We thank both reviewers for their valuable and constructive comments that helped us to improve the manuscript significantly. We list point by point responses to their comments below and hope they find the new version sufficient to be published in ACP.

Responses to comments from Reviewer#1

This work described the contributions of Nordic anthropogenic emissions on air pollution and premature mortality over the Nordic region and the Arctic. Although this study provides important results and is well written, there remain some concerns in the current manuscript. First, one issue is that the results are unsatisfactory discussed with only a few references in the case of premature mortality. Are the results coherent to other studies, years, countries? Which are the limitations of your method?

Major comments:

Comment: L113: Why 2015? Justify the selected year.

Response: We have now added the following (lines 115-118): "Year 2015 is selected to be in agreement with the ongoing Coupled Model Intercomparison Project Phase 6 (CMIP6: Eyring et al., 2016), where the current year is 2015. As the present study will also look at the impacts in the future using baseline scenarios from the CMIP6, we have selected the present year to be 2015 for consistency."

Comment: L231: Why you use exposure-response functions for chronic mortality based on data from United States from the year 2002? Didn't you find any study from your Nordic region? What is about short-term exposure for PM2.5? Are the results from United States really applicable in the Nordic region? How could influence the use of ERF from different studies? Why you use short-term effects only for specific pollutants and for others only chronic mortality? I recommend including table S2 as regular table, as only with this table the paragraph is understandable. The paragraph is not very clear. I would also include some limitation here about the use of exposure-response functions or discuss the limitation. Explain and justify the reason for selecting the specific exposure-response functions from these studies.

Response: We have now extended the health impact assessment section to discuss these concerns from the two reviewers.

*Comment: Fig. 5-9: I think you should use stacked percent plot, which could help to compare sectorial emissions. In order to see the total, you could label each bar. In the actual form, it is not possible to compare correctly some sectorial categories.* 

Response: The figures have been modified accordingly.

*Comment:* L448-: Why only PM2.5? NOx? SO2? O3? Please indicate the confidence interval for the mortality estimations, particularly in Table 4. The same for the cost estimations.

Response:  $NO_2$ ,  $O_3$  and  $SO_2$  are mostly associated with acute health impacts, although there are some recent studies suggesting chronic impacts from  $O_3$ . However, the current version of the EVA model does not yet include these impacts. This is now also added to the text (lines 226-231).

Minor comments:

Comment: L77: please use capital letter for Primary PM2.5 (PPM2.5)

Response: Corrected accordingly.

Comment: L79: "secondary inorganic PM2.5 (SIA)" should it be secondary inorganic aerosol?

Response: Corrected accordingly.

*Comment: L123: DHEM, although the abbreviation was defined in the abstract here you should repeat it for the reader. The same for EVA in point 2.2. It is not advisable to use abbreviations as titles.* 

Response: Corrected accordingly.

*Comment: Fig1: Please use a better graphical representation. For example, treemap, circular packing or something else in which the graph is easier to read.* 

Response: Fig.1. has been modified accordingly.

Comment: L206: It should be "European Environmental Agency (EEA)".

Response: Corrected accordingly.

Comment: L232: remove last ")".

Response: Removed.

Comment: L305: "eacvh" -> each;

Response: Corrected.

*Comment: "Figure 4" If you use figure reference in text at beginning, it would be better the style "Figure X". Please, revise the whole document.* 

Response: the text is modified accordingly.

Comment: L307: "The figure" -> the bars or graph?; subindex missing for PM2.5

Response: We have now modified the text.

## Responses to comments from Reviewer#2

In this modelling study, PM and O3 exposure and associated premature mortalities in the Nordic countries have been attributed to anthropogenic emission sources (sectors) in each of the countries. The attribution is based on the tagging methodology which is more accurate than linearized source-receptor relations, commonly used under conditions of limited CPU resources.

## General comments:

The material obtained from the modelling is potentially relevant, however my feeling is that the results are not optimally evaluated and presented, and too much attention is given to less relevant issues. In my opinion, the major conclusion of this study is that 80-85% percent of the air pollution impacts in the Nordic countries are coming from sources outside that region. This observation is reported in the abstract and in the conclusions, however without giving any further consideration on the (policy) relevance of this finding. It basically means that national air quality measures in the Nordic country apparently barely can contribute to improving air quality. Given this outcome, one can wonder what is the relevance of making a detailed discussion of individual other Nordic countries contributions by sector to PM2.5 in the receptor country (i.e. attribution by country and by sector of the tiny orange part in the bar graphs of Fig. 4).

Based on Figure 4, the key question is: which source regions and sectors are then contributing to the gray portion of the stacked bars? Hence, if the aim of the study is "to identify emission sectors that should be targeted for mitigation to decrease air pollution levels in the Nordic countries" (L108) the authors have clearly overlooked the major contributing factors. If the authors still want to focus specifically on the Nordic countries ' contribution only, this should be better motivated and framed in the introduction. (Besides, I also wonder what is the motivation for a separate health impact assessment for specifically the low-populated Arctic region >67 N).

Response: We thank the reviewer for the detailed comments. We have tried to address all the concerns in the following sections. The main aim of the study is to identify how much each Nordic country is contributing to the air pollution levels and exposure in the Scandinavian region and the Arctic. We agree that it is also very relevant and interesting how much is coming from rest of the world on a sectoral basis, however this is not the main objective of this study, and it requires additional sectoral simulations. It is also true that populationwise, the Arctic is not much relevant regarding health impact assessment, as it is for e.g. Europe. However, it is also interesting to have some first estimates of how much the Arctic population is affected from air pollution that is mainly transported from rest of the world. We tried to make this more clear in the end of the introduction section.

Specific comments:

1. Throughout the text: use subscript in chemical names and PM2.5

Response: Corrected accordingly.

2. L34 – 37 and throughout the paper: please use consistent naming for the sectors in text and figure legends; "non-industrial" and "residential" are interchanged. It is better to use just one consistent name (preferably "residential"). Same for "Agriculture and Waste" and "Others" (preferably use "Agriculture + Waste")

Response: We have modified. The text, the plots and the tables accordingly.

3. L33: '::: 80% of the PM2.5 concentration was attributed to transport from outside:::'

Response: Corrected.

4. L34-35: If 80% of PM2.5 comes from outside, how can residential combustion (inside the country) be responsible for 60% of total PM2.5 mass?

Response: We mean that out of the 20% originating inside the region, 60 % is coming from non-industrial combustion. We have modified the sentence accordingly (lines 35-36).

5. L38 OC is said to be the major contributor. In the main section however nothing has been mentioned on the chemical mass balance of the PM2.5 in each country, and further ammonium nitrate has never been mentioned. Was this compound considered as a PM2.5 constituent? Earlier studies have suggested that ammonium nitrate is the dominant PM2.5 component in NW Europe (e.g. Lelieveld et al., 2015).

Response: We have now added a modelled PM2.5 chemical composition section under Section 3.2.1 (lines 345-352).

6. L39: if the tagging method was used, the contribution of the residential sector should not be 'suggested' from the chemical composition but result directly from the tagged species & sector?

Response: The tagging method identifies the contribution from all non-industrial combustion sources in the residential and commercial heating, including residential wood burning.

7. L62: in Sweden originates

Response: Corrected.

8. L66: instead of 'geographic' maybe better use 'spatial'?

Response: Changed accordingly.

9. It is unclear to me how a country contributes to x% of European PM2.5. Do you mean that the Europeanwide population-weighted PM2.5 concentration (i.e. exposure) contains x% PM2.5 emitted in that country (L77-79)? Please formulate more precisely.

Response: The cited study showed that Sweden contributed to 1.4% of the European Primary PM2.5 (PPM2.5) mass concentrations.

10. L94: Can you be more quantitative on how 'low' air pollution levels are, e.g. relative to WHO target levels? Does 'low' refer to country-area-mean or population exposure? Does this also apply to urban locations?

Response: We have modified the sentence accordingly (lines 95-97) as: "The Nordic countries are generally characterized among the EU countries with low air pollution levels (EEA, 2018). PM<sub>2.5</sub> levels are below the EU legislated limit value of 40  $\mu$ g m<sup>-3</sup> as well as the WHO limit value of 20  $\mu$ g m<sup>-3</sup> (EEA, 2018)."

11. L96-104: not sure if the climate impact of BC is relevant in this context. Define 'SLCFs' (L103)

Response: We have removed that sentence from the text.

12. L109 'decrease'

Response: Corrected accordingly.

13. DEHM: What is the time resolution of the model output for the pollutants? Are O3 values produced at 1h time steps? Does the model include natural PM components (in particular seasalt)?

Response: We have modified the section as (lines 138-141):

"The time resolution of the DEHM model is one hour. The gas-phase chemistry module includes 58 chemical species, 9 primary particles, including natural particles such as sea-salt and 122 chemical reactions (Brandt et al., 2012).",

and as (lines 143-148):

"In addition to the anthropogenic PM and SOA due to biogenic emissions, DEHM model also calculates seasalt emissions and their transport and interactions with other pollutants. The current version of the DEHM model does not include wind-blown or re-suspended dust emissions. DEHM model does not output a PM2.5 or PM10 diagnostic, however these are calculated off-line, using all anthropogenic and natural components of PM, in order to be used in the health impact assessment described in Section 2.2."

14. L151: Actually the large contribution of NH3 in 'Others' is due to Agriculture (only).

Response: Modified accordingly.

15. Figure 1 is difficult to read and would benefit from a different layout (e.g. stacked bar plots, and using a different Y-scale for each component). Alternatively, as the total values are already given in the table, the plot could show the different relative contributions by sector (stacked bar or pie plots).

Response: We have changed Figure 1.

16. L165: The tagging method keeps track: : :

Response: Corrected accordingly.

17. L167: What do you mean by "background concentrations"? Usually this refers to concentrations in absence of anthropogenic emissions. L168: not clear what is meant by "in parallel". In general this paragraph is rather difficult to understand for those not really confident with the tagging method. Would it be possible to include some mathematical equation(s) that express the basic principle(s)?

Response: We have now modified the section. The technical details for the tagging scheme was already provided in Brandt et al. (2013), which is referred to in the manuscript..

18. Model evaluation: L181: these data are not shown in the supplemental material (I presume they are presented in Tale 3 instead). Is the model resolution of 50kmx50km high enough to reproduce urban background concentrations? Does the model include a sub-grid treatment to simulate the urban increment (for PM) or titration decrement (for O3)? Table S1 should include as well station data for PM2.5, SOMO35, SO2 (i.e. all the metrics used for the health impact assessment). The references to data sources for the 4 countries can easily be moved to Table S1 so the section from L184 – L214 can be shortened.

Response: 50 km resolution is coarse to reproduce the urban gradients. We have added some discussion for this in the text. This is why, we only do the comparison with urban and regional background stations. Data sources has been moved to the supplementary material.

19. Section 2.2 (EVA) could contain some more information on the exposure-response functions and RRs used both for PM and O3. Table S2 should be explained better. ERFs are commonly expressing the relative risk. It is strange to see the exposure-response coefficient expressed as mortalities per concentration unit. There must be an underlying calculation, involving exposed population number and baseline mortalities.

Please expand this. Why is SO2 included as a risk but not NO2? WHO (2013, HRAPIE project) recommends PM, O3 and NO2 as major risk factors, but not SO2 and CO. It is not clear if CO was considered here: CO ERF is not mentioned in Table S2, but section 2.2 mentions it is included in EVA.

Response: This section has been extended following the suggestions from both reviewers.

20. L225: "EVA calculates and uses annual mean: :: " change to: "EVA uses annual mean: :: "

Response: Modified accordingly.

21. Are natural PM components included in the PM2.5 exposure? L235: "full range of anthropogenic concentrations"?

Response: Changed accordingly (lines 238-239) as: "...simulated total (anthropogenic and natural) PM<sub>2.5</sub> mass.".

22. L247-248: not clear if the perturbations were done for each individual SNAP sector, or for the combined sectors in case of Industry and Others

Response: The perturbation is done for the combined snaps in case of Industry and Others.

23. L253-255: what is the outcome of this comparison between 100% and scaled 30% perturbation?

Response: We apologize for the error. This experiment was removed from the study and not conducted due to time limitation within the project.

