1	Local Characteristics of and Exposure to Fine Particulate Matter (PM _{2.5}) in					
2	Four Indian Megacities					
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18	Highlights:					
19	• PM _{2.5} increased by 75% during Diwali in Delhi, causing 20 extra daily mortality					
20	• A weekend effect is found in Mumbai and Chennai but not in Delhi and Hyderabad					
21	• Distinct differences in diurnal pattern of PM _{2.5} in different seasons and cities					

22 Abstract:

Public health in India is gravely threatened by severe PM_{2.5} exposure. This study presents an 23 analysis of long-term PM_{2.5} exposure in four Indian megacities (Delhi, Chennai, Hyderabad 24 and Mumbai) based on in-situ observations during 2015-2018, and quantifies the health risks 25 26 of short-term exposure during Diwali Fest (usually lasting for ~5 days in October or November 27 and celebrating with lots of fireworks) in Delhi for the first time. The population-weighted annual-mean PM_{2.5} across the four cities was 72 μ g/m³, ~3.5 times the global level of 20 μ g/m³ 28 and 1.8 times the annual criterion defined in the Indian National Ambient Air Quality Standards 29 (NAAQS). Delhi suffers the worst air quality among the four cities, with citizens exposed to 30 31 'severely polluted' air for 10% of the time and to unhealthy conditions for 70% of the time. Across the four cities, long-term PM_{2.5} exposure caused about 28,000 (95% confidence interval: 32 17,200–39,400) premature mortality and 670,000 (428,900–935,200) years of life lost each 33 year. During Diwali Fest in Delhi, average PM_{2.5} increased by ~75% and hourly concentrations 34 reached 1676 μ g/m³. These high pollutant levels led to an additional 20 (13–25) daily 35 premature mortality in Delhi, an increase of 56% compared to the average over October-36 November. Distinct seasonal and diurnal variations in PM2.5 were found in all cities. PM2.5 37 mass concentrations peak during the morning rush hour in all cities. This indicates local traffic 38 could be an important source of PM_{2.5}, the control of which would be essential to improve air 39 quality. We report an interesting seasonal variation in the diurnal pattern of PM_{2.5} 40 concentrations, which suggests a 1-2 hours shift in the morning rush hour from 8 a.m. in pre-41 42 monsoon/summer to 9-10 a.m. in winter. The difference between PM_{2.5} concentrations on weekdays and weekend, namely weekend effect, is negligible in Delhi and Hyderabad, but 43 noticeable in Mumbai and Chennai where ~10% higher PM_{2.5} concentrations were observed in 44 morning rush hour on weekdays. These local characteristics provide essential information for 45

46 air quality modelling studies and are critical for tailoring the design of effective mitigation47 strategies for each city.

48 Keywords: PM_{2.5}; Health effect; Diwali festival effect; Weekend effect; Long-term; Short49 term

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51 **1. Introduction**

52 Exposure to fine particulate matter (particles with an aerodynamic diameter less than 2.5 µm, PM_{2.5}) can pose a major threat to human health (Chowdhury and Dey, 2016; Gao et al., 53 2018a; Gao et al., 2017; Huang et al., 2018; Pope et al., 2009; Wang et al., 2017). As a rapidly 54 developing country with an expanding population, India is suffering severe PM_{2.5} pollution, 55 with nine cities among the top ten most polluted cities in the world as reported by the World 56 Health Organization (WHO, 2016). Exposure to high levels of PM_{2.5} causes ~1 million 57 premature mortality per year across India (Conibear et al., 2018a). In order to tackle this PM_{2.5} 58 pollution, the Central Pollution Control Board (CPCB) of India set revised National Ambient 59 60 Air Quality Standards (NAAQS) in 2009 that included PM_{2.5} regulations (CPCB, 2009). Some 61 mitigation policies have been implemented in major Indian cities (Chowdhury et al., 2017; Sharma and Dixit, 2016), but limited improvement in air quality (~10% reduction in PM_{2.5}) has 62 63 been seen (Chowdhury et al., 2017). PM_{2.5} pollution is expected to further deteriorate in the coming decades (Chowdhury et al., 2018; Conibear et al., 2018b), due to rapid ongoing 64 65 urbanization. This surface pollution over India also has important global implications through effective transport by the Asian summer monsoon to the upper troposphere and lower 66 stratosphere, where pollutants can be re-distributed on a global scale and thus affect global 67 climate forcing and air quality (Lelieveld et al., 2018; Liu et al., 2015; Yu et al., 2017). 68

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Previous studies estimated health risks in India of exposure to PM_{2.5} based on model 69 analysis or satellite retrieves and mainly focused on long-term exposure (e.g., Chowdhury and 70 71 Dey, 2016; Conibear et al., 2018a, b; Gao et al., 2018b; Lelieveld et al., 2015; van Donkelaar et al., 2015). In addition, intensive emissions and unfavourable meteorological condition for 72 dispersion can significantly increase PM_{2.5} and lead to hazardous short-term exposure with high 73 health risks (Atkinson et al., 2014; Héroux et al., 2015). In-situ observations at high temporal 74 75 resolution are valuable for more firmly grounded estimates of health risks. Furthermore, characterizing the seasonal and diurnal variations of urban PM_{2.5} concentrations and their 76 77 relationships to meteorology is the key to understanding the drivers of air pollution and devising effective mitigation strategies in Indian megacities (Schnell et al., 2018). Long-term 78 in-situ monitoring studies are critical for a better understanding of these factors. However, only 79 80 a few studies providing long-term observations of PM_{2.5} have been undertaken, and most of these have focused on Delhi only (Sahu and Kota, 2017; Sharma et al., 2018). Information on 81 local characteristics such as the diurnal variation in pollutant emissions is also critical for 82 modelling studies. This information is scarce in India and models typically use a constant 83 diurnal profile of emissions (e.g., Mohan and Gupta, 2018) or standard profiles from American 84 or European cities to represent conditions in India (e.g., Marrapu et al., 2014). Long-term 85 observations of the diurnal variation of pollutants would provide essential information for 86 improving model performance. 87

This study presents a comprehensive summary of the seasonal and diurnal variation of urban PM_{2.5} in four Indian megacities (Delhi, Chennai, Hyderabad and Mumbai), based on ground observations from 2015 to 2018. This analysis reveals the observation-based patterns of human activity and local temporal characteristics of emissions in each city, and hence provides valuable input for modelling studies. In addition, for the first time, we report the influences of weekend effect on the diurnal variations and quantify the health risks of shortterm exposure during Diwali Fest. Finally, the cumulative exposure of urban residents to PM_{2.5}
and the corresponding health burdens are estimated for each city. The results of this study are
valuable for the designation and implementation of mitigation policies on a city level aimed at
improving air quality to meet the Indian NAAQS standards.

