**BRIEFING** 

# The link between buildings, health and the National Energy and Climate Plan (NECP) – Recommendations from the health sector



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## THE NATIONAL CLIMATE AND ENERGY PLANS: A KEY INSTRUMENT FOR CLIMATE AMBITION AT NATIONAL LEVEL

The National Climate and Energy Plan (NECP) is the first step where member states have to get concrete in their plans for climate mitigation to 2030. The plan is key in the implementation of the nationally determined contributions that each country made for the Paris Climate Agreement.

For the EU countries, an NECP is legally binding. In it, member states have to list climate and energy GHG reduction goals and measures for the energy, transport, buildings and other sectors. They also have to include their national long term strategies on renovation of buildings, as well as specific national objectives on energy poverty. In addition, a cost and benefit analysis of the measures, including health benefits where possible also has to be included.

The 28 EU Member States had to submit their draft NECPs by 31 December 2018 and they have until 31 December 2019 to submit their final plans (with a final deadline for the complete long-term renovation strategies of 10 March 2020). Being ambitious on buildings in the NECP is also a huge health opportunity.

## BUILDINGS CLIMATE FOOTPRINT AND HEALTH EFFECTS

Buildings are a key sector to address in the EU, as the sector responsible for 40% of energy consumption and 36% of CO2 emissions in the EU. In addition, one in six Europeans live in buildings that make them sick [1].

People spend the majority of their time - about 20 hours a day - indoors. This makes the buildings surrounding us, both residential and non-residential, a crucial determinant of health. The built environment impacts our health through a variety of factors including inadequate ventilation, poor indoor air quality, chemical contaminants from indoor or outdoor sources, by making us feel too cold or too hot, traffic noise or poor lighting.

The health effects range from respiratory and cardio-

vascular diseases from indoor air pollution, to illness and deaths from temperature extremes and inadequate energy access, anxiety and depression when buildings can't provide a sense of safety, as well as discomfort from less than optimal lighting conditions or irritability from noise levels. With one in six Europeans living in homes that make them sick [2], unhealthy buildings are a widespread problem that need political and public attention.

Given buildings sector's high climate footprint, improvement of existing and new buildings need to be a priority in tackling the climate crisis but equally a public health concern that requires respective social and equity priorities.

### SPEEDING UP THE RENOVATION OF BUILDINGS: AN OPPORTUNITY FOR HEALTH

Currently, only 1% of buildings in the EU are renovated annually, a rate which is not enough to tackle the sectors climate footprint. EU policy-makers have recognised this challenge; the EU Energy Performance of Buildings Directive (EPBD) requires Member States to establish a long-term renovation strategy, which now also has to be included in the NECP. This strategy needs to encompass an overview of policies and actions to target the worst performing segments of the national building stock, an outline of relevant national actions to alleviate energy poverty, and an evidence-based estimate of expected energy savings and wider benefits, such as those related to health, safety, and air quality.

The EPBD states that the energy need of buildings should be calculated to optimise health. If done correctly, this could help identify the worst-performing buildings and prioritise those buildings used most by the vulnerable groups of society.

It is important to focus on the worst performing segments of the national building stock as there is a mismatch between those who can afford energy efficiency renovations and those who need them the most and would benefit from them the most [3]. Diverting resources to the most vulnerable could eradicate nearly all premature excess cold weather deaths and indoor dampness-related asthma [4].

#### **RECOMMENDATIONS FROM THE HEALTH SECTOR:**

We call on national policy-makers to step up in tackling climate change, in addressing the buildings climate footprint and protecting health.

#### Policy-makers should:

- Put health at the center of renovation strategies, and increase the annual renovation rate of buildings. Renovating
  buildings should not only improve energy performance but also guarantee better health. The latest health evidence
  regarding indoor air quality and building materials need to be taken into account. Buildings with the biggest potential
  for health gains should be prioritised.
- Fully assess the level of energy poverty and propose clear objectives and plans to tackle it, supporting those who cannot afford the energy services to meet their basic needs. The draft NECPs show that most Member States do not recognise the level of energy poverty in their country [5]. Energy poverty is recognised by the World Health Organization (WHO) as a common challenge to be tackled by governments in the European region [6].
- Consult with the health sector is consulted before finalising the long-term renovation strategy. Member States are required to carry out a public consultation on prior to submitting the final NECPS to the European Commission. The health sector's input is valuable in order to assure the latest health evidence is taken into consideration.

#### **HEAL PUBLICATIONS ON HEALTHY BUILDINGS**



HEAL briefing 'Healthy buildings, healthier people':  $\underline{EN}$ ,  $\underline{DE}$ ,  $\underline{TR}$ ,  $\underline{NL}$ ,  $\underline{FR}$ ,  $\underline{ES}$ ,  $\underline{BG}$  and PL



HEAL report 'Healthy air, healthier children': <u>EU-wide report in English</u>, individual city reports <u>London</u>, <u>Madrid</u> (<u>Spanish</u>), <u>Berlin</u> (<u>German</u>), <u>Paris</u> (<u>French</u>), <u>Sofia</u> (<u>Bulgarian</u>)

#### REFERENCES:

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- 3 COMBI (calculating and operationalising the multiple benefits of energy efficiency in Europe) H2020 project (2018). 'Final report: quantifying energy poverty-related health impacts of energy efficiency.' <a href="https://combi-project.eu/wp-content/uploads/D5.4">https://combi-project.eu/wp-content/uploads/D5.4</a> 20180514.pdf
- 4 COMBI (calculating and operationalising the multiple benefits of energy efficiency in Europe) H2020 project (2018). 'Final report: quantifying energy poverty-related health impacts of energy efficiency.' <a href="https://combi-project.eu/wp-content/uploads/D5.4\_20180514.pdf">https://combi-project.eu/wp-content/uploads/D5.4\_20180514.pdf</a>
- 5 Right to energy NECP briefing
- 6 WHO 2019 env health inequalities report

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The Health and Environment Alliance (HEAL) is a leading European not-for-profit organisation addressing how the environment affects health in the European Union. With the support of its over 80 member organizations, which represent health professionals, not-for-profit health insurers, patients, citizens, women, youth, and environmental experts, HEAL brings independent expertise and evidence from the health community to different decision-making processes. Members include international and Europe-wide organisations as well as national and local groups.

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