24. Table 3 should also include the mean values for O3 and PM2.5. What about the model evaluation for SO2 and NOx?

Response: We have now added a Table S2 in the supplementary for the model evaluation for  $NO_2$  and  $SO_2$  and text in the manuscript (lines 308-313).

25. Use consistent symbols for the correlation coefficient (either r or R)

Response: Changed to *r* throughout the text.

26. Do the Taylor diagrams add essential new information to what is given in Table 3? What can be concluded from the diagrams that is not emerging from the table? Is model performance better/worse for specific station type?

Response: The Taylor diagrams show a station by station evaluation while the table gives an overall comparison based on the mean of stations in each country. In addition, we have added the following text (lines 310-316): "In all countries, lower NMB values are calculated for O3 over the regional background stations compared to urban background stations, where the overestimations are higher. Regarding PM2.5, no such conclusions can be drawn die to very limited number of regional background stations in Denmark and Norway. In Finland, lower NMB values for PM2.5 are calculated for the regional background stations, while in Sweden, much lower NMB values are calculated for the urban stations. These differences reflect the underestimations in emissions as well as the coarse model resolution."

27. L270-274: the discussion does not correspond to what is given in Table 3: r is not >0.7 for Norway. If the % overestimation refers to the NME, then for O3 it is rather 20% for Denmark, Finland and Sweden, not 10%. For PM2.5, the R for Norway in the table is 0.35, not 0.7. A relatively good R does not necessarily imply a good model performance: mean biases of the order of -3g/m3 are significant as can be seen in

the NME (underestimation of 40 to 50% for all countries). Could this be due to a natural component in the measurements that was not considered in the model? What can be concluded from this model evaluation in the context of the further analysis? How robust are the model results?

Response: We have now modified this section accordingly.

28. L301: "near de ground surface": change to "near the surface"

Response: Corrected

29. L301: 'Caused by the..'' change to "Based on the prevailing : : : "

Response: Changed accordingly.

30. L305 eacvh: each

Response: Corrected.

31. Why does Fig. 4 not include NH4 and NO3? The sum BC+OC+SO4 is much lower than total PM2.5. What makes up the remaining PM2.5 mass? If NO2 and CO are not used in the impact evaluation why show the values?

Response: We have now added a paragraph for the modelled aerosol chemical composition (lines 353-360).

32. Why is the same analysis not made for O3 or SOMO35?

Response: We have done a similar analysis and the results are discussed in lines 376-379.

*33. L307-308: this is a very important observation and raises immediately the question about the sources of this major rest contribution. This observation should not be left undiscussed.* 

Response: we have now added some discussion in the text (line 370-371).

34. Please increase text font in Figures 5 to 7.

Response: Modified accordingly.

35. L324: 7 g m-3

Response: Corrected.

36. L328: again: what is the contribution of ammonium nitrate?

Response: A section discussing chemical composition is now added to the text (lines 353-360).

37. In Section 3.2.1, the text is quite repetitive, basically repeating for each combination of source country x and receptor country z the contribution for each chemical component. How relevant is this separation in components in the context of the formulated scope of this study (i.e. to identify the emission sectors that should be targeted for mitigation)? To answer this question it is more relevant to show for each of the receptor regions how much is being contributed (1) from the country's own emissions (2) from other Nordic countries (3) from the rest of the world (by difference). I would suggest to move Figs. 5-8 to the supplemental information. Instead, for each relevant exposure metric (PM2.5, O3 and maybe SO2, NO2, CO in the supplemental material), a figure could then be presented for each receptor country (DK, NO, FI, SE),

with each bar representing a sector, and within each (stacked) bar a contribution from within the country, from other Nordic countries, and from the rest of the world (and maybe an additional bar for the sum of all sectors) as in attached figure 1 (made up with arbitrary numbers).

Response: We agree with the reviewer and indeed it is an interesting approach. However, this is not he main scope of the paper. The main focus is to calculate how much each Nordic country is responsible, on a sectoral basis, of their pollution in the Nordic and Arctic regions. In addition, this approach requires to make additional perturbation simulations for the present sectors for each country.

38. Similar comment for the Arctic (Fig. 9) where a graph could show the contributions by sector from each Nordic country and the rest of the world. But what is the relevance of considering specifically the >67 N area for health impacts? The contribution from the Scandinavian countries are very low, also here it would be interesting to see what the major contributors to this receptor region are.

Response: Please see above response.

39. Are the concentrations and % shown in Figs 4-8 referring to exposure (i.e. population-weighted concentrations) or grid-area-weighted mean? To answer the formulated scientific question it should be exposure. For SE, NO and FI which have large portions of uninhabited area there could be a significant difference between area and population-weighted average.

Response: This is a very good point and we thank the reviewer for raising this. All the numbers and plots are now updated to present the population-weighted contributions and concentrations.

40. If the graphs are produced as suggested, including PM2.5 and O3, the grid maps Fig 10 and 11 add little new information and they could be omitted (or transferred to the supplemental information)

Response. We keep the figures based on the responses to comments 37 and 38.

41. If the grid maps are kept, please adapt the color scale of the O3 grid maps. Use the same range for the 4 maps, and make an upper limit that extends further above zero (now it seems that everything is colored red because the scale is cut off at a too low limit).

Response: Maps are now modified.

42. L405: what do you mean with "... are mainly calculated in the source country itself."

Response: We have modified the sentence (lines 482-484) as: "The annual-mean contributions are very low, (up to 1.5  $\mu$ g m-3: 5%). Largest contributions in each country are calculated in the source region in the particular country, implying the impact of O3 titration by local fresh NO emissions."

43. L 406 "Zealand region" has no meaning to a readership not familiar with the regional naming details.

Response: We have removed this.

44. L405 - 407 ("Danish anthropogenic: : :towards south") I can't follow the reasoning here: titration leads to a -4 to -5% contribution, but also to a +1% increase south? Also, as the scale stops at 0, this cannot be observed in graph 10a.

Response: We have now modified this sentence (lines 484-485) and the figure accordingly.

45. What is the share of O3 and SO2 in the acute mortalities?

Response: We have now added the following sentence (line 537-540): "Results also show that SO2 is almost responsible for all acute mortalities in the region, which is consistent with earlier studies (e.g. Brandt et al., 2013). This is due to the decrease of O3 in the region by fresh NO emissions, leading to low mortality due to O3-exposure."

46. L469: Given the fact that PM2.5 is the major risk factor in mortalities, why is the contribution of AGR so dominant in DK (compared to the small share in Fig 5)? Is this because the population exposure was taken into account? How is the share of sectors in the mortalities evaluated? By using the same proportion as in the population-weighted PM composition? In table 5 it would be useful to put in brackets which share in total mortalities in each receptor country the numbers represent - e.g. 422 (13%).

Response: We have now added the following sentence (line 568-570): "As seen in the figure, agriculture and waste management sectors can have significant share in the premature mortality (e.g. Denmark) due to the dominant contribution of NH4 aerosols in the region."

47. L503 - 510: this is no new information because the costs are proportional to the mortalities for which it was already stated which sectors are dominating (L496 - 474). Further, when making recommendations on which sectors to address in order to "substantially reduce the costs of air pollution", the authors seem to have overlooked that 80 - 85% of the pollution health impact is imported from other regions.

Response: We have moved the figure to the supplement. We have also added the following to the end of the paragraph (lines 600-602): "However, as the local contributions to air pollutants are generally low in the region, it should be noted that significant reductions can only be achieved by reducing the emissions downwind, which would require a coordinated effort in Europe."

48. L566 It is not 50% of total but 50% of premature deaths caused by the Nordic countries (the latter being 16% of total premature mortalities).

Response: we have modified as follows (lines 654-661): "Danish agriculture and industrial emissions contribute similarly (by 33%) to ~400 premature mortality cases in Denmark, that are due to the Danish emissions. In Norway, non-industrial combustion, dominated by non-industrial wood combustion, is responsible for 48% of the ~200 premature deaths in Norway due to the exposure to pollution from the Nordic sources. In Finland, non-industrial combustion and traffic are responsible for more than half of the ~270 premature deaths in 2015, caused by the sources within the region. Finally, in Sweden, traffic and waste management/agriculture are responsible for 50% of the total premature death in Sweden (~330), caused by the emissions in the Nordic region."

49. L579 -578: To my opinion this is the most relevant conclusion of this study. It leaves the reader with the feeling that the less relevant part of the data has been analyzed in too much detail, leaving this essential part untouched: : :

Response: Please refer to the response to the general comment and comment 37.

## References

Lelieveld, J., Evans, J. S., Fnais, M., Giannadaki, D. and Pozzer, A.: The contribution of outdoor air pollution sources to premature mortality on a global scale, Nature, 525(7569), 367–371, doi:10.1038/nature15371, 2015.

## Contributions of Nordic anthropogenic emissions on air pollution and premature mortality over the Nordic region and the Arctic

Ulas Im<sup>1,2</sup>, Jesper H. Christensen<sup>1,2</sup>, Ole-Kenneth Nielsen<sup>1,2</sup>, Maria Sand<sup>3</sup>, Risto Makkonen<sup>4,5</sup>, Camilla Geels<sup>1,2</sup>, Camilla Anderson<sup>6</sup>, Jaakko Kukkonen<sup>4</sup>, Susana Lopez-Aparicio<sup>7</sup>, Jørgen Brandt<sup>1,2</sup>

8 1 Aarhus University, Department of Environmental Science, Atmospheric Modelling Section,
9 Frederiksborgvej 399, Roskilde, Denmark.

10 2 Interdisciplinary Center for Climate Change (iCLIMATE), Frederiksborgvej 399, Roskilde,11 Denmark.

12 3 Center for International Climate Research, Postboks 1129 Blindern, 0318 Oslo, Norway.

4 Finnish Meteorological Institute, Erik Palmenin aukio 1, P.O.Box 503, FI-00101, Helsinki,
 Finland.

5 University of Helsinki, Institute for Atmospheric and Earth System Research, P.O. Box 64,
 00014, Helsinki, Finland.

17 6 Swedish Meteorological and Hydrological Institute, SE-60176 Norrköping, Sweden.

18 7 NILU - Norwegian Institute for Air Research, Instituttveien 18, P.O. Box 100, 2027 Kjeller,
19 Norway.
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#### Abstract

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23 This modelling study presents the sectoral contributions of anthropogenic emissions in the four 24 Nordic countries; Denmark, Finland, Norway and Sweden, on air pollution levels and the associated health impacts and costs over the Nordic and the Arctic region for the year 2015. The Danish 25 26 Eulerian Hemispheric Model (DEHM) has been used on a 50 km resolution over Europe in tagged 27 mode in order to calculate the response of a 30% reduction of each emission sector in each Nordic 28 country individually. The emission sectors considered in the study were energy production, nonindustrial/commercial heating, industry, traffic, off-road mobile sources, and waste 29 30 management/agriculture. In total, 28 simulations were carried out. Following the air pollution 31 modelling, the Economic Valuation of Air Pollution (EVA) model has been used to calculate the 32 associated premature mortality and their costs. Results showed that more than 80% of the PM<sub>2.5</sub> concentration, was attributed to transport from outside these four countries, implying an effort 33 34 outside the Nordic region in order to decrease the pollutant levels over the area. The leading 35 emission sector in each country was found to be non-industrial combustion (contributing by more 36 than 60% to the total PM2.5 mass coming from the country itself), except for Sweden, where industry contributed to PM2.5 with a comparable amount as non-industrial combustion. In addition 37 38 to non-industrial combustion, the next most important source categories were industry, agriculture 39 and traffic. The main chemical constituent of PM2.5 concentrations that comes from the country 40 itself is calculated to be organic carbon in all countries, which suggested that non-industrial wood 41 burning was the dominant national source of pollution in the Nordic countries. We have estimated 42 the total number of premature mortality cases due to air pollution to be around 4 000 in Denmark 43 and Sweden and around 2 000 in Finland and Norway. These premature mortality cases led to a 44 total cost of 7 billion Euros in the selected Nordic countries. The assessment of the related 45 premature mortality and associated cost estimates suggested that non-industrial combustion, 46 together with industry and traffic, will be the main sectors to be targeted in emission mitigation 47 strategies in the future.