98

99 2. Materials and Methods

100 **2.1 Data**

Datasets of pollutants measured between 1 March 2015 and 31 December 2018 are 101 analysed in this study. An overview of the data is given in Table S1. Hourly PM_{2.5} observations 102 in Delhi, Chennai, Mumbai and Hyderabad (Fig. S1) are rountinely made at U.S. Embassy and 103 consulates using a beta attenuation monitor (San Martini et al., 2015). These records are 104 available from the AirNow website (https://www.airnow.gov/). The instruments are maintained 105 and calibrated following the regulations of the U.S. Environmental Protection Agency (EPA, 106 107 2009, 2015). PM_{2.5} observations from the U.S. Embassy are widely used in previous studies in India (Wang and Chen, 2019) and China (Lv et al., 2017; Lv et al., 2015; San Martini et al., 108 2015), and have been shown to be of good quality and in good agreement with other 109 observations (Jiang et al., 2015; Mukherjee and Toohey, 2016). 110

We use hourly meteorological observations at the airport in each city (VIDP-Delhi, VOMM-Chennai, VABB-Mumbar and VOHY-Hyderabad). The flat topography surrounding these airports suggests that the observations are broadly representative of the dominant meteorological conditions in these cities. Historical records are archived by the National Oceanic and Atmospheric Administration, and are available from the National Climatic Data Center (https://www.ncdc.noaa.gov/data-access/). The height of the planetary boundary layer (PBL) is obtained from the European Centre for Medium-Range Weather Forecasts (ECMWF) ERA-interim reanalysis at a 3-hour interval and 0.125° × 0.125° spatial resolution
(https://www.ecmwf.int/).

120 **2.2 Method**

We estimate the long-term health impacts from exposure to ambient PM_{2.5} concentrations, 121 as these account for the majority of the health effects through capturing both acute and chronic 122 responses. Following our previous works (Conibear et al., 2018a, b), we use integrated 123 124 exposure-response (IER) functions (Burnett Richard et al., 2014), updated for the Global Burden of Disease GBD2016 (GBD, 2016) to estimate the relative risk (RR) of premature 125 126 mortality due to exposure to PM_{2.5} concentrations. There are IER functions with age-specific modifiers for chronic obstructive pulmonary disease (COPD), lower respiratory infection (LRI), 127 ischaemic heart disease (IHD), cerebrovascular disease (CEV), and lung cancer (LC). We use 128 129 the parameter distributions from the GBD2016 for 1,000 simulations to derive the mean IER with 95% uncertainty intervals. The IER functions have uniform theoretical minimum risk 130 exposure levels for PM_{2.5} between 2.4–5.9 μ g/m³. 131

We use multi-year average annual-mean $PM_{2.5}$ concentrations from measurements made at U.S. diplomatic missions in Delhi (110 µg/m³), Chennai (33 µg/m³), Hyderabad (56 µg/m³), and Mumbai (60 µg/m³). Baseline mortality data are taken from the GBD2016 for India (GBD, 2018). Population size was taken from the lastest Indian Census data for 2011. Population age composition was taken from the GBD2016 population estimates for 2015 for India (GBD, 2017a).

Annual premature mortality (M) for each age and disease were estimated as a function of population (P), baseline mortality rates (I), and the attributable fraction (AF) for a specific relative risk (RR) (Equation 1). The disease burden from LRI, IHD, CEV, COPD, and LC was estimated between 0 and 95 years upwards in 5 year groupings.

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$$M = P \times I \times AF, \qquad AF = \frac{RR - 1}{RR} \tag{1}$$

143

Annual years of life lost (YLL) for each age and disease were estimated as a function of premature mortality and age-specific life expectancy (LE) from the standard reference life table from the GBD2016 (Equation 2) (GBD, 2017b).

147

$$YLL = M \times LE \tag{2}$$

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We estimate the short-term health impacts during Diwali Fest in Delhi from exposure to 149 ambient PM_{2.5} concentrations as all-cause premature mortality. The short-term health impacts 150 151 are accounted for within the long-term health impacts, and are used to indicate the variation in the daily burden from acute responses (Héroux et al., 2015). We use the summary risk estimates 152 (γ) from Atkinson et al. (2014) of 1.04% (0.52–1.56) per 10 μ g/m³ change in daily mean PM_{2.5} 153 concentrations (C_d), with respect to a reference PM_{2.5} concentration (C_r) of $0 \mu g/m^3$. We assume 154 no upper concentration cutoff. India-specific risk functions for ambient PM_{2.5} exposure do not 155 156 currently exist, however, the use of the summary risk estimate of 1.04% is conservative when compared with the summary risk estimate of 1.2% from Levy et al. (2012) and 1.23% from 157 WHO (2013). Baseline mortality data are taken from the GBD2016 for India for all ages for 158 both genders combined (GBD, 2018). We convert these annual rates to daily rates (Id) by 159 dividing by 365.25, consistent with previous work due to the lack of daily data (West et al., 160 2007). We use first-three-day of Diwali Fest (320 μ g/m³) and October-November two-month 161 (183 μ g/m³) averaged daily-mean PM_{2.5} concentrations during 2015-2018 from the U.S. 162 Embassy measurements for Delhi. 163

164
$$RR_d = 1 + [\gamma \times (C_d - C_r) \times 0.1]$$
(3)

$$M_d = P \times I_d \times \frac{RR_d - 1}{RR_d} \tag{4}$$

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We use a linear exposure-response function with no cap on daily relative risk (RR_d),
similar to a previous work (van Donkelaar et al., 2011), estimating daily relative risks following
Equation 3. Daily premature mortality (M_d) is then estimated using Equation 4.

Using a logarithmic exposure-response function as in previous work (Crippa et al., 2016),
our estimates of short-term premature mortality are about 10% larger than with a linear
exposure-response function. To be conservative, we use the linear exposure-response function
in this study.

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174 **3. Results**

175 **3.1 Overview of PM_{2.5} in Four Megacities**

The locations of Delhi, Chennai, Hyderabad and Mumbai are shown in Fig. 1, together 176 with annual mean surface concentrations of PM_{2.5} of anthropogenic origin over India in 2015 177 178 (van Donkelaar et al., 2015; van Donkelaar et al., 2011). Fig. 2 shows a calendar-view of daily 179 average PM_{2.5} concentrations in the four cities during 2015-2018, and monthly statistics are shown in Fig. S1. There is no clear inter-annual trend in PM_{2.5} observed in these cities during 180 181 2015-2018. The Indian NAAQS classifies six different levels of air quality based on daily 24hour averaged PM_{2.5} concentrations (Fig. 2). The two cleanest air quality levels, 'good' and 182 'satisfactory', are defined as healthy, and the others ($PM_{2.5} > 60 \ \mu g/m^3$) are defined as 183 unhealthy (CPCB, 2014). Delhi suffers the worst air quality among these cities, and the air 184 quality levels are categorized as 'poor', 'very poor' or 'severe' for ~50% of the time. These 185 hazy days mostly occur during October-February. The air quality in Chennai and Hyderabad 186 is much better than Delhi, with few 'poor' air-quality days; and 'healthy' days counted up to 187

