



Forum For Clean Air Toolkit

A practical guide to building city-level clean air forums
for dialogue, collaboration, and collective action

DOCTORS
FOR CLEAN AIR
AND CLIMATE ACTION



LUNG CARE
FOUNDATION



Forum For Clean Air — Toolkit —

A practical guide to building city-level clean air forums
for dialogue, collaboration, and collective action

SECTION A - INTRODUCTION & OVERVIEW

Introduction.....	1
Why Forums For Clean Air?.....	1
Introduction to the Toolkit	2

SECTION B - UNDERSTANDING AIR POLLUTION & LOCAL AIR QUALITY ISSUES

Understanding Air Pollution and its health impacts	3
Identifying Local Air Quality Issues & Understanding Air Quality Data	6
Using AQI to Understand City's Air Quality	6
• Where to check AQI:	6
• How to interpret AQI levels:	7
Mapping Local Hotspots Through On-Ground Observations	8
Health Evidence: Insights from Doctors and Clinics	8
Community Observations & Lived Experiences	9
Hyperlocal Checks Using Simple Tools	9
Creating a "Local Clean Air Profile"	10

SECTION C - FORUM PLANNING, ACTION AND FACILITATION

Planning activities	11
Action catalogue	12
1.Evidence & Knowledge-Building Actions	12
2.Health-Centred Advocacy Actions	12
3.Community Engagement & Behaviour Change	13
4.Youth & Education-Focused Actions	13
5.Media & Communication Actions	14
6.Collaboration with Government & Institutions	14
7.Rapid Response Actions (During High AQI Episodes)	15
8.Capacity Building & Internal Strengthening	15
9.Visibility, Recognition & Momentum-Building	15

SECTION D - TOOLS & GUIDES

Letters to Administration	16
RTI	17
Rapid response by FFCA Chairperson.....	18
Severe AQI day checklist for the forum.....	19
FAQs for Media (For Healthcare Professionals)	20
Clean Air Prescription	23

SECTION E - INSPIRATION & MOTIVATION

Success Stories from Existing FFCAs.....	24
Key Takeaway.....	26

Introduction

Lung Care Foundation (LCF) is a social impact trust working at the intersection of air pollution, climate change, and public health. Anchored in medical expertise and community engagement, LCF focuses on advancing prevention-oriented approaches by strengthening health systems, empowering health professionals, and enabling evidence-based action to protect population health from environmental risks.

Under LCF's leadership, Doctors for Clean Air and Climate Action (DFCA) is a nationwide network of health professionals committed to addressing air pollution and climate change through evidence-based advocacy, public education, and health-centred policy engagement. The initiative is grounded in the principle that those who safeguard health must also speak out against the environmental determinants of disease, especially air pollution, which is responsible for over 2 million premature deaths annually in India.

DFCA mobilises doctors as trusted messengers and motivated motivators, enabling them to communicate the health risks of air pollution and climate change with credibility and urgency, and to engage communities, policymakers, and the media in informed, health-led action.

To translate this health leadership into sustained local action, DFCA facilitates the Forum for Clean Air (FFCA) a city- or district-level, multi-stakeholder platform. FFCA brings together health professionals, government representatives, citizen groups, youth, schools, media, and local experts to build shared understanding, identify city-specific air quality challenges, and develop actionable, context-sensitive solutions.

FFCA provides a participatory space for:



Identifying local pollution hotspots



Sharing lived experiences and data on health impacts



Co-creating feasible, context-specific solutions



Coordinating public outreach and policy engagement



Monitoring and reviewing progress on air quality actions



Why Forums For Clean Air?

Cities across India face worsening air quality due to rapid urbanization, vehicular growth, and inadequate enforcement of environmental norms. While many sectors are affected, the health sector has a unique role to play, not just as a responder to illness, but as a proactive advocate for prevention and public welfare.

The FFCAs are envisioned to:

- Localize clean air advocacy
- Promote inter-sectoral collaboration
- Center public health in environmental governance
- Support the role of doctors as communicators of climate and health impacts

Introduction to the Toolkit

This toolkit is designed to guide local organizers, DFCA champions, and allied stakeholders in setting up, facilitating, and sustaining effective Forums for Clean Air across various Indian cities.

Audience



Structure:

