Environment Health Working Group

This year’s activities focused primarily on climate health issues but maintained our relationships with other groups relating primarily to chemical issues in health care and society as well.

14th World Congress on Public Health

In preparation for the World Health Assembly in Kolkata in February, the Environmental Working Group participated in planning discussions and sponsored several sessions. It further worked on the Kolkata Call to Action and specifically emphasized the section: Climate and Health.

The profound threat to human health from global warming and resulting climate change is central to the challenges of this century. The human contribution to warming through energy generation from fossil fuels, and coal in particular, provide clear requirements to mitigate these effects and protect thousands of lives at risk as well from the air pollution inherent in these processes. These risks too fall unevenly on the poor within countries and poor nations globally. We must commit to sustainable and renewable energy technologies and not short term and potentially dangerous methods such as nuclear fission and hydraulic fracking.

At the meeting itself the Working Group had a face to face meeting which brought new energy and participation to its activities. Participation from the Australia, India, Nigeria, Norway, Philippines, South Africa, and the USA. Also participating were collaborating organizations Health Care Without Harm (HCWH) and the Global Climate and Health Alliance. The editor of the Journal of Public Health Policy and WFPHA Headquarters in Geneva also attended. Dr. Michael C Asuzu, Professor of Public Health & Community Medicine, Consultant in Community & Occupational Medicine and the Director of the Ibarapa Community & Primary Health Programme, University College Hospital, Ibadan, Nigeria, agreed to join Dr. Peter Orris (in the photo above), Professor of Occupational and Environmental Health Sciences at the University of Illinois Hospital and Health Sciences System, Chicago, Illinois as Co-Chair of the Working Group.

COP21 The climate summit in Paris

As reported by diverse scientific and health research organizations (including the World Health Organization), climate change poses a central and increasing threat to the health of the world’s people in this century. However, little was known about how national governments were planning for this unprecedented public health challenge. To address this gap, the Group developed plans for an online survey of actions by national governments for completion by health non-governmental organizations from each country. This quickly brought support of the Climate and Health Alliance, Health Care Without Harm, and the Public Health Association of Australia. It was conducted during August and September 2015 by WFPHA with support from the World Medical Association and its Young Doctors Network.

National public health associations, medical associations, and other health professional organizations responded, providing information on the actions of thirty-five governments (15 developed and 20 developing nations). The respondent countries are spread across the globe, with six continents represented, and include USA, Canada, Brazil, Spain, China, Australia, Japan and the EU.

The survey revealed a lack of climate-health preparedness, with more than half of respondent countries (51%) having no national plan to protect their citizens from the health impacts of climate change in their countries. Twelve (35%) countries have yet not developed policies for long-range climate change and its impact on health and 13 (37%) countries did not have any policies for public health adaptation.

The majority of respondent countries (77.1%) have no comprehensive identification of health risks of climate change projections for their citizens and 65.7% had done little towards identifying vulnerable populations and infrastructure, developing public health adaptation responses, assessing coping capacity or gaps in knowledge. Some positive examples bucking the trend include Taiwan and Lithuania, reporting comprehensive climate change action plans with both mitigation and adaptation strategies, along with climate-health risk surveillance, and early warning systems for health risks from extreme weather.

The report was released in late November and received prominent attention during a number of health related events in Paris during the Climate Summit of 30 November to 11 December 2015. WFPHA was represented during the Paris events through leadership of the Working Group both at the Conference of the Parties itself and at many of the side events organized by several of our collaborating organizations. The Paris agreement signed on Saturday 12 December 2015 is binding and commits signatories to limit global warming to well below 2 degrees Celsius. The more ambitious 1.5 degrees Celsius goal is also named as a serious aspiration. The agreement includes a commitment