Podcast script recorded 22 December 2021

I am about to put the case that infant death rates rise in locations exposed to emissions after incinerators start operating. I feel well-placed to speak on this issue due to personal circumstances and extensive research over the last two decades.

The incinerator issue is extremely serious as it's about the Environment Agency's ongoing failure to protect us from toxic incinerator emissions, as well as the failure of bodies such as the Health Protection Agency and Public Health England to examine relevant data around incinerators and then tell the Environment Agency of the harm to health the emissions are causing, so that many thousands of lives being lost or impaired might be saved.

I've used Office for National Statistics (ONS) data to support my claim that incinerator emissions cause higher infant death rates by mapping the rates at electoral ward level and seeing higher rates in wards downwind of incinerators.

I've also plotted graphs of infant mortality trends at Council level showing infant death rates rising after incinerators start operating, which shows that deprivation, ethnicity and low socioeconomic status can't be blamed.

Edmonton incinerator started fifty years ago. When I looked at infant death rates in "groups of four" electoral wards in London's 625 wards aggregated for the twelve years 2002-2013, the highest group was a cluster around the Edmonton incinerator where four wards, two in Enfield and one each in Waltham Forest and Haringey, had a total of 12,109 live births and 111 infant deaths recorded by ONS, i.e. an infant mortality rate of 9.2 per 1,000 live births. The lowest group of four wards were in Bromley, where three infant deaths and 5,119 live births were recorded in the same 12-year period, i.e. an infant death rate of 0.6 per 1,000 live births. The rate in the cluster around Edmonton incinerator was fifteen times higher than in Bromley.

I wish I'd read many years ago about Dr William Brend, a barrister as well as a medically-qualified doctor, who died in 1944. He was concerned that women might be wrongly accused of having killed their babies.

He examined infant death rates in all parts of the British Isles for 1914 and saw a huge range from 38 per 1,000 live births in rural County Roscommon to 184 per 1,000 in the textile town of Ashton-under-Lyne. He concluded that poverty couldn't be blamed and that air pollution must be the dominant causal factor. He knew over a hundred years ago that it was wrong to blame poverty, but his opinion was ignored and his research ridiculed by other doctors in the letters pages of The Lancet. Poverty is still

being blamed and at first glance it seems correct....until you realise that polluting industries have so often been sited in poor areas.

The entire text of Dr Brend's "Health and The State" (Constable, 1917) is online, thanks to the University of California in Los Angeles, and the following is on pages 87 & 88:

"The Effect of a Smoke- and Dust-polluted Atmosphere

We have now examined, with one exception, the main factors which might be held to account for a high rate of infant mortality, and we find that differences neither in poverty, bad housing, insufficient feeding, defective sanitation, disease, industrial occupation of women, nor malnutrition of mothers can be regarded as adequate to explain the excessive and widespread difference between urban and rural rates of infant mortality. The factor which remains to be examined is that of smoke and dust in the atmosphere. Dirtiness of the air appears to be the one constant accompaniment of a high infant mortality: purity of the atmosphere is the one great advantage which the agricultural labourer of Wiltshire, the Connaught peasant, and the poverty-stricken crofter of the Highlands enjoy over the resident in the town. In the opinion of the writer, a smoky and dusty atmosphere as a cause of infant mortality far transcends all other influences.

We have noticed that the highest rates of infant mortality always occur in manufacturing towns, and over these there hangs throughout the year a pall of smoke which has been estimated to cut off 20 per cent of bright sunshine, and as much as 40 per cent of the total light. The soot emitted from the chimneys is not carried off by the wind, but falls rapidly in the immediate neighbourhood."

My late father-in-law's copy of Black's Medical Dictionary has the following sentence in the infant mortality section:

"As a general rule it is lowest in agricultural districts, higher in thickly populated mining and manufacturing regions, and highest in large towns where textile industries are carried on and where female labour is largely employed."

(Black's Medical Dictionary, 1944 edition, page 471)

Despite many politicians having taken notice of the incinerator issue, none have pursued it vigorously enough to expose the truth about how key data showing evidence of harm has been ignored or otherwise overlooked by those paid to protect public health.