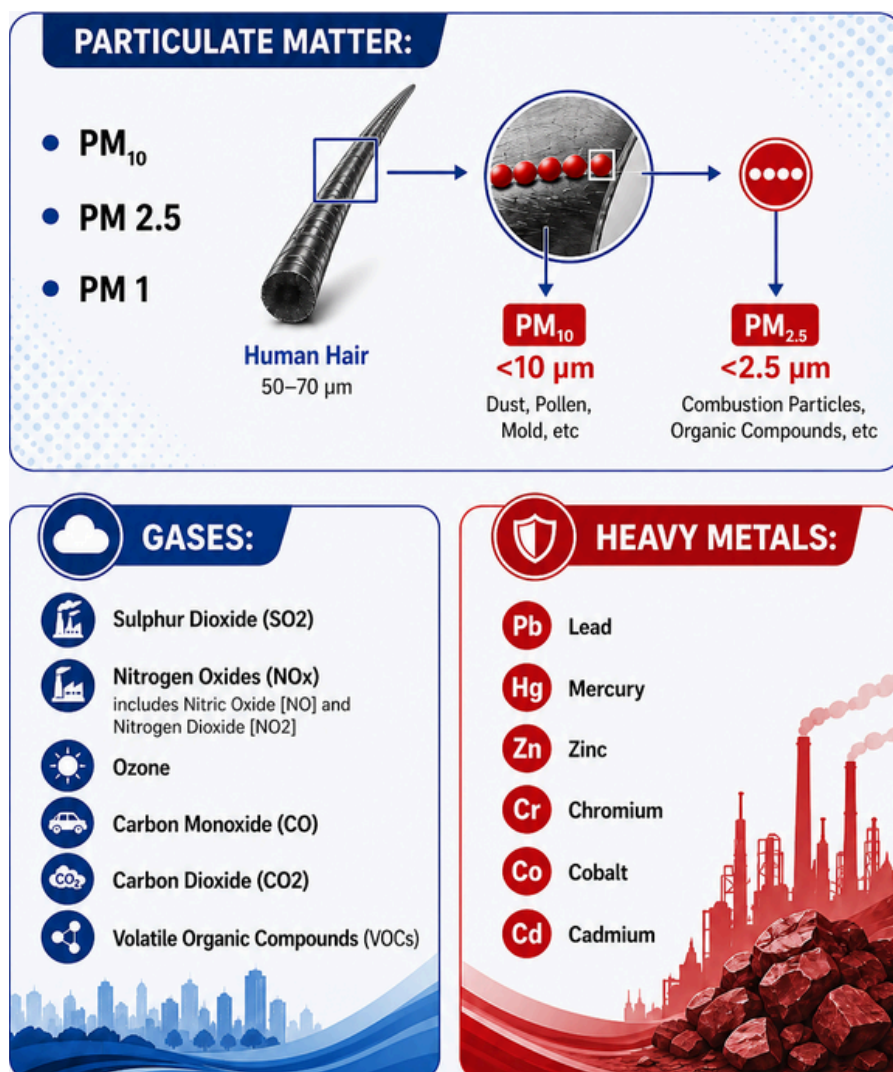
The toolkit is divided into practical sections, such as understanding air quality and local air quality issues, forum facilitation, action planning, communication, and inspiration with ready-to-use templates and real-world examples.

Understanding Air Pollution and its health impacts

Air pollution by definition refers to the presence of undesirable components (above the set limits) that contaminate the air and are detrimental to human health, ecosystem or planet as a whole. These pollutants can cause a range of health issues and environmental problems, affecting everyone, especially the most vulnerable populations like children, the elderly, and those with preexisting health conditions.

Types of Pollutants

Pollutants can be particulate matter, gases, and heavy metals. Origin of these air pollutants can be natural or man-made.



Types of Air Pollution

Outdoor (Ambient) Air Pollution



Contamination of outside air due to toxic emissions from combustion of fuels, chemical industries, vehicles, construction activities etc.

Major Pollutants

Particulate Matter (PM 2.5 as well as PM 10), Ground-level ozone, Nitrogen Dioxide (NO₂), Sulfur Dioxide (SO₂), Carbon Monoxide (CO)

Sources

Industrial Emissions, Vehicle Emissions, Agricultural Activities (Crop Residue Burning, Fertilizers and pesticides), Natural Sources (Wildfires, dust storms)

Indoor (Household) Air Pollution



Contamination of the air inside homes and buildings from compounds such as smoke, CO, dust, formaldehyde, asbestos, pesticides, lead, cleaning solvents, chloroform etc. Indoor air pollution is 5-10 times more harmful than outdoor air pollution.

Major Pollutants

Particulate Matter (PM 2.5 as well as PM 10), Volatile Organic Compounds (VOCs), Carbon Monoxide (CO), Radon, Biological Pollutants (Mold, dust mites, pet dander, and other allergens and pathogens)

Sources

Residential Biomass Burning (Cooking and Heating), Tobacco Smoke, Household Products (Cleaning agents, paints), Building Materials (Asbestos, formaldehyde, and lead), Biological Pollutants



Health Effects of Air Pollution



Short-Term Health Impacts

Short-term exposure to air pollution can lead to immediate health effects, especially in vulnerable populations such as children, the elderly, and those with preexisting health conditions.

Headaches and Dizziness
Nausea



Eye and Skin Irritation

- Eye Irritation
- Skin Issues



Cardiovascular Effects

- Increased Heart Rate and Blood Pressure
- Heart Attacks



Respiratory Symptoms

- Irritation of the Airways
- Asthma Exacerbation



Percentage of deaths (by Cause) due to Air Pollution in 2021

Stroke	39%
Lung Cancer	31%
Heart Disease	38%
COPD	67%
Neonatal	33%

Long-Term Health Impacts



Long-term exposure to air pollution has more severe and chronic health effects. These impacts can develop over the years and significantly reduce life expectancy and quality of life.

Neurological Effects

- Cognitive Decline
- Mental Health Issues
- Stroke



Cardiovascular Effects

- Heart Disease



Chronic Respiratory Diseases

- Chronic Obstructive Pulmonary Disease
- Lung Cancer



Immune System Effects

- Weakened Immune Response
- Autoimmune Diseases



Metabolic and Endocrine Effects

- Diabetes
- Obesity



Reproductive and Developmental Effects

- Adverse Pregnancy Outcomes
- Impact on Child Development



Identifying Local Air Quality Issues & Understanding Air Quality Data

Effective clean air action begins with a clear understanding of what is happening locally, what the air contains, where pollution is coming from, when it peaks, and how it affects community health. This section helps Forum members combine scientific data, on-ground observations, and health evidence to build a reliable picture of their city's air quality challenges.

Using AQI to Understand City's Air Quality

The Air Quality Index (AQI) is a measure of the level of air pollution, which takes into consideration the levels of 8 major pollutants (PM10, PM2.5, NO2, SO2, CO, O3, NH3, Pb) in the area. It is a figure derived from a formula that takes into account the levels of all these 8 major pollutants in accordance with their importance and contribution towards air quality. AQI simplifies complex air pollution data into an easy-to-understand number, colour code, and health risk information. As AQI rises (worse air quality), health risks, especially for vulnerable populations, increase. Six AQI categories, each with a colour, inform the public about air quality and encourage action towards cleaner air.

