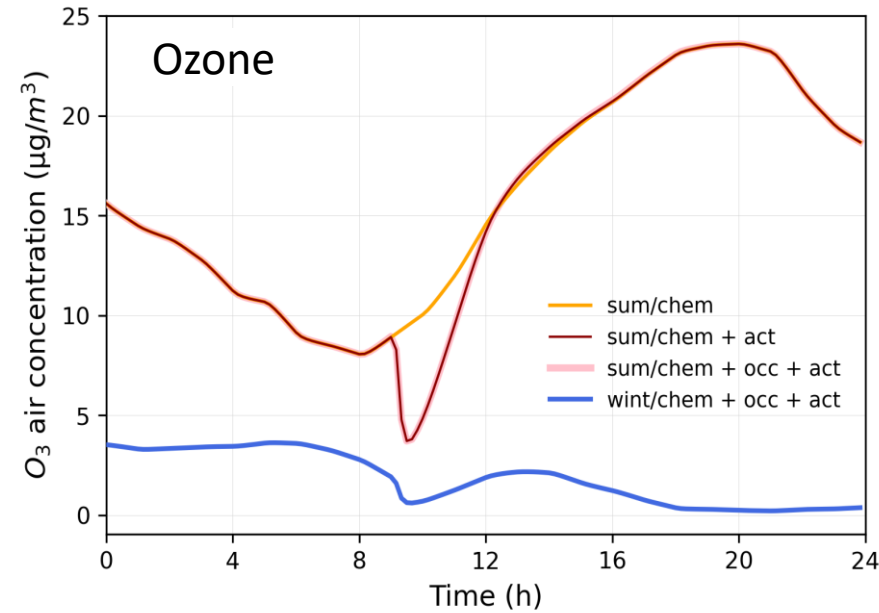
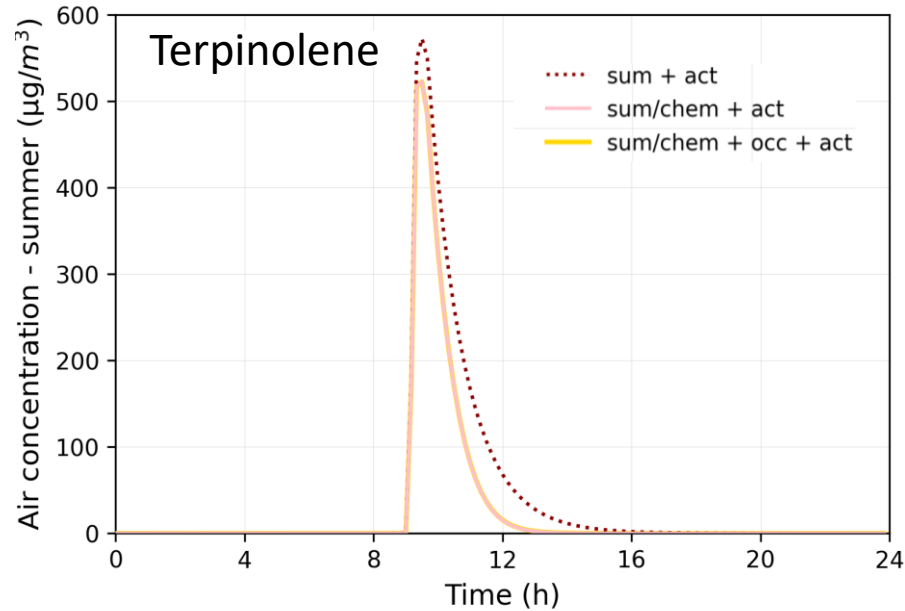
- | | | | |
|----------------------------------|--------------------------------|-----------------------|-----------------|
| — iso-intake/impact lines | ⤴ Printer (high) | * Heating stove | ■ open 14 ACH |
| — annual exposure recommendation | + Frying (low) | ★ Incense (high) | ■ before 3 ACH |
| — daily exposure recommendation | ⊗ Grilling (low) | ● Cook stove (medium) | ■ before 14 ACH |
| ■ Candle burning (low) | ↵ Smoking/Candle (high) | ○ Cook stove (high) | ■ during 3 ACH |
| ▶ Toasting/cooking (low) | ▼ Cook stove (low) | □ closed 0.2 ACH | ■ during 14 ACH |
| ⤴ Candle burning (medium) | ▲ Cooking (high, with burning) | ■ closed 0.6 ACH | ■ after 3 ACH |
| ● Incense (low) | ◀ Frying/grilling (high) | ■ open 3 ACH | ■ after 14 ACH |
| ◆ Gas stove | | | |