The September 2007 reply to the Parliamentary Question by Shadow Cabinet Minister Norman Baker MP is important and the answer should have been "None whatsoever".

"To ask the <u>Secretary of State</u> for Health what assessment he has made of the correlation between the presence of a functioning incinerator and the incidence of infant mortality in that area.

Ben Bradshaw Minister of State (Regional Affairs) (South West), The Minister of State, Department of Health

In November 2005 the <u>Health Protection Agency</u> issued advice on the public health impact of Municipal Solid Waste Incineration and this is available on their website at: This information has also been <u>placed in the Library</u>.

Emissions from modern waste incinerators in the United Kingdom are subject to stringent health controls."

Those involved in campaigns against incinerators might recall a group in North Yorkshire getting a threat of legal action from Kirklees Council over a slide they'd shown at a public meeting.

The same slide had been shown by myself at a large public meeting at Costessey High School, Norwich in January 2007 and also reproduced in the Dorking Advertiser of 10 January 2008, along with two others showing higher rates of infant deaths in electoral wards downwind of incinerators at Kirklees, Edmonton and Coventry. There was a follow-up article in the Dorking Advertiser of 17th January 2008 with the headline: "If it was dangerous it wouldn't be built, say incinerator bosses".

The bullying by Kirklees Council over a major public health issue is very important and could have dissuaded people from using the infant mortality data when fighting incinerator proposals. The Northern Echo article ("Legal threats in waste dispute", 3 July 2009) included:

"A Kirklees Council spokesman said: "The council and its partners Sita Kirklees and NHS Kirklees are seriously concerned about the misuse of infant mortality figures by Disc.

"The Kirklees figures were closely studied by the NHS and lifestyle is seen as the chief cause.

"The implied suggestion that the death rate is caused by airborne contaminants from the incinerator is wholly untrue and the council has written to Disc to ask them to desist."

An incinerator was eventually built in Allerton Park and the infant mortality rate rose in Hambleton Council after it started operating in 2018.

The Huddersfield Examiner article "Air pollution linked to Kirklees baby deaths, says campaigner" (17 February 2017) started: "Air pollution – rather than poverty – is the reason for high numbers of baby deaths in parts of **Kirklees**, it has been claimed. According to environmental researcher Michael Ryan, areas such as Dewsbury and Batley not only have the highest levels of deprivation in the borough, they also have the poorest air quality."

The article ended: "The Examiner invited Kirklees Council to comment but the council is yet to respond."

Kirklees Council were keen to bully a group of concerned residents, but chose not to give comment to the newspaper.

After Daniel Kawczynski MP kindly purchased a set of ONS infant mortality data for all Councils from 1974, one of the first graphs I prepared was for Kirklees which showed a sudden post-incinerator rise in rates of infant deaths, just like the ones at Byker, Coventry, Nottingham, Edmonton, Dudley, Wolverhampton, SELCHP, Birmingham, Colnbrook, Belvedere, Exeter, Plymouth, Shrewsbury, Four Ashes, Bolton, Chineham, Crymlyn Burrows, Splott, Greatmoor, Newhaven, Marchwood, Javelin Park etc.

The Harrow Observer of 3 May 2007 reported my research over three pages. The front page had a photo of the Colnbrook incinerator with the headline "BABY KILLER?". Inside it reported that Harrow Primary Care Trust had declined to comment. The journalist told me that the PCT refused to take her calls or answer her emails. Dhruti Shah got a young journalist award for her articles on the subject. The Primary Care Trust remained silent and the residents in the incinerator fallout zone are still breathing contaminated air today.

In October 2004, when Ruth Kelly MP was a Treasury Minister, she kindly authorised the release of an eight-year set of unpublished birth defect data for the 303 Primary Care Trusts in England. When the data was first published in detail in 1987, there were 200 locations, but reduced to only 28 in England in the 2001 set, making the data increasingly worthless. I'd requested the data as I'd earlier noticed a sudden rise in the published rate of birth defects in the London Borough of Hillingdon after the Colnbrook incinerator started.

