Wildfire Smoke Trends and the Air Quality Index

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Glossary

AQI – Air Quality Index, EPA Air Quality health scale.
PM2.5 – Particulate matter 2.5 microns in diameter or smaller
PM10 - Particulate matter 10 microns in diameter or smaller
≥USG – Unhealthy for Sensitive Groups, Unhealthy, Very Unhealthy, and Hazardous AQI
Executive Summary

Large wildfires have been increasing across the western United States over the last decade and are expected to become more frequent, according to the National Interagency Fire Center. This report summarizes Oregon Department of Environmental Quality’s air quality monitoring for particulate matter during wildfire season through 2021, how that information is translated into an Air Quality Index with categories of potential health effects, and what trends in the AQI are showing over the last several years.

Across Oregon, smoke from wildfires is causing increases in AQI values that are unhealthy for sensitive groups or worse, or ≥USG, for short. Some examples from Eastern, Southern, and Western Oregon illustrate this.

- Eastern Oregon (Bend): From 1989 to 2016, Bend only had 10 ≥USG days from wildfire smoke, or 0.4 ≥USG days/year. From 2017 to 2021, Bend jumped to 53 days ≥USG or 10.6 ≥USG days/yr. That is a 26.5 fold increase in days impacted per year. Bend also had hazardous AQI levels for the first time in 2020, with six days. Bend also had one hazardous day in 2021.
- Southern Oregon (Klamath Falls): From 1989 to 2014, Klamath Falls had 37 ≥USG days from wildfire smoke, or 1.4 ≥USG days/year. From 2015 to 2021, they have had 117 ≥USG days, or 16.7 ≥USG days/yr. That is a 11.9 fold increase in days impacted per year. Klamath Falls had its first hazardous AQI day in 2020.
- Western Oregon (Portland). Before 2015, Portland had not had a single day with air quality that was ≥USG from wildfire smoke since air quality monitoring began in 1985. From 2015 to 2021, Portland had 23 ≥USG days or 3.3 ≥USG days/year. In 2020 Portland had its first days over the unhealthy AQI level with three very unhealthy and five hazardous days.

If these trends continue, Oregon would see an increase in unhealthy air quality conditions during wildfire season, and more summers with widespread air quality impacts. Additionally, summers with little or no wildfire smoke, like 2016 and 2019, will be much less commonplace.

1. Introduction

Oregon and surrounding states have temperate rainforests west of the Cascade Mountains and more arid ponderosa pine forests east of the Cascades. Fire is a natural part of the ecology of these forests and occasional burning is healthy for forests. However, fires in these forests have become more massive and burn more acres, according to the National Interagency Fire Center. Figure 1 shows increasing wildfire trends over the last decade for Oregon, Washington, and Northern California. The fire season starts earlier and ends later with larger fires than in the past. The 2021 fire data was published by the National Interagency Fire Center.
2. **Scope of This Report**

This report is limited to the presentation of AQI PM2.5 trends and associated categories of potential health impacts. The report can be used as a reference for more in depth discussion of the causes, prevalence, and impacts of wildfire smoke.

3. **Wildfire Smoke Impacts**

Oregon’s wildfire season historically started in late July and continued into early September. More recently, there have been fires starting in mid-July and lasting until early October. Fires impacting Oregon have been mainly in the Southern, Central and Northeastern Oregon and Northern California mountains. Some recent impacts have come from British Columbia and Central Washington. In 2020 large fires also occurred in the Cascades and on the coast.

Wildfire smoke emits a wide variety of pollutants measured as particulate matter (PM2.5 and PM10), black carbon, nitrogen dioxide, carbon monoxide, volatile organic compounds, polycyclic aromatic hydrocarbons and metals. According to the Oregon Health Authority’s publication, *Wildfire Smoke and Your Health*, of these pollutants, PM2.5 may represent the greatest health concern since it can be inhaled deeply into the lungs and a fraction may even reach the bloodstream. Volatile organic compounds can cause early symptoms such as watery eyes, respiratory tract irritation and headaches. Higher levels of ozone (smog) can also be formed from an increase in the precursor pollutants: nitrogen dioxide and volatile organic compounds.
4. **Air Quality Index**

PM2.5 is a criteria pollutant that is easily measured and has well established National Ambient Air Quality Standards (NAAQS). The U.S. EPA created the color-coded Air Quality Index, or AQI, which is used to convert pollutant concentrations into understandable health risk language. The AQI uses PM2.5, ozone, PM10, nitrogen dioxide, carbon monoxide and sulfur dioxide data to calculate health indices. In Oregon, PM2.5 and ozone measurements typically have the highest AQI and are therefore considered drivers of air quality related health risks. In the summer, the ozone AQI in urban areas is usually higher than the PM2.5 unless there is wildfire smoke.