(a) Intake of PM_{2.5} and (b) health impacts for different activities and ventilation scenarios, compared to WHO recommended limits: daily exposure (red) and annual exposure (orange)

Activity VOC emissions and chemical reactions



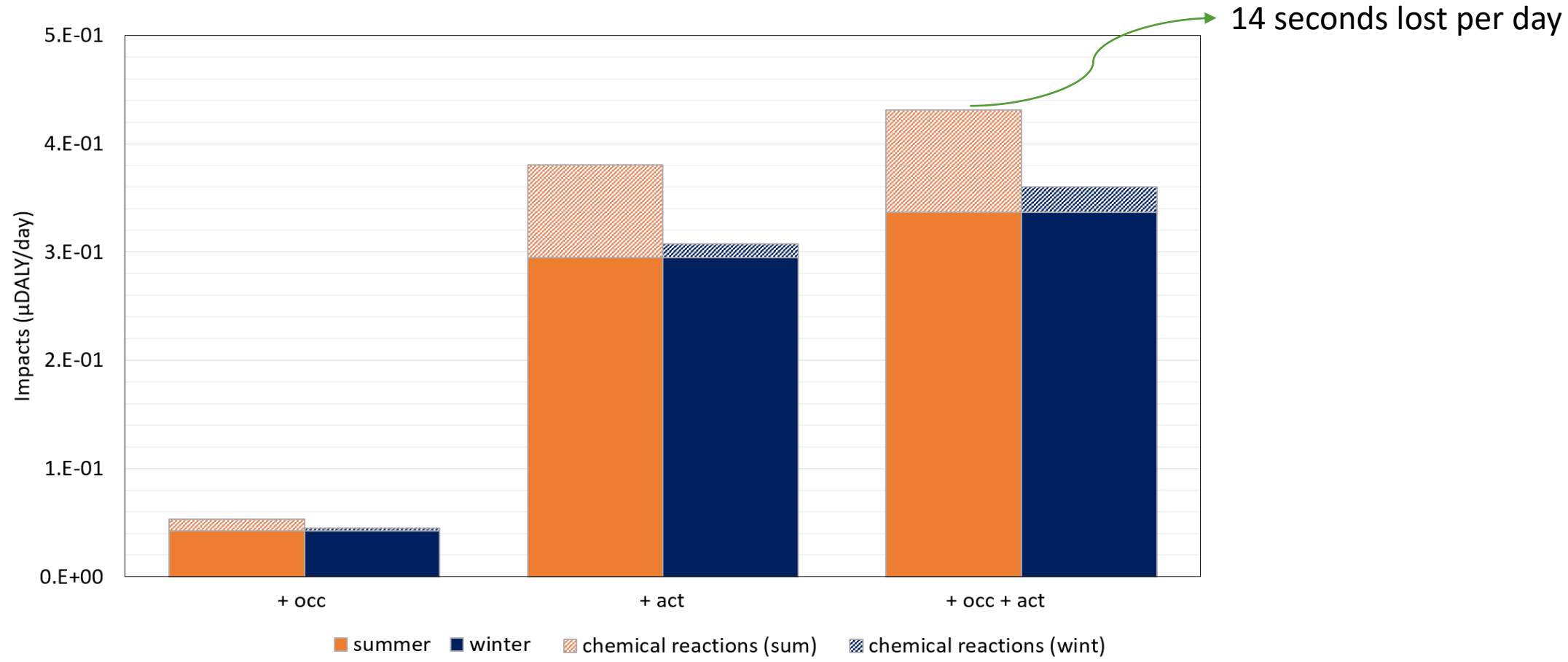
- VOC emission data for **cleaning with detergent** and **occupant skin/breath**
- Indoor air chemistry model reference: SAPRC-07 model¹ (O₃ and NO_x + VOCs)