John McDonnell MP met me at Westminster in March 2004 and later asked a parliamentary question on the subject. Birth defect data had been collected since 1964, following the Thalidomide scandal and the Chief Medical Officer had written to all doctors, as reported in The Times article "SCHEME TO NOTIFY MALFORMATIONS", on 6 January 1964:

"He reminds practioners that "following the thalidomide tragedy it was generally felt that there should be a national notification of congenital abnormalities so that any increase in these conditions might be noted as early as possible". The scheme will be widely welcomed as a valuable means of helping to cope with a problem which involves a high infant mortality rate and is responsible for much ill health, disability, and parental distress."

The Yorkshire Post of 1st September 2005 reported my research using the birth defect rates in the Primary Care Trusts and a link with incinerators. On the 15th September, their front page article reported the Health Protection Agency's promise to carry out an investigation. That was a false statement by the Health Protection Agency.

I was wrong to think that baby death charities and the Royal College of Midwives would be interested in the incinerator link with higher infant death rates. My letters to BLISS and SANDS were unanswered, as was my letter sent by recorded delivery to Cathy Warwick at the Royal College of Midwives on 1 July 2017.

Mark Metcalf wrote about the Lullaby Trust's lack of interest in the incinerator link with infant deaths in Big Issue North. They were formerly the Foundation for the Study of Infant Deaths, who'd known about the air pollution link with sudden infant deaths in 1985 as the 1981 research by Toke Hoppenbrouwers and others was included in "Sudden infant death: Patterns, Puzzles and Problems" (Open Books, 1985).

Saying that incinerator emissions don't harm health is very easy, but providing evidence of "lack of harm" has so far eluded the Environment Agency, Health Protection Agency, Public Health England and anyone else who may assist these bodies.

You need to see graphs showing post-incinerator rises in the rates of infant deaths in councils exposed to emissions, plus the graphs showing sudden falls in the rate after incinerators closed down.

It's all about changes in levels of exposure to toxic air pollution and if UK academics and public health experts had been alert in the early 1970s, they'd have noticed the correlation between the switch to clean North Sea Gas from toxic town gas, in the late 1960s and early 1970s, with a rapid fall in infant mortality in England & Wales.

The report "Geographical trends in infant mortality: England and Wales, 1970–2006" by Danny Dorling and others (Health Statistics Quarterly 40 Winter 2008) starts: "At national level in England and Wales, infant mortality rates fell rapidly from the early

1970s and into the 1980s." The introduction of North Sea Gas was a major missed opportunity for public health.

When Turkey imported natural gas from Russia, there was also a fall in infant death rates, but unlike here in the UK, the link was written about in "Air Pollution and Infant Mortality: Evidence from the Expansion of Natural Gas Infrastructure" (The Economic Journal, 26 May 2015). The abstract states:

"We examine the impact of widespread adoption of natural gas as a source of fuel on infant mortality in Turkey, using variation across provinces and over time in the intensity of natural gas utilisation. Our estimates indicate that the expansion of natural gas infrastructure has resulted in a significant decrease in the rate of infant mortality. Specifically, a one-percentage point increase in natural gas intensity – measured by the rate of subscriptions to natural gas services – would cause the infant mortality rate to decrease by 4%, which would translate into approximately 348 infant lives saved in 2011 alone."

Most of my professional life was as a flood defence engineer for the Environment Agency and predecessor authorities. Floods can't be ignored or covered-up – unlike health and mortality data around incinerators.

Alan Dalton named me in his August 2001 report: "Just who does the Environment Agency protect?", which he sent to Environment Minister Michael Meacher MP asking him "to back him or sack him". He'd been appointed to the Environment Agency Board by Michael Meacher in 1999 and was sacked by the same man on 19 December 2001. The sacking was by fax and Alan Dalton's reply fax told Mr Meacher that he'd "shot the messenger".

One of the case studies in that report was about the infamous Byker incinerator in Newcastle-upon-Tyne. Another was about the hazardous landfill site at Normanton, near Wakefield.

I was named in the case study about workplace stress in the Environment Agency because I'd reported them to the Health and Safety Executive over their failure to comply with the Management of Health and Safety at Work Regulations.