AQI levels directly correlate with the extent of damage to health and well-being.

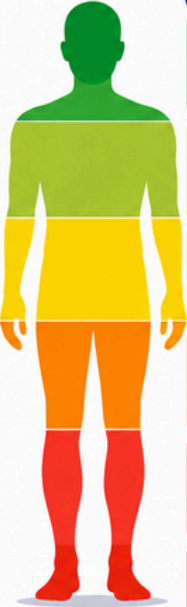
Where to check AQI

- 1 **CPCB Air Quality Bulletin & AQI dashboard**
- 2 **Sameer App**
- 3 **Safar (wherever available)**
- 4 **State Pollution Control Board websites**
- 5 **OpenAQ Explorer**
- 6 **Mobile apps & websites (e.g., AQI India, AirVisual, IQAir)**



How to interpret AQI levels:

AQI Levels and Health Effects



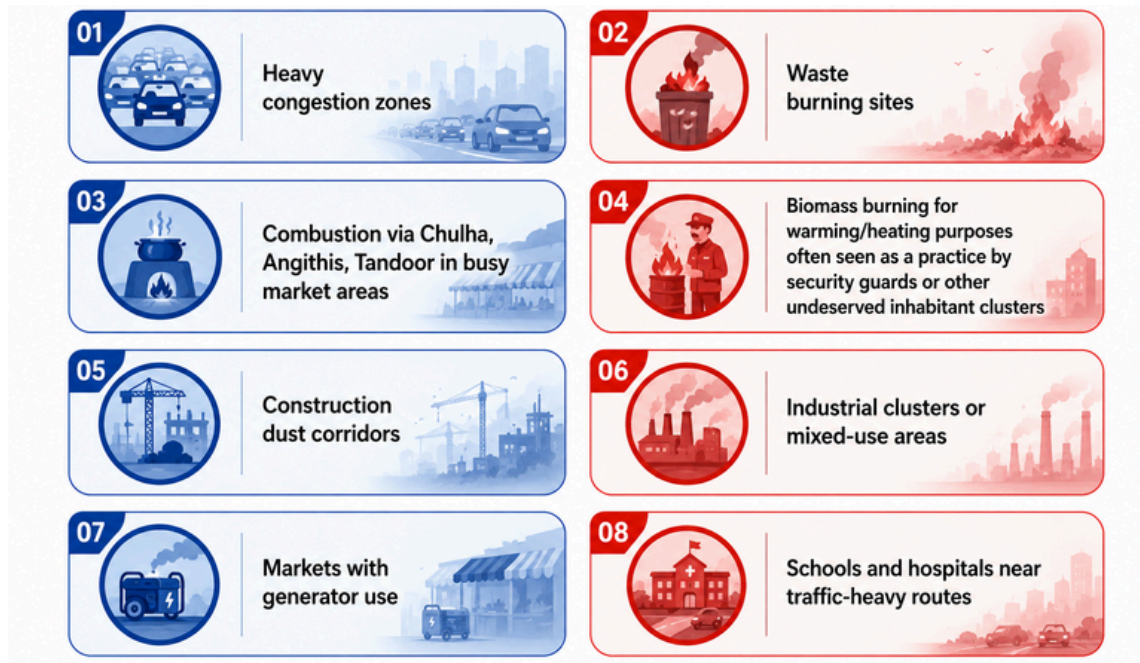
AQI LEVEL	HEALTH EFFECTS
Good (0-50)	 Low risk
Satisfactory (51-100)	 Minor breathing discomfort in vulnerable population
Moderate (101-200)	 Breathing or other health related discomfort in vulnerable population
Poor (201-300)	 Breathing discomfort in healthy people on prolonged exposure Breathing or other health related discomfort in vulnerable population on short exposure
Very Poor (301-400)	 Respiratory illness in healthy people on prolonged exposure Pronounced respiratory or other illnesses in vulnerable population on short exposure
Severe (401-500)	 Respiratory illness in healthy people on prolonged exposure Serious respiratory or other illnesses in vulnerable population on short exposure

AQI becomes the **gateway** through which forums can discuss local health impacts and identify priority areas for action.