50% of the time in Hyderabad and most of the time in Chennai. Mumbai has better air quality 188 than Delhi. This may be due to its coastal climate, where surface PM_{2.5} is often diluted by clean 189 190 air from the ocean. However, Mumbai still experiences about four months per year with air quality of 'poor' standard or worse. The Diwali Fest and New Year festivals make the air 191 quality substantially worse in Delhi, as shown by the 'severe' days at the beginning of 192 November and January (Fig. 2a). This suggests that the fireworks during the festivals contribute 193 194 to an increase of PM_{2.5} loading in Delhi significantly. However, there is no clear festival effect observed in the other three cities. It is unclear why no festival effect is observed in these other 195 196 cities, although it may reflect lower firework use and more favourable meteorological conditions for dispersion in coastal cities. 197

All cities suffered severe episodes of poor air quality, with maximum hourly $PM_{2.5}$ 198 concentrations of 1676 μ g/m³, 1334 μ g/m³, 1107 μ g/m³ and 758 μ g/m³ in Delhi, Chennai, 199 Hyderabad and Mumbai, respectively. In Delhi, the maximum hourly PM_{2.5}, observed during 200 201 the Diwali Fest nights in 2016 and 2018, is ~70% higher than the highest level recorded in Beijing (980 μ g/m³), China (San Martini et al., 2015; Wang et al., 2014; Zheng et al., 2015). 202 This strongly suggests that control of fireworks during the Diwali Fest would efficiently 203 mitigate short-term PM_{2.5} exposure in Delhi. This is also implied by a previous study (Singh et 204 al., 2010), where a significant increase in particle loading by a factor of 2-6 compared with the 205 period before and after Diwali Fest was found in Delhi during 2002-2007. Extreme episodes in 206 other cities were observed at night-time (10 p.m.-2 a.m.) from the end of October to the 207 beginning of December. The shallow planetary boundary layer (PBL) at night and intensive 208 209 crop burning in this season are the likely reasons for these extremely high concentrations (Tiwari et al., 2013). Fig. S2 shows that there is a clear decrease in the frequency of high PM_{2.5} 210 concentrations in all cities as the PBL height increases. We also observe an anti-correlation 211 212 between wind speed and PM_{2.5} loading. With the same PBL height, PM_{2.5} loading generally

decreases as wind speed increases, and $PM_{2.5}$ is generally less than 100 μ g/m³ when the wind speed is greater than 4 m/s in all cities (Fig. S2). This is because the higher PBL and larger wind speed dilute the surface $PM_{2.5}$ (Chen et al., 2009; Mohan and Gupta, 2018).

In order to investigate the possible source regions of PM_{2.5} for each city, we analyse the 216 217 relationship between PM_{2.5} concentration and wind direction (Fig. 3). Delhi is influenced by easterly and westerly/northwesterly winds, with high $PM_{2.5}$ concentrations (>150 µg/m³) from 218 both directions. The westerly and northwesterly winds have the highest frequency (~33%) and 219 are associated with the most polluted episodes in Delhi. About 30% of the time $PM_{2.5}$ 220 221 concentration in Delhi are higher than $150 \,\mu g/m^3$, ~50% of which is associated with a westerly or northwestly wind. This indicates that crop biomass burning and desert dust could be major 222 sources of PM_{2.5} in Delhi. Punjab and Haryana are located to the northwest of Delhi, and are 223 major sources of particles and gaseous precursors from crop burning during October-November 224 (Cusworth et al., 2018; Jethva et al., 2018; Rastogi et al., 2014), when the worst air quality is 225 226 observed in Delhi. Furthermore, previous modelling studies show significant increases (> 50%) in aerosol loading when the westerly and northwesterly wind transports dust from the Thar 227 Desert to Delhi during April-June (Kumar et al., 2014a; Kumar et al., 2014b). In Hyderabad, 228 another inland city, the easterly/westerly wind pattern is also dominant. The easterly wind 229 brings a substantial amount of PM_{2.5} to Hyderabad, but the conditions are better than in Delhi, 230 with limited episodes of $PM_{2.5}$ concentration higher than 150 μ g/m³. Chennai and Mumbai are 231 coastal cities with a prevailing onshore wind for 70-80% of the time which brings relatively 232 clean marine air masses. The PM_{2.5} concentrations are generally lower than 75 μ g/m³ when an 233 234 onshore wind is present. The offshore wind brings pollutants from inland regions to the cities, but this occurs much less frequently (20-30%). These results indicate that there is a strong 235 236 interaction between meteorology and PM_{2.5} pollution, and strong local characteristics are found in each city. Detailed investigation of these local characteristics would be helpful in tailoringan effective mitigation policy for each city.

239 3.2 Seasonal and Diurnal Patterns of PM_{2.5}

A distinct seasonal variation in the diurnal patterns is found, and this has different 240 characteristics in each city (Fig. 4). Generally, the climate in India is characterised by four 241 seasons: pre-monsoon/summer (March-May), monsoon (June-August), post-monsoon 242 (September-November) and winter (December-February). Notable inter-seasonal changes in 243 meteorology lead to significant differences in PM_{2.5} loading. Benefitting from the cleansing 244 effect of precipitation in the monsoon season (Ghosh et al., 2015), the hourly PM_{2.5} is generally 245 less than 50 μ g/m³ in the inland cities (Delhi and Hyderabad) and less than 30 μ g/m³ in the 246 coastal cities (Chennai and Mumbai). Apart from cleansing by precipitation, frequent deep 247 convection during summer monsoon in India can lift air pollutants near the surface to free 248 troposphere or even upper troposphere, as reported by previous modelling and observational 249 studies (Fadnavis et al., 2011; Kumar et al., 2015; Lelieveld et al., 2018). This transport process 250 dilutes air pollutants near the surface and could be one of the reasons that surface PM_{2.5} 251 252 concentration is the lowest during the monsoon season. Future works, with aircraft observations and modelling, are needed to quantify the relative importance of wash out and 253 vertical transport in reducing concentrations of surface pollutants. Chennai benefits from 254 255 prevailing onshore winds, with low PM_{2.5} loadings in both the pre-monsoon and monsoon seasons ($< 30 \,\mu g/m^3$). As a result of unfavourable meteorological conditions for dispersion and 256 an increase in emissions from heating (Guttikunda and Calori, 2013; Guttikunda and Gurjar, 257 2012), winter is the most polluted season in all cities. The slow wind speeds and shallow PBL 258 (Fig. S2) can trap PM_{2.5} in the surface layer and increase its concentration (Hu et al., 2019; 259 Zheng et al., 2015). The post-monsoon is the second most polluted season, with PM_{2.5} higher 260

than the annual averages. This inter-seasonal variation is consistent with the observations during 2013-2016 (Sreekanth et al., 2018) despite the rapid increase of anthropogenic emissions in India over the past decade (Li et al., 2017), indicating the importance of meteorology on the seasonal variation.