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57       Jntroduction       Page Break         58       Air pollution is the world's largest single environmental health risk (WHO, 2014), estimated to be responsible for 3.7 million premature deaths in 2012 from urban and rural sources worldwide. In Europe, recent results (Andersson et al., 2009), Brandt et al., 20135, Gelest et al., 2015, In et al., 2018, 21009, Brandt et al., 2013a, 2105, Gelest et al., 2015, In et al., 2018a, Elang et al., 2018, Sloazo et al., 2019 show that outdoor air pollution causes -500 000 premature deaths in Proper Brandt et al. (2013a) aclutated that due to exposure to anniheria air pollution, there were around 3.500 premature deaths in proper Brandt et al. (2013a) aclutated that due to exposure to anniheria air pollution causes of provos00 for the year 2000 (Geles et al., 2014; Watkiss et al., 2005, Karvosenoja et al., 2010, respectively). Kukkonen et al. (2018)       Deteted: Sematinavian         71       Sweden originates from south-western Europe, while the largest contribution to long-term effects in sweden originates from south-western Europe, while the largest contribution to short-term exposure originates from south-western Europe, while the largest contribution to short-term exposure originates from south-western Europe, and 10130.       Deteted: Sematinavian         71       Sweden originates from south-western Europe, to large differences in the geographical distribution of human exposure to a ray oll short (in et al., 2018a). Furthermore, the wides great all skine to the degree of urbanization. There are large spatial differences in the pollution and the degree of urbanization. There are large spatial challenge for exposure to air gollution (in the all, 2014a). Junth-western Europe, the wides great and horway were responsible for 4% for European PfMars Contribution to secondary inorganic expansiol (SIA				
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<ul> <li>responsible for 3.7 million premature deaths in 2012 from urban and rural sources worldwide. In Europe, recent results (Andersson et al., 2009; Brandt et al., 2013; Cieclé et al., 2015; In et al., 2018; Liang et al., 2018; Solazzo et al., 2018) show that outdoor air pollution causes ~500 000 premature deaths in Europe. Brandt et al. (2013) estaulated that due to exposure to ambient air pollution, there were around 3.500 premature deaths in 2011 in Demmark alone. Lehtomäki et al. (2018) have recently evaluated that ambient air pollution causes absorbed to exposure to ambient air pollution, there were around 3.500 presenture deaths in Finland in 2015. Other studies have made assessments for some of the Nordic countries (Demmark, Sweden and Finland) with estimates ranging from 6500 to 9500 for the year 2000 (Geels et al., 2014; Watkiss et al., 2005; Karosoenoj et al., 2010), respectively). Kukkonen et al. (2018)</li> <li>et al. 2014: watkiss et al., 2005; Karosoenoj et al., 2010, respectively). Kukkonen et al. (2018)</li> <li>and Forsberg et al. (2015) have concluded that long-range transported fine particulate matter dominates from south-western Europe (Jonsson et al. 2013).</li> <li>Air pollution is a transboundary problem covering global, regional, national and local sources, leading therefore to large differences in the geographical distribution of thuman exposure to air pollution (Matherefore to large differences in the geographical distribution of the met and induction and distance from local ensions ource such as road of domestic wood stoves in the Nordic countries as a pocial challenge for exposure to air pollution (Kakkomen et al., 2013a). Unthermore, the widespread use of domestic wood stoves an the Nordic countries as a special challenge for exposure to a fass of the Batter and North Seas (Brandt et al., 2013b), Jukken et al., 2013b), Jukken et al., 2013b), Jukken et al., 2013b), Jukken et al., 2013b), where e.g. more than a third of the health impacts from Danish emissions afre</li></ul>	59	Air pollution is the world's largest single environmental health risk (WHO, 2014), estimated to be		
<ul> <li>Europe, recent results (Andersson et al., 2009; Brandt et al., 2013; 2013b; Geels et al., 2015; Im et al., 2018; Ling et al., 2018; Solazzo et al., 2018) show that outdoor air pollution causes = 5000 000</li> <li>premature deaths in Europe. Brandt et al. (2013) calculated that due to exposure to ambient air pollution, there were around 3.500 premature deaths in 2011 in Denmark alone. Lethomäki et al. (2018) have recently evaluated that ambient air pollution causes approximately 2000 premature deaths in Finland in 2015. Other studies have made assessments for some of the Nordic countries.</li> <li>(Denmark, Sweden and Finland) with estimates ramaging from 6500 to 9500 for the year 2000 (Geels et al., 2014; Watkiss et al., 2005, Karvosenoja et al., 2010, respectively). Kukkonen et al. (2018) and Forsberg et al. (2015) have concluded that long-range transported fine particulate matter dominates the health effects in the <u>Nordic</u> countries, with largest contribution to long-term effects in Sweden originates from south-western Europe, while the largest contribution to short-term exposure originates from south-western Europe, while the largest contribution to short-term exposure originates from south-western Europe, to large differences in the geographical distribution.</li> <li>Air pollution is a transboundary problem covering global, regional, national and local sources, leading to large gential variability and therefore to large differences such as road transport, power plans and industry (Brandt et al., 2013). Furthermore, the widespread use of domestic wood stoves in the Nordic countries from south and east as well as due to the degree of urbanization. There are also local differences depending on wind direction and distance from local ensiston sources such as road transport, power plans and industry (Brandt et al., 2013). Furthermore, the widespread use of dimestic wood stoves. International ship transition is source of air pollution (Makhonen et al., 2017). Based on simulations for the period 19977 20</li></ul>	60	responsible for 3.7 million premature deaths in 2012 from urban and rural sources worldwide. In		
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<ul> <li>premature deaths in Europe. Brandt et al. (2013a) calculated that due to exposure to ambient air pollution, there were around 3.500 premature deaths in 2011 in Denmark alone. Lehtomäki et al. (2018) have recently evaluated that ambient air pollution caused approximately 2000 premature deaths in Finland in 2015. Other studies have made assessments for some of the Nordic countries (Denmark, Sweden and Finland) with estimates ranging from 6500 to 9500 for the year 2000 (Geels et al., 2014) Warkiss et al., 2005, Karvosenoja et al., 2010, respectively). Kukkonen et al. (2018) and Forsberg et al. (2015) have concluded that long-range transported fine particulate matter</li> <li>dominates the health effects in the <u>Nordic</u> countries, with largest contribution to long-term effects in Sweden originates from south-western Europe, while the largest contribution to short-term exposure originates from south-western Europe, while the largest contribution to short-term exposure originates from south-western Europe, while the largest contribution to short-term exposure originates from south-western Europe, while the largest contribution to short-term exposure originates from south-western Europe, while the largest contribution to short-term exposure originates from south and east as well as due to the degree of urbanization. There are large spatial differences in air pollution (met al., 2018, ab.). In the Nordic countries, there are large spatial differences in the Nordic countries represents a special challenge for exposure to air and pollution (Kukkonen et al., 2010, Nansson et al., 2017). Based on simulations for the period 1997 PM25 (PM25) planse on tell, 2017). Based on simulations for the period 1997 PM25 (PM25) mass concentrations while Demark, Finland and Norway). They also calculated a death rate for the period 2013 (Marce Resporter to PM25, and SUA) receive were much smaller of a furpoper PM15 (Contribution to secondary inorganic agreeoid (SUA) levels were much smaller (0.5% from Sweden and 1.4% from Demark,</li></ul>	62	al 2018a: Liang et al 2018: Solazzo et al 2018) show that outdoor air pollution causes ~500 000		
<ul> <li>pollution, there were around 3.500 premature deaths in 2011 in Denmark alone. Lehtomäki et al. (2018) have recently evaluated that ambient air pollution caused approximately 2000 premature deaths in Finland in 2015. Other studies have made assessments for some of the Nortic countries (Denmark, Sweden and Finland) with estimates ranging from 6500 to 9500 for the year 2000 (Geels et al., 2014; Watkiss et al., 2005, Karvosenoja et al., 2010, Spectively). Kutkonen et al. (2018) and Forsberg et al. (2015) have concluded that long-range transported fine particulate matter dominates the health effects in the <u>Nordic</u> countries, with largest contribution to long-term effects in 5000 for the year 2000 (Geels originates from south-eastern Europe, while the largest contribution to short-term exposure originates from south-eastern Europe, while the largest contribution to short-term exposure originates from south-eastern Europe, while the largest contribution to short-term exposure originates from south-asset as well as due to large differences in the geographical distribution of human exposure to air pollution (Im et al., 2018a,b). In the Nordic countries, there are large spatial differences in air pollution (Im et al., 2018a,b). In the Nordic countries represents a special challenge for exposure to air and the stress of a south advests at swell as due to the deage of urbanization. There are also local differences depending on wind direction and distance from local emission sources such as road transport, power plants and industry (Brandt et al., 2013). Furthermore, the widespread use of domestic wood stoves. International ship traffic is also a significant source of air pollution and health impacts in highly trafficked areas of the Batth and North Sees (Brandt et al., 2019). Where e.g. more than a third of the health impacts from Danish emissions are due to smoke from wood stoves. International ship traffic is also a significant source of air pollution and health impacts in highly trafficked areas of the Batthe</li></ul>	63	premature deaths in Europe. Brandt et al. (2013a) calculated that due to exposure to ambient air		
<ul> <li>(2018) have recently evaluated that ambient air pollution caused approximately 2000 premature deaths in Finland in 2015. Other studies have made assessments for some of the Nortic countries (Demark, Sweden and Finland) with estimates ranging from (S00 to 9500 for the year 2000 (Geels et al., 2014); Watkiss et al., 2005, Karvosenoja et al., 2010, respectively). Kukkonen et al. (2018) and Forsberg et al. (2015) have concluded that long-range transported fine particulate matter dominates the health effects in the Nordic countries, with largest contribution to long-term effects in Sweden originates from south-eastern Europe, while the largest contribution to short-term exposure originates from south-eastern Europe, differences in the geographical distribution of human exposure to air pollution power plants and industry problem covering global, regional, national and local sources, leading to large gpatial variability and therefore to large differences in the geographical distribution of human exposure to air pollution power belows. International polluted air masses especially from the south and east as well as due to the degree of urbanization. There are also local differences depending on wind direction and distance from local emission sources such as road transport, power plants and industry (Brandt et al., 2013a). Furthermore, the widespread use of domestic wood stoves in the Nordic countributed to 1.4% of the European PIMagest from Danish emissions are due to smoke from wood stoves. International ship traffic is also a significant source of air pollution and health impacts in highly trafficked areas of the Baltic and North Seas (Brandt et al., 2019), where e.g. more than a third of the Balti magest some Danish emission source responsible for 44.</li> <li>(0.5% from Sweden and 1.4% from Demark, Finland and Norway were responsible for 1494.</li> <li>(0.5% from Sweden and 1.4% from Demark, Finland and Norway were cound bandt et al., 2019, where e.g. more be been estimated to be approx. 800 billion Euros p</li></ul>	64	pollution, there were around 3,500 premature deaths in 2011 in Denmark alone. Lehtomäki et al.		
<ul> <li>deaths in Finland in 2015. Other studies have made assessments for some of the Nordic countries (Denmark, Sweden and Finland) with estimates ranging from 6500 to 9500 for the year 2000 (Geels et al., 2014; Watiss et al., 2005, Karvosenoja et al., 2010, respectively). Kukkonen et al. (2018) and Forsberg et al. (2015) have concluded that long-range transported fine particulate matter dominates the health effects in the <u>Jordic countries</u>, with largest contribution to long-term effects in Sweden originates from south-western Europe, (Miles the largest contribution to short-term exposure originates from south-western Europe (Jönsson et al. 2013).</li> <li>Air pollution is a transboundary problem covering global, regional, national and local sources, leading to large apatial variability and therefore to large differences in the geographical distribution of human exposure to air pollution (m et al., 2018a,b). In the Nordic countries, there are large spatial differences in air pollution (levels because of long-range transported and polluted air masses especially from the south and east as well as due to the degree of urbanization. There are also local differences in the Nordic countries represents a special challenge for exposure to air pollution (Kukkonen et al., 2019), where e.g. more than a third of the health impacts from Danish emissions are due to smoke from wood stoves. International ship traffic is also a significant source of air pollution and health impacts in highly trafficked areas of the Battic and North Seas (Brand et al., 2013b; lalkanen et al., 2010; Johansson et al., 2017). Based on simulations for the period 1997- 2003, Andersson et al. (2009) ecluated that Sweden.</li> <li>PM<sub>2.5</sub> (PPM<sub>2.5</sub>) mass concentrations while Denmark, Finland and Norway). They also calculated a death rate increase of 2 and 3% due to exposure to PM<sub>2.5</sub> and SIA, respectively, in Europe due to emissions from Denmark, Finland, Norway and Sweden.</li> <li>The external (or indirect) costs to society related to health imp</li></ul>	65	(2018) have recently evaluated that ambient air pollution caused approximately 2000 premature		
