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2 **INFLUENCE OF ROAD TRAFFIC ON AIR QUALITY ASSOCIATED WITH INHALABLE FINE**  
3 **PARTICLES IN THE CITY OF LUANDA**

4  
5 ***Abstract***  
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8 This article aimed to evaluate the influence of traffic on air quality related to fine particles in the city of Luanda. For  
9 this purpose, a Thermo particle analyzer model ADR-1200S was installed on Avenida 21 de Janeiro, at the entrance  
10 of the Faculty of Engineering, for continuous measurement of fine particle concentrations in the air over 68 days.  
11 The results of this monitoring, which took place in 2014, were compared with those of a similar monitoring carried  
12 out in 2009, observing a coincidence of the days with the highest concentrations (Tuesdays and Thursdays) in both  
13 years. It was concluded that traffic has a decisive influence on the concentration of suspended PM<sub>2.5</sub> in Luanda's  
14 atmosphere. Despite the decrease in PM<sub>2.5</sub> concentrations from 2009 to 2014, particle concentrations in Luanda's  
15 atmosphere are still considered high, thus posing a risk to public health, and therefore additional measures are  
16 necessary

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18  
19 ***Key words:-***

20 Air pollution, monitoring, fine particles, air quality, road traffic.

21 ***Introduction:-***

22 According to the World Health Organization (WHO), more than 2 million premature deaths are annually attributed  
23 to the effects of air pollution (outdoor and indoor); half of these deaths occur in developing countries (Alvim-Ferraz;  
24 Pereira & Slezakova, 2009).

25 "Previous and recent studies point to the inhalable fraction of suspended particles (PM – Particulate Matter) as  
26 having the most significant effects in terms of the impact of air pollutants on health (Padilha et al., 2026; Lisboa,  
27 2011; Alvim-Ferraz; Pereira & Slezakova, 2009); exposure, whether acute or chronic, can lead to a wide variety of  
28 effects ranging from simple respiratory irritation to premature death" (Eliton & Alves, 2011; Kelesoglu, 2008).

29 Various physiological tests demonstrate a relationship between particle size and their penetration into the human  
30 respiratory system (Galleto, 2025); only particles smaller than 10 µm are inhalable (PM<sub>10</sub>), with the lower  
31 respiratory tract being affected only by particles smaller than 2-3 µm (Padilha et al., 2026; Soares, 2025; Maurício,  
32 2009).

33 PM<sub>10</sub> are referred to as the inhalable fraction and particles smaller than 2.5 µm (PM<sub>2.5</sub>) as the fine fraction (Galleto,  
34 2025; Soares, 2025); an increase in their concentrations is associated with effects that cause negative health impacts  
35 and the consequent emergence of various diseases, namely cardiopulmonary diseases and lung cancer, increasing  
36 morbidity and mortality rates (Padilha et al., 2026; Bonifácio, 2024; Mota, 2021).

37 In urban atmospheres, various emitting sources contribute to the increase in particle concentration in the air  
38 (Freitas & Solci, 2009), with motor vehicles being one of the most relevant (Souza & Miranda, 2017; Maurício, 2009;  
39 Brito, 2005). In Luanda, particle emission is associated with the construction of large buildings, resuspension on  
40 unpaved roads in some peripheral neighborhoods, and different types of industries. However, it is road traffic that  
41 accounts for the largest amount of particle emissions (Lisboa, 2011; Gonçalves, 2011).

42 The number of vehicles circulating in the city of Luanda has increased significantly in recent years, both in terms of  
43 private transport vehicles and fleets of trucks and buses from state and private companies. However, this increase  
44 has not been matched by an adequate expansion of road infrastructure. This situation causes major congestion on the  
45 roads, especially in the city's urban center, forcing vehicles to move at reduced speeds on the few existing roads,  
46 thus there is no proportionality between the increase in circulating vehicles and greater population mobility.

47 Simultaneously, fuel consumption (gasoline and diesel) has increased, reaching very high levels, which is evident in  
48 the long lines of vehicles at fuel supply pumps.

49 As described above, in Luanda road traffic is particularly intense and disorderly, so the quantity of particles emitted  
50 may imply environmental concentrations incompatible with the preservation of health and the environment (Padilha  
51 et al., 2026; Souza & Miranda, 2017; Maurício, 2009). However, knowledge is still very incipient, making it urgent  
52 to continue evaluating the evolution of PM<sub>2,5</sub> concentrations, as these have the most severe health effects.

### 53 **Objectives**

54 To evaluate the influence of traffic on the concentration of fine inhalable particles in the city of Luanda;

55 To determine, with the aid of monitoring equipment, the hourly average concentrations of particles on Avenida 21  
56 de Janeiro;

57 To compare particle concentrations with the traffic profile, based on hourly averages throughout the day and on  
58 daily averages throughout the week;

59 To compare PM<sub>2,5</sub> concentrations with the air quality standards for the protection of human health defined by the  
60 World Health Organization, the European Union and Portugal (Directive 2008/50/EC and Decree-Law No.  
61 102/2010), the United States of America (USEPA), and South Africa (DEAT).

### 62 **Materials and Methods**

#### 63 **Study location**

64 In order to better compare the results obtained with those from other previously conducted studies (Lisboa, 2011;  
65 Gonçalves, 2011), so as to accurately analyze the evolution of air pollution in Luanda, the monitoring equipment  
66 was installed in the same location as the previous studies: Avenida 21 de Janeiro, at the entrance of the Faculty of  
67 Engineering. Another relevant reason that led to the choice of this location was the guarantee of equipment safety.  
68 The avenue in question is a road with heavy vehicular and pedestrian traffic. Figure 1 shows Avenida 21 de Janeiro  
69 where the air sample collection took place.

70

#### 71 **Figure 1:**

72 *Avenida 21 de Janeiro (red line) [19].*



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Source: Google earth (2015)

75 **Monitoring**

76 To achieve the objectives set out in this study,  $PM_{2.5}$  concentrations were monitored. For this purpose, a Thermo  
77 particle sampler model ADR-1200<sub>S</sub>, shown in Figure 2, was installed at the monitoring site for continuous  
78 monitoring of particle concentrations in the air.