A clear diurnal pattern is found in all cities during winter, post-monsoon and pre-monsoon 265 seasons (Fig. 4). However, no clear diurnal pattern is found during the monsoon season due to 266 the influence of precipitation. The minimum PM_{2.5} concentration during a day is generally 267 found at 3-4 p.m. local time, possibly resulting from the dilution effect of the fully developed 268 PBL in the afternoon (Fig. S3). PM_{2.5} concentrations peak during the morning rush hour in all 269 cities, the peaks approach 280 μ g/m³ (Delhi), 90 μ g/m³ (Chennai), 115 μ g/m³ (Hyderabad) and 270 140 μ g/m³ (Mumbai) in winter, respectively. It is interesting that the morning rush hour 271 consistently shifts 1-2 hours later from around 8 a.m. (pre-monsoon) to 10 a.m. (winter) in 272 Delhi and Mumbai, and to 9 a.m. (winter) in Chennai and Hyderabad. A remarkably strong 273 274 PM_{2.5} peak is found during morning rush hour in Chennai and Hyderabad, with hourly PM_{2.5} increased by ~50% and ~30% in two hours, respectively. However, only a slight increase in 275 $PM_{2.5}$ concentration is observed in Delhi and Mumbai, with an increase of ~10% in winter. 276 These characteristics of PM_{2.5} variation during morning rush hour may be related to the size of 277 the population of each city. According to the latest census of India, there are around 4.6 and 278 7.0 million citizens in Chennai and Hyderabad, respectively; but more than 10 million citizens 279 in Delhi and Mumbai (India Office of the Registrar General and Census Commissioner, 2011). 280 Our results suggest that there is much greater human activity and emissions during the night in 281 282 these two larger megacities leading to higher night-time PM_{2.5} concentration but less variation during the morning. The morning rush hour lasts longer until 10 a.m. in winter in these 283 megacities, in contrast to 9 a.m. in Chennai and Hyderabad. This is possibly because the busy 284 285 traffic, also alarger city size would prevent a smooth commute and lead to longer commuting

times (Alam and Ahmed, 2013; Srinivas, 2018). In addition, traffic is a major local source of PM_{2.5} (~45%) in Delhi (Sahu et al., 2011). These results suggest that developing a more convenient and efficient public transport system and encouraging the usage could be a key to mitigate PM_{2.5} pollution, especially in the biggest cities. More work on source apportionment is needed for each city to inform better targeted mitigation strategies.

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292 **3.3 Weekend Effect in Four Cities**

We report the influence of a weekend effect on the diurnal patterns of PM_{2.5} in these cities, 293 as shown in Fig. 5. No noticeable weekend effect is found in Delhi and Hyderabad. This is 294 295 similar to Beijing and Chengdu in China (San Martini et al., 2015), with the diurnal patterns of PM_{2.5} similar during weekdays and at the weekend. However, a notable weekend effect can be 296 found in Chennai and Mumbai. The difference in the diurnal pattern of PM2.5 between weekday 297 298 and weekend is greatest before 10 a.m. A stronger morning rush hour is found in Chennai and Mumbai on weekdays, with ~10% higher $PM_{2.5}$ than at the weekend. This indicates that the 299 decrease of traffic emissions in Mumbai and Chennai during weekend is probably the reason 300 of weekend effect, and control of traffic emissions could be an efficient measure for improving 301 air quality. In Chennai, PM_{2.5} concentrations are about $5 \,\mu g/m^3$ higher during night (12-5 a.m.) 302 at the weekend than on weekdays; in contrast, PM_{2.5} concentration is about 5 μ g/m³ lower at 303 the weekend in Mumbai. These different weekend effects possibly indicate different life styles 304 and PM_{2.5} sources in each city. Further modelling and emission flux studies are needed to better 305 understand the sources of PM_{2.5} in each city. 306

307 3.4 Exposure to PM_{2.5} and Health Impacts

We use these long-term in-situ observations to estimate the exposure of the population to 308 PM_{2.5} in Delhi, Chennai, Hyderabad and Mumbai. The annual averaged PM_{2.5} loading in these 309 cities is $110 \,\mu\text{g/m}^3$, $33 \,\mu\text{g/m}^3$, $56 \,\mu\text{g/m}^3$ and $60 \,\mu\text{g/m}^3$, respectively. The population-weighted 310 annual mean PM_{2.5} loading is 72 μ g/m³ across the four cities, which is about 3.5 times higher 311 than the global population-weighted value (20 μ g/m³, van Donkelaar et al., 2010) and ~22% 312 higher than average Chinese city-level value (Zhang and Cao, 2015). The annual averaged 313 314 PM_{2.5} loading in Delhi is much higher than all Chinese major cities in the last five years (Wang et al., 2019). Fig. 6 shows the time integrated exposure, which indicates the proportion of time 315 316 that a citizen is exposed to PM_{2.5} concentrations over a given level over the four years measurement period. Citizens are exposed to unhealthy air quality ($PM_{2.5} > 60 \mu g/m^3$) for about 317 70% (Delhi), 15% (Chennai), 50% (Hyderabad) and 45% (Mumbai) of the time. The air quality 318 is especially unhealthy in Delhi where citizens are exposed to 'severe' PM_{2.5} pollution (>250 319 $\mu g/m^3$) for about 10% of the time. It is noteworthy that citizens of all four cities are exposed to 320 air quality exceeding the 10 μ g/m³ WHO guideline nearly 100% of the time. PM_{2.5} in all the 321 cities except Chennai severely exceeds the revised Indian NAAQS standards of an annual 322 average of 40 μ g/m³. 323

324 These continuous in-situ measurements give us an opportunity to make a robust assessment of long-term health impacts on a city scale in India (Fig. 7). We estimate that long-325 term ambient PM_{2.5} exposure causes 10,200 (95% confidence interval: 6,800–14,300), 2,800 326 (1,500–4,100), 5,200 (3,100–7,400), and 9,500 (5,800–13,600) premature mortality each year 327 in Delhi, Chennai, Hyderabad, and Mumbai, respectively. Our premature mortality estimate 328 329 for Delhi is reasonably agreed (~10% negative bias) with a previous estimate from the GBD2016 (GBD, 2016). We estimate that about 248,000 (168,000–340,700), 66,000 (37,400– 330 331 96,800), 125,000 (78,300–176,100), and 230,000 (145,200–321,700) years of life are lost each 332 year in Delhi, Chennai, Hyderabad, and Mumbai, respectively. The annual mortality rate per

100,000 population, which is independent of population size, is 93 (62–130), 60 (33–89), 74
(45–106), 76 (46–108) in Delhi, Chennai, Hyderabad, and Mumbai, respectively.
Cardiovascular disease dominates the disease burden, with ischaemic heart disease (IHD)
contributing ~40% and cerebrovascular disease (CEV) contributing ~30% in each city.