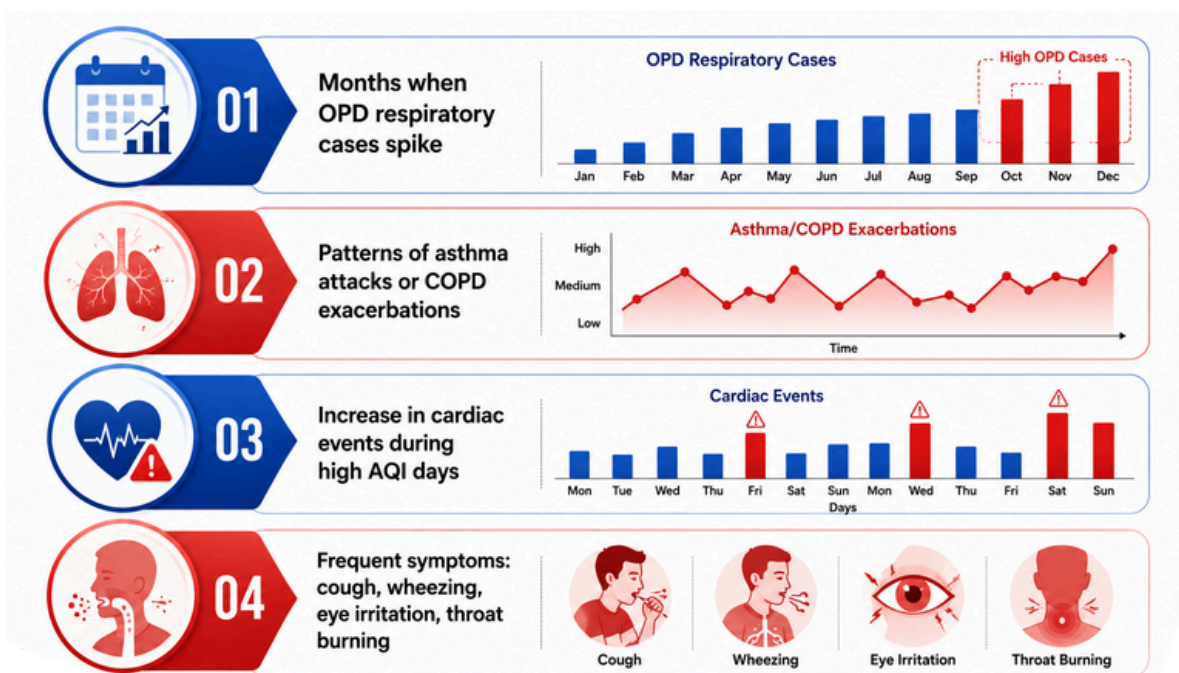
Mapping Local Hotspots Through On-Ground Observations

AQI provides the big picture, but forums also need hyperlocal understanding. The Forum members can identify and document hotspots by observing:



Health Evidence: Insights from Doctors and Clinics

Doctors and health workers are trusted observers of community health. Their experiences help humanize and contextualize AQI levels. Forums can gather simple observations such as:



Community Observations & Lived Experiences

Local residents often know where the air feels worst. Forums can gather experiences and document them through:



Hyperlocal Checks Using Simple Tools

If available, forums may use or borrow simple devices such as handheld PM2.5 checkers, pocket monitors, or low-cost sensors to understand real-time local air quality.

Hyperlocal monitoring is useful for capturing neighbourhood-level variations that citywide averages often miss, especially near traffic corridors, construction sites, or local emission hotspots. These checks can help communities better contextualise daily exposure and support informed local discussions and advocacy. However, the emphasis remains on the AQI as the primary and standardised indicator for air quality assessment.



Creating a “Local Clean Air Profile”

Forums could consolidate insights from AQI, observations, and health trends into a simple 1-page summary for their city.

Suggested **Format:**

- 
- City/Area:
 - Average AQI (last 30 days):
 - Worst AQI days & likely reasons:
 - Identified hotspots:
 - Common local pollution sources:
 - Observed health trends:
 - Community complaints:
 - Potential priority actions:

*This becomes the foundation for
Forum discussions, engagement with authorities,
and **communication materials.***



Forum Planning, Action and Facilitation

Once the Forum understands its local air quality challenges, the next step is designing structured activities and actions that bring stakeholders together, deepen understanding, and lead to meaningful local solutions.

This section supports Forum conveners with ready-to-use tools to plan meetings, run discussions, and implement effective actions.

Planning activities

Forum activities should be few, focused, and locally relevant. The aim is not to run many events, but to maintain continuity and momentum.

Guiding questions for planning:

- What are the top 2–3 air quality issues in our city or district?
- Which stakeholders are most relevant for these issues?
- What actions are realistic in the next 3–6 months?

Typical activity mix (indicative):

- One multi-stakeholder Forum meeting
- One activity with/for the Government stakeholder
- One issue-specific or site-based discussion
- One community or awareness activity
- One review or reflection meeting



Forums may choose actions based on local priorities, capacity, and partnerships. The actions below are indicative and can be adapted.

A. Evidence & Knowledge-Building Actions

(Strengthening the local evidence base)

- 1 Prepare a Local Clean Air Profile (1-pager updated quarterly)
- 2 Track monthly AQI trends and share summaries with stakeholders
- 3 Document seasonal pollution patterns and triggers
- 4 Maintain a simple hotspot register (locations, sources, observations)
- 5 Compile doctor-reported health trend notes during high AQI periods
- 6 Conduct walk-through surveys of pollution hotspots
- 7 Support short citizen observation logs (smell, smoke, dust complaints)
- 8 Collaborate with local institutions for short-term monitoring exercises
- 9 Compile media reports related to local pollution incidents
- 10 Create a shared local evidence folder for Forum members

B. Health-Centred Advocacy Actions

(Using the health voice to influence decisions)

- 11 Issue health advisories during high or severe AQI days
- 12 Write joint letters from doctors to local authorities on urgent issues
- 13 Present health evidence during city or district review meetings
- 14 Participate in public consultations related to CAP/NCAP
- 15 Submit health-focused recommendations to municipal bodies
- 16 Engage professional medical associations to endorse clean air messages
- 17 Conduct doctor-led policy briefings for local officials
- 18 Advocate for health-protective measures around schools and hospitals

C. Community Engagement & Behaviour Change

(Mobilising citizens and local groups)

- 19 Awareness sessions in schools, RWAs, markets, workplaces
- 20 Anti-idling campaigns near schools and hospitals
- 21 No-waste-burning awareness drives in neighbourhoods
- 22 Community hotspot walks with residents
- 23 Parent meetings focused on children's exposure reduction
- 24 Youth-led street plays, exhibitions, or poster campaigns
- 25 Community pledge campaigns for cleaner practices
- 26 Engagement with transport workers and vendors
- 27 Distribution of simple AQI awareness material

D. Youth & Education-Focused Actions

(Building future clean air champions)