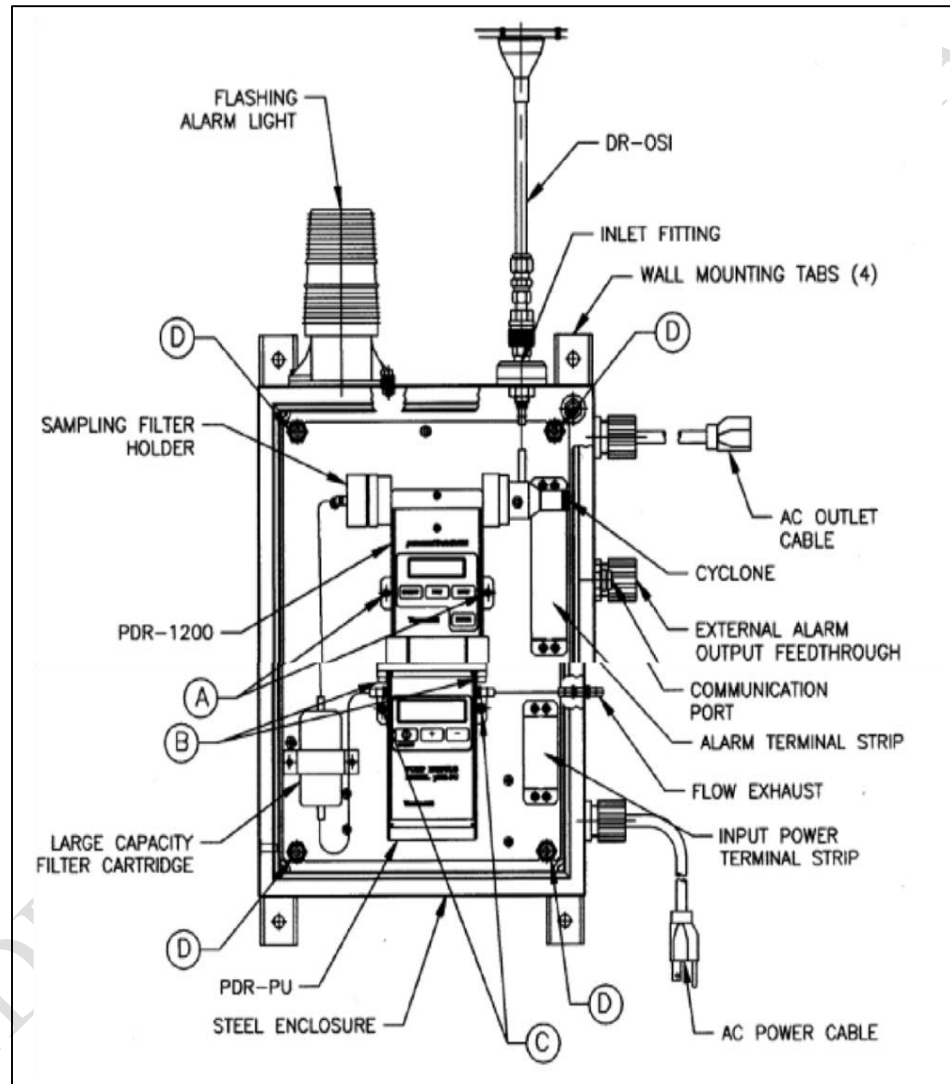
79 ***Thermo Particle Sampler Model ADR-1200 S***

80 "The Thermo particle sampler model ADR-1200S is a complete monitoring system designed to make continuous  
81 measurements of air particle concentrations corresponding to aerodynamic diameter sizes between 1  $\mu m$  and 10  
82  $\mu m$ . Its weatherproof housing allows safe and effective operation under any weather conditions. It performs  
83 continuous monitoring with real-time data transmission to a central station and/or to an internal data logging  
84 unit. This unit is incorporated into the system, whereas for data transmission a separate modem or telemetry  
85 equipment (used to transmit data remotely) is required.

86 The equipment monitor shows real-time concentrations, average and maximum readings. This model allows  
87 accurate monitoring over long periods of time of very low particle concentrations, on the order of 1  $\mu g/m^3$ " (Viegas;  
88 Gonçalves; Tatiana, 2013).

89 The combination of modules forms a continuous monitoring system, without interruption or power supply failure  
90 (pDR-AC) for up to 36 hours. At the alarm output, the ADR-1200S (on the external upper part of the housing)  
91 displays a flashing red light that automatically triggers its alarm system whenever the measured particle  
92 concentration exceeds the limit level selected by the operator. This alarm signal can be seen from a considerable  
93 distance (Instruction manual P/N 1000341-00, 2004).

94 **Figure 2:**  
95 *Schematic of the ADR-1200 S particle analyzer provided by the equipment manufacturer*



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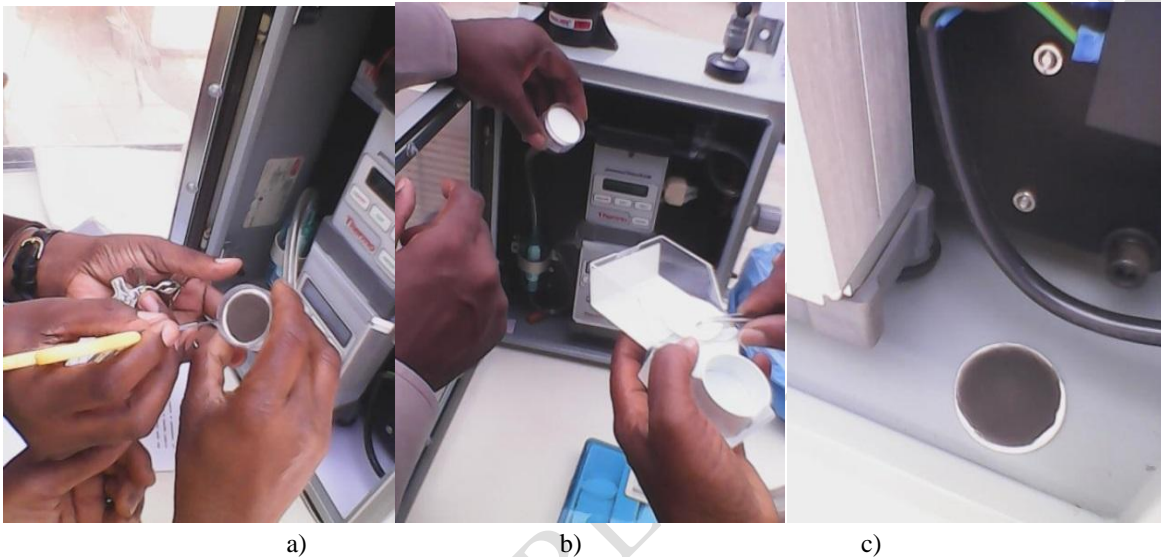
**Source:** Instruction manual P/N 1000341-00, 2004

98 In addition to allowing continuous real-time measurement, the ADR-1200S allows the collection of particles on a  
99 filter for gravimetric or chemical analysis. Figure 3 illustrates the installation and collection of a filter, which will  
100 later be sent to the laboratory for evaluation of the concentration of fine inhalable particles in subsequent studies.

101 In the work carried out, the filter was changed after 15 days of monitoring, in compliance with the guidelines  
102 contained in the instruction manual of the equipment used to measure  $PM_{2.5}$  concentrations throughout the air  
103 quality monitoring period (Instruction manual P/N 1000341-00, 2004).

104 **Figura 3:**

105 *Installation and collection of a filter: a) installation; b) collection after 15 days of monitoring; c) filter with*  
106 *deposited particles.*



109 **Source:** Makonga&Lito, 2026

110 The instantaneous concentration measurements are stored in the memory of the Personal/Data Ram at time intervals  
111 chosen by the user. In order to ensure uninterrupted long-term operation of the equipment, it is equipped with a  
112 rechargeable battery. The measured data, stored in the Personal/Data Ram, are subsequently downloaded to a  
113 computer for further processing.

114 **Monitoring planning**

115 The equipment was configured for continuous measurement of  $PM_{2.5}$  concentration, with a flow rate of 1.5 L/min  
116 selected on the pump unit, and with an average time of one hour for data storage (1-hour averages). The duration of  
117 each monitoring run averaged 15 days without interruption, with 5 runs carried out starting from June 17, 2014  
118 (more than 1875 hours of monitoring).

119 At the end of each experiment, the stored data were collected to a computer; for this purpose, the computer (with  
120 specific software installed) was connected to the monitoring equipment. The data were collected in raw form,  
121 subsequently undergoing appropriate statistical treatment. In order to maintain the same operating conditions, the  
122 afternoon period was established for the data collection and run start-up process; data collections as well as run  
123 start-ups were all carried out at the monitoring site.