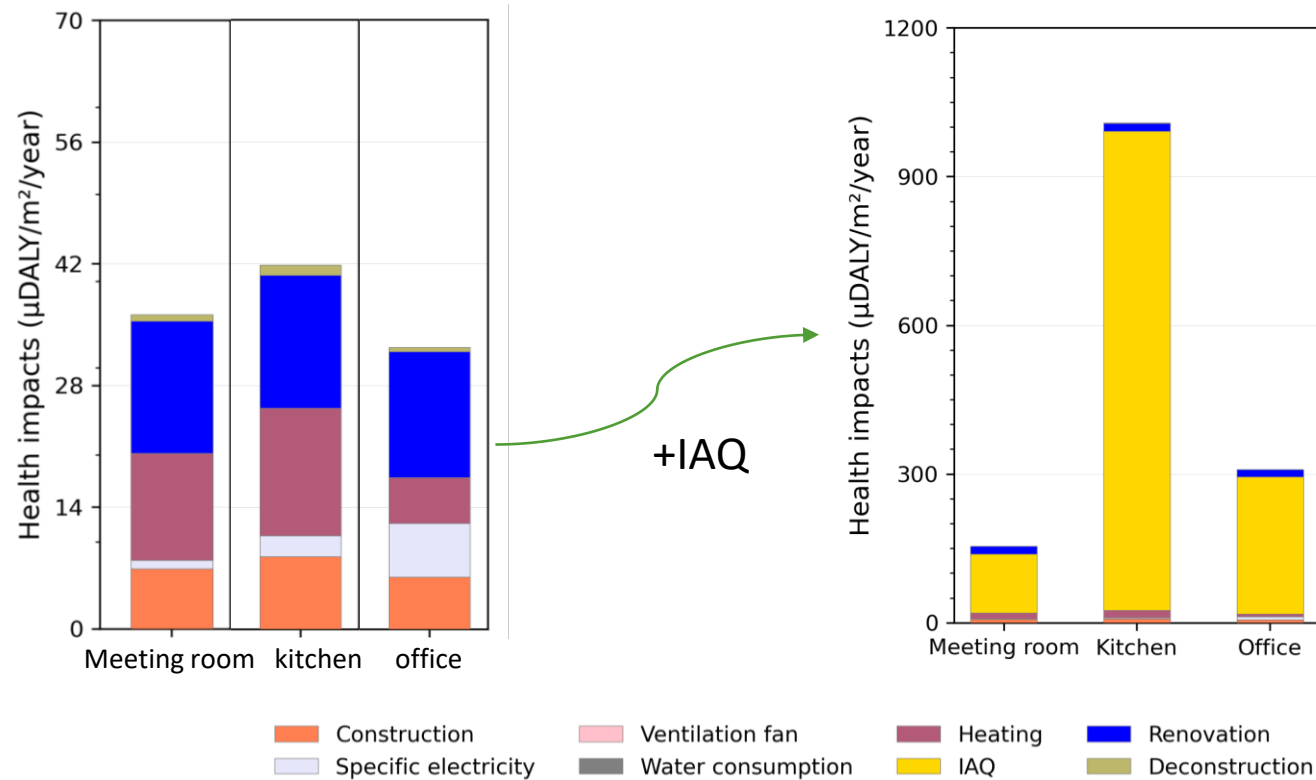
Terpinolene and ozone concentrations indoors in the presence of VOC emissions from floor cleaning and occupants

- Terpinolene produced by chemical reactions
- Ozone consumed
- Higher ozone concentrations in summer than winter: more reactivity