- 28 Formation of school clean air clubs
- 29 Student-led AQI tracking or reporting exercises
- 30 Clean air competitions (posters, debates, quizzes)
- 31 Youth ambassador programmes linked to DFCA
- 32 Training student volunteers as clean air communicators
- 33 College talks on air pollution and health careers
- 34 Youth participation in Forum meetings



E. Media & Communication Actions

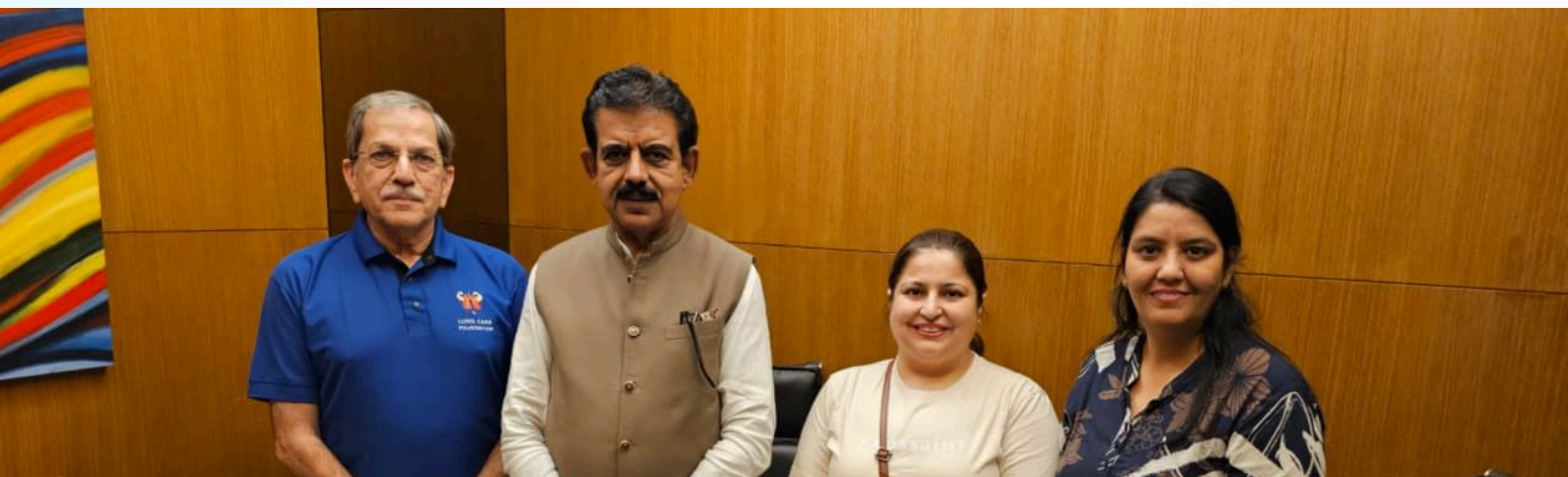
(Amplifying the health narrative)

- 35 Doctor-led media briefings during pollution episodes
- 36 Writing op-eds or opinion pieces in local newspapers
- 37 Regular sharing of health-based AQI messages with journalists
- 38 Use of social media for local AQI alerts
- 39 Sharing patient-safe stories to humanise the issue
- 40 Participating in radio or local TV discussions
- 41 Issuing joint statements during major pollution events

F. Collaboration with Government & Institutions

(Working with the system, not against it)

- 42 Joint site visits to pollution hotspots with authorities
- 43 Meeting the head of the district to secure long term collaboration
- 44 Supporting municipal awareness campaigns
- 45 Providing technical or health inputs for cities' Clean air Action Plans implementation and integrating clean air agenda within other ongoing campaigns in the city
- 46 Co-hosting clean air dialogues with government departments
- 48 Engaging stakeholders/departments basis local sources, e.g., the Agriculture dept in Punjab.
- 48 Supporting training programmes for frontline workers
- 49 Engaging district health officials on exposure reduction
- 50 Coordinating with traffic police on congestion hotspots
- 51 Working with education departments on school advisories



G. Rapid Response Actions **(During High AQI Episodes)**

(Amplifying the health narrative)

- 52 Activate Forum communication channels during AQI spikes
- 53 Issue coordinated health messages across doctors and media
- 54 Advise schools on exposure-reduction measures
- 55 Support emergency awareness announcements
- 56 Respond to misinformation or panic with clear messaging
- 57 Track and document health impacts during severe episodes

H. Capacity Building & Internal Strengthening

(Working with the system, not against it)

- 58 Orientation sessions for new Forum members
- 59 Media communication training for doctors
- 60 AQI interpretation and messaging workshops
- 61 Peer-learning exchanges with other cities
- 62 Annual reflection and planning sessions
- 63 Documentation of Forum learnings and successes
- 64 Leadership rotation and role-sharing within the Forum

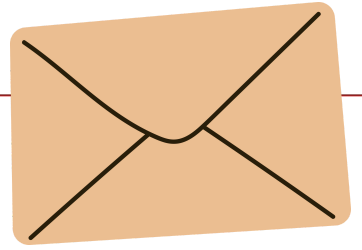
I. Visibility, Recognition & Momentum-Building

(Keeping energy and ownership alive)

- 65 Publicly recognise active Forum members
- 66 Celebrate Clean Air Days or Environment Days
- 67 Share success stories across DFCA platforms
- 68 Publish short activity reports or photo stories
- 69 Nominate local champions for awards or recognition
- 70 Showcase Forum work at state or national events

Tools & Guides

Letters to Administration



This is a ready-to-use format that Forums can adapt to:

- Highlight urgent air quality concerns
- Share health observations and AQI trends
- Request specific actions or meetings

This can be used for writing to municipal bodies, health departments, pollution control boards, or district officials.