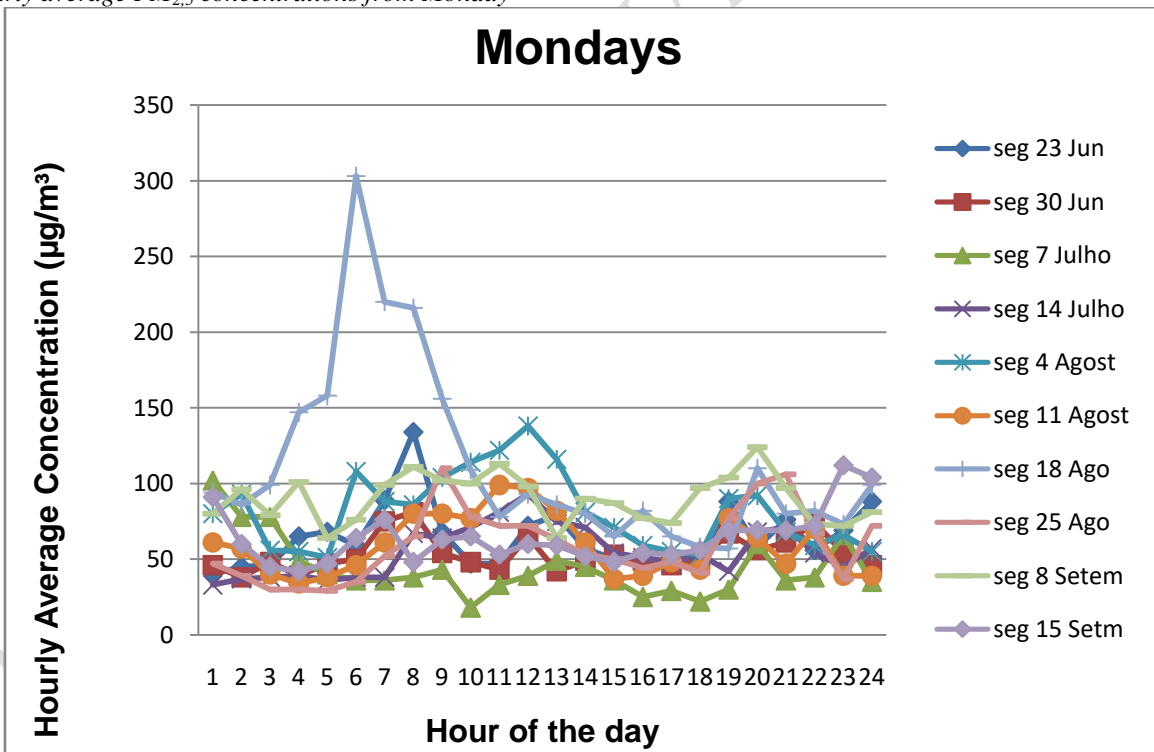
124 In order to compare the results obtained in this work with previous studies, data processing was essentially based on  
125 the calculation of arithmetic means (hourly and daily) and standard deviation, understood as the measure of  
126 dispersion or variability of the data for hourly and daily averages. The daily averages of the measured concentrations  
127 were compared with the respective standards defined by WHO and USEPA for the protection of human health.

128 **Results and discussion**

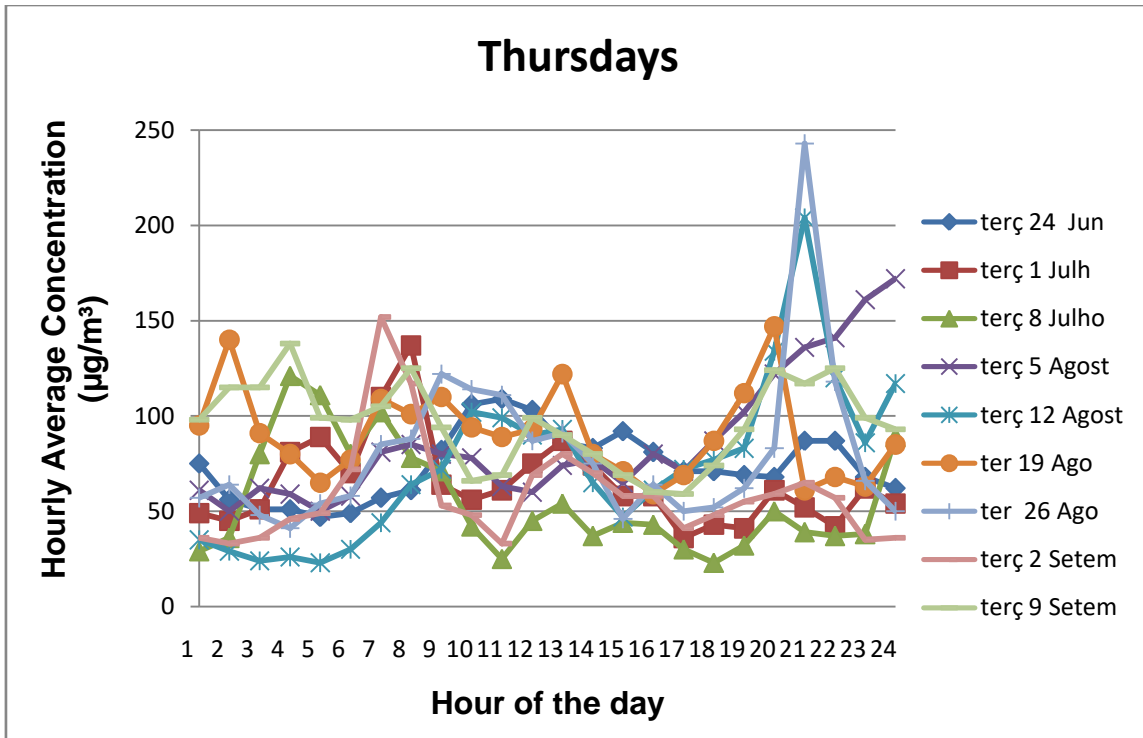
129 As mentioned in the methodology, it was possible to measure fine particle concentrations, whose hourly averages  
130 were stored in the system memory and subsequently downloaded to a computer through the continuous particle  
131 monitoring system installed on Avenida 21 de Janeiro at the entrance of the Faculty of Engineering (Central  
132 Pavilions) of Agostinho Neto University (UAN) in Luanda.

133 The records of hourly average  $PM_{2.5}$  concentrations stored in the system during the 68-day monitoring campaign  
134 (from June 17 to September 16, 2014) were downloaded to the computer and are archived on a CD attached to this  
135 dissertation. The results of the hourly averages of these measurements are presented in Figures 4, 5, and 6 of this  
136 article.