Health impacts

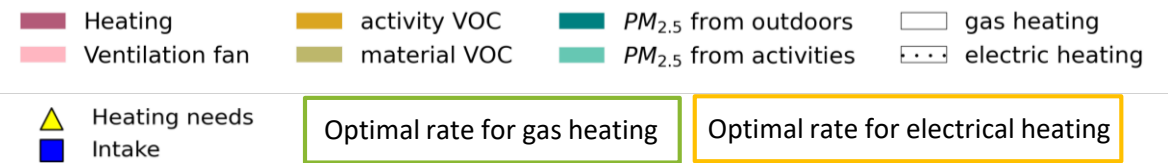
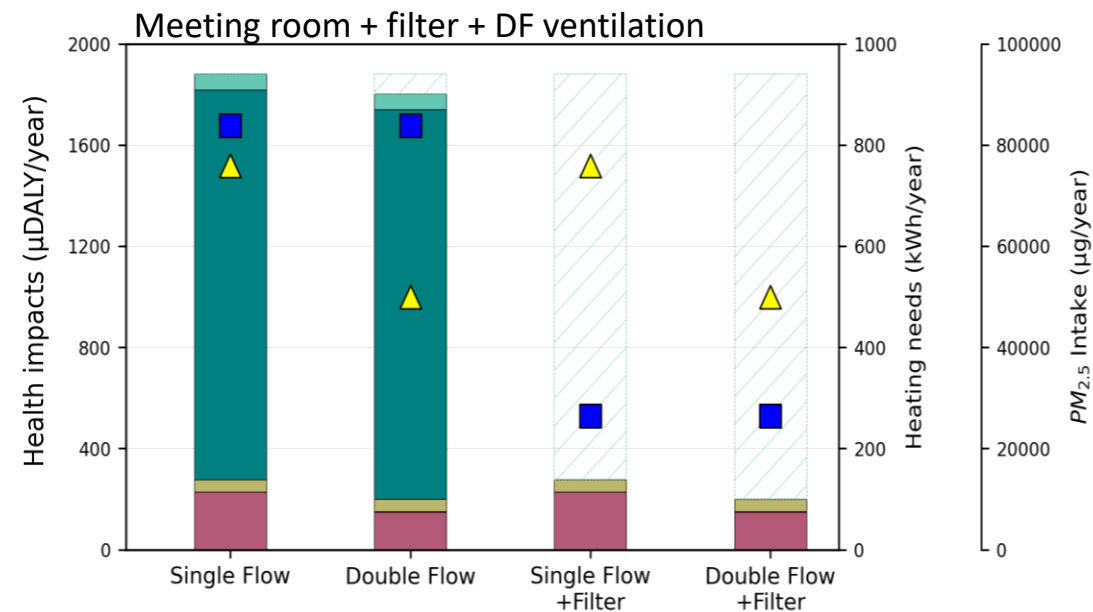
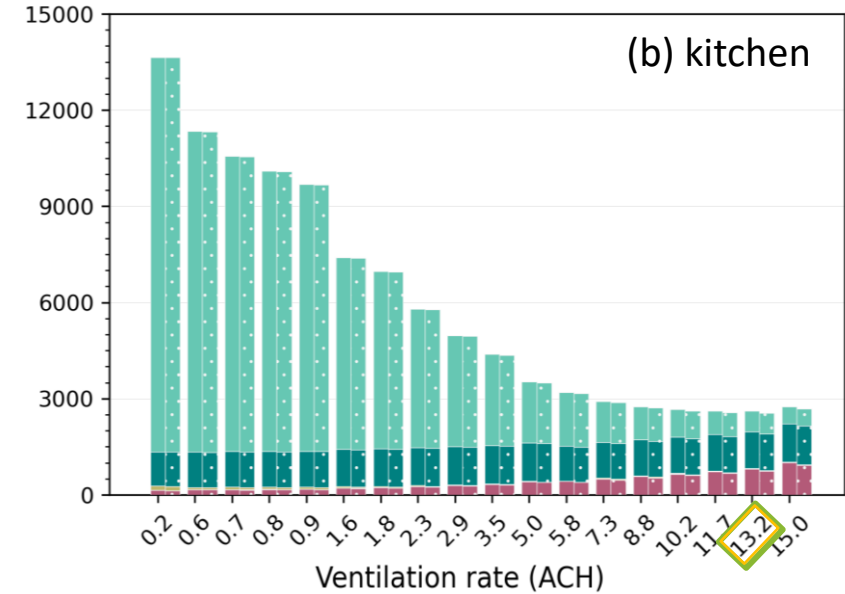
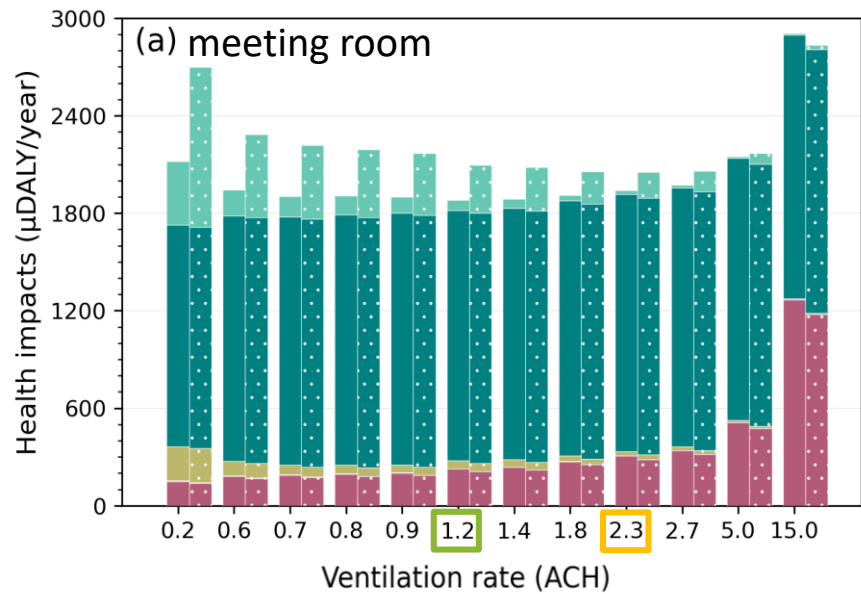