5. **Calculating AQI Trends**

The AQI is useful for calculating trends of wildfire smoke impact on public health. These AQI used in the trends are calculated using PM2.5 measurements because PM2.5 has the highest AQI levels of any of the continuously measured pollutants during wildfire smoke intrusions.

DEQ measures PM2.5 using Federal Reference Method (FRM) filter samplers in several locations. These work by passing air through a filter for 24 hours starting at midnight and sampling every third day. The filter samplers are co-located with nephelometers that measure continuous, real-time light scattering due to particulate matter. DEQ uses linear regression to compare the light scattering from the nephelometer and the PM2.5 from the filter samplers to get a correlation between the two methods. The correlation equation is used to convert the nephelometer’s light scattering into a real-time PM2.5 estimate. The 24-hour PM2.5 average is used to calculate the daily AQI presented in this report.

DEQ and Lane Regional Air Protection Agency have been updating the PM2.5 network with Federal Equivalence Method (FEM) monitors, which collect data hourly and operate continuously. The nephelometers are currently being correlated to the FEMs to update their calibration.

**PM2.5 estimate calculations**

To calculate the AQI, the PM2.5 FRM or FEM data is used when available. When there is no FRM/FEM data, the nephelometer derived PM2.5 estimates are used. Most days and locations do not have FRM/FEM data so the PM2.5 estimates consist of over half of the values. For this trend report, when no data was available for a monitor, DEQ used a nearby citizen Purpleair monitor and correlated that with the nearest DEQ nephelometer when both were running. The correlation was used to estimate PM2.5 during times the DEQ monitor was down.

For this trend report, DEQ used the 2013 to 2015 PM2.5 Federal Reference Method/nephelometer correlation equations to recalculate the nephelometer light scattering values. The PM2.5 estimates were updated using a more recent correlation equation to eliminate variations from changing correlations over the years. _Note that correlation equations change very little, but a small change can be significant if the PM2.5 estimate is near a break point between AQI categories._

**AQI calculations**

The AQI was also updated using the most recent AQI breakpoints provided by EPA. The AQI breakpoints changed when EPA updated the PM2.5 standards in 2012. In order for past and present data to be comparable, all the data has to be recalculated using the same AQI breakpoints. The most recent breakpoints are based on the most current health information. The current EPA breakpoints are in Table 6 of the EPA’s _Technical Assistance Document for the Reporting of Daily Air Quality – the Air Quality Index (AQI), May 2016_. The AQI calculation is Equation 1 in the document. The AQI categories and breakpoints are shown in Table 1 below.
Table 1. The PM2.5 Air Quality Index, breakpoints, and potential health effects.