337 We estimate the health risks of short-term exposure during the New Year and Diwali Fest in Delhi and provide quantitative evidence to support control of fireworks. The fireworks 338 during New Year enhance the PM_{2.5} pollution in Delhi to some extent. The averaged PM_{2.5} 339 concentration during 1-3 January (276 μ g/m³) was about 20% higher than the monthly average 340 341 of January (227 μ g/m³). This makes the daily premature mortality in Delhi slightly increase from January average of 43 (24-59) person per day to 50 (28-67) person per day during the 342 New Year. The fireworks during Diwali Fest contribute substantially to the extremely high 343 hourly concentration of PM_{2.5} in Delhi (up to 1676 μ g/m³), leading to hazardous short-term 344 exposure. Crop burning in Punjab and Haryana makes a large contribution to PM_{2.5} loading in 345 346 Delhi during October-November (Cusworth et al., 2018; Jethva et al., 2018), while fireworks 347 in Diwali Fest can greatly worsen PM_{2.5} pollution over the period of a few days (Singh et al., 2010). We find that the PM_{2.5} concentration during Diwali Fest (including the festival start day 348 and the following two days) is 75% higher (~320 μ g/m³) than the two-month average (~183 349 $\mu g/m^3$ in October-November) in Delhi over this four-year period. We estimate the short-term 350 351 health impacts from ambient PM_{2.5} concentrations during Diwali Fest at 56 (32-75) premature mortality per day in Delhi. This is an additional 20 (13-25) daily premature mortality, an 352 increase of 56% compared with the October-November average of 36 (19–50) daily premature 353 354 mortality. This highlights the importance of reducing firework emissions during Diwali Fest to improve public health. 355

356 **3.5 Spatial Representativeness and Uncertainty**

In order to analyse the spatial representativeness of observations in U.S. diplomatic 357 missions in each city and the corresponding uncertainty, we extract surface PM_{2.5} 358 359 concentrations from a global high spatial resolution satellite-retrieved dataset (van Donkelaar et al., 2015, http://fizz.phys.dal.ca/~atmos/martin/?page_id=140). The extracted dataset 360 includes the annual averaged (2015-2016) PM_{2.5} concentration at locations of U.S. diplomatic 361 missions and their surrounding regions within a distance of 20-100 km. This satellite-retrieved 362 363 dataset is of high horizontal-resolution of 0.01 deg. \times 0.01 deg. (lat-lon, about 1km \times 1km). The retrieved data has been validated and widely adopted for global health effect analysis in 364 365 previous studies (van Donkelaar et al., 2010; van Donkelaar et al., 2015). The standard deviation and ratios of PM2.5 concentrations between U.S. diplomatic missions' locations and 366 averages of surrounding regions are given in Fig. 8. 367

As shown in Fig. 8, the uncertainty in Chennai and Hyderabad is negligible, with 368 difference between U.S. diplomatic missions and surrounding regions less than 5%, and the 369 370 standard deviations increase slowly with the increase of distance from U.S. diplomatic missions but always less than 5%. This indicates a relatively homogeneous spatial distribution of PM_{2.5} 371 concentrations in Chennai and Hyderabad. In Mumbai, the standard deviation varies between 372 5-7%, with the minimum at a distance of \sim 60 km. This may be due to the influence of nearby 373 large cities, such as Pune which is about 100 km away from Mumbai. The difference between 374 U.S. diplomatic mission in Mumbai and the surrounding regional average is less than 6% in 375 general, with the maximum underestimation of ~6% when the distance is about 40 km. This 376 indicates that the observations of U.S. diplomatic mission in Mumbai well represent the nearby 377 378 region, at least the region within 100 km. The representativeness of observations in the U.S. Embassy of Delhi decreases as the distance increases. The U.S. Embassy's observations may 379 overestimate the PM_{2.5} concentrations in Delhi compared with the regional average, but this 380 overestimation is less than 5% and with standard deviations less than 6% when the distance (or 381

region radius) is less than 60 km. However, the overestimation increases to ~10% with a standard deviation of ~10% when the distance is 100 km. This indicates a good representativeness of U.S. Embassy's observation for Delhi and its surrounding region within 60 km, but may overestimate the PM_{2.5} concentration and the corresponding human exposure by ~10% if using U.S. Embassy's observations to estimate the PM_{2.5} human exposure in a larger region of Delhi, such as with a radius of 100 km. This could be due to the higher urbanization level of Delhi, leading to a higher pollution level in/near the city center.

389

390 4. Conclusions and Discussion

This study has estimated the health risks of long-term exposure to $PM_{2.5}$ based on in-situ observations in four Indian megacities (Delhi, Hyderabad, Chennai and Mumbai) during 2015-2018, and quantified the health risks of short-term exposure during Diwali Fest in Delhi for the first time. We also summarized the local characteristics of seasonal and diurnal variations of PM_{2.5}, and report the influence of a weekend effect on diurnal patterns. The results from this study are valuable for modelling studies and helpful in tailoring city-specific mitigation strategies.

Generally, substantial inter-seasonal variations in PM_{2.5} are observed in the four cities, 398 with the highest concentration during winter and the lowest during the monsoon season, when 399 intensive wet scavenging lowers pollutant concentrations (Naja et al., 2014; Ojha et al., 2012). 400 Winter is the most polluted season as a consequence of the shallow PBL and increased 401 emissions from heating (Guttikunda and Calori, 2013; Guttikunda and Gurjar, 2012). Solid fuel 402 burning is a common form of household heating in winter over India (Dumka et al., 2019; 403 404 Jagadish and Dwivedi, 2018). To increase the efficiency of energy use and reduce PM_{2.5} emissions in cities, we would suggest reduction in use of solid fuels (e.g., replace wood and 405

coal with liquid petroleum gas or compressed natural gas) and implementation of 406 central/electric heating systems with heating centres located in non-upwind regions (e.g., north 407 408 or south of Delhi). The megacities of Delhi and Mumbai show a weak morning rush hour effect, but there is a strong one in Hyderabad and Chennai. For the first time, we report an interesting 409 and consistent shift of about two hours in the timing of the morning rush hour from pre-410 monsoon/summer (8 a.m.) to winter (9-10 a.m.), and analyse the influence of a weekend effect 411 412 on the diurnal patterns of PM2.5 in Indian megacities. The coastal cities of Chennai and Mumbai show a clear difference in morning PM_{2.5} concentrations between weekdays and the weekend, 413 414 but no noticeable difference was observed in the inland cities of Delhi and Hyderabad. These results indicate traffic emissions could be important sources of PM_{2.5} and highlight the distinct 415 local characteristics of human activity in each city, which is critical information for modelling 416 studies. The four cities show significant differences in wind patterns and transport of PM_{2.5}, 417 suggesting that different control strategies are needed for each city that take into account its 418 local emission characteristics and meteorological conditions. 419

