

CONSULTATION RESPONSE

Assessing the effects of scope 3 emissions on climate from offshore oil and gas projects

The <u>UK Health Alliance on Climate Change</u> is an alliance of 48 UK based health organisations including Royal Colleges, associations and societies representing more than one million health professionals working across all areas of healthcare.

As health professionals, we are deeply concerned about the impact of downstream emissions from oil and gas on human health. Emissions from fossil fuels are both the primary driver of climate change and air pollution and damage the natural environment, all of which pose huge harms to health and threaten the resilience of our health services.

Currently, environmental impact assessments rightly include consideration for habitats and seabird populations, but they rarely include assessment of the impacts on human health. We believe this needs attention.

We strongly urge the government to consider the impacts of scope 3 emissions and pollution from offshore oil and gas projects on both climate **and human health** in order to fully assess and understand the risks of these projects.

In this document, we outline our response to the proposals outlined in the draft <u>Supplementary EIA Guidance - Effects of Scope 3 Emissions.</u>

Defining baseline scenario for assessing scope 3 emissions

Question 1: Do you agree with the advice in the draft supplementary EIA guidance on how the baseline scenario should be set out in an ES?

The draft guidance is too vague and lacks specificity to accurately define and set a baseline scenario.

Question 1(a): If not, please outline what else should be considered or done differently.

The draft guidance should specify that scope 3 emissions under a baseline scenario will be emissions in the complete absence of the proposed project. In most cases, this would mean zero scope 3 emissions without the project.

The reference to 'alternative development options' and 'alternative baseline scenarios' adds confusion. The primary baseline scenario for assessing scope 3 emissions must be the absence of the proposed development, rather than a comparison to a worse or different project.

In addition to CO2, fossil fuel combustion is the major source of other climate- and health-damaging air pollutants; these include sulfur dioxide (SO2), nitrogen oxides (NOx), ozone, volatile organic compounds (VOCs), fine particulate matter (PM10 and PM2.5) and mercury. The baseline scenario should be extended to include baseline air quality levels so that the significant effects of pollution from downstream combustion emissions can be quantified.

Relevant scope 3 emissions

Question 2: Do you agree with the approach to the selection of relevant scope 3 emissions from different downstream activities to be included in the assessment, i.e., emissions borne from the refinery process, transport of the oil or gas and end-use combustion?

The draft guidance does not provide sufficient clarity on selecting relevant scope 3 emissions.

Question 2(a): If not, please outline what else should be considered or what else should be left out.

The guidance should require an assumption of 100% combustion of oil and gas produced, with the burden of proof on the developer to prove otherwise.

The guidance recognises that there are a number of different methodologies and conversion factors available to estimate scope 3 emissions. It does not prescribe a particular methodology and proposes instead that the Environmental Statement (ES) should explain the approach used, including assumptions and associated uncertainties.

The guidance should make clear that the methodology chosen must be in line with the Environmental Impact Assessment (EIA) requirement to provide information

based on 'current knowledge and methods of assessment' and must not include any substitution.

Assessing significant effects

Question 3: To what extent do you agree with the advice given in the draft supplementary EIA guidance for evaluating the likely significant effects of scope 3 emissions on climate is helpful when it comes to preparing an ES?

The draft guidance states that 'predictions of the magnitude and significance of likely effects of scope 3 emissions must be included' and 'accompanied by an indication of the criteria used to determine whether an impact is likely and whether it is significant'. Instead of setting out specific criteria, the guidance states 'which comparator or contextual information are most relevant will depend on a range of factors'.

The advice is too vague to ensure sufficient and legally relevant information is included in the ES to assess the impact of the project on climate. We strongly encourage that criteria to determine the impact on human health are also considered in evaluating the likely significant effects.

Question 3(a): Do you have any other suggestions that could be considered?

Combustion emissions are always both likely and significant effects of fossil fuel projects. The guidance should include criteria against which the significance of climate impacts must be assessed and contextualised.

The following criteria against which the significance of scope 3 emissions should be assessed should be included.

Risks to human health

The World Health Organization (WHO) has declared climate change to be the major threat to global health. Climate change poses multiple harms to physical and mental health from floods, wildfires, heatwaves, severe storms, spread of infectious diseases, food and water insecurity. The risks to health become more severe with each increment of a degree in global heating.