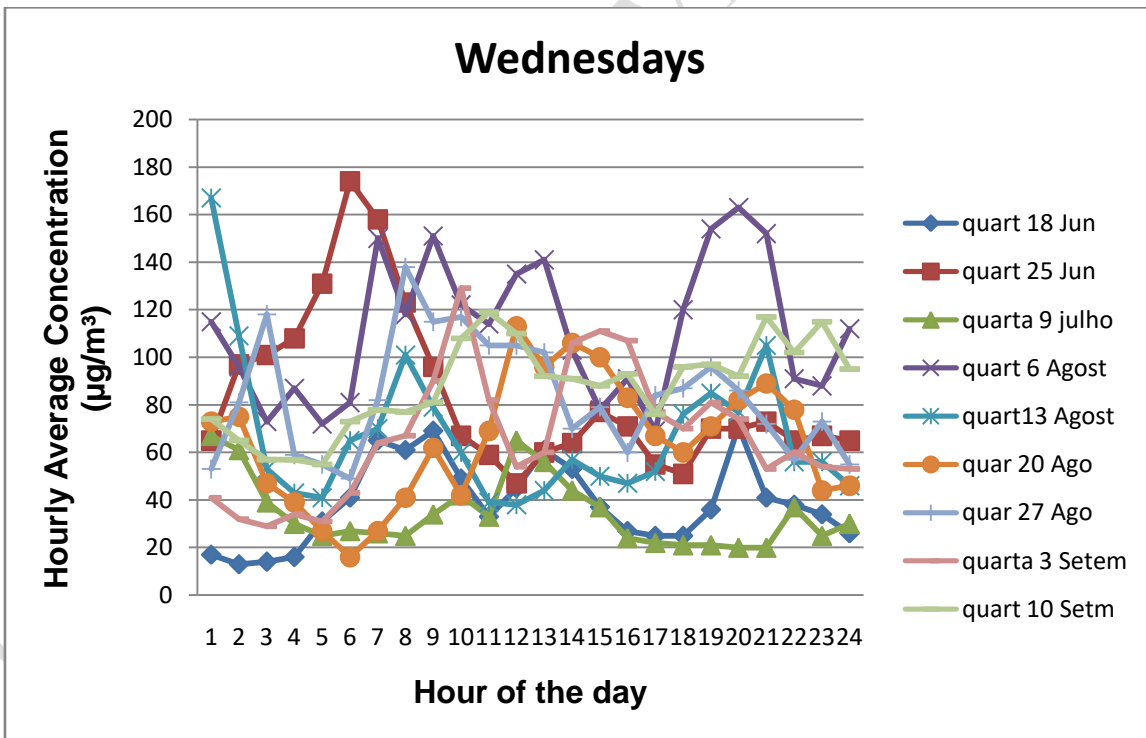
137 **Figure 4:**  
138 *Hourly average  $PM_{2.5}$  concentrations from Monday*



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141 **Figure 5:**  
142 *Hourly average  $PM_{2.5}$  concentrations from tuesday to wednesday*



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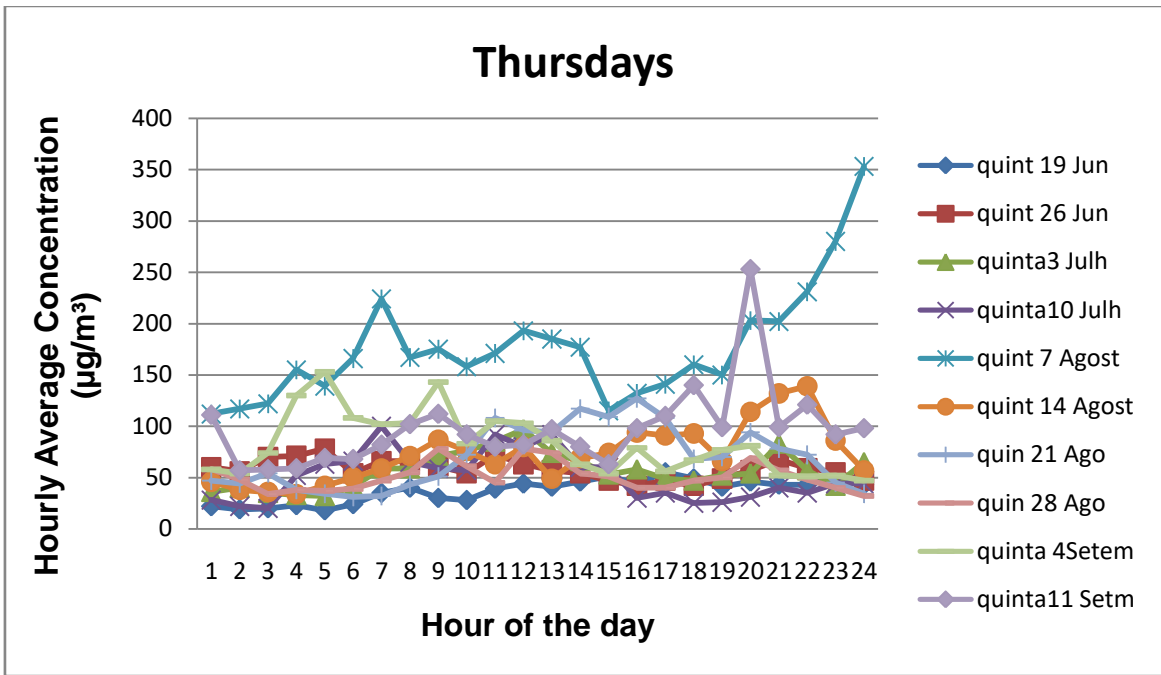
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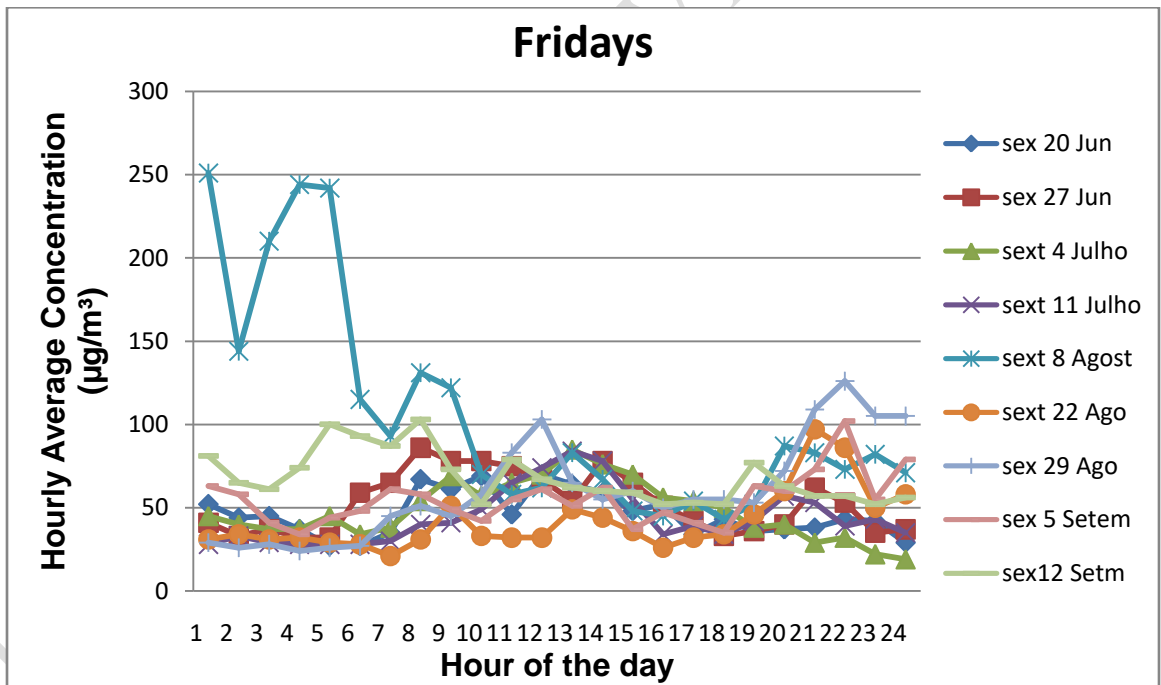
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147 **Figure 6:**