Health impacts due to occupant and activities VOC emissions, with the addition of chemical reactions



High impacts due to **heating**
and **IAQ** (VOCs and PM_{2.5}) at an average ventilation rate of 0.6 ACH

Optimal ventilation rates (office building)



Optimal ventilation rates **reducing all impacts**

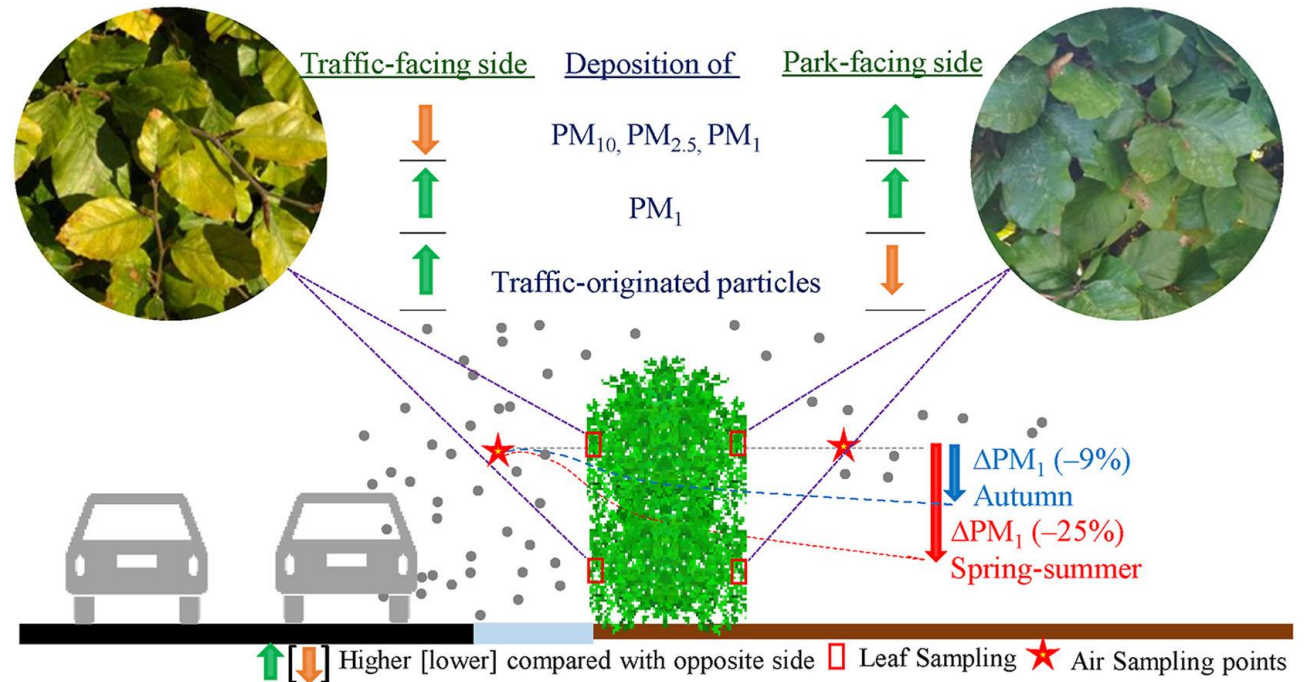
Filter and DF ventilation allow to reduce IAQ and LCA (heat) impacts
Average ACH in OECD countries: **0.6 ACH**

Urban vegetation

Vegetation and air quality



- **Absorption** (Leaf Area Index up to 5-6 times higher than ground surface)
- **Deposition**
- **Barrier effect**
- **Surfaces with no local emissions**
(parks/forests...)