Heatwaves are linked to sharp increases in deaths. Older people and very young children are the most vulnerable to adverse health impacts. Heat exposure in pregnancy is linked to premature births, low birthrate and stillbirth. Heat stress adversely impacts mental health and exacerbates pre-existing mental illnesses. The UK Health Security Agency projects that annual heat-related deaths in the UK could

reach over 21,000 per year by the 2070s in a high-warming scenario. Heat caused more than 47,000 deaths in Europe and many thousands more globally in 2023.

Alongside climate change impacts, pollutants produced from combustion emissions are also hazardous to human health. Short-term exposure can impact lung function and breathing, exacerbate asthma and increase hospital admissions and mortality. Long-term exposure can reduce life expectancy due to respiratory diseases, cardiovascular diseases, and lung cancer, and has been associated with dementia, diabetes, poor birth outcomes and cognitive decline. Globally, 1.2 million deaths were caused by fossil-fuel-derived particulate matter pollution in 2020 [Lancet Countdown 2023 report], including 27,000 deaths in the UK. The government has recognised air pollution as the greatest environmental risk to public health. Research has shown a direct link between air pollution and hospital admissions and GP appointments and the total impact of the cost to the NHS and social care systems as a consequence of the health impacts of air pollution is estimated to be £1.6 billion from 2017-2025.

Health systems are also at risk, both from increasing patient demand as a consequence of climate change risk factors and the threats to health infrastructure from over-heating, flooding, and other unpredictable extreme weather events.

In 2024, the UK Health Alliance on Climate Change published a report that provides further detailed evidence of the risks to health: <u>A Just Transition for the Good of Health</u>

The short and long term health risks posed by combustion emissions should be considered in evaluating the likely effects of scope 3 emissions.

Global consensus on equitable transition away from fossil fuels

At <u>COP28</u>, there was global consensus for 'transitioning away from fossil fuels in energy systems in a just, orderly and equitable manner'. This places an obligation on the UK to support the acceleration of the global transition away from fossil fuels.

A fundamental principle enshrined in the UN Framework Convention on Climate Change and the Paris Agreement is that countries should act on climate change according to their common but differentiated responsibilities and respective capabilities. This is based on two moral principles: those that did most to cause the climate problem (countries with the largest historic emissions) should contribute most to solving it, and that in a collective endeavour, the greatest efforts should fall on the broadest shoulders (the countries with greatest financial and institutional resources). Thus the Paris Agreement states that developed countries should take the lead in reducing emissions, while developing countries are given more time. As a wealthy nation with a significant history of carbon emissions, the UK has a moral duty to address the inequalities between those responsible and those most impacted by climate change.

Emissions produced from proposed new oil and gas projects should be considered in relation to the UK's obligation to account for cumulative emissions and historical contributions by cutting emissions more rapidly.

International leadership

The UK has established itself as a climate leader and decisions on oil and gas projects in the UK will influence those in other countries.

The <u>Committee on Climate Change (2022)</u> has advised that stopping new oil and gas exploration (and by implication, development) would send a powerful signaling effect, both domestically and internationally. IEA director Fatih Birol has <u>encouraged</u> <u>the UK</u> to be an "inspiration for the rest of the world" on climate action, with decisions on new oil fields "an important step in that direction".

If the UK opens new fields, it weakens its diplomatic standing and gives license to other governments to continue opening new fields too, further placing health at risk. In particular, poorer countries are less likely to begin a phaseout of fossil fuel extraction while countries such as the UK continue to open new fields.

Because of this wider influence, the impact of opening new fields – or deciding not to do so – is much greater than the direct emissions from the fields alone and should be considered in assessing new projects.

Consideration of cumulative effects

Question 4: To what extent does the overview provided for assessing cumulative effects help convey the expectation on what other relevant projects (existing or planned) should form part of an assessment?

The overview does not adequately convey the expectation of what should form part of an assessment. The draft guidance is too narrow and vague.

Question 4(a): Do you have any other suggestions that could be considered?

The <u>IEMA guidance 2022</u> states that 'as GHG emission impacts and resulting effects are global rather than affecting one localised area, the approach to cumulative effects assessment for GHGs differ from that for many EIA topics where only projects within a geographically bounded study area would be included.' The guidance further

states that all global cumulative GHG sources are related to the effect on climate change.

The guidance should recognise that the cumulative assessment of scope 3 emissions differs from cumulative assessments of other types of environmental impacts and that understanding the significance of cumulative GHG emissions on the global level is needed.

On the global level, the cumulative effect of GHG emissions in the atmosphere impacts the level of global temperature increase. Adding new emissions to the atmosphere inevitably leads to more years of cumulative heating.