<table>
<thead>
<tr>
<th>AQI Category and Color</th>
<th>AQI value</th>
<th>PM2.5 (µg/m³) 24-hr Aver.</th>
<th>Air Quality and Health</th>
</tr>
</thead>
<tbody>
<tr>
<td>Good</td>
<td>0 to 50</td>
<td>0.0 to 12.0</td>
<td>Air quality is satisfactory. Air pollution poses little or no health risk.</td>
</tr>
<tr>
<td>Moderate</td>
<td>51 to 100</td>
<td>12.1 to 35.4</td>
<td>Air quality is acceptable; however, there may be a moderate health concern for a very small number of people. Respiratory symptoms are possible in people unusually sensitive to air pollution. Heart or lung disease (such as asthma) symptoms may be aggravated in people with cardiopulmonary disease and older adults. These groups should consider reducing prolonged or heavy outdoor exertion.</td>
</tr>
<tr>
<td>Unhealthy for Sensitive Groups</td>
<td>101 to 150</td>
<td>35.5 to 55.4</td>
<td>Members of sensitive groups may experience health effects. People with heart or lung disease may experience increased symptoms and premature mortality; older adults, pregnant women and children, are also among the groups most at risk of respiratory symptoms. These groups should reduce prolonged or heavy outdoor exertion. The general public is not likely to be affected.</td>
</tr>
<tr>
<td>Unhealthy</td>
<td>151 to 200</td>
<td>55.5 to 150.4</td>
<td>Everyone may begin to experience health effects; members of sensitive groups may experience more serious health effects. These groups should avoid prolonged or heavy exertion: People with heart or lung disease, children, pregnant women and older adults. Everyone else should reduce prolonged or heavy exertion.</td>
</tr>
<tr>
<td>Very Unhealthy</td>
<td>201 to 300</td>
<td>150.5 to 250.4</td>
<td>Health alert: everyone may experience more serious health effects. These groups should avoid all physical activity outdoors: People with heart or lung disease, children, pregnant women and older adults. Everyone else should avoid prolonged or heavy exertion.</td>
</tr>
<tr>
<td>Hazardous</td>
<td>&gt;300</td>
<td>&gt;250.5</td>
<td>Health warnings of emergency conditions. The entire population is more likely to be affected. See EPA AIRNow “Extremely High Levels of PM2.5: Steps to Reduce Your Exposure” when PM2.5 levels are “Hazardous” or above on the AQI.</td>
</tr>
</tbody>
</table>

6. Trends

DEQ compiled the wildfire AQI trends for “Unhealthy for Sensitive Groups,” “Unhealthy,” “Very Unhealthy” or “Hazardous” categories of the AQI. Collectively these categories are known as unhealthy for sensitive groups or worse, or ≥USG for short. In Oregon, wildfire smoke occurs during the summer, so for this report values from June 1 to October 20 were selected. July 4 was removed from the trends because of outliers due to fireworks. DEQ evaluated summertime AQI trends up to 2021 for 24 communities in Oregon. A map of wildfire related AQI trends for various cities around the state is shown in Figure 2. The charts on the map show the ≥USG for each city.

To simplify the discussion in this report, only four of the cities from across the state are provided in the main body. They are Bend, Klamath Falls, Medford and Portland. The trends for the number of days ≥USG for these cities are provided in Figures 3 through 6. The graphs for the remaining cities are shown in the appendix.
Figure 2. Map of wildfire AQI trends across Oregon.
The charts’ vertical axis are the number of days per year that have an AQI of $\geq$USG (Unhealthy for Sensitive Groups or worse). ND = No data collected for these years. The charts’ horizontal axis is the year.
7. Discussion

Wildfire smoke impacts are increasing across the state. There are more ≥USG days per year and more years with at least one ≥USG event. The most significant impacts from fires are in Southern Oregon. Eastern Oregon is also experiencing more ≥USG than in the past. Portland did not experience smoke impacts at all from 1985 until 2015, and then four out of the next six years had smoke impacts.

The 2021 wildfire season was longer in duration than 2020 and was more similar to 2017 and 2018 fire seasons. Most of the impacts were in Eastern and Southern Oregon. The first impacts were from the BootLeg Fire in SE Oregon and later smoke impacts were mainly from the southern Oregon Cascades and from Northern California. More information about the 2021 fire season is available in the National Interagency Coordination Center Wildland Fire Summary and Statistics Annual Report 2021. In particular, the Rogue Valley and Klamath Falls had the most smoke impacted days.

Based on the AQI, associated potential health impact events are also increasing. There are more unhealthy, very unhealthy and hazardous days than in the past.

- Between 1987 and 2014, Bend had three unhealthy days caused by wildfire smoke. Between 2015 to 2021, Bend has had 20 unhealthy days, six very unhealthy days and seven hazardous days.
- Klamath Falls had 20 unhealthy days before 2015 and had 61 unhealthy days between 2015 and 2021 from wildfire smoke. Klamath Falls had two very unhealthy days before 2015, five between 2015 and 2021, and its first hazardous day in 2020.
- Medford had 18 unhealthy days between 1985 and 2014 and had 64 between 2015 and 2021 from wildfire smoke. Medford had nine very unhealthy days between 1985 and 2014, mostly in 1987. From 2015 to 2021 Medford had 9. Medford had one hazardous day in 1987 and did not have another one until 2017. It had three in 2020.
- Portland had no unhealthy days or worse between 1985 and 2014 from wildfire smoke. From 2015 to 2021 it has had five unhealthy, three very unhealthy, and five hazardous days from wildfire smoke. The very unhealthy and hazardous days occurred in 2020.
Figure 3. Bend ≥ USG AQI wildfire smoke trends.

