

Statement of Kevin M. Stewart Director of Environmental Health American Lung Association of Pennsylvania

Before the Committee on Transportation Pennsylvania House of Representatives

Regarding
Senate Bill 295
The Diesel-Powered Commercial Motor Vehicle Idling Act

April 10, 2008

Good morning, Mr. Chairman, and members of the Committee. My name is Kevin Stewart. I am Director of Environmental Health for the American Lung Association of Pennsylvania. I thank you for the opportunity to testify before you today on Senate Bill 295. The American Lung Association of Pennsylvania, in commenting on this legislation, advocates for and represents not only on the order of a million Pennsylvanians who suffer from chronic lung disease, but also the millions more who desire to breathe clean air and so protect their good health.

Our predecessor agency was founded in 1892 to fight tuberculosis. The American Lung Association is now dedicated to our broader mission of preventing lung disease and promoting lung health. We have been fighting for relief from ambient air pollution since the middle of the last century.

Emissions from the idling of motor vehicles, and especially those produced by long-duration idling of diesel-powered motor vehicles, have been recognized as a serious health concern throughout the Commonwealth, most notably in situations where buses and trucks are congregated. While we recognize that the needless production of air pollution is a problem wherever it occurs, this is especially true at truck stops, rest areas, freight handling facilities, public venues, and schools, where students, passengers, workers, drivers, and even bystanders or nearby residents can be exposed to high levels of these harmful emissions.

The American Lung Association of Pennsylvania strongly supports the enactment of a measure in Pennsylvania law that will significantly, promptly and reliably reduce the amount of emissions caused by the idling of diesel motor vehicles and believes that Senate Bill 295 is a measure that will do much to bring the Commonwealth into line with this need. We encourage the Committee to approve this bill expeditiously and to resist calls for weakening amendments – including calls for superfluous or unnecessary exemptions.

Health

The American Lung Association has long advocated for stronger controls of diesel exhaust since it is such a serious air pollutant. It is a complex mixture of gases, solid particles and condensed matter, and we have learned that it affects public health in four distinct ways:

- Nearly twenty years ago (in 1990), the California Environmental Protection Agency first recognized diesel exhaust as a known cause of cancer. For instance, scientists have found that male workers with the highest on-the-job exposure to diesel fumes were 63% more likely than men not exposed to the exhaust to develop lung cancer.
- It contains dozens of toxins that are known to interfere with the nervous, reproductive, and immune systems.
- Ninety percent of its particulate emissions are of the fine variety, the fraction most clearly linked with premature death. Among all highway vehicles, heavy duty diesel vehicles contribute about three-quarters of the fine particle emissions.
- And last, but not least, it is responsible for nitrogen oxides, a precursor of ground level ozone, a powerful respiratory irritant that inflames lung tissues, exacerbating asthma and other lung diseases, sending people to the emergency room and also resulting in premature death.

According to the U. S. Environmental Protection Agency's National Ambient Air Quality Standards for ground level ozone and for fine particle pollution, a majority of the state's population lives in areas where the air quality is unhealthful. Over twenty populous counties (within even larger metropolitan areas) have levels of air pollution that violate one or the other or both of these standards, including the stricter standard that EPA promulgated just last month for ground level ozone. Since the Commonwealth will have to take several significant steps to meet these standards, reducing vehicle idling is such a reasonable tool to help us achieve attainment that the need for passage of this bill is clear. Furthermore, the American Lung Association is on record as stating that both of these standards are still too weak to protect public health with an adequate margin of safety, so the urgency is that much greater.

In order for the Committee to have some sense of the scope of the problem, it is important for you to consider that the populations of Pennsylvanians at special risk from these pollutants include the following:

- 2.8 million under the age of 18
- 1.9 million age 65 and above
- 260,000 children with asthma
- 837,000 adults with asthma

- 427,000 persons with chronic bronchitis
- 197,000 persons with emphysema
- 3.5 million persons with heart disease
- 805,000 persons with diabetes.

Support

For reasons of public health just described, the American Lung Association of Pennsylvania strongly supports Senate Bill 295 and encourages the Transportation Committee to report it out to the full House. Specifically:

- We support the provision of subsection 3.(a) that establishes the standard of care for idling as no more than five minutes in any hour-long period.
- We support the list of exemptions given in subsection 3.(b) as sufficient to cover needs encountered by vehicle operators. For instance, we believe that the needs of utility repair fieldworkers and refuse collection workers are adequately addressed by the bill's existing exemptions.
- We oppose blanket exemptions for large economic sectors such as the construction or
 agriculture industries. Furthermore, we also find that turning engines off and on is
 neither an undue burden, nor does it significantly impact efficient movement of queued
 traffic through a facility or at a project worksite. Moreover, the practice of allowing a
 vehicle to idle while the operator disembarks to attend to paperwork or other needs
 should generally not be permitted.
- We support the non-applicability of the exemption found in 3.(b)(10) if the vehicle is parked at a location with stationary idle reduction technology that is available for use. The Lung Association applauds the Commonwealth's support for the installation of such technology and looks forward toward the day its availability and use is accepted as a matter of course.
- We support the expiration of that same exemption on May 1, 2010, since idling for the sole purpose of heating or cooling of cabs has been made unnecessary by a variety of technologies such as auxiliary power systems and battery-powered systems. Two years is sufficient time to require implementation of these alternatives, given that many vehicle operators and fleet owners have already installed them.

Additional Considerations

While not integral to the language of the bill, it is a lesson well-learned that public measures such as these are most successful when they are accompanied by public education and strong support to the regulated community. Time and effort must be taken to ensure that vehicle operators are aware of the requirements of the law. The general public, too, should be informed about the essential provisions of the law so that they can serve to alert the Commonwealth (perhaps through a call-in number) when excessive idling is occurring or when they are experiencing adverse health effects due to such idling. When enforcement is undertaken, it should begin by addressing clear citizen concerns and the most egregious behavior.

In order for a system of sanctions to work, the assessment of penalties and the implementation of enforcement need to provide an adequate and reliable disincentive for the undesirable behavior. This means that fines and the penalty structure create sufficient distress that violators will take the idling proscription seriously; violators have a reasonable expectation that citation will in fact occur; the number of offenses is trackable; and fines, including those assessed for violations by occasional visitors to the Commonwealth, are collected.

Since Pennsylvania is nearly surrounded by states that already have idling rules, and since the provisions of Senate Bill 295 are largely consistent with the rules in those states as well as with the Environmental Protection Agency's model rule, enactment of the bill can be expected to fit in well with the current legal situation, and will go a long way toward covering at least the northeastern quadrant of the continental United States by what would effectively be a single health-promoting law – akin to the crowning step of adding the keystone when building an arch.

Finally, a note of hope for the trajectory of this bill in public practice: We look forward to the day when the ethic of minimizing unnecessary idling will be carried out in certain situations even though the bill does not require it. An example of this would be occasions such as those when an operator shuts down if the vehicle is forced to remain motionless on the highway for more than a few minutes.

Conclusion

In their deliberations, I ask the members of this Committee to remember that air pollution worsens and causes disease and even death for real people. In Pennsylvania, the populations at increased risk from particle pollution include infants, youngsters and the elderly, persons with chronic lung and heart disease, and diabetes. While we estimate that on the order of about half of the Commonwealth's population is described by at least one of these categories, every one of these millions is a real person, not a nameless statistic. Every one of these people is a family member, a neighbor, a coworker, a friend – someone whose health and life deserve to be protected. Therefore, the American Lung Association of Pennsylvania strongly supports Senate Bill 295 and encourages this Committee and the full House to resist making weakening changes.

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