<ul> <li>(Denmark, Sweden and Finland) with estimates ranging from 6500 to 9500 for the year 2000 (Geels et al., 2014; Watkiss et al., 2005, Karvosenoja et al., 2010, respectively). Kukkonen et al. (2018) and Forsbreg et al. (2015) have concluded that long-range transported fine particulate matter dominates the health effects in the <u>Nordic</u> countries, with largest contribution to long-term effects in 15. Sweden originates from south-eastern Europe (Jönsson et al. 2013).</li> <li>Air pollution is a transboundary problem covering global, regional, national and local sources, leading to large <u>spatial</u> variability and therefore to large differences in the geographical distribution of fohuman exposure to air pollution (Me et al., 2018a, b). In the Nordic countries, there are large spatial differences in air pollution (Me et al., 2018a). Furthermore, the widespread use of domestic wood stoves in the Nordic countries represents a special challenge for exposure to air pollution (Kukkonen et al., 2019), where e.g. more than a third of the health impacts from Danish emissions are due to smoke from wood stoves. International ship traffic is also a significant source of al 2009) calculated that Sweden contributed to 1.4% of the European Pfrimary PM<sub>25</sub> (PPM<sub>25</sub>) mass concentrations while Denmark, Finland and Norway were responsible for 4% of European PPM<sub>25</sub>. Contribution to secondary inorganic <u>gerosol</u> (SIA) levels were much smaller ta increase of 2 and 3% due to exposure to PPM<sub>25</sub> and SIA, respectively, in Europe due to emissions from Denmark, Finland and Norway were responsible for 4% of the external costs to society related to health impacts from air pollution and the whole of European PPM<sub>25</sub>. Contribution to secondary inorganic gerosol (SIA) levels were much smaller the therefore to PPM<sub>25</sub> and SIA, respectively, in Europe due to emissions from Denmark, Finland and Norway were responsible for 4% of the whole of Europe, the total external costs are nearly 4 billion Europe peryea (Brandt et al., 2013a). In a more n</li></ul>	66	deaths in Finland in 2015. Other studies have made assessments for some of the Nordic countries		
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<ul> <li>and Forsberg et al. (2015) have concluded that long-range transported fine particulate matter dominates the health effects in the <u>Nordic</u> countries, with largest contribution to short-term exposure originates from south-eastern Europe (Jönsson et al. 2013).</li> <li>Air pollution is a transboundary problem covering global, regional, national and local sources, leading to large <u>spatial</u> virability and therefore to large differences in the geographical distribution of human exposure to air pollution (Im et al., 2018a,b). In the Nordic countries, there are large spatial differences in air pollution levels because of long-range transported and polluted air masses especially from the south and east as well as due to the degree of urbanization. There are also local differences depending on wind direction and distance from local emission sources such as road transport, power plants and industry (Brandt et al., 2013a). Furthermore, the widespread use of domestic wood stoves in the Nordic countries represents a special challenge for exposure to air pollution (Kukkomen et al., 2016), Johansson et al., 2017). Based on simulations for the period 1997-2003, Andersson et al. (2009) calculated that Sweden contributed to 1.4% of the European Primary PM<sub>2.5</sub> (PPM<sub>2.5</sub>) mass concentrations while Demmark, Finland and Norway. They also calculated a death rate increase of 2 and 3% due to exposure to PM<sub>2.5</sub> and SIA, respectively, in Europe due to emissions from Denmark, Finland, Norway and SWeden.</li> <li>The external (or indirect) costs to society related to health impacts from air pollution are substantial. In the whole of Europe, the total external costs have been estimated to be approx. 800 billion Euros per year and in Denmark A, Finland, Norway and SWeden.</li> <li>The external (or indirect) costs to society related to health impacts from are substantial. In the whole of Europe, the total external costs have been estimated to be approx. 800 billion Euros per year and in Denmark Johansing at progratic approx. 800 b</li></ul>	68	et al., 2014: Watkiss et al., 2005, Karvosenoja et al., 2010, respectively), Kukkonen et al. (2018)		
70       dominates the health effects in the <u>Nordic</u> countries, with largest contribution to long-term effects in       Deleted: Scandinavian         71       Sweden originates from south-western Europe, while the largest contribution to short-term exposure       Deleted: Scandinavian         74       Air pollution is a transboundary problem covering global, regional, national and local sources,       Image: Standard St	69	and Forsberg et al. (2015) have concluded that long-range transported fine particulate matter		
71       Sweden originates from south-western Europe, while the largest contribution to short-term exposure originates from south-eastern Europe (Jönsson et al. 2013).         73       Air pollution is a transboundary problem covering global, regional, national and local sources, leading to large spatial variability and therefore to large differences in the geographical distribution of human exposure to air pollution (Ime tal. 2018a, b). In the Nordic countries, there are large spatial differences in air pollution levels because of long-range transported and polluted air masses especially from the south and cast as well as due to the degree of urbanization. There are also local differences depending on wind direction and distance from local emission sources such as road transport, power plants and industry (Brandt et al., 2013a). Furthermore, the widespread use of domestic wood stoves in the Nordic countries represents a special challenge for exposure to air pollution (Kukkonen et al., 2019), where e.g. more than a third of the health impacts from Danish emissions are due to smoke from wood stoves. International ship traffic is also a significant source of air pollution and health impacts in highly trafficked areas of the Baltic and North Seas (Brandt et al., 2013b; Jalkanen et al., 2016, Johansson et al., 2017). Based on simulations for the period 1997.       Detered: p         80       f European PPM2 Contribution to secondary inorganic acrosol (SIA) levels were much smaller       Detered: p         97       PM2.5 (PPM2.5) mass concentrations while Denmark, Finland and Norway). They also calculated a death rate increase of 2 and 3% due to exposure to PM2.5 and SIA, respectively, in Europe due to emissions from Denmark, Finland, Norway and SWeden.       Detered: PM2.5         98       The external (or ind	70	dominates the health effects in the Nordic countries, with largest contribution to long-term effects in	Deleted: Scandinav	ian
<ul> <li>originates from south-eastern Europe (Jönsson et al. 2013).</li> <li>Air pollution is a transboundary problem covering global, regional, national and local sources, leading to large <u>spatial</u> variability and therefore to large differences in the geographical distribution of human exposure to air pollution (m et al., 2018a,b). In the Nordic countries, there are large spatial differences in air pollution levels because of long-range transported and polluted air masses especially from the south and east as well as due to the degree of urbanization. There are also local differences depending on wind direction and distance from local emission sources such as road transport, power plants and industry (Brandt et al., 2013a). Furthermore, the widespread use of 1 domestic wood stoves in the Nordic countries represents a special challenge for exposure to air pollution and health impacts in highly trafficked areas of the Baltic and North Seas (Brandt et al., 2015), Jalkanen et al., 2010, Johansson et al., 2017). Based on simulations for the period 1997-2003, Andersson et al., 2010, Johansson et al., 2017). Based on simulations for the period 1997-2003, Andersson et al. (2009) calculated that Sweden contributed to 1.4% of the European PPimary</li> <li>PM<sub>2.5</sub> (PPM<sub>2.5</sub>) mass concentrations while Demmark, Finland and Norway were responsible for 4%</li> <li>of European PPM<sub>2.5</sub>. Contribution to secondary inorganic aerosol (SIA) levels were much smaller</li> <li>(0.5% from Sweden and 1.4% from Demmark, Finland and Norway). They also calculated a death</li> <li>or texternal (or indirect) costs to society related to health impacts from air pollution are substantial. In the whole of Europe, the total external costs are nearly 4 billion Euro per use (Brandt et al., 2015). In a ore recent study, Im et al. (2018a), using a multi-model ensemble of 14 chemistry</li> <li>transport models (CTM), estimated that ambient air pollution in Europe in 2010 was responsible for 414 000:1100 000 premature deaths, leading to a cost of 30</li></ul>	71	Sweden originates from south-western Europe, while the largest contribution to short-term exposure		
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<ul> <li>emissions are due to smoke from wood stoves. International ship traffic is also a significant source</li> <li>of air pollution and health impacts in highly trafficked areas of the Baltic and North Seas (Brandt et</li> <li>al., 2013b; Jalkanen et al., 2016, Johansson et al., 2017). Based on simulations for the period 1997-</li> <li>2003, Andersson et al. (2009) calculated that Sweden contributed to 1.4% of the European Primary</li> <li>PM<sub>2.5</sub> (PPM<sub>2.5</sub>) mass concentrations while Denmark, Finland and Norway were responsible for 4%</li> <li>of European PPM<sub>2.5</sub>. Contribution to secondary inorganic <u>aerosol</u> (SIA) levels were much smaller</li> <li>(0.5% from Sweden and 1.4% from Denmark, Finland and Norway). They also calculated a death</li> <li>rate increase of 2 and 3% due to exposure to PPM<sub>2.5</sub> and SIA, respectively, in Europe due to</li> <li>emissions from Denmark, Finland, Norway and Sweden.</li> </ul> The external (or indirect) costs to society related to health impacts from air pollution are substantial. In the whole of Europe, the total external costs have been estimated to be approx. 800 billion Euros per year and in Denmark alone the external costs are nearly 4 billion Euro per year (Brandt et al., 2013a). In a more recent study, Im et al. (2018a), using a multi-model ensemble of 14 chemistry transport models (CTM), estimated that ambient air pollution in Europe in 2010 was responsible for 414 000±100 000 premature deaths, leading to a cost of 300 billion Euros. The study also showed that a 20% decrease of anthropogenic emissions in Europe source could avoid 47 000 premature	82	pollution (Kukkonen et al., 2019), where e.g. more than a third of the health impacts from Danish		
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<ul> <li>(0.5% from Sweden and 1.4% from Denmark, Primate and Norway). They also calculated a deal</li> <li>rate increase of 2 and 3% due to exposure to PPM<sub>2.5</sub> and SIA, respectively, in Europe due to</li> <li>emissions from Denmark, Finland, Norway and Sweden.</li> <li>The external (or indirect) costs to society related to health impacts from air pollution are substantial.</li> <li>In the whole of Europe, the total external costs have been estimated to be approx. 800 billion Euros</li> <li>per year and in Denmark alone the external costs are nearly 4 billion Euro per year (Brandt et al.,</li> <li>2013a). In a more recent study, Im et al. (2018a), using a multi-model ensemble of 14 chemistry</li> <li>transport models (CTM), estimated that ambient air pollution in Europe in 2010 was responsible for</li> <li>414 000±100 000 premature deaths, leading to a cost of 300 billion Euros. The study also showed</li> <li>that a 20% decrease of anthropogenic emissions in Europe source could avoid 47 000 premature</li> </ul>	88	of European PPM <sub>2.5</sub> . Contribution to secondary inorganic <u>aerosol</u> (SIA) levels were much smaller	Deleted: PM <sub>2.5</sub>	
<ul> <li>Find the increase of 2 and 3% due to exposure to FFM25 and SFA, respectively, in Europe due to emissions from Denmark, Finland, Norway and Sweden.</li> <li>The external (or indirect) costs to society related to health impacts from air pollution are substantial.</li> <li>In the whole of Europe, the total external costs have been estimated to be approx. 800 billion Euros</li> <li>per year and in Denmark alone the external costs are nearly 4 billion Euro per year (Brandt et al., 2013a). In a more recent study, Im et al. (2018a), using a multi-model ensemble of 14 chemistry</li> <li>transport models (CTM), estimated that ambient air pollution in Europe in 2010 was responsible for</li> <li>414 000±100 000 premature deaths, leading to a cost of 300 billion Euros. The study also showed</li> <li>that a 20% decrease of anthropogenic emissions in Europe source could avoid 47 000 premature</li> </ul>	00	(0.5% from Sweden and 1.4% from Definiark, Finiand and Norway). They also calculated a death		
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<ul> <li>per year and in Denmark alone the external costs are nearly 4 billion Europ prever (Brandt et al.,</li> <li>2013a). In a more recent study, Im et al. (2018a), using a multi-model ensemble of 14 chemistry</li> <li>transport models (CTM), estimated that ambient air pollution in Europe in 2010 was responsible for</li> <li>414 000±100 000 premature deaths, leading to a cost of 300 billion Euros. The study also showed</li> <li>that a 20% decrease of anthropogenic emissions in Europe source could avoid 47 000 premature</li> </ul>	94	In the whole of Europe, the total external costs have been estimated to be approx, 800 billion Euros		
<ul> <li>96 2013a). In a more recent study, Im et al. (2018a), using a multi-model ensemble of 14 chemistry</li> <li>97 transport models (CTM), estimated that ambient air pollution in Europe in 2010 was responsible for</li> <li>98 414 000±100 000 premature deaths, leading to a cost of 300 billion Euros. The study also showed</li> <li>99 that a 20% decrease of anthropogenic emissions in Europe source could avoid 47 000 premature</li> </ul>	95	per vear and in Denmark alone the external costs are nearly 4 billion Euro per vear (Brandt et al.		
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98 414 000±100 000 premature deaths, leading to a cost of 300 billion Euros. The study also showed 99 that a 20% decrease of anthropogenic emissions in Europe source could avoid 47 000 premature	97	transport models (CTM), estimated that ambient air pollution in Europe in 2010 was responsible for		
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100 deaths in Europe, while a similar reduction in the U.S. would avoid around 1 000 premature deaths	100	deaths in Europe, while a similar reduction in the U.S. would avoid around 1 000 premature deaths		
101 in Europe due to long-range transport.	101	in Europe due to long-range transport.		
102	102			
103 The Nordic countries are generally characterized <u>among the EU countries</u> with low air pollution	103	The Nordic countries are generally characterized among the EU countries with low air pollution	Deleted: compared	to the rest of Europe
104 levels (EEA, 2018). PM <sub>2.5</sub> levels are below the EU legislated limit value of $40 \ \mu g \ m^{-3}$ as well as the	104	levels (EEA, 2018). PM <sub>2.5</sub> levels are below the EU legislated limit value of 40 µg m <sup>-3</sup> as well as the	Form-tt-1. C. 1	int to the rest of Europe