Source: Makonga&Lito, 2026



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Source: Makonga&Lito

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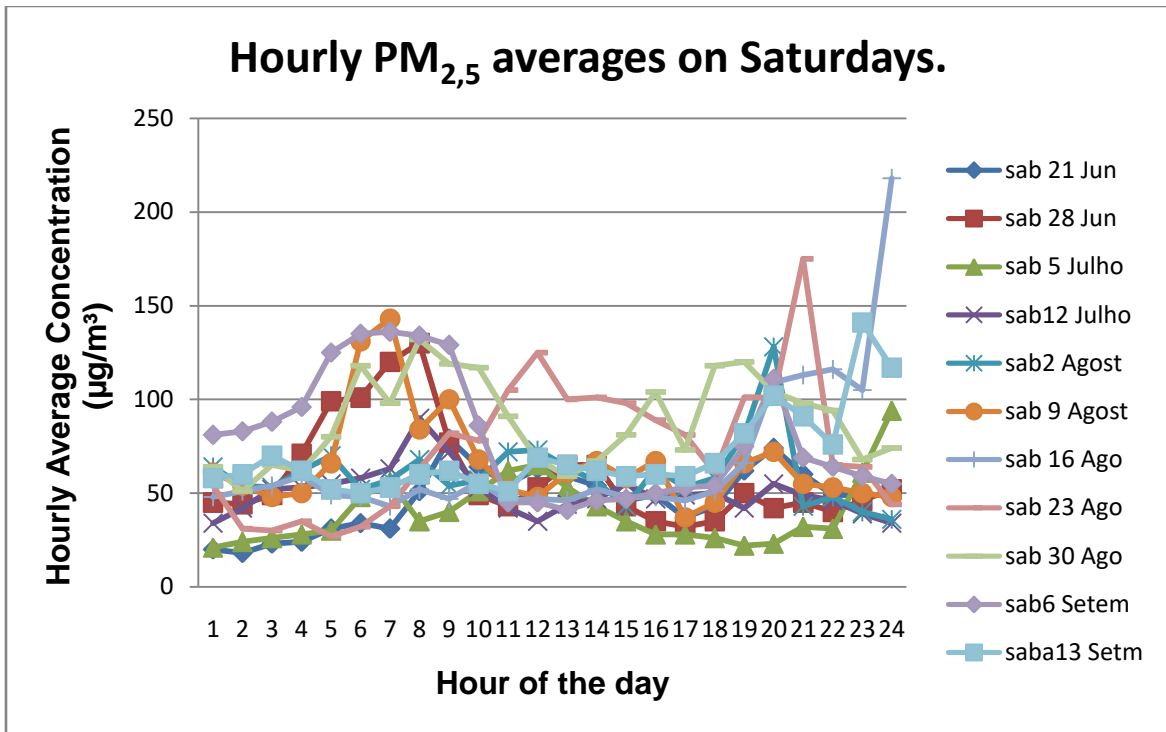
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156 Figure 7:

157 Hourly average  $PM_{2,5}$  concentrations from Saturday.



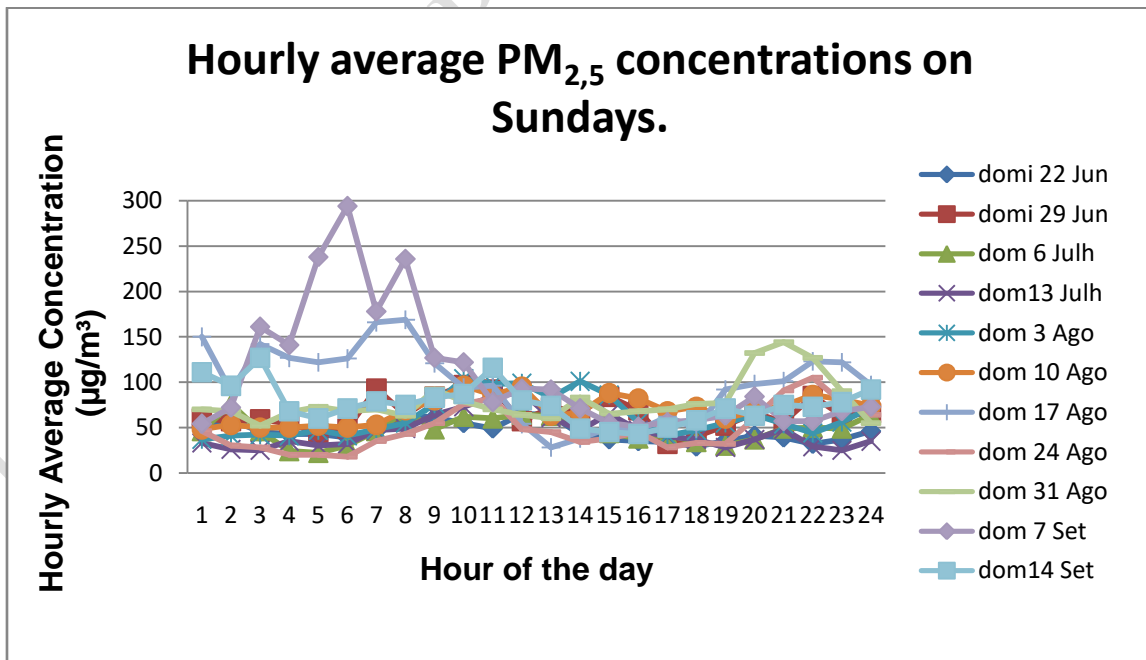
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Source: Makonga&Lito

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160 **Figure 8:**

161 Hourly average  $PM_{2,5}$  concentrations on Sundays.



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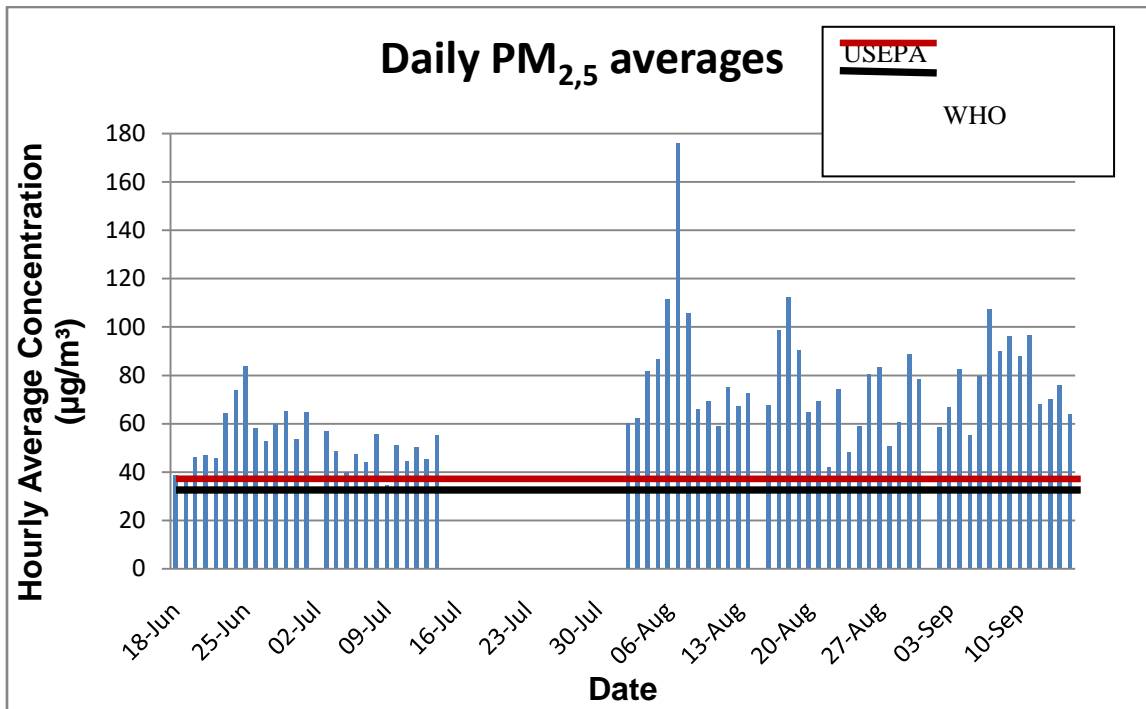
Source: Makonga&Lito