Abhijith et Kumar 2020

Site description



Jardin du Palais Universitaire in Strasbourg (STBG)

Vegetation

No vegetation

Reference scenario

High vegetation

27% road
47% trees
26% grass

10% road
81% trees
9% grass



Ozone levels

Reference

High levels

From ATMO Grand-Est
(Strasbourg)

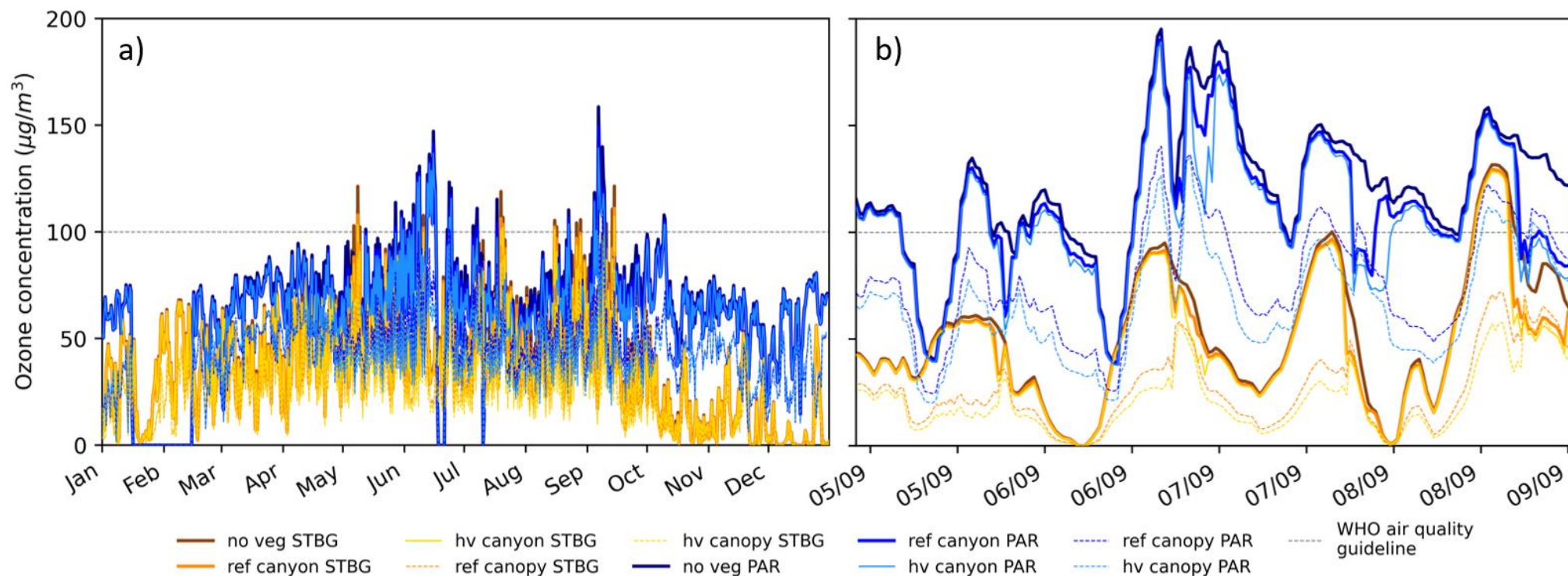
From AirParif (Paris)



Average occupancy of 1 person over 12 hours (8-20h)
Results can be multiplied by different occupancy rates

Ozone reactivity NOT considered

Ozone concentrations (TEB-Surfatm)



O_3 canyon and canopy concentrations for no vegetation (nv), reference (ref) or high vegetation (hv) scenarios