112 WHO limit value of 20 µg m<sup>-3</sup> (EEA, 2018). However, there are still large impacts of air pollution 113 on human health and climate in the region itself (Arctic Council, 2011; Brandt et al., 2013a; Forsberg et al., 2015), as well as over the Arctic (Sand et al., 2015). The Task Force on Short Lived 114 115 Climate Forcers of the Arctic Council reported that measures aimed at decreasing Nordic emissions 116 will have positive health effects for communities exposed to air pollution. In a recent study, Sand et 117 al. (2015) showed that although the largest Arctic warming source is from Asian emissions, the 118 Arctic is most sensitive, per unit mass emitted, to Short Lived Climate Forcers (SLCF), emissions 119 from a small number of activities within the Arctic nations themselves.

120 121 The aim of the study is to quantify the contributions of the main emission sectors in each of the 122 Nordic countries to air pollutant levels and their impacts on premature mortality and associated 123 costs in the Nordic region and the Arctic. This will help us jdentify the emission sectors in these 124 Nordic countries that should be targeted for mitigation to decease the air pollution and exposure 125 levels in the Nordic countries, that are originated within the region. In addition, we also aim to give 126 a first estimate of the impact of transported air pollution on the Arctic population. In order to 127 achieve this, we have coupled the Danish Eulerian Hemispheric Model (DEHM) to the Economic 128 Valuation of Air Pollution (EVA) model and conducted a number of perturbation simulations 129 targeting different emission sectors in the four Nordic countries; Denmark, Finland, Norway and Sweden, for the year 2015. Year 2015 is selected to be in agreement with the ongoing Coupled 130 131 Model Intercomparison Project Phase 6 (CMIP6: Eyring et al., 2016), where the current year is 132 2015. As the present study will also look at the impacts in the future using baseline scenarios from 133 the CMIP6, we have selected the present year to be 2015 for consistency. The models and 134 perturbation simulations are described in Section 2, the model evaluation against surface measurements in the Nordic countries are presented in Section 3.1, the contributions of sectoral 135 136 emissions on the air pollution levels in the Nordic region and the Arctic are presented in Section 137 3.2., and the health impacts and associated costs are presented in Section 3.3. Conclusions are given 138 in Section 4. 139

# 140 1. Materials and methods141

# 142 2.1. <u>Danish Eulerian Hemispheric Model (DEHM)</u>143

144 The DEHM model was originally developed mainly to study the transport of SO2 and SO4 to the 145 Arctic (Christensen 1997), but has been extended to different applications during the last decades. It has been documented extensively in Brandt et al. (2012) and evaluated in several intercomparison 146 147 studies (e.g. Solazzo et al., 2012 a,b; Solazzo et al., 2017; Im et al., 2018a,b) and recently joined the 148 suit of operational models in the Copernicus Atmospheric Monitoring System (CAMS) to provide 149 regional forecasts of air pollution over Europe. The DEHM model uses a 150 km×150 km spatial 150 resolution over the Northern Hemisphere, then nests to 50 km×50 km resolution over Europe, 151 extending up to 100 hPa through 29 vertical levels, with the first layer height of approximately 20 152 m. The meteorological fields were simulated by the Weather Research and Forecast Model (WRF, 153 Skamarock et al., 2008) setup with identical domains and resolution. The time resolution of the DEHM model is one hour. The gas-phase chemistry module includes 58 chemical species, 9 154 155 primary particles, including natural particles such as sea-salt and 122 chemical reactions (Brandt et 156 al., 2012). The model also describes atmospheric transport and chemistry of lead, mercury, CO<sub>2</sub>, as 157 well as POPs. Secondary organic aerosols (SOA) are calculated using the Volatility Base System 158 (VBS: Bergstrom et al., 2012). In addition to the anthropogenic PM and SOA due to biogenic 159 emissions, DEHM model also calculates sea-salt emissions and their transport and interactions with

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**Deleted:** black carbon (BC) emission sources within Arctic Council nations generally have a greater impact on climate change per unit of emissions compared to sources outside of the Arctic (Arctic Council, 2011). The report also states that **Deleted:** these

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167	other pollutants. The current version of the DEHM model does not include wind-blown or re-	
168	suspended dust emissions. DEHM model does not output a PM2.5 or PM10 diagnostic, however	Format
169	these are calculated off-line, using all anthropogenic and natural components of PM, in order to be	Format
170	used in the health impact assessment described in Section 2.2.	
171		
172	In the current study, the DEHM model used anthropogenic emissions from the EDGAR-HTAP	
173	database and biogenic emissions are calculated online based on the MEGAN model. The total	
174	emission per country for the different pollutants are presented in Table 1. The sectoral distributions	
175	of emissions in each country are presented in Figure 1. As seen in the Table 2, most SNAP	Deleted
176	(Selected Nomenclature for Air Pollutants; CEIP, 2019) sectors are considered individually, while	
177	some are merged in order to reduce the computational costs. All sectors in relation to industrial	
178	activities (combustion, processes, solvent use and extraction and transport of fossil fuels) are	
179	merged into an "Industry" source sector, while waste management and agriculture sectors were	
180	lumped into one source sector.	Deleted
181	-	
182	As seen in Figure 1, non-industrial combustion (orange bars), where non-industrial combustion	Deleted
183	dominates, stands out as a major source contributing to CO and PM emissions while industry (grey	Deleted

dominates, stands out as a major source contributing to CO and PM emissions while industry (grey bars) (Table 2) is the largest source of NMVOCs, NOx and SOx. Traffic (yellow bars) also contributes significantly to CO and NOx. The largest source of NH<sub>3</sub> is from agriculture in particular, as well as waste management (green bars) (Table 2).

188 Table 1. Total pollutant emissions in the Nordic countries (in Gg) in 2015.189

	CO	NH <sub>3</sub>	NMVOC	NOx	SO <sub>2</sub>	PM10	PM <sub>2.5</sub>
DK	251	75	106	102	9	31	20
FI	302	31	85	128	41	31	19
NO	378	28	155	133	16	35	27
SE	413	54	159	129	18	37	18

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229 (NMB) and root mean square error (RMSE), The station information is provided in Table S1, along 230 with the descriptions of the monitoring network in each country. 231 232 233 2.2. Economic Valuation of Air Pollution (EVA) System 234 235 The EVA system (Brandt et al., 2013a,b; Geels et al., 2015; Im et al., 2018a) is based on the 236 impact-pathway chain method (Friedrich and Bickel, 2001), The EVA system can estimate acute 237 (short-term) and chronic (long-term) mortality, related to acute exposure to O3, and SO2, and 238 chronic exposure to PM2.5, and the associated external costs. The EVA system requires gridded 239 concentrations along with gridded population data, exposure-response functions (ERFs) for health 240 impacts, which are recommended by the WHO (2013), and economic valuation functions of the 241 impacts from air pollution. In addition, EVA uses population densities over fixed age intervals, 242 corresponding to babies (under one year), children (under 15), adults (above 15 and above 30), and 243 elderlies (above 65). The impacts of short-term exposure to O<sub>3</sub>, and SO<sub>2</sub>, and the long-term 244 exposure to PM2.5 are well established. EVA uses the annual mean concentrations of SO2, and 245 PM<sub>2.5</sub>, while for O<sub>3</sub>, it uses the SOMO35 metric that is defined as the annual sum of the daily 246 maximum of 8-hour running average over 35 ppb, following WHO (2013) and EEA (2017). 247 248 The health impacts are calculated using an ERF of the following form: 249  $R = \underline{\alpha} \times \underline{\delta_{c}} \times P$ 250 where R is the response (in cases, days, or episodes), c denotes the pollutant concentration, P 251 denotes the affected share of the population, and a an empirically determined constant for the 252 particular health outcome. EVA uses ERFs that are modelled as a linear function, which is a 253 reasonable approximation for the region of interest in the present study, as showed in several 254 studies (e.g. Pope et al., 2000; the joint World Health Organization/UNECE Task Force on Health 255 (EU, 2004; Watkiss et al., 2005)). However, some studies showed non-linear relationships, being 256 steeper at lower than at higher concentrations (e.g. Samoli et al., 2005). Therefore, linear 257 relationships may lead to overestimated health impacts over highly polluted areas. Exposure response functions (ERF) for all-cause chronic mortality due to PM2.5 are based on Pope et al., 258 259 2002; Krewski et al., 2009), which are also recommended by the WHO (2013). These are the most 260 extensive and up-to-date data, although there are ongoing studies in Europe, and in particular in the 261 Nordic region to develop regional-specific ERFs (e.g. the Nordic WelfAir project: 262 https://projects.au.dk/nordicwelfair/). The current version of the EVA system used in the present 263 study does not include impacts due to exposure to NO2. However, a new version is currently under 264 development under the NordicWelfAir project. 265 266 EVA calculates the number of lost life years for a Danish population cohort with normal age 267 distribution, when applying the ERF of Pope et al. (2002) for all-cause mortality (relative risk, RR= 268 1.062 (1.040-1.083) on 95% confidence interval). The latency period sums to 1138 year of life lost 269 (YOLL) per 100 000 individuals for an annual PM2.5 increase of 10 µg m<sup>-3</sup> (Andersen, 2008). The 270 counterfactual PM2.5 concentration is assumed to be 0 µg m-3 following the EEA methodology,