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164 Figure 7 shows some data gaps, the largest corresponding to the period from July 13 to August 1, which  
165 corresponded to the equipment maintenance period.

166 **Figure 9:**

167 Comparison of daily PM<sub>2.5</sub> averages in Luanda with the human health protection standards established by WHO and  
168 USEPA.



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Source: Makonga&Lito, 2026

171 The daily average concentrations vary from day to day, being lowest between June 18 and 22 (38.7 µg/m<sup>3</sup> and 37.3  
172 µg/m<sup>3</sup> on days 18 and 19, respectively). In the following days, a clear increase in concentration is observed. To  
173 protect human health, the World Health Organization (WHO) established a maximum value of 25 µg/m<sup>3</sup> for the  
174 daily average as a standard. The United States Environmental Protection Agency (USEPA) sets a value of 35 µg/m<sup>3</sup>  
175 for the same standard. It is with these daily average standards that the results obtained in Luanda, on Avenida 21 de  
176 Janeiro, will be compared.

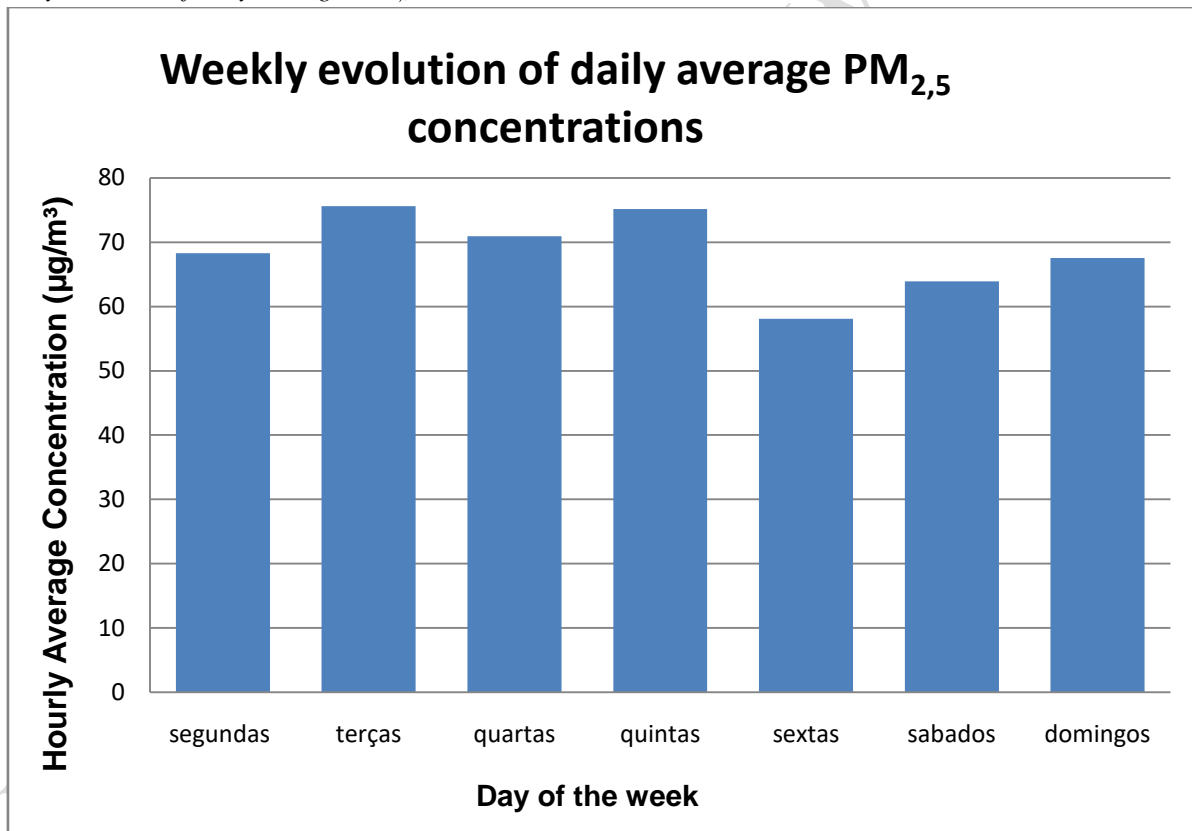
177 Calculating the daily average concentration values is necessary because the air quality criteria legislated for PM<sub>2.5</sub>  
178 are established based on daily average concentrations (Freitas&Solci, 2009; Maurício, 2009). However, the research  
179 showed that during the 68 days of monitoring, the daily average concentrations were always above 25 µg/m<sup>3</sup> (EC,  
180 2005; EU, 2004). Particle concentrations above 35 µg/m<sup>3</sup> and 40 µg/m<sup>3</sup> were recorded in 98.5% and 95.6% of the  
181 monitored days, respectively. Above 50, 60, 80, and 100 µg/m<sup>3</sup> were recorded in 80.9%, 58.8%, 22.1%, and 5.9% of  
182 the measurements, respectively. August 7 had the highest daily average: 176 µg/m<sup>3</sup>.

183 Based on the above, it was verified that throughout the monitoring period, PM<sub>2.5</sub> concentrations exceeded WHO  
184 standards for the protection of human health. Regarding USEPA standards, only on July 9, which had an average of  
185 34.6 µg/m<sup>3</sup>, did PM<sub>2.5</sub> concentrations fall below the limit value (EC, 2005; EU, 2004).

186 Analyzing the figures above, the daily average concentration of 50 µg/m<sup>3</sup> was exceeded 55 times in a monitoring  
187 period of 68 days; it should be noted that this is the limit that cannot be exceeded more than 35 times per year for  
188 PM<sub>10</sub> concentrations (EC, 2005; EU, 2004), a pollutant for which the margin of tolerance is much greater. The fact  
189 that the recommended standards are breached by such a wide margin indicates a strong risk of exposure to PM<sub>2.5</sub>  
190 (Nóbrega& Pessoa, 2013; Secuma, 2012), especially for the population of Luanda that frequents the studied area.

191 Figure 8 shows the weekly evolution of the average concentrations of fine inhalable particles on Avenida 21 de  
192 Janeiro.

193 **Figure 10:**  
194 *Weekly evolution of daily average PM<sub>2.5</sub> concentrations.*



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196

Source: Makonga e Lito, 2026

197 In Figure 8, it can be observed that the highest averages correspond to the first days of the week. However, the  
198 results obtained seem to reflect the popular knowledge of Luanda residents, who point to Tuesdays and Thursdays  
199 as the days of the week with the most congested traffic.