Sample Letter to Administration

Subject: Health concerns related to air quality and request for local action in [City/District Name]

*Dear [Designation and Name of Officer],
[Department / Office Name],*

We are writing to you on behalf of the [City Name] Forum for Clean Air (FFCA), a multi-stakeholder platform comprising doctors, health professionals, civil society representatives, educators, and community members working collectively to address air pollution from a public health perspective.

Over the past [weeks/months], our Forum has been closely observing air quality trends in [City/District Name], particularly periods when the Air Quality Index (AQI) has remained in the "Poor" to "Very Poor" categories. During these periods, health professionals within our network have reported a noticeable increase in respiratory symptoms, asthma exacerbations, and other pollution-related health complaints, especially among children, the elderly, and individuals with pre-existing conditions.

In addition to AQI trends, Forum members and community groups have identified local pollution hotspots, including [briefly list 2-3 examples such as traffic congestion zones, waste burning areas, construction sites, etc.]. These observations indicate opportunities for targeted, local interventions that could significantly reduce exposure and improve public health outcomes.

We would respectfully like to request your support in the following areas:

- *Reviewing identified pollution hotspots and possible mitigation measures*
- *Strengthening enforcement of existing regulations related to waste burning, construction dust, or traffic emissions*
- *Supporting awareness and preventive health measures for vulnerable populations*
- *Exploring opportunities for collaboration between your office and the Forum for Clean Air*

Our Forum would welcome the opportunity to share local observations and health insights in greater detail and explore how we can work together to support ongoing clean air efforts in alignment with existing government plans and priorities.

We appreciate your leadership and commitment to public welfare and look forward to the possibility of constructive engagement.

Thank you for your time and consideration.

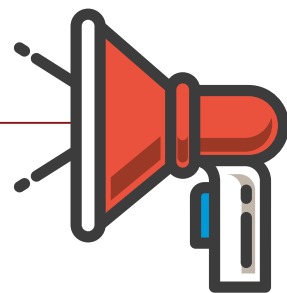
Warm regards,

[Name]

[Designation / Role]

Forum for Clean Air – [City/District Name]

[Contact details]



This is a simplified RTI format to request:

- Information on local pollution sources
- Status of implementation of clean air measures
- Monitoring or enforcement data

This can be used when information pertaining to local issues is not publicly available or responses are delayed.

Sample RTI Application

To
The Public Information Officer (PIO)
[Name of Department / Authority]
[Office Address]

Subject: Application under the Right to Information Act, 2005 regarding air quality management and related actions in [City/District Name]

Respected Sir/Madam,

I am writing this application under the Right to Information Act, 2005 to seek information related to air quality management and public health protection measures in [City/District Name].

The information sought below is being requested in public interest, as air pollution poses significant health risks, particularly to children, elderly persons, and individuals with pre-existing medical conditions.

Kindly provide the following information:

1. The details of monitoring stations currently operational in [City/District Name], including their locations and parameters monitored.
2. The monthly average AQI values recorded in [City/District Name] for the last [6/12] months.
3. The key pollution sources identified by your department in [City/District Name].
4. Details of actions taken in the last [6/12] months to address air pollution, including enforcement measures, notices issued, or penalties imposed.
5. Copies of any Clean Air Action Plans / city-level action plans, guidelines, or directives currently being implemented.
6. Details of measures undertaken to protect vulnerable populations, such as school children, elderly persons, and patients with respiratory or cardiac conditions, during periods of poor air quality.
7. The designated nodal officer or department responsible for coordinating air quality-related actions at the city/district level.

I request that the above information be provided in electronic format (PDF/email) wherever possible, as permitted under the RTI Act.

Thank you for your time and cooperation.

Yours sincerely,
Name:
Address:
Contact Number:
Email ID:
Date:
Signature:

Rapid response by FFCA Chairperson

(To be issued by DFCA / Forum for Clean Air during Very Poor–Severe AQI days)



**FORUM FOR
CLEAN AIR
(FFCA)**
DOCTORS FOR CLEAN AIR
AND CLIMATE ACTION
(DFCA)

Headline (example)

Doctors issue health advisory as air quality deteriorates in [City Name]

DATE:
[DD/MM/YYYY]

ISSUED BY:
Forum for Clean Air (FFCA), [City Name] |
Doctors for Clean Air and Climate Action (DFCA)

Doctors from the [City Name] Forum for Clean Air (FFCA) have issued a public health advisory as the Air Quality Index (AQI) in the city has remained in the **“Very Poor / Severe”** category over the past **[24–48]** hours.

Health professionals report a rise in respiratory symptoms, including breathlessness, wheezing, cough, eye irritation, and chest discomfort, particularly among children, elderly individuals, pregnant women, and people with asthma, COPD, heart disease, or other chronic conditions.

“**Air pollution is not just an environmental issue, it is a public health emergency.** During high AQI days, we see a clear increase in respiratory distress and worsening of pre-existing illnesses,” said **Dr. [Name], [Specialty]**, member of DFCA.



HEALTH ADVISORY FOR THE PUBLIC

Doctors advise the following precautionary measures until air quality improves:

 FOR EVERYONE	 FOR VULNERABLE GROUPS (children, elderly, pregnant women, and people with chronic illness)	 FOR SCHOOLS AND INSTITUTIONS
 Limit outdoor activities, especially in the early morning and late evening	 Stay indoors as much as possible	 Avoid outdoor assemblies and sports
 Avoid strenuous exercise outdoors	 Strictly avoid outdoor exertion	 Modify school timings or activities if needed
 Keep windows closed where possible	 Continue prescribed medications and keep rescue inhalers accessible	 Ensure children with respiratory conditions are closely monitored
 Follow official AQI updates	 Seek medical help if symptoms worsen	

CALL FOR ACTION

Doctors urge authorities to take immediate preventive and mitigation measures, including:

 Strict enforcement against waste burning and dust-generating activities	 Traffic and congestion management in pollution hotspots	 Clear public communication on protective measures
---	---	--

At the same time, **long-term solutions** focusing on reducing pollution at source are essential to prevent repeated health crises.