# meaning that the impacts have been estimated for the <u>simulated total (anthropogenic and natural)</u> <u>PM<sub>2.5</sub> mass, Applying a low counterfactual concentration can underestimate health impacts at low</u>

concentrations if the relationship is linear or close to linear (Anenberg et al., 2016). However, it is important to note that uncertainty in the health impact results may increase at low concentrations

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Deleted: The Danish Air Quality Monitoring Programme consists of an urban monitoring network that includes stations in the four largest Danish cities (Aalborg, Aarhus, Copenhagen and Odense) and two background stations in rural areas (Keldsnor and Risø). The design of the Danish air quality monitoring network is based on location of one or more pairs of stations in each of the four cities (Ellermann et al., 2015). In each city one of the stations is located at a pollution hot spot close (at the sidewalk) to a street lane with a high traffic density. The other station. It is placed so that it is not influenced by emissions from a single or a few streets or other nearby sources and hence is representative for the urban background pollution. In most cases the background stations are placed on rooftops. In addition, rural stations monitor the pollution outside city areas. ¶

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Regarding short-term expose (Hurley et al., 2005) and W	sitution in relatively clean atmos	spheres (Anenberg et al., 2	<u>2016).</u>				
(Hurley et al., 2005) and W	sure to $O_3$ , EVA uses the ERF re	commended by the CAFI	E Programme				
concentrations. There are al	HO (2013) that uses the daily m	aximum of 8-hour mean	U <sub>3</sub> tality and FVA				
adopts the ERF identified in	the APHENA study – Air Poll	ution and Health: A Euro	pean Approach				
(Katsouyanni et al., 1997).	Some recent studies also report	the chronic effects from C	D <sub>3</sub> (e.g. Turner,	Formatted: Subscript			
2016), however the current	version of the EVA model does	not include these effects.	The ERFs				
used in EVA to calculate m	ortality are presented in Table 2	•		Deleted: S			
Table 2. Exposure-response	: functions (ERF) used in EVA t	to calculate premature mo	rtality.				
		389					
	Exposure-response coefficient	Valuation, €390					
Health effects (compounds)		391					
	<u>(a)</u>	(EU27) 393					
Acute mortality <sup>2,3</sup> (SO <sub>2</sub> )	7.85E-6 cases/µgm <sup>-3</sup>	394					
Acute mortality <sup>2,3</sup> (O <sub>3</sub> )	3.27E-6*SOMO35 cases/µgm <sup>-3</sup>	<u>1,532,099 ревенье</u> 396					
Chronic mortality <sup>1,4,</sup> , YOLL (PM)	<u>1.138E-3 YOLL/μgm<sup>-3</sup> (&gt;30 years)</u>	57,510 per Y 397					
Infant mortality <sup>5</sup> , IM (PM)	<u>6.68E-6 cases/<math>\mu</math>gm<sup>-3</sup> (&gt; 9 months)</u>	2,298,148 pe <b>3299</b> e					
		400					
<sup>1</sup> Pope et al. (2002), <sup>2</sup> Anderson (	1996), <sup>3</sup> Touloumi (1996), <sup>4</sup> Pope et al	. (1995), <sup>5</sup> Woodruff et al. (199	<u>97).</u>	Formatted: English (US)			
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For the valuation of the hea	Ith impacts a value of FUP 1 5	million was applied for n	roventing on	Formattad: Space Defore: 6 pt			
acute death, following expe	rt panel advice (EC, 2001), whi	le for the valuation of a li	fe vear, a value	Formated. Space Belote. Opt			
of EUR 57 500 per year of	life lost (YOLL) were applied (A	Alberini et al., 2006). Moi	re details can				
be found in Im et al. (2018a	ı).	, ,					
2.3. Scenarios (response and	d contribution)			Deleted:			
			6.4				
	uction on land-based anthropoge	enic emissions from each	of the				
We have applied a 30% red	s. which include Denmark. Fini:	and, Norway and Sweden	. Each	<b>Deleted:</b> The perturbations are applied based on the SN sectors			
We have applied a 30% red continental Nordic countrie	P sector from an individual Nor	simulation perturbed a SNAP sector from an individual Nordic country, which are listed in Table $\underline{3}$					
We have applied a 30% red continental Nordic countrie simulation perturbed a SNA Industry is perturbed as the	AP sector from an individual Non combination of SNAP 3.4.5 and	dic country, which are list	AP9) and	Deleted: 2			
We have applied a 30% red continental Nordic countrie simulation perturbed a SNA Industry is perturbed as the waste management (SNAP	AP sector from an individual Noi combination of SNAP 3,4,5 and 10) are perturbed as one combin	dic country, which are list <u>16, while agriculture (SN</u> ned sector.	AP9) and	Deleted: 2			
We have applied a 30% red continental Nordic countrie simulation perturbed a SNA Industry is perturbed as the waste management (SNAP	AP sector from an individual Non combination of SNAP 3,4,5 and 10) are perturbed as one combin	the country, which are he is a country, which are he is a country which are he is a country which are here here here here here here here	AP9) and	Deleted: 2			
We have applied a 30% red continental Nordic countrie simulation perturbed a SNA Industry is perturbed as the waste management (SNAP DEHM model has been run	AP sector from an individual No. combination of SNAP 3,4,5 and 10) are perturbed as one combin on "tagged" mode, explained in	ale country, which are he <u>16, while agriculture (SN</u> <u>ned sector.</u> <u>1 section 2.1., so each sim</u>	AP9) and ulation	Deleted: 2			
We have applied a 30% red continental Nordic countrie simulation perturbed a SNA Industry is perturbed as the waste management (SNAP DEHM model has been run included a "perturbed" and	AP sector from an individual No combination of SNAP 3,4,5 and 10) are perturbed as one combir on "tagged" mode, explained ir "non-perturbed" concentration,	ale country, which are he <u>16, while agriculture (SN</u> <u>16 sector.</u> <u>1 section 2.1., so each sim</u> which we used to calcula	AP9) and ulation te the response	Deleted: 2			
We have applied a 30% red continental Nordic countrie simulation perturbed a SNA Industry is perturbed as the waste management (SNAP DEHM model has been run included a "perturbed" and to the 30% reduction in the	AP sector from an individual No: combination of SNAP 3,4,5 and 10) are perturbed as one combin on "tagged" mode, explained in "non-perturbed" concentration, particular country and sector. T	a section 2.1., so each sim which we used to calcula hese responses are then co	AP9) and ulation te the response onverted to	Deleted: 2			
We have applied a 30% red continental Nordic countrie simulation perturbed a SNA Industry is perturbed as the waste management (SNAP DEHM model has been run included a "perturbed" and to the 30% reduction in the population-weighted contril	AP sector from an individual No: combination of SNAP 3,4,5 and 10) are perturbed as one combin on "tagged" mode, explained in "non-perturbed" concentration, particular country and sector. The putions using the gridded popular	a section 2.1., so each sim which we used to calcula hese responses are then co ation densities and by assu	AP9) and ulation te the response onverted to uming a linear	Deleted: 2			
We have applied a 30% red continental Nordic countrie simulation perturbed a SNA Industry is perturbed as the waste management (SNAP DEHM model has been run included a "perturbed" and to the 30% reduction in the population-weighted contril extrapolation to 100%.	AP sector from an individual No: combination of SNAP 3,4,5 and 10) are perturbed as one combin on "tagged" mode, explained in "non-perturbed" concentration, particular country and sector. The putions using the gridded popula	a section 2.1., so each sim which we used to calcula hese responses are then co ation densities and by assu	AP9) and ulation te the response onverted to uming a linear	Deleted: 2 Deleted: We have also simulated a 100% reduction scen to all sectors per country ("All" in Table 2) to see the im			

## 435 Table <u>3</u>, Source sectors used in the perturbation scenarios.

Source Sectors	SNAP Code
Combustion in energy and transformation industries	1
Non-industrial Combustion	2
Industry	3,4,5,6
Road transport	7
Other mobile sources and machinery	8
Waste and agriculture	9,10

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# 439 2. Results and Discussion440

441 2.1.Evaluation

443 Surface ozone and PM<sub>2.5</sub> concentrations calculated by the DEHM model have been evaluated using 444 surface observations from the urban background and regional background monitoring stations in the 445 Nordic countries, The comparison of the mean of all observed concentrations in each country and 446 the corresponding modelled concentrations are presented in Table 4, while Figs. 2 and 3 present 447 Taylor diagrams for each station in each Nordic country, giving insight to the sptial distribution of 448 model performance. As seen in Table 3, temporal variation of O3 levels are well reproduced by the 449 DEHM model over all countries (r > 0.6), however with an overestimation of ~10% over Denmark, 450 Finland and Sweden, and ~30% over Norway. The daily variations of PM2.5 levels, averaged over all stations in each Nordic country are well reproduced for Denmark (r > 0.7), moderately over 451 452 Norway and Sweden (r>0.4), and poorly (r~0) over Finland (Table 3). PM2.5 concentrations are 453 underestimated by up to 35% over Denmark, Finland and Norway, and overestimated by 8% over 454 Sweden. 455

456 In all countries, lower NMB values are calculated for O2 over the regional background stations 457 compared to urban background stations, where the overestimations are higher. Regarding PM<sub>2.5</sub>, no 458 such conclusions can be drawn die to very limited number of regional background stations in 459 Denmark and Norway. In Finland, lower NMB values for PM2.5 are calculated for the regional 460 background stations, while in Sweden, much lower NMB values are calculated for the urban 461 stations. These differences reflect the underestimations in emissions as well as the coarse model 462 resolution. Table S2 shows the same comparisons for NO2 and SO2. Differences in observed and 463 modelled concentrations can be attributed to coarse model resolution as well as missing sources, in 464 particular for PM, such as wind-blown and resuspended dust in the DEHM model. The 465 underestimations in the modelled PM2.5 levels imply an underestimated exposure to PM2.5 levels. 466 given the dominance of PM2.5 in premature mortality. Similarly, the overestimations in O2 levels can be attributed to the underestimated NO-titration (Table S2). 467

468

Table <u>4. Model evaluation for the daily mean concentrations of O<sub>3</sub> and PM<sub>2.5</sub> for all the selected
 stations in the Nordic countries.
</u>

O3			PM <sub>2.5</sub>					
	MB	NMB.	RMSE		MB	NMB.	RMSE	
r	(µg m <sup>-3</sup> )	(%)	(µg m <sup>-3</sup> )	ľ	(µg m <sup>-3</sup> )	(%)	(µg m <sup>-3</sup> )	

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b)

- however underestimating by 12% (Denmark) up to 30% (Norway).
- 534

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Figure 4. Simulated surface PM2.5 chemical composition over a) Denmark, b) Finland, c) Norway, and d) Sweden.

Figure 5 compares the contribution of the total contribution of each Nordic country on the surface concentrations over the country itself, with contributions from rest of the Nordic countries and rest of the world. Figure 5 clearly shows that over 80% or more of PM2.5 surface levels are transported, outside the Nordic region, pointing that the Nordic countries are responsible for less than 20% of the particulate pollution in the region, This suggests significant decreases in the PM2.5 levels in the 547 region can only be possible by reductions in the emissions downwind. Similar high contributions 548 for other species including CO also shows that Nordic countries are exposed to airmasses coming 549 from rest of the world while local pollution is low. The figure also shows that PM<sub>2.5</sub> levels are 550 generally low in the Nordic countries, with annual means lower than 10, µg m-3 (highest in Denmark 551 and lowest in Finland). Similar to PM<sub>2.5</sub>, annual mean surface O<sub>3</sub> levels are also low (~30 µg m<sup>-3</sup>). 552 Similar analyses done for O3 (not shown) show that O3 levels are controlled largely regional, where 553 the local sources in the Nordic countries lead to small sink of O3 due to NO-titration. This is also in 554 agreement with Im et al. (2018b) reporting high Response to Extra-Regional Emission Reductions 555 (RERER) values (>0.8) suggesting that O<sub>3</sub> is a regional background pollutant in Europe. 556

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Figure 5, Absolute contributions of national, Scandinavian and other sources on the surface levels of major air pollutants over a) Denmark, b) Finland, c) Norway and d) Sweden. Note that CO concentrations are divided by 20 to scale with other pollutants.