200 Table 1 shows a summary of the average values of daily average particle concentrations and the corresponding  
201 standard deviation for each average.

202 **Table 1:**

203 *Average values of daily average particle concentrations in the air ( $\mu\text{g}/\text{m}^3$ ) and the corresponding standard*  
204 *deviation for each average.*

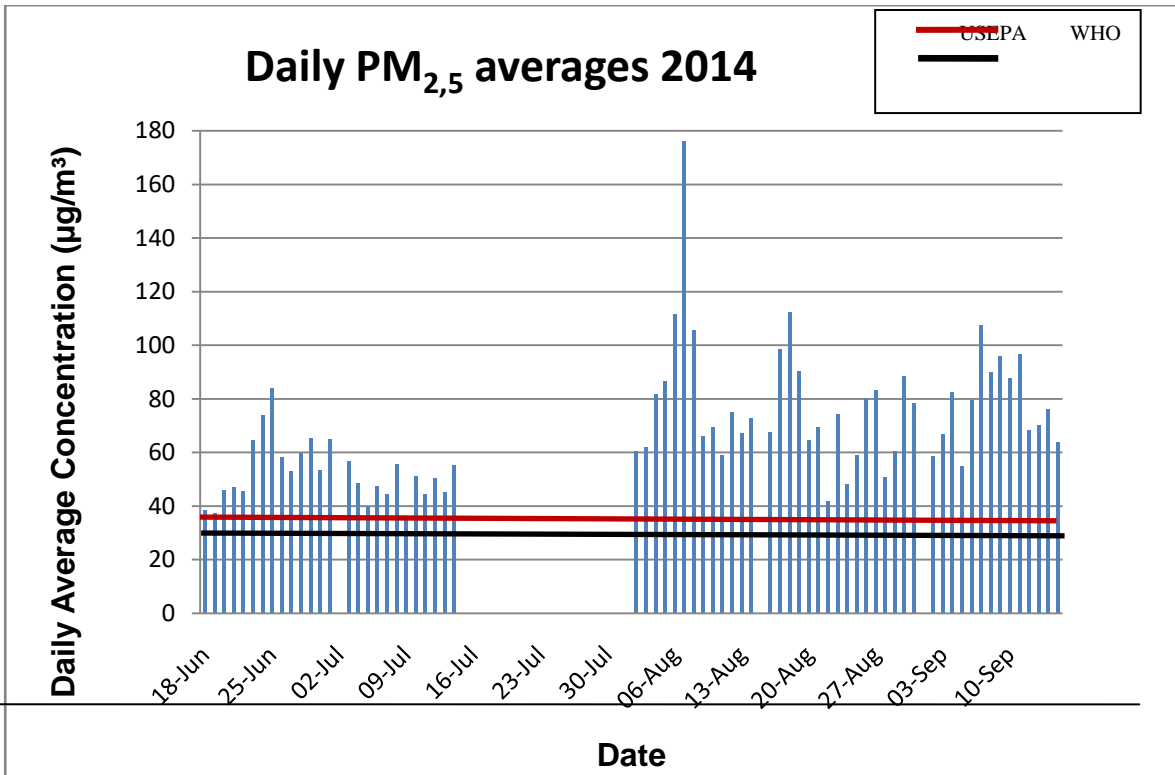
Days of the Week	Average values of daily average particle concentrations in the air over the week ( $\mu\text{g}/\text{m}^3$ ) and standard deviations associated with each average.	
	Average PM <sub>2,5</sub> concentrations during the monitoring period ( $\mu\text{g}/\text{m}^3$ )	Standard Deviation
Mondays	68,29	20,46
Tuesdays	75,62	14,05
Wednesdays	70,95	24,18
Thursdays	75,17	39,43
Fridays	58,07	19,60
Saturdays	63,91	14,45
Sundays	67,56	31,31

205 **Source:** Makonga e Lito, 2026

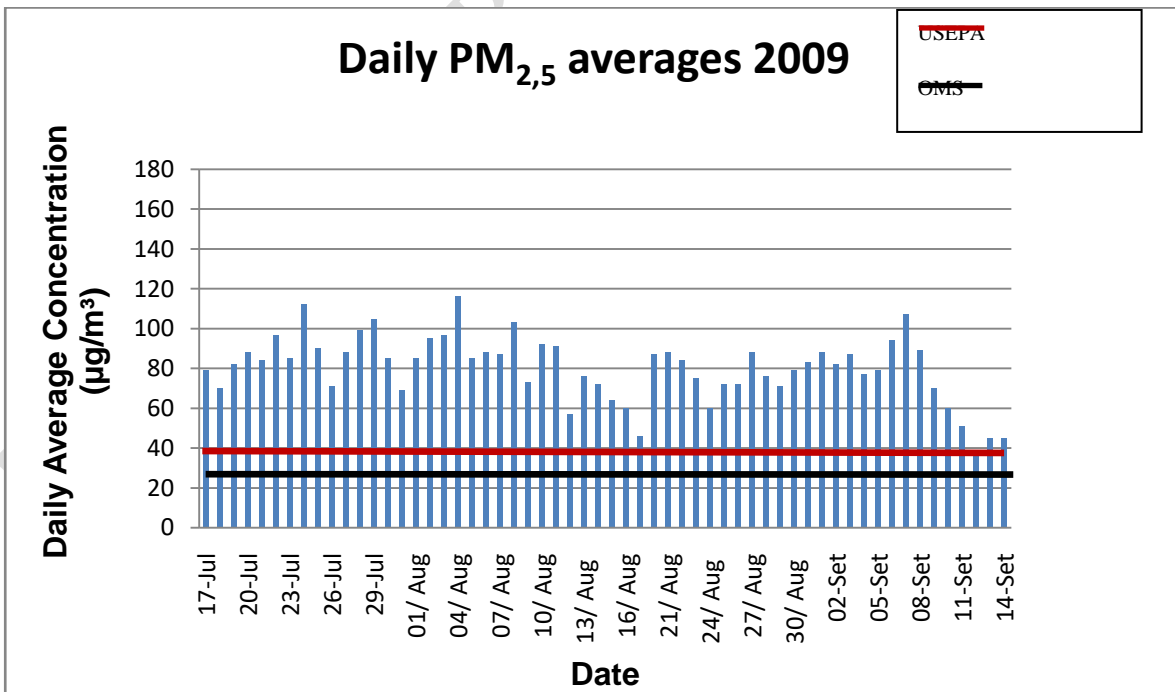
206 From this table it can be concluded that the degree of variation of the average values was lowest for Tuesdays at  
207 about 14.05, followed by Saturdays at about 14.45, while the days of the week with the largest standard deviation  
208 were Thursdays at about 39.43, followed by Sundays at 31.31. In Figure 9, daily average concentrations monitored in  
209 2014 (a) are compared with those monitored in 2009 (b). For these two periods, Table 2 compares: the overall daily  
210 average, the maximum and minimum values, and the percentages of daily averages above 25, 35, 50, and 100  $\mu\text{g}/\text{m}^3$ ;  
211 this table also indicates the monitoring periods and the number of days monitored.