Figure 4. Klamath Falls ≥ USG AQI wildfire smoke trends.

Notes: No data was collected during the summer from 1991 through 1995, 1997, and 1998.
Figure 5. Medford ≥ USG AQI wildfire smoke trends.

Figure 6. Portland ≥ USG AQI wildfire smoke trends.

Note: Not included: There were four USG days in Portland in mid to late September, two in 1985, one in 1987, and one in 1990. These were likely from field burning and are not shown here.
8. Conclusion

This report is intended to explain the AQI and show AQI trends from wildfire smoke impacts. The data shows that AQI categories from wildfire smoke have been increasing starting around 2012, with more frequent days at more “unhealthy” or worse levels, including the record breaking events of September 2020. If these trends continue, Oregon should expect to see an increasing number of ≥USG during the summer, and not just in Southern Oregon where it is more common, but across the state. This will include areas which have not typically seen significant smoke impacts, such as the north coast area, the Willamette Valley, and the Portland Metro area.

Learn More

EPA’s Wildland Fire Publications, Fact Sheets and Other Resources

AQI – A Guide to Air Quality and Your Health

Track current air quality on DEQ’s online Air Quality Index or the free smart phone app.

During wildfire season, you can also track air quality on the Oregon Smoke Blog.

Wildfire Smoke and Your Health, Public Health Division, Oregon Health Authority.

Alternative Formats

DEQ can provide documents in an alternate format or in a language other than English upon request. Call DEQ at 800-452-4011 or email deqinfo@deq.state.or.us.
Appendix

Wildfire Trends for Individual Communities

The graphs below show the number of days with an AQI ≥USG for 20 communities with monitoring data. The horizontal axis (or date) varies for each chart depending on when monitoring was started.

![Bar chart showing Albany Wildfire Smoke by AQI Category](image)

Figure 7. Albany wildfire ≥ USG AQI wildfire smoke trends.
Air Quality Division

Baker City Wildfire Smoke by AQI Category

Figure 8. Baker City wildfire ≥ USG AQI wildfire smoke trends.

Burns Wildfire Smoke by AQI Category

Figure 9. Burns wildfire ≥ USG AQI wildfire smoke trends.
Figure 10. Cave Junction wildfire ≥ USG AQI wildfire smoke trends.

Figure 11. Corvallis wildfire ≥ USG AQI wildfire smoke trends.
Figure 12. Cottage Grove wildfire ≥ USG AQI wildfire smoke trends.

Figure 13. Enterprise wildfire ≥ USG AQI wildfire smoke trends.
Figure 14. Eugene/Springfield wildfire ≥ USG AQI wildfire smoke trends. 1985 and 1987 were likely field burning.

Figure 15. Grants Pass wildfire ≥ USG AQI wildfire smoke trends.
Figure 16. John Day wildfire ≥ USG AQI wildfire smoke trends.

Figure 17. Lakeview wildfire ≥ USG AQI wildfire smoke trends.
Figure 18. La Grande wildfire ≥ USG AQI wildfire smoke trends.

Figure 19. Oakridge wildfire ≥ USG AQI wildfire smoke trends.
Air Quality Division

Figure 20. Pendleton wildfire ≥ USG AQI wildfire smoke trends.

Figure 21. Prineville wildfire ≥ USG AQI wildfire smoke trends.
Figure 22. Roseburg wildfire ≥ USG AQI wildfire smoke trends.

Figure 23. Salem wildfire ≥ USG AQI wildfire smoke trends.
Figure 24. Sisters wildfire ≥ USG AQI wildfire smoke trends.

Figure 25. Sweet Home wildfire ≥ USG AQI wildfire smoke trends.
Figure 26. The Dalles wildfire ≥ USG AQI wildfire smoke trends.