574 Danish emissions contribute to only 1,14 µg m<sup>-3</sup> (13%) of the surface PM<sub>2.5</sub> concentrations over 575 Denmark (9.1, µg m<sup>-3</sup>), while contributions to other Nordic countries are about 3% (Figure 6). Non-576 industrial combustion (SNAP2), which is dominated by non-industrial combustion, is responsible 577 for  $0.36 \,\mu\text{g}$  m<sup>-3</sup> (60%) of the Danish contribution to surface PM<sub>2.5</sub> concentrations over Denmark. 578 Non-industrial combustion contributes to 0.22, µg m<sup>-3</sup> (56%) of the Danish contribution to surface 579 organic carbon (OC) concentrations over the country, suggesting the importance of non-industrial wood burning for heating. Industry contributes to  $0.01 \mu g$  m<sup>-3</sup> (35%) of the Danish contribution to 580 581 the surface SO<sub>2</sub> concentrations over Denmark, while on-road and off-road transport contributes 582 equally to the Danish share of the in surface NO<sub>2</sub> concentrations by  $1.02 \,\mu g \, m^{-3}$  (~79% together). 583 Agriculture and waste handling are important sources for surface SO4 levels over Denmark as well 584 as over the other Nordic countries, via the formation of ammonium sulfate ((NH4)<sub>2</sub>SO<sub>4</sub>) due to the 585 large ammonia (NH<sub>3</sub>) emissions from these sectors. 0.26 µg m<sup>-3</sup> of PM<sub>2.5</sub> over Denmark comes the 586 other Nordic countries, with 0.03 µg m<sup>-3</sup> coming from non-industrial combustion only. 587



Danish emissions contribute to only 10...144...µg m-3 (130...) of the surface PM2.5 concentrations over Denmark (3....18...µg m-3), while contributions to other Nordic countries are about less than ...1... (Fig....igure 65.... Nonindustrial combustion (SNAP2), which is dominated by residential...on-industrial combustion, is responsible for 0.3624...µg m-3 (605...) of the Danish contribution to surface PM2.5 concentrations over Denmark. Residential...onindustrial combustion contributes to 0.2216...µg m-3 (5660...) of the Danish contribution to surface organic carbon (OC) concentrations over the country, suggesting the importance of residential...on-industrial wood burning for heating. Industry contributes to 0.017... µ ... m-3 (351...) of the Danish contribution to the surface SO<sub>2</sub> concentrations over Denmark, while on-road and off-road transport contributes equally to the Danish share of the in surface NO2 concentrations by 1.020.55... µg m<sup>-3</sup> (~792 .. [6]

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Figure 6, Population-weighted sectoral contributions of Danish emissions on surface a) BC, b) OC, c) SO<sub>4</sub>, d) PM<sub>2.5</sub>, e) SO<sub>2</sub> and f) NO<sub>2</sub> over the Nordic countries. <u>The labels above the bars show the</u> absolute total contribution in µg m<sup>-3</sup> from all the sectors in Denmark.

Contributions of the Norwegian emissions over the Nordic countries are presented in Figure 7. Similar to the Danish emissions, Norwegian emissions contribute to  $0.6 \,\mu\text{g}$  m<sup>-3</sup> (13%) of the surface PM<sub>2.5</sub> concentrations over Norway, while contributions to other Nordic countries are below 1%, except for NO<sub>2</sub>, where on-road transport emissions from Norway contributes to almost  $0.02 \,\mu\text{g}$  m<sup>-3</sup> (42%) of the surface NO<sub>2</sub> levels over Finland. Non-industrial combustion is the main source of pollutant levels, in particular for OC, where Norwegian emissions are responsible for  $0.18 \,\mu\text{g}$  m<sup>-3</sup> (74%) of local contribution to the surface OC levels over Norway. Industry is a major source of surface SO<sub>2</sub> levels over Norway, contributing to  $0.02 \,\mu\text{g}$  m<sup>-3</sup> (66%) of the local contribution. 0.2  $\,\mu\text{g}$  m<sup>-3</sup> of PM<sub>2.5</sub> levels over Norway comes from the other Nordic countries, 0.02  $\,\mu\text{g}$  m<sup>-3</sup> being from non-residential combustion.



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Figure 7, Population-weighted sectoral contributions of Norwegian emissions on surface a) BC, b)
 OC, c) SO<sub>4</sub> d) PM<sub>2.5</sub>, e) SO<sub>2</sub> and f) NO<sub>2</sub> over the Nordic countries. The labels above the bars show
 the absolute total contribution in µg m<sup>-3</sup> from all the sectors in Norway.



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 BC, b) OCSO4... c) SO4OC
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c)

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industrial combustion, contribute largest to the air pollution over Sweden.



Deleted: Fig....igure ...7...shows the contributions of Finnish emissions on the pollutant levels over the Nordic countries. Similar to Denmark and Norway, non-industrial combustion, which is dominated by residential combustion, is the major source of pollution over Finland, although contributions are lower compared to Denmark and Norway (0.1906...µg m<sup>3</sup> (4158...) of PM<sub>2.5</sub> and 0.1104...µg m<sup>3</sup> (4866...) of OC). Another noticeable difference is that energy production is also an important contributor to surface SO<sub>2</sub> (0.01. µg m<sup>3</sup>: %4451... and SO<sub>4</sub> (0.032....µg m<sup>3</sup>: 443 ... [11] Formatted: Subscript



Figure & Population-weighted sectoral contributions of Finnish emissions on surface a) BC, b) OC,
 c) SO<sub>4</sub>, d) PM<sub>2.5</sub>, e) SO<sub>2</sub> and f) NO<sub>2</sub> over the Nordic countries. The labels above the bars show the
 absolute total contribution in μg m<sup>-3</sup> from all the sectors in Finland.

729 730 Contributions from the Swedish emission sources to surface pollutant levels over the Nordic 731 countries are presented in Figure 9. Unlike other Nordic countries, Swedish emissions have larger 732 contributions to pollution levels over the other Nordic countries, in particular over Norway. The 733 figure also shows that Sweden does not experience as dominant contribution from non-industrial 734 combustion (32%) like the other Nordic countries show. Swedish emissions from SNAP2 are much 735 lower than for the rest of the Nordic countries (official emissions reported to the CLRTAP), most 736 probably due to lower emission factors. Non-industrial combustion and industry contribute 737 similarly to the surface PM<sub>2.5</sub> levels. Industry also has an important contribution to surface SO<sub>4</sub> 738 levels (0.01 μg m<sup>-3</sup>: 51%), as well to SO<sub>2</sub> (0.01 μg m<sup>-3</sup>: 58%) and BC (0.006 μg m<sup>-3</sup>: 18%). 0.5 μg 739 m<sup>-3</sup> of surface PM<sub>2.5</sub> levels over Sweden comes from the other Nordic countries, of which, 0.1 µg 740 m<sup>-3</sup> comes from non-residential combustion. 741

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Figure 9, Population-weighted sectoral contributions of Swedish emissions on surface a) BC, b)
SO4, c) OC, d) PM2.5, e) SO2 and f) NO2 over the Nordic countries. The labels above the bars show the absolute total contribution in μg m<sup>-3</sup> from all the sectors in Sweden.
2.2.2. Arctic

809 The contributions of the emission sources in the different Nordic countries on the surface aerosol 810 concentrations over the Arctic region (defined as the area north of 67 °N latitude) are presented in Figure 10, Results show that overall, Norway has the largest contribution to surface aerosol levels 811 812 over the Arctic, while Denmark has the lowest contribution, although contributions are only a few percent. Norwegian emissions, in particular non-industrial combustion, contributes to about 2% of 813 814 the surface BC levels over the Arctic. Non-industrial combustion in the Nordic countries is also the 815 largest contributor to Arctic BC levels, except for Sweden, where industry plays a more important role. Non-industrial combustion is also the dominant contributor to OC levels over the Arctic. 816 817 Sulfate levels are largely influenced by the contributed from the agriculture and waste treatment 818 facilities over the Nordic countries. Contributions to Arctic PM2.5 levels are similar to the

819 contributions to the BC levels.

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Figure 10, Population-weighted sectoral contributions from a) Denmark, b) Norway, c) Finland and 833 d) Sweden to the surface aerosol levels over the Arctic (north of 67°N). The labels above the bars 834 show the absolute total contribution in µg m<sup>-3</sup> from all the sectors in each source country.

#### 836 2.2.3. Spatial distributions of contributions

838 The geographical distributions of total anthropogenic emissions from each Nordic country to 839 surface PM2.5 and O3 levels are calculated to investigate the extent of contributions from each 840 Nordic country to its neighbours and to the Arctic. Figure 11, shows the annual-mean absolute 841 contributions (%) of total land-based anthropogenic emissions to surface O3 levels in the Nordic 842 region from each country. The annual-mean contributions are very low, (up to  $1.5 \,\mu g \, m^{-3}$ ; 5%) 843 Largest contributions in each country are calculated in the source region in the particular country. 844 implying the impact of O<sub>3</sub> titration by local fresh NO emissions, Danish anthropogenic emissions 845 (Figure 1 1a) leads to a titration of up to 1.5 µg m<sup>-3</sup> (around 4-5%), particularly over capital region, **k**46 The largest impact of Finnish emissions is around the Helsinki area, responsible for up to  $1 \mu g m$ 847 (5%) of surface O<sub>3</sub> destruction over the area (Figure 11b). Finnish emissions also lead to an increase 848 of surface O<sub>3</sub> levels by up to 0.5  $\mu$ g m<sup>-3</sup>(1%) over the downwind regions to the southeast and 849 northwest. Impact of Norwegian emissions to surface O3 levels (Figure 11c) are largest (up to 1µg 850  $m^{-3}$ : 2%) over the Oslo area and the impact extents over the northern part of Oslo with a slightly 851 larger spatial contribution to O3 levels compared to Denmark and Finland. The Swedish emissions 852 have a larger geographical impact on the surface O3 levels (Figure 11d) over the country itself 853 compared to the other Nordic countries but the magnitude is similar to the impact from the 854 Norwegian emissions. 855



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Figure 1 L Spatial distributions of annual population-weighted mean absolute contributions (µg m<sup>-3</sup>)
of total emissions from a) Denmark, b) Finland, c) Norway, and d) Sweden to surface O<sub>3</sub> levels in
the Nordic region.

921 Figure 12 shows the annual-mean <u>absolute</u> contributions of each Nordic country on the surface 922 PM<sub>2.5</sub> levels in the entire model domain. Danish anthropogenic emissions are responsible for up to 923 20% of surface PM<sub>25</sub> levels over Denmark, with largest contributions over the <u>capital</u> region 924 (Greater Copenhagen area) (Figure 12a). Danish land emissions also impact the surface PM<sub>2.5</sub> levels 925 over the southern part of Sweden and Norway, by around 4% and 2%, respectively. The Finnish 926 anthropogenic emissions have the largest impact on surface PM<sub>2.5</sub> levels over the southern part of 927 the country, around the capital region by up to 30% (Figure 12b). Finnish emissions also have a small impact, lower than 3%, on the central part of Sweden and northern parts of Norway. 928 929 Norwegian anthropogenic emissions have largest contributions to surface PM2.5 level around the 930 capital region by up to 30%, while there is also a significant impact on surface PM2.5 levels over 931 Sweden by around 7% (Figure 12c). Finally, Swedish anthropogenic emissions have large 932 contribution to surface PM2.5 levels over the Stockholm area by around 15% and also contributes to 933 PM<sub>2.5</sub> levels over Finland, in particular over the southwestern parts of Finland, by up to 5% Figure 934 1<u>2</u>d).

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Figure 12, Spatial distributions of annual population-weighted mean absolute contributions (µg m<sup>3</sup>)
of total emissions from a) Denmark, b) Finland, c) Norway, and d) Sweden to surface PM<sub>2.5</sub> levels
over the Nordic and the Arctic regions (north of 67°N).