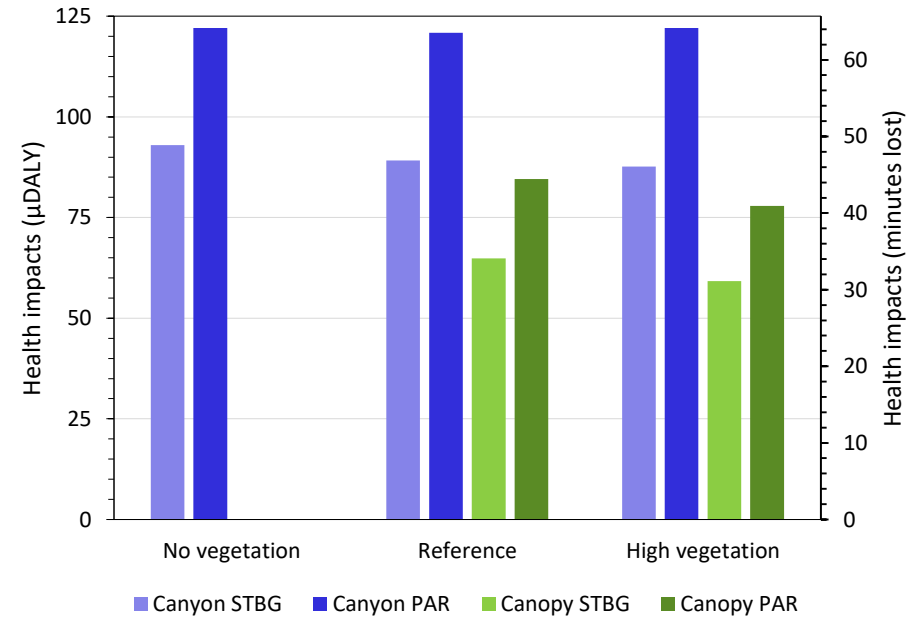
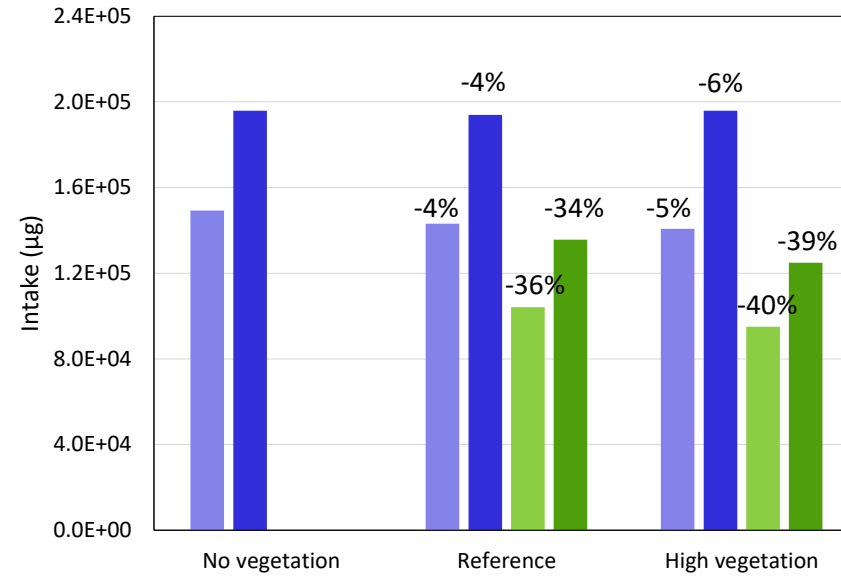
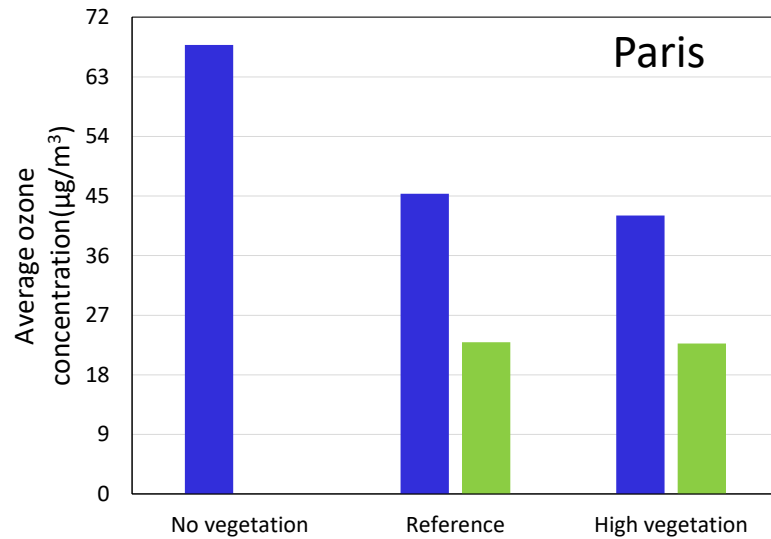
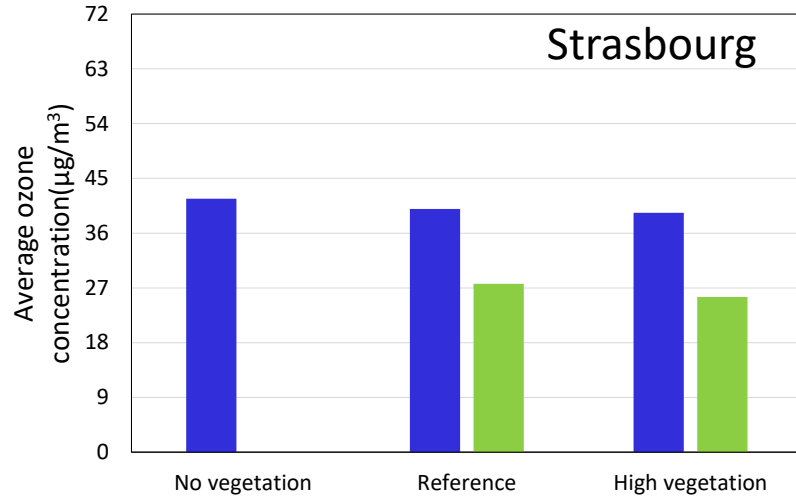
Canyon O_3 concentrations are higher than the WHO guideline for:

- 4% of the time in non-vegetated scenarios
- <1% of the time in vegetated scenarios.

O_3 concentrations decrease by:

- up to 6% in the **canyon**
- 30 to 36% in the **canopy** with vegetation v/s without vegetation

Human exposure and impacts



PM deposition: ongoing work

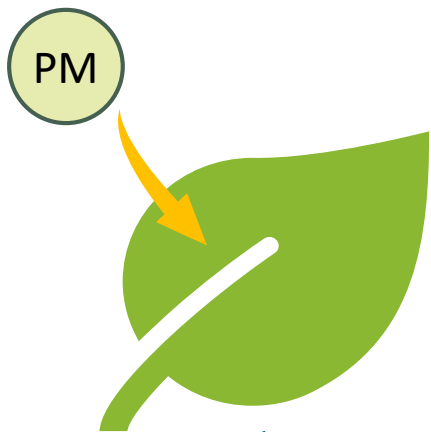


Reduction: lower emissions, dilution or **deposition**

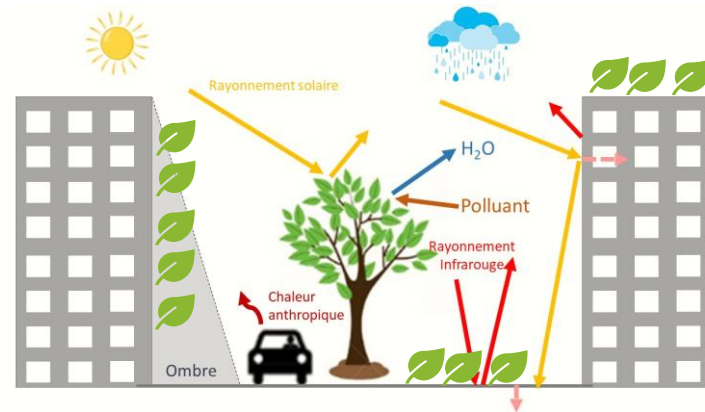
Increase **deposition**: vegetation increases deposition surfaces (+absorption temperature regulation, biodiversity...)

Method

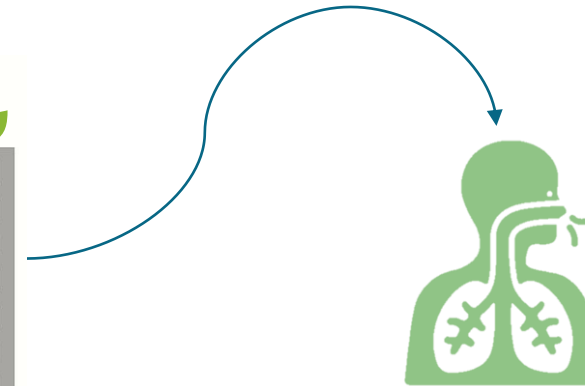
PM deposition model



Air concentration



Exposure and damage model





Human health risks associated with indoor air pollutants (e.g. work places)

- Coordination of expert groups
- Research for methodological development (European PARC Project)

Questions?...