420 In this study, we report the high health risks of exposure to PM_{2.5}pollution in Indian cities and highlight hazardous short-term exposure during Diwali Fest in Delhi. Across the four cities, 421 422 long-term exposure to PM_{2.5} causes about 28,000 (95% confidence interval: 17,200–39,400) premature mortality and 670,000 (428,900–935,200) years of life lost each year. Fireworks 423 during the Diwali Fest lead to severe air pollution in Delhi, and this is responsible for 56 (32-424 75) premature mortality per day, a 56% increase over the monthly average. More effective 425 control policies are urgently required to mitigate the health burden and achieve sustainable 426 427 development. Previous studies have shown that the dominant emission sources contributing to the disease burden from ambient PM_{2.5} exposure are land transport in Delhi, residential solid 428 fuel burning in Chennai and Hyderabad, and industrial coal burning in Mumbai (Conibear et 429 430 al., 2018a). The disease burden is likely to increase substantially in future due to population 431 ageing and growth, which enhance the susceptibility to disease, unless stringent emission432 control policies are implemented (Conibear et al., 2018b).

We have estimated the $PM_{2.5}$ exposure in the four cities with continuous observations, but it is noteworthy that some other Indian cities experience more severe air pollution (WHO, 2016). Continuous, widespread pollutant measurements across India would provide more complete information on regional pollutant characteristics and overall pollutant levels. More detailed measurements of the physicochemical properties of $PM_{2.5}$ in major cities, e.g., their composition and size distribution, would permit better characterisation of urban sources, and provide the information needed to design appropriate mitigation strategies.

440

441 Author contributions

Y. C. and O. W. conceived the study. Y. C. performed the analysis and interpreted the results with
input from all co-authors. L. C. helped with the health effect assessment. The manuscript was written with
input from all co-authors.

445 Additional Information

446 The authors declare no competing financial interest.

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Hourly measurements of PM2.5 made at U.S. diplomatic missions in India are available through the 448 449 AirNow platform maintained by the U.S. Department of State and the U.S. Environmental Protection Agency 450 at https://www.airnow.gov/. Meteorological variables are available through the Integrated Surface 451 Database—Surface Data Hourly Global data product maintained by the U.S. National Oceanic and 452 Atmospheric Administration-National Climatic Data Center at https://www.ncdc.noaa.gov/. Y. W. would 453 like to thank the China Scholarship Council for support through a PhD scholarship. Y. C. and O. W. would like to thank the NERC for funding (NE/P01531X/1 and NE/N006976/1). R. L. would like to thank the 454 National Natural Science Foundation of China (grant no. 41305114). L. C. would like to thank the N8 455

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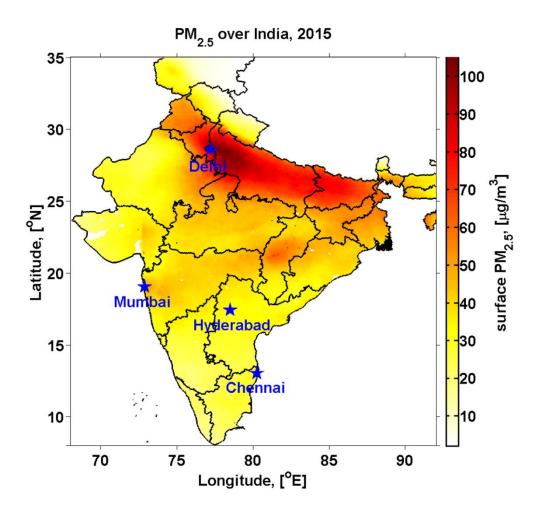


Figure 1. Map of Delhi, Chennai, Hyderabad and Mumbai. Surface annual (2015) average of PM_{2.5} is retrieved from satellite observations with sea-salt and dust excluded and at a relative humidity of 35% (van Donkelaar et al., 2015).

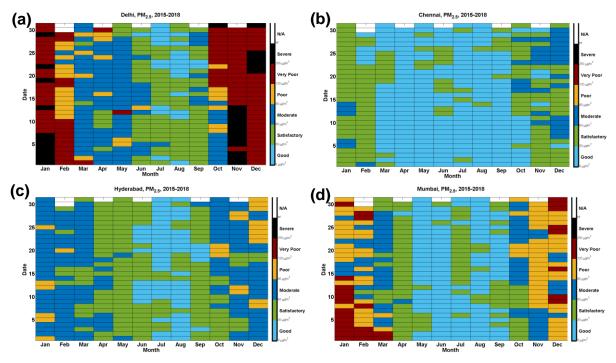


Figure 2. Calendar-view of daily PM_{2.5} air quality levels averaged over 2015-2018. (a) Delhi,
(b) Chennai, (c) Hyderabad, and (d) Mumbai. The air quality levels are categorized following the Indian national air quality index definitions (https://app.cpcbccr.com/AQI_India).

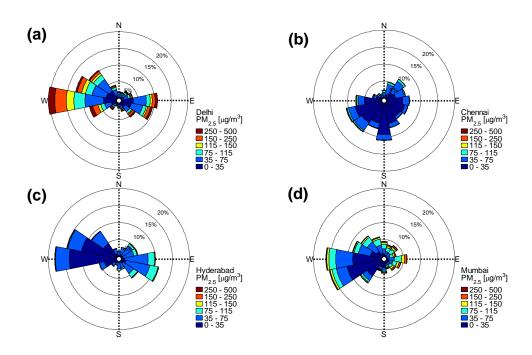


Figure 3. Frequency distributions of PM_{2.5} concentration as a function of wind direction. (a) Delhi, (b) Chennai, (c) Hyderabad, and (d) Mumbai.

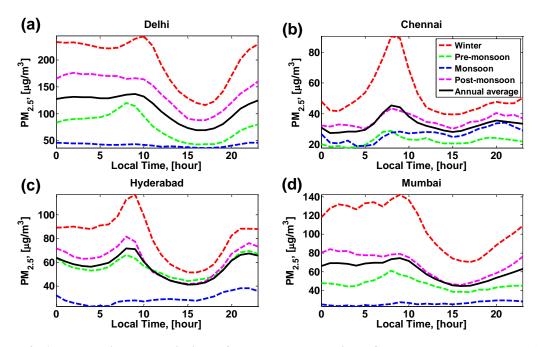


Figure 4. Average diurnal variation of PM_{2.5} concentrations for each season. (a) Delhi, (b) Chennai, (c) Hyderabad, and (d) Mumbai. The statistical values for each city in each season, including average, median, 75% percentile, 25% percentile, 95% percentile and 5% percentile, are given in Fig. S4-S8.