995 2.3. Contribution to premature mortality and costs



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1011 The number of acute and chronic premature mortality in the four selected Nordic countries and the 1012 Arctic region (north of 67°N), along with the associated costs are presented in Table 5. As seen in the Table, chronic mortality due to  $PM_{2.5}$  is the major source for premature mortality, as EVA 1013 1014 calculates chronic mortality only due to exposure to PM<sub>2.5</sub> (see Table 2). The highest number of 1015 cases is calculated for Sweden (~4 200 cases), followed by Denmark (~3 500 cases), Finland 1016 (~1 800) and Norway (~1 700). Results also show that SO2 is almost responsible for all acute 1017 mortalities in the region, which is consistent with earlier studies (e.g. Brandt et al., 2013). This is 1018 due to the decrease of  $O_3$  in the region by fresh NO emissions, leading to low mortality due to  $O_3$ . 1019 exposure. These numbers lead to an associated cost of more than 2 billion Euros in Sweden and 1020 Denmark and ~ 1 billion Euros in Finland and Norway. The number of premature death cases are comparable with existing literature (e.g. Brandt et al., 2013a for Denmark; Solazzo et al., 2018 for 1021 1022 all four Nordic countries; EEA, 2017 for all four Nordic countries). In the Arctic region, the total 1023 number of premature mortality cases is calculated to be 94, 93 of which are due to exposure to 1024 PM<sub>2.5</sub> (chronic), leading to a cost of 58 million Euros. 1025

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1b26 Table 5, Acute and chronic premature death cases in the Nordic countries and the Arctic region 1027 (north of 67°N) in 2015 and the associated costs. Deleted: 4

	1028						
		Denmark	Finland	Norway	Sweden	Arctic	
	Prematu	re Mortality (number of ca	ises)				Formatted Table
	Acute	19 <u>[19 20]</u>	18 [18 18]	6 <u>[66]</u>	25 <u>[24 25]</u>	1_[	<u>[1]</u>
(	Chronic	3 <b>,</b> 332 <u>[3 263 3 398]</u>	1,707 <u>[1 671 1 740]</u>	1 <b>_</b> 596 <u>[1 563 1 628]</u>	4 <u>091 [4 006 4 172]</u>	93 <mark>[9</mark> 1	Deleted:
1	Fotal	3,351 [3 282 3 417]	1,725 <u>[1 689 1 759]</u>	1 <u>602 [1 569 1 634]</u>	4 11 <u>5 [4 030 4 197]</u>	94 92	Deleted:
		Cost (million Euros)					Deleted:
4	Acute	30 <u>[29 30]</u>	28 [27 28]	9 <u>[9 10]</u>	38 <u>[37 38]</u>	λŢ.	Deleted:
(	Chronic	2,031 [1 989 2 071]	1,040 <u>[1 019 1 061]</u>	973 <u>[953 992]</u>	2,494 [2 442 2 543]	57 56	(Deleted:
-	Fotal	2,061 [2 018 2 102]	1,068 <u>[1 046 1 089]</u>	982 [962 1 002]	2,53 <u>1,[2 479 2 582]</u>	58 57	Deleted:
	1029 Deleted:						
	1030 The EVA model has been used to calculate the contributions of Nordic emissions to the total Deleted:						
	1031 premature mortality (acute + chronic) in the Nordic countries for the year 2015. Table 6 presents a						
	1032	source/receptor matrix of	the contributions to pren	nature mortality on the	Nordic countries. Danis	h \ \\\	Deleted:
	1033	emissions contribute to $\sim 4$	100  premature deaths in  100  prematu	Denmark, dominated by	agriculture (33%), non	- \ \\\\	Deleted:
	1034 1035	non-industrial combustion (31	(18%) and trainic (18%). In	Norway, the domination $t_{200}$ premature de	aths in Norway. In		Deleted:
	1035 Finland, the total number of premature deaths in 2015 is calculated to be $\sim$ 270, where non-industrial <b>Deleted</b> :						Deleted:
	1037 combustion and traffic are responsible for more than half. Finally, in Sweden, traffic and waste						
1038 management/agriculture are responsible for 50% of the total premature death in Sweden (~330). Deleted:						Deleted:	
1039 Deleted: 2						Deleted: 2	
1040 Table 6, Source/Receptor relationships of the contributions of anthropogenic emissions from the Deleted: 5						Deleted: 5	
	1041	Nordic countries to the pro	emature mortality in the	Nordic area.			Deleted: 5

Source/Receptor	Denmark	Finland	Norway	Sweden
Denmark	422 <u>[414 431]</u>	24 [23 24]	29 <u>[28 29]</u>	198 [194 202]
Finland	8 <u>[8 8]</u>	274 <u>[269 280]</u>	9 <u>[99]</u>	42 [41 43]
Norway	33 <u>[33 34]</u>	26 <u>[26 27]</u>	203 <u>[199 207]</u>	86 <u>[84 87]</u>
Sweden	57 <u>[55 58]</u>	64 [63 65]	27[26 28]	340 <u>[333 346]</u>

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Finland	5 <u>[5 5]</u>	172 <u>[169 176]</u>	<u>6 [5 6]</u>	26 <u>[26 27]</u>	
Norway	20 [20 21]	16 <u>[16 16]</u>	12 <u>6 [123 128]</u>	5 <u>3 [51 54]</u>	
Sweden	3 <u>6 [35 36]</u>	39 <u>[39 40]</u>	1 <u>7 [16 17]</u>	212 [207 216]	

1099 Regarding the costs attributed to each of the source sectors, Figure S1 summarizes the contributions 1100 per country. For Denmark, results suggest that non-industrial combustion and agriculture/waste 1101 management are the main sectors to be targeted to reduce the negative impacts of air pollution. In 1102 Norway, reduction of non-industrial combustion emissions alone can substantially reduce the costs 1103 of air pollution. In Finland, similar to Denmark and Norway, non-industrial combustion should be 1104 targeted for developing emission reduction strategies, along with the traffic emissions, which 1105 contribute as large as the non-industrial combustion. Finally, in Sweden, traffic and 1106 agriculture/waste management sectors should be targeted to reduce the adverse impacts of air 1107 pollution and their associated costs. However, as the local contributions to air pollutants are 1108 generally low in the region, it should be noted that significant reductions can only be achieved by 1109 reducing the emissions downwind, which would require a coordinated effort in Europe.

#### 1111 3. Conclusions 1112

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1113 The sectoral contributions of land-based anthropogenic emission sources in the four Nordic 1114 countries; Denmark. Finland, Norway and Sweden, on air pollution levels and premature mortality 1115 in these countries and over the Arctic have been estimated using the DEHM/EVA impact 1116 assessment system for the year 2015. The chemistry and transport model, DEHM, was run with 1117 tagging mode in order to calculate inline the sectoral contributions based on 30% reductions of each 1118 sector separately. Using the modelled surface concentrations of O<sub>3</sub>, SO<sub>2</sub> and PM<sub>2.5</sub>, the EVA model 1119 calculated the acute (O3 and SO2) and chronic (PM2.5) premature mortality due to exposure to these 1120 pollutants.

1122 Results show that the Nordic countries are responsible for 5-10% of the regional background 1123 surface PM<sub>2.5</sub> concentrations in the countries itself. The non-industrial combustion (SNAP2), which 1124 is dominated by the non-industrial wood combustion, is responsible for 50% to 80% of the 1125 contribution to surface PM2.5 in the Nordic countries. In Denmark, Finland and Norway, non-1126 industrial combustion contributes largely to surface OC (by 60% - 80%). In Sweden, SNAP2 is responsible for 43% of the contribution to surface OC, while 43% comes from industrial activities. 1127 1128 Similar to OC, BC is also dominated by non-industrial combustion (by 50%-65%), except for 1129 Sweden, where 25% originates from non-industrial combustion and 31% from industrial activities. 1130 The dominant source for surface SO<sub>4</sub> and SO<sub>2</sub> in all four Nordic countries is calculated to be industrial activities. In Norway and Sweden, around 70% of SO2 are coming from industrial 1131 1132 activities, while in Denmark and Finland, industrial activities are responsible for around 30% of 1133 SO<sub>2</sub>. Off-road traffic is responsible for 21% of SO<sub>2</sub>, while energy production is responsible for 50% of SO<sub>2</sub> in Finland. Industrial activities are also responsible for 60% of SO<sub>4</sub> in Norway and Sweden 1134 and 30% in Denmark and Finland. The dominant source for NO2 is calculated to mobile sources, 1135 and the share between on-road and off-road traffic varies depending on the country. Almost 35% of 1136 NO2 comes from on-road traffic in all four Nordic countries while off-road traffic contributes by 1137 1138 25% to 35%.

1140 Norway has the largest contribution to aerosol levels over the Arctic, while Denmark has the lowest
1141 contribution, although contributions are only a few percent. Non-industrial combustion in the
1142 Nordic countries is also the largest contributor to Arctic OC and BC levels, except for Sweden,

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where industry plays a more important role in relation to the Arctic levels. Agriculture and waste
treatment facilities over the Nordic countries are responsible contribute to the sulfate levels over the
Arctic.

Anthropogenic emissions lead to a titration of around 4-5%, particularly over the source countries 1156 and lead to a very small surface O3 increase (>1%) in the downwind regions. The largest impacts 1157 are calculated to be around the capital regions. Danish emissions also impact the surface PM2.5 1158 1159 levels over the southern part of Sweden and Norway, by around 3%. Finnish emissions also have a 1160 small impact, lower than 3%, on the central part of Sweden and northern parts of Norway. 1161 Norwegian anthropogenic emissions impacts PM2.5 levels over Sweden by around 7% while Swedish anthropogenic emissions contribute to PM2.5 levels over the southwestern parts of Finland, 1162 1163 by up to 5%. It should be noted that these results are calculated for a specific year, 2015, therefore 1164 transport from one country to others can significantly vary in different years due to meteorology, in 1165 particular wind speed and direction.

1167 The total number of premature mortality cases due to air pollution are calculated to be  $\sim 4000$  in 1168 Denmark and Sweden and ~2 000 in Finland and Norway, leading to a total cost of 7 billion Euros 1169 in the selected Nordic countries. The contributions of emission sectors to premature mortality in 1170 each of the Nordic countries vary. Danish agriculture and industrial emissions contribute similarly 1171 (by 33%) to ~400 premature mortality cases in Denmark, that are due to the Danish emissions. In 1172 Norway, non-industrial combustion, dominated by non-industrial wood combustion, is responsible 1173 for 48% of the ~200 premature deaths in Norway due to the exposure to pollution from the the 1174 Nordic sources. In Finland, non-industrial combustion and traffic are responsible for more than half 1175 of the ~270 premature deaths in 2015, caused by the sources within the region. Finally, in Sweden, 1176 traffic and waste management/agriculture are responsible for 50% of the total premature death in 1177 Sweden (~330), caused by the emissions in the Nordic region. In Denmark, Finland and Norway, 1178 non-industrial combustion is the main sectors to be targeted to reduce the negative impacts of air 1179 pollution, while in Sweden, traffic and agriculture/waste management sectors should be targeted to 1180 reduce the adverse impacts of air pollution and their associated costs. Overall, Nordic countries 1181 contribute to low premature death cases in their Nordic neighbours ( $\leq$ 50). Among the four Nordic 1182 countries, Denmark has the largest external costs due to air pollution, followed by Sweden, Finland 1183 and Norway, respectively. Following the mortality rates, Denmark, Finland and Norway have the 1184 largest cost contribution to Sweden, while Sweden contributes largest to Denmark.

1186Overall, results from the estimates of pollution export, premature mortality and associated costs1187suggest that in the Nordic countries, non-industrial combustion, which is dominated by non-1188industrial1189wood combustion, together with industry and traffic are the main sectors to be targeted1180for emission mitigation strategies. The contributions of emissions from Nordic countries to each1190other are small (<10%), and to the Arctic (up to 2%), meaning that large reductions can be achieved</th>1191only by coordinated efforts to decrease emissions in the upwind countries.

## 1193 Author Contribution

1194
1195 UI and JHC conducted the model simulations. JHC and OKN worked with the emissions input. MS
1196 and RM contributed to the experimental design of the model simulations. UI, JK, CA and SL-A

extracted measurement data from Denmark, Finland, Sweden and Norway, respectively. CG and JBcontributed to premature mortality and cost calculations. All co-authors contributed to the

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## 1203 Acknowledgements

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