“Protecting public health must remain central to clean air action. Preventing exposure today and reducing emissions tomorrow must go hand in hand,” added **Dr. [Name]**.



 **CLEAN AIR. HEALTHY PEOPLE.** | **STRONGER COMMUNITIES.** | **Stay Informed. Stay Protected. Stay Healthy.**

Severe AQI day checklist for the Forum

(To be used when AQI enters "Very Poor" or "Severe" category)

This is a checklist to help Forums respond quickly, calmly, and consistently during high air pollution episodes, with public health protection as the primary focus.

1 Confirm & Document the Situation

- ☒ Check official **AQI data** (PCB / SPCB / SAFAR / OpenAQ)
- ☒ Note current **AQI category and duration** (since when Aqi is high)
- ☒ Identify **affected areas or hotspots**, if known
- ☒ Save **screenshots or summaries** of Aqi data for records and communication

2 Activate the Forum Response

- ☒ Inform **core Forum members** (WhatsApp/email)
- ☒ Identify 1–2 doctors as **official spokespersons** for the day
- ☒ Decide the **level of response** required:
 - Advisory only
 - Advisory + media engagement

3 Issue a Health Advisory

- ☒ Prepare a **short health advisory** (public-facing)
- ☒ Include **specific guidance** for:
 - Children
 - Elderly
 - Pregnant women
 - People with comorbidities
- ☒ Ensure advice is **simple, non-alarmist, and health-focused**
- ☒ Share **advisory** with:
 - Local media
 - Schools and RWAs
 - Social media platforms
 - Forum partner organisations
 - Public Relations Department/Officer in government systems

SAMPLE PUBLIC HEALTH ADVISORY (VERY POOR TO SEVERE AIR QUALITY)



Air quality in the city is currently in the **Very Poor/Severe** range, which may increase health risks, particularly for children, older adults, pregnant women, and people with existing respiratory or heart conditions.



GENERAL GUIDANCE FOR ALL RESIDENTS



Limit outdoor activities



Avoid strenuous physical exercise



Keep windows and doors closed as much as possible



If going outdoors is unavoidable, use a well-fitting N95/FFP2 mask



If you experience coughing, breathlessness, chest discomfort, wheezing, or eye irritation, seek medical advice promptly.



SPECIFIC GUIDANCE FOR VULNERABLE GROUPS



CHILDREN

Reduce outdoor play and sports activities, especially during peak pollution hours. Schools should minimise outdoor assemblies and physical exertion.



ELDERLY

Avoid outdoor exposure as far as possible and ensure regular medication for existing conditions is continued without interruption.



PREGNANT WOMEN

Limit time outdoors and avoid high-traffic or polluted areas to reduce exposure.



PEOPLE WITH COMORBIDITIES (asthma, COPD, heart disease)

Follow prescribed treatment plans strictly, keep rescue medications accessible, and consult a doctor if symptoms worsen.



Institutions, including schools and workplaces, are encouraged to take precautionary measures to reduce exposure and support vulnerable individuals during this period.



4

Engage
with Media
(If Needed)



In times when air quality deteriorates, engaging with the media becomes important to ensure that accurate, health-focused information reaches the wider public quickly. Media platforms allow medical voices to translate air quality data into clear, actionable guidance, helping people understand personal risk, adopt protective behaviours, and avoid misinformation. Thoughtful media engagement during such episodes also helps convey the seriousness of the situation, reinforces the need for precautionary measures by schools, workplaces, and communities, and draws attention to the urgency of short-term response and accountability from relevant authorities.

- ✓ Share 1–2 **doctor quotes** focusing on health impacts
- ✓ Avoid **technical jargon** or **blame-oriented** language
- ✓ Emphasise **prevention, exposure reduction, and health protection**
- ✓ Keep **messaging consistent** across interviews and platforms

5

Coordinate
with Schools
& Community
Groups



- ✓ Inform **schools** about **precautionary measures**:
 - Avoid outdoor activities
 - Modify assemblies or sports
 - Monitor children with respiratory conditions
- ✓ Share **simple messages** with RWAs:
 - Avoid waste burning
 - Reduce outdoor exertion
 - Protect vulnerable residents

6

Communicate
with Local
Authorities
(Optional but
Recommended)



- ✓ Send a **brief note/email** to relevant departments highlighting:
 - Current AQI status
 - Health concerns being observed
 - Request for immediate preventive actions
- ✓ Keep tone **cooperative** and **solution-oriented**



7

Monitor
Health
Signals

- ✓ Doctors **note any unusual spike** in:
 - Respiratory distress
 - Asthma/COPD exacerbations
 - Emergency visits
- ✓ Capture **anecdotal observations** (no patient identifiers)

8

Maintain
Calm & Ethical
Communication

- ✓ Avoid **panic-inducing** language
- ✓ Do not share **unverified data**
- ✓ Do not **disclose** patient details
- ✓ Stick to **health-protective** messaging

9

Document
the Response

- ✓ Save copies of **advisories issued**
- ✓ Archive **media mentions** or **interviews**
- ✓ Note **actions taken** by the Forum
- ✓ Record **learnings** for **future response**

10

Review After
AQI Improves

- ✓ What **worked** well?
- ✓ What could be **improved** next time?
- ✓ Do we need to **update** our rapid response tools?