Mitigation measures

Question 5: To what extent does the draft supplementary EIA guidance provide clarity on how to approach identifying suitable mitigation measures and subsequently implementing those measures?

The draft guidance does not provide clarity on how to approach mitigation for scope 3 emissions.

Question 5(a): Do you have any other suggestions that could be considered?

Combustion emissions cannot be meaningfully avoided, prevented, reduced or offset if an offshore oil and gas project goes ahead. As such, there are no mitigation measures for combustion emissions, and the only way to avoid the adverse climate impacts of those emissions is for the project not to go ahead.

Some developers may propose carbon capture, usage, and storage (CCUS) as a way of mitigating or offsetting emissions from a fossil fuel project. There is strong <u>scientific evidence</u> that carbon dioxide removal CCUS cannot be considered equivalent to reductions in actual emissions, and thus estimates of net emissions can be misleading.

CCUS does not capture other pollutants from fossil fuels, such as fine particulate matter, NOx, SO2, and mercury, which cause multiple health harms. Moreover, reliance on CCUS further perpetuates usage and slows the transition away from fossil fuels, while condemning our children to years of harm from breathing dirty air.

The guidance should make clear that CCUS is not an appropriate or effective mitigation for combustion emissions from new extraction.

Environmental protection objectives

Question 6: Are the expectations on environmental protection objectives clear?

The expectations on environmental protection objectives are not clear.

Question 6(a): Do you have any other suggestions that could be considered?

The guidance should provide a clearer indication of what environmental protection objectives are. The reference to environmental protection objectives is broad and should include wider principles, policies and targets aimed at environmental protection

The global temperature goal set out in the Paris Agreement is the most relevant environmental protection objective, which is established in national law by the UK's ratification of the Paris Agreement and the adoption of Paris-aligned targets in the <u>Climate Change Act (CCA) 2008</u>. The Paris Agreement also refers to "equity and the principle of common but differentiated responsibilities and respective capabilities, in the light of different national circumstances" which should be included in the environmental protection objectives.

The CCA 2008 integrates some of the obligations under the Paris Agreement into domestic law. The guidance should make clear that any reference to the objectives of the CCA 2008 or UK carbon budget does not negate the obligation to assess all emissions, regardless of where they are released. The majority of scope 3 emissions from UK projects are released outside the UK and must also be assessed in the ES (~70% UK reserves are oil, ~80% of oil is exported). Global objectives are most relevant for scope 3 emissions.

At EU level, there are four principles on which environmental policy is based and each of these could be deemed environmental protection objectives : (1) precautionary principle; (2) preventive action; (3) rectifying pollution at source; and (4) polluter pays principle.

The environmental protection objectives should be specified, and should include the objectives of the Paris Agreement.

The impact of approving new projects on the UK's international climate leadership and global cooperation towards achieving international climate objectives should also be considered in this step of the guidance.

Members of the UK Health Alliance on Climate Change are:

Association of British Neurologists Association of Clinical Psychologists UK Association of Dental Hospitals Association of Paediatric Anaesthetists of Great Britain and Ireland Association of Surgeons of Great Britain and Ireland British and Irish Association of Stroke Physicians British Association of Critical Care Nurses British Association of Parenteral and Enteral Nutrition British Dental Association **British Geriatrics Society** British Medical Association **British Medical Journal** British Orthopaedic Association British Society of Gastroenterology British Thoracic Society **College of Paramedics** Faculty of Medical Leadership and Management Faculty of Pharmaceutical Medicine Faculty of Public Health Faculty of Sexual & Reproductive Healthcare Florence Nightingale Foundation **Greener Practice CIC** Healthcare Infection Society Infection Prevention Society Intensive Care Society Nursing Standard Journal Paediatric Critical Care Society Planetary Health Report Card Plant Based Health Professionals The Lancet Real Zero **Royal College of Veterinary Surgeons Royal College of Anaesthetists Royal College of Emergency Medicine Royal College of General Practitioners** Royal College of Nursing Royal College of Obstetricians and Gynaecologists Royal College of Paediatrics and Child Health Royal College of Physicians Royal College of Physicians and Surgeons of Glasgow Royal College of Physicians of Edinburgh Royal College of Psychiatrists Royal College of Surgeons of England **Royal Pharmaceutical Society** Students for Global Health The Academy of Medical Sciences The Physiological Society **UK Kidney Association**