

WASTE PLANT HARM DISMISSED

PHE say incinerators not “a significant risk”

Father claims they increase infant deaths

Public Health England’s claims that constructing more waste incinerators is not “a significant risk to public health” has again been challenged by a man whose studies have consistently shown that infant mortality rates are above average in locations close to such plants.

In seeking to reduce landfill, councils are increasingly incinerating waste, with 10.8 million tonnes being burnt in 2017-18, compared with 4.9 million tonnes four years earlier. There are over 90 plants across the UK, with 22 constructed in the last decade, whilst another 50-plus are approved or proposed.

Infant mortality

Michael Ryan began researching the possible impact of air pollution two decades ago after he lost two children, one at 14 weeks, causing him to consider if their deaths could be related to pollution caused by living downwind of incinerators.

He obtained at considerable personal financial cost infant mortality statistics from every ward across England and Wales. He discovered that whether incinerators are sited in affluent areas – for example Chingford, close to the Edmonton incinerator – or poorer areas then infant mortality levels are above average.

He cited other scientists, stretching back over a century in some cases, who challenged the norm that deprivation, poor parenting and cultural practices are the only reasons for infant deaths. He reported on how infant mortality levels had collapsed in both the UK and in those parts of Turkey where natural gas, which releases fewer pollutants, had been introduced.

Ryan’s work, which has been consistently reported in *Big Issue North*, has been used by MPs to ask parliamentary questions and this in turn pushed Public Health England (PHE) to conduct a study into the impact of waste incinerators on infant mortality levels. This was first promised in 2003, began in 2011 and came out last year, taking six years longer than the original two year schedule.

The result of the research, which ignored Ryan’s work altogether and was undertaken by the Small Area Health Statistics Unit at Imperial College, London, was that PHE reconfirmed its claim that “modern, well run and regulated municipal waste incinerators are not a significant risk to public health”.

PHE – set to be renamed the National Institute for Health Protection – adjusted the data for deprivation, ethnicity and socioeconomic status before coming to its conclusions. Ryan believes the study was thus flawed and has also questioned why the researchers did not look at what has happened in areas where modern waste incinerators have opened in the last 10 years. One such location is Newhaven on the south coast, opened in 2012, downwind of which are the residents of Lewes and Eastbourne.

‘Convenient dumping ground’

As in many other locations the original proposal to build an incinerator by East Sussex Council was highly controversial and its official opening was boycotted by Norman Baker, Lewes MP, who argued: “Newhaven is simply a convenient dumping ground for the rest of the county.”

Peter Jones, leader of the council, accused opponents of the incinerator of peddling “voodoo science”.

The infant mortality rates for Eastbourne and Lewes in



Ryan blames incinerators for his children’s deaths. Photo: Steve Ryan

2013 were zero and 1.1 per 1,000 live births. In 2019, when infant mortality rates for England and Wales were 4 per 1,000 live births, the corresponding figures in Eastbourne and Lewes were 8.7 and 7.9. In real life this corresponds to six infant deaths in Lewes.

Critics believe such trends should be worth examining by a body charged with protecting public health.

Along the south coast, Exeter incinerator opened in 2014 when the infant mortality rate was 3 per 1,000 live births. By 2019 it had doubled to 6 infant deaths.

In the Midlands, Bromsgrove’s infant mortality rate has risen since the £165 million Hartlebury incinerator began in 2017 from 3 to over 6 per 1,000 live births.

The figures in other locations are not so gloomy. In Leeds it rose only slightly, from 4.8 in 2016, when the Leeds Energy Recovery Plant incinerator was opened, to 5.1 last year. Bolton, which has two incinerators, has a rate of 4.9 per 1,000 live births with 18 still births and 18 infant deaths last year.

There are no areas with incinerators where infant

mortality rates are below the national average.

Big Issue North asked PHE if it had studied the statistics for newer incinerators. Could it offer any explanation? Were infants dying unnecessarily and was PHE partly responsible by failing to consider Ryan’s work?

PHE did not respond to the specific questions, restating its longstanding position that incinerators are not a significant risk, with a spokesperson adding: “While it is not possible to rule out adverse health effects from these incinerators completely, any potential effect for people living close by is likely to be very small.”

Eastbourne and Lewes councils and Caroline Ansell, Eastbourne’s MP, did not respond to requests for comment.

Ryan said: “PHE, councils and MPs should be looking at trends over time. By doing so they’d surely become aware of many sudden post-incinerator rises in infant death rates which surely cannot be put down to sudden influxes of poorer people into these localities.”

MARK METCALF