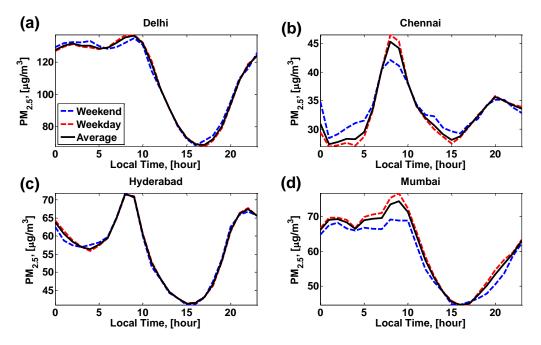


Figure 5. Average diurnal variation of PM_{2.5} concentrations on weekdays and at the weekend.
(a) Delhi, (b) Chennai, (c) Hyderabad, and (d) Mumbai.

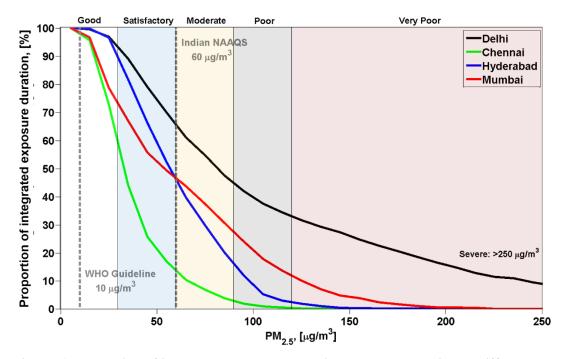


Figure 6. Proportion of integrated exposure duration to PM_{2.5} pollution at different levels in four cities.

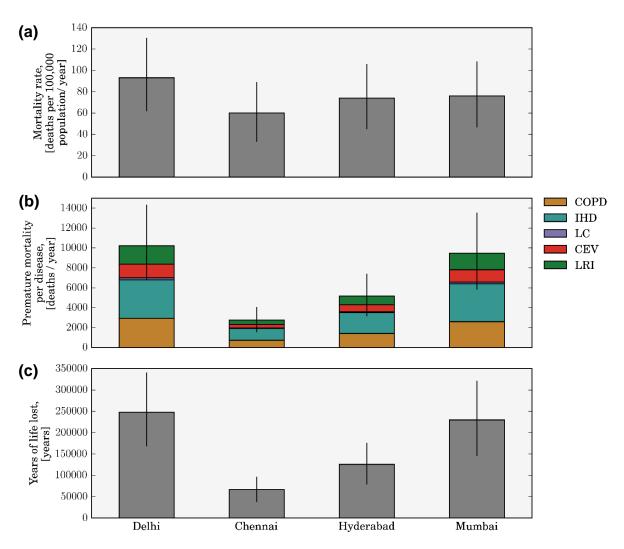


Figure 7. Annual city-specific disease burden from long-term ambient PM_{2.5} **exposure.** (a) Mortality rate per 100,000 population. (b) Premature mortality per disease of chronic obstructive pulmonary disease (COPD), lower respiratory infection (LRI), ischaemic heart disease (IHD), cerebrovascular disease (CEV), and lung cancer (LC). (c) Years of life lost.

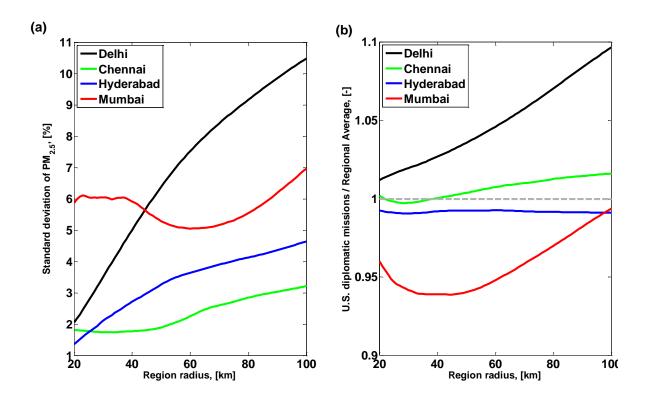


Fig. 8. Spatial representativeness of U.S. diplomatic mission observations in each city. (a) Standard deviation of PM2.5 mass concentrations in surrounding region as a function of region radius. (b) The ratio between U.S. diplomatic mission observation and regional average as a function of region radius.

Supporting Information

for

Local Characteristics of and Exposure to Fine Particulate Matter (PM_{2.5}) in

Four Indian Megacities

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Contents of this file

Tables:

Table S1 – Overview of PM_{2.5} observations in four cities.

Figures:

- Figure S1 Monthly statistical overview of hourly PM_{2.5} concentrations.
- Figure S2 Hourly PM_{2.5} concentration as a function of PBL height and wind speed.

Figure S3 – The averaged diurnal pattern of PBL for each season.

Figure S4 – The annual averaged diurnal pattern of PM2.5 in each city.

Figure S5 – The winter averaged diurnal pattern of PM2.5 in each city.

Figure S6 – The pre-monsoon averaged diurnal pattern of PM2.5 in each city.

Figure S7 – The post-monsoon averaged diurnal pattern of PM2.5 in each city.

Figure S8 – The monsoon averaged diurnal pattern of PM2.5 in each city.

City	Lat. / Long.	Population [*]	Climate Description	Annual	Unhealth/Valid [#]
	[°N / °E]	[million]		PM _{2.5}	[days]
				[µg/m ³]	
Delhi	28.60 / 77.19	11.0	Subtropical/continental	110	837/1373
Chennai	13.05 / 80.22	4.6	Tropical/coastal	33	133/1274
Hyderabad	17.44 / 78.47	7.0	Tropical/continental	56	528/1335
Mumbai	19.06 / 72.87	12.5	Tropical/coastal	60	565/1293

Table S1. Overview of PM_{2.5} observations in four cities.

*source from census of India 2011 (India Office of the Registrar General and Census Commissioner, 2011)

[#]Valid days show how many days with valid data during March 2015 to December 2018. The unhealth-day is counted the days with daily-averaged PM_{2.5} > $60 \ \mu g/m^3$, following the definition of Indian NAAQS (CPCB, 2009).

