

Lisa Bain

Dear CARB Staff and Board Members,

As a public health professional who has spent the past 15 years focused on infant mortality prevention, I am deeply concerned about proposed changes to California's Cap and Invest program that would weaken protections against air pollution.

A robust body of evidence demonstrates that exposure to fine particulate matter, ground level ozone, and other air pollutants during pregnancy is strongly associated with adverse birth outcomes, including preterm birth, low birth weight, and stillbirth. These outcomes are not inevitable - they are largely preventable with strong, protective environmental and climate policies.

Stillbirth remains one of the most devastating outcomes in maternal health, with profound and lasting impacts on families and communities. Research shows that pollutants from traffic, industrial emissions, and wildfire smoke can cross the placenta, disrupting placental function and increasing the risk of stillbirth. Climate and air quality policies are therefore not abstract environmental measures—they are maternal and infant safety policies.

Weakening California's climate protections will disproportionately harm communities already facing the highest burden of poor birth outcomes, including Black, low income, and environmentally overburdened communities. Prenatal exposure to air pollution is a well established, evidence based driver of inequities in maternal and infant health, and regulatory decisions must reflect this reality.

For these reasons, I strongly urge CARB to amend the proposed Cap and Invest changes to ensure the program continues to reduce emissions, protect air quality, and sustain critical investments through the Greenhouse Gas Reduction Fund. Preserving and strengthening this program is essential to safeguarding maternal and infant health, advancing health equity, and ensuring California's climate leadership delivers tangible benefits to families.

Thank you for your consideration and for prioritizing policies that protect our most vulnerable populations.

Sincerely, Lisa Bain, MPH