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220 **Figure 11:**  
 221 *Comparison of daily average PM<sub>2.5</sub> concentrations monitored in 2014 (a) with those monitored in 2009 (b). The*  
 222 *standards for public health protection defined by WHO and USEPA are indicated.*



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Source: Makonga&Lito, 2026

226 Below, Table 2 compares the daily average concentrations monitored in 2009 with those monitored in 2014 ( $\mu\text{g}/\text{m}^3$ ).

227 **Table 2:**

228 *Comparison of daily average concentrations monitored in 2009 with those monitored in 2014 ( $\mu\text{g}/\text{m}^3$ ): global*  
 229 *average, maximum, minimum, and percentage of days above 25, 35, 50, and 100  $\mu\text{g}/\text{m}^3$ .*

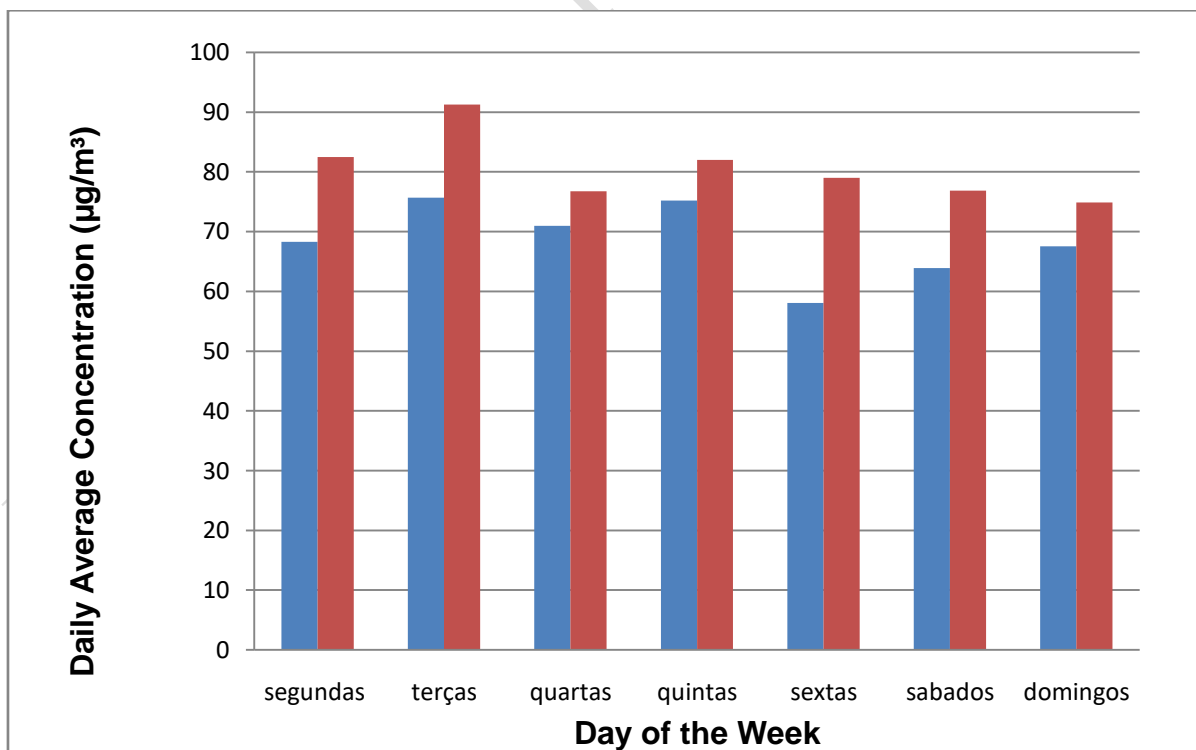
		2014	2009
Monitoring periods		18-Jun a 15-Sept	17-Jul a 14-Sept
Number of monitored days		68	58
Global daily average		68,4	79,9
Maximum daily average		176	116
Minimum daily average		34,6	39
Percentage of days above	25	100	100
	35	98,5	100
	50	80,9	93,1
	100	5,9	8,6

230 **Source:** Makonga&Lito, 2026

231 Figure 10 compares the weekly evolution of daily average concentrations.

232 **Figure 12:**

233 *Comparison of the weekly evolution of daily average  $\text{PM}_{2.5}$  concentrations in 2014 with those in 2009.*



234 **Source:** Makonga&Lito, 2026

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236 As in 2014, it was observed in 2009 that the highest averages corresponded to the first days of the week. The 2014  
237 results confirm those of 2009: Thursdays have the highest average concentrations. Regarding the lowest  
238 concentration, there is no coincidence: in 2014 it occurred on Friday, while in 2009 it occurred on Sunday. As  
239 previously mentioned, conclusions regarding the weekly evolution of daily average concentrations cannot be  
240 generalized with certainty, considering the relatively short monitoring period on which they are based. Therefore,  
241 one could not expect the 2014 conclusions to strictly replicate those of 2009. However, the coincidence of the days  
242 with the highest concentrations (Thursdays) is noteworthy; this fact confirms the relevance of the popular  
243 knowledge of Luanda residents, who consider these to be the days of the week with the most congested traffic.

244 The results shown in Figure 10 confirm that concentrations in 2014 were lower than those in 2009, which was  
245 consistently observed for all days of the week. The decrease in PM<sub>2.5</sub> concentration on Avenida 21 de Janeiro in  
246 Luanda can be explained by the following facts:

- 247 — Complete rehabilitation of this urban space;
- 248 — Increased traffic flow;
- 249 — Decrease in the average age of circulating vehicles.

250 These observations allow us to conclude that traffic has a decisive influence on the concentration of suspended  
251 PM<sub>2.5</sub> in Luanda's atmosphere. Despite the observed decrease in concentrations, the very high concentrations of  
252 suspended PM<sub>2.5</sub> still present in Luanda's atmosphere indicate a high risk to the health of its inhabitants, and  
253 therefore additional measures are absolutely necessary.

## 254 **Conclusions**

255 Generally, the first hours of the day presented considerably high values; these average values increased in the early  
256 morning hours, reaching a maximum between 8:00 and 12:00, decreasing from 14:00 to 18:00, and then increasing  
257 again. The variability of concentrations is strongly associated with the variability in traffic intensity, and the  
258 influence of meteorological conditions that condition pollutant dispersion, namely wind direction and speed, is also  
259 significant.

260 Daily averages were always above 25 µg/m<sup>3</sup> and rarely below 40 µg/m<sup>3</sup>, but often exceeded 50 and 60 µg/m<sup>3</sup>,  
261 repeatedly reaching 80 µg/m<sup>3</sup> and even 100 µg/m<sup>3</sup>. August 7 had the highest daily average: 176.2 µg/m<sup>3</sup>. Hourly  
262 averages during the early morning hours were generally higher in 2014, sometimes exceeding the values observed  
263 during the day. This fact is fundamentally due to the current preferential schedule for truck traffic during that period.

264 WHO standards were not met on any of the monitored days; the more permissive USEPA standards were only  
265 marginally met on one of the monitored days. The daily average concentration of 50 µg/m<sup>3</sup> was exceeded 55 times in  
266 a monitoring period of 68 days; it is emphasized that this is the limit that cannot be exceeded more than 35 times per  
267 year for PM<sub>10</sub> concentrations, a pollutant for which the margin of tolerance is much larger. The highest averages  
268 correspond to the first days of the week. Tuesday and Thursday have the highest average concentrations, reflecting

269 the popular knowledge of Luanda residents, who point to Tuesdays and Thursdays as the days of the week with the  
270 most congested traffic.

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