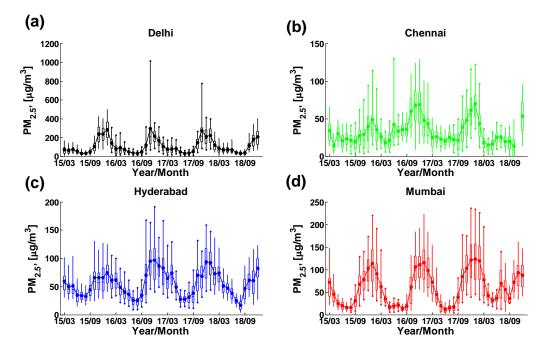


Figure S1. Monthly statistical overview of PM_{2.5} **hourly concentrations**. (**a**) Delhi, (**b**) Chennai, (**c**) Hyderabad, and (**d**) Mumbai. The dots indicate the average value; short-scores in the middle indicate the median value; the boxes indicate the 25% and 75% percentage values; and the error bars indicate the 5% and 95% percentage values.

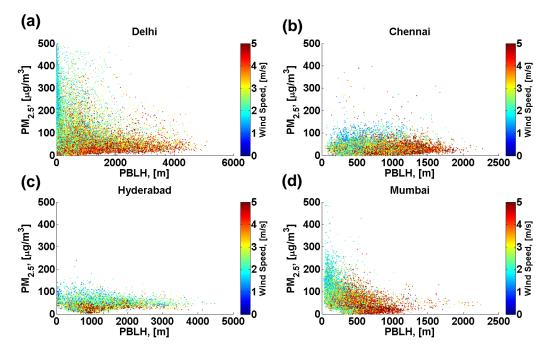


Figure S2. Hourly PM_{2.5} concentration as a function of PBL height and wind speed. (a) Delhi,
(b) Chennai, (c) Hyderabad, and (d) Mumbai.

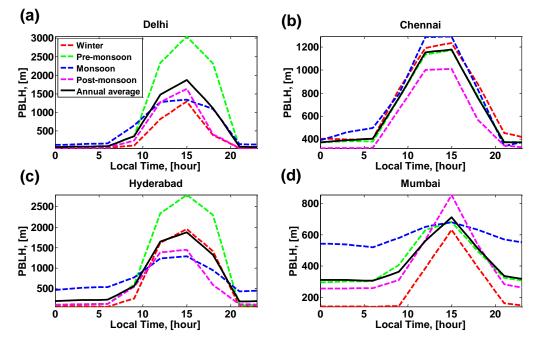


Figure S3. The averaged diurnal pattern of the height of PBL (PBLH) for each season. (a) Delhi, (b) Chennai, (c) Hyderabad, and (d) Mumbai.

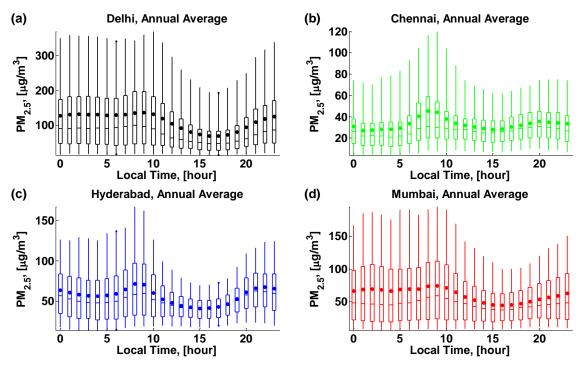


Figure S4. Annual averaged diurnal pattern of PM2.5 hourly concentration. (a) Delhi, (b) Chennai, (c) Hyderabad, and (d) Mumbai. The dots indicate the average value; short-scores in the middle indicate the median value; the boxes indicate the 25% and 75% percentage values; and the error bars indicate the 5% and 95% percentage values.

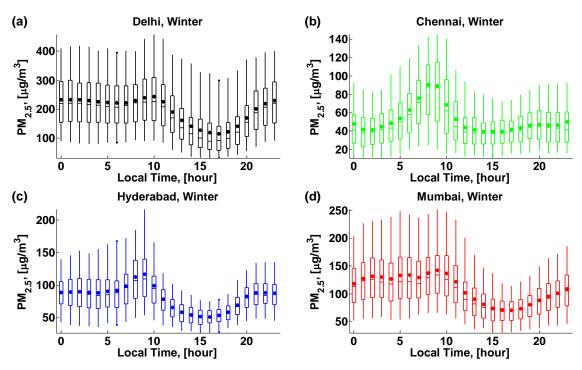


Figure S5. Same as Fig. S4, but during the winter season.

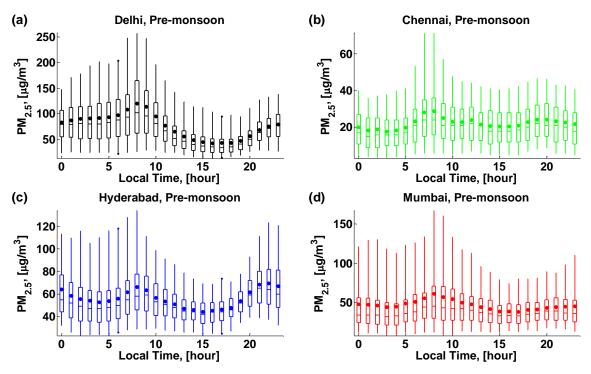


Figure S6. Same as Fig. S4, but during the pre-monsoon season.

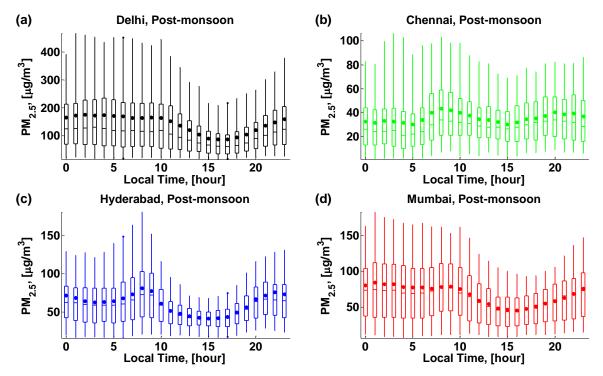


Figure S7. Same as Fig. S4, but during the post-monsoon season.

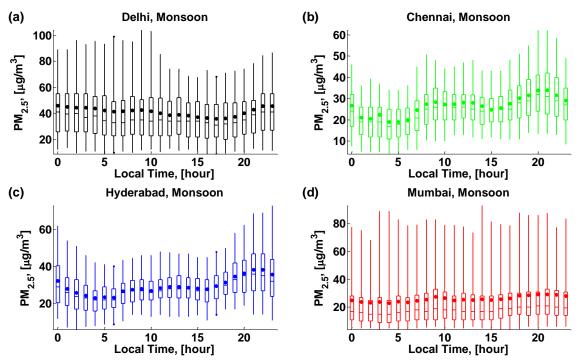


Figure S8. Same as Fig. S4, but during the monsoon season.

Supplementary References:

CPCB, 2009. National Ambient Air Quality Standards. Central Pollution Control Board, New Delhi, India.

India Office of the Registrar General and Census Commissioner, 2011. Census of India, Minist. of Home Affairs, Gov. of India, New Delhi.