In 2006, I bought a three-year set of birth and mortality data from ONS for sixty pounds plus VAT and mapped infant death rates at electoral ward level around incinerators and saw higher rates of baby deaths in wards downwind of incinerators in different parts of the country.

BBC Radio London sent a journalist to interview me in Shrewsbury on 12 April 2007. She later emailed the London Health Observatory and was told that their expert advisers had told them that air pollution wasn't linked to infant mortality. After the BBC dropped the news item about my research, I contacted the London Health Observatory and obtained copies of the above email correspondence. I then made a request under the Freedom of Information Act asking for the names of their expert advisers and their reply claimed that they couldn't remember.

The first newspaper reports about this research were in six local London papers and one national in 2007. The data I'd bought listed numbers of births and deaths in every electoral ward in England and Wales, both as totals and by sex. The deaths were also listed in age groups: under 28 days, less than 1 year, 1-4, 5-14, 15-24 years etc.

When Ken Livingstone was London Mayor, his office kindly sent me a large-scale electoral ward map of London, which let me easily see infant death rates around the three municipal incinerators affecting parts of London: Edmonton in Enfield, SELCHP in Lewisham, and Colnbrook in Slough. I was puzzled by the low infant death rates in Hillingdon wards close to Colnbrook incinerator until I realised that the planes to or from Heathrow would fly through the plume and displace and disperse the emissions.

In August 2003, the newly formed Health Protection Agency promised to check data around incinerators and landfill sites due to health concerns of residents. In March 2008, I sent a letter by recorded delivery asking Dr Pat Troop under the Freedom of Information Act for a list of the incinerators around which they'd examined the rates of illness and premature deaths at all ages at electoral ward level and compared the upwind wards with those downwind of incinerators.

I then sent a follow-up letter, also by recorded delivery, in which I threatened to inform the Information Commissioner of their failure to comply. A backdated letter was received in which the new Chief Executive, Justin McCracken, admitted that no such data had been examined. That appalling admission of negligence was reported in both the Dorking Advertiser and also the Surrey Mirror on 22 May 2008.

Justin McCracken was interviewed by Nigel Hawkes, whose Times article of 20 May 2008 reported that the Health Protection Agency was: "proud to put public health first" and "Our role is to develop evidence and make sure that those who can act on it are given it and do act on it". The Health Protection Agency were supposed to be providing expert advice to the Environment Agency about health effects of air pollution. Their Chief Executive didn't tell The Times in May 2008 that they'd been shown to have failed in their declared aim earlier that month.

I'm grateful for the encouragement of Mark Metcalf and for his articles and also to Big Issue North for publishing articles exposing the truth, starting in April 2010.

Those articles persuaded, or shamed the former Health Protection Agency into promising a study in April 2011 into a possible link between incinerators and infant mortality. That study was published online in November 2018 and concluded no link, but only after ONS data was adjusted for deprivation, ethnicity and socioeconomic status.

Following my FoI request in 2012, ONS released infant mortality rates in all London Boroughs from 1970 to 2010. The graph of post-SELCHP rises in rates of infant mortality in Lewisham, Newham, and Tower Hamlets was the first such graph I produced. Wandsworth was included and the rates were all similar and falling steeply in all four Boroughs before the SELCHP incinerator started in 1993. After 1993, the rate in Wandsworth, which is rarely exposed to emissions, continued to fall but infant death rates suddenly rose in Lewisham, Newham, and Tower Hamlets.

As long ago as 1913, it was clear to at least one politician that there wasn't any link between poverty and infant mortality. The Rt Hon John Burns MP was quoted as follows in the Manchester Evening News of 4 August 1913:

"Lancashire is industrial, its industry is a marvel to everybody. Commerce is very prosperous, and, broadly speaking, its people have regular work and relatively good wages. No county in the kingdom has a lower pauperism, but it stands highest in the list for infant mortality."

Wake up Britain!

We've been paying people who should have been diligent and honest about toxic incinerator emissions, but have instead been failing us and shortening our lives and those of past and future generations.