These FAQs help health professionals communicate clearly and confidently with media on air pollution and health.

1. Why is air pollution a health issue?

Air pollution directly affects the lungs, heart, brain, and blood vessels. We see more respiratory infections, asthma attacks, heart problems, and hospital visits during periods of poor air quality. Clean air is essential for public health.

2. What does a high AQI mean for people's health?

A high AQI means the air contains pollutants at levels that can harm health. During Poor to Severe AQI days, symptoms such as cough, breathlessness, eye irritation, and chest discomfort become more common—especially among children, the elderly, and people with existing illnesses.

3. Who is most vulnerable to air pollution?

Children, elderly people, pregnant women, and those with asthma, COPD, heart disease, or other chronic conditions are most at risk. Outdoor workers are also more exposed.

4. What health impacts do doctors see during high pollution periods?

Doctors often see a rise in asthma exacerbations, respiratory infections, breathing difficulty, and worsening of heart conditions during high AQI episodes. Emergency visits may also increase.

5. What immediate precautions should people take on poor AQI days?

People should limit outdoor activities, avoid strenuous exercise outside, and follow AQI updates. Vulnerable groups should stay indoors as much as possible and continue prescribed medications.

6. Should schools change their routine during high AQI days?

Yes. During Poor to Severe AQI days, outdoor assemblies, sports, and strenuous activities should be avoided. Schools should monitor children with respiratory conditions closely.

7. Is air pollution only a seasonal problem?

No. While pollution often worsens in certain seasons, long-term exposure throughout the year also increases the risk of chronic diseases. Air pollution is a continuous public health concern.

8. What role can doctors play **beyond treating patients?**

Doctors are trusted voices. By sharing health impacts, educating communities, and engaging with policymakers and media, doctors can help prevent illness and protect public health.

9. Are masks enough to protect **people from air pollution?**

Masks may reduce exposure to some extent but are not a complete solution. Reducing pollution at source and limiting exposure are more effective for protecting health.

10. What is the long-term **solution to this problem?**

The long-term solution is reducing pollution at source through cleaner transport, better waste management, dust control, and strong enforcement—while keeping health at the centre of decision-making.



More Media Interaction Tips (For HCPs)

- Keep answers simple and health-focused
- Use AQI as a reference point
- Avoid technical jargon
- Do not share patient-identifiable information
- Emphasise prevention and public health protection

Clean Air Prescription

A toolkit specifically designed for health professionals to make them advocates for clean air. Can be found at the DFCA Knowledge Hub.

[DOWNLOAD NOW](#)



Inspiration & Motivation

Forums for Clean Air are built on the idea that local action, led by health voices, can drive meaningful change. Across cities, doctors and community members are already shaping conversations, influencing decisions, and protecting public health.

Success Stories from Existing Forums for Clean Air

Across different cities, Forums for Clean Air have demonstrated that collaboration works when health professionals lead with evidence and empathy.

Amritsar, *Sanjhi Hawa te Sehat*

Amritsar Forum for Clean Air demonstrated how health-led local platforms can drive meaningful change. Through sustained collaboration between the District Administration, Health Department, and DFCA, stubble burning was reframed as a preventable public health concern rather than an enforcement issue. Doctors played a central role in trainings, farmer engagement, and evidence-based dialogue alongside agriculture officials, maintaining trust even during the flood crisis. This FFCA approach, rooted in empathy, credibility, and continuity, resulted in durable partnerships, a visible shift in community ownership, and official data showing a subtle decline in stubble burning incidents.



Gorakhpur's Open Waste Burning Free Journey: A Health-Led Community Success

The Gorakhpur Forum for Clean Air illustrates how FFCA platforms translate health evidence into community action at the city level. Across 10 model wards, in collaboration with Gorakhpur Municipal Corporation, doctors engaged residents and municipal sanitation workers by clearly linking everyday practices such as waste burning and unsafe sanitation work to long-term lung damage and family health. Practical guidance from health professionals helped convert awareness into behaviour change, with communities discouraging open waste burning and sanitation workers adopting safer practices. The Gorakhpur experience reinforces FFCA's core principle that when trusted health voices lead locally, clean air becomes a shared responsibility and sustainable change follows.



In nutshell,

What Forums Have Achieved

- Brought together doctors, municipal officials, educators, and citizens on a shared platform
- Shifted conversations from pollution numbers to health impacts
- Identified local hotspots and priority issues using AQI and community observations
- Enabled constructive engagement with authorities without confrontation
- Increased public and media awareness through doctor-led communication

Across India, health-centred clean air initiatives show that progress is possible when:

- Health evidence is used to humanise pollution
- Doctors engage beyond clinics into communities and public discourse
- City-level platforms enable multi-department coordination
- Youth and schools are actively involved
- Media is treated as a partner in public awareness

These practices underline the importance of local leadership, continuity, and trust-building.

Key Takeaway

Clean air work can be challenging and slow. Not every action will lead to immediate results. However, every conversation, every data point shared, and every community engaged contributes to long-term public health protection.

Change begins locally and it is strengthened when health professionals, community members, educators, youth, administrators, and civil society work together. Each voice, perspective, and effort plays a role in creating healthier environments and more informed decisions.

Sustained collaboration, shared responsibility, and collective action are what make clean air efforts resilient and impactful.

DOCTORS FOR CLEAN AIR AND CLIMATE ACTION



JOIN NOW

www.dfca.org.in



Scan the Qr code
to join now



An initiative of



**LUNG CARE
FOUNDATION**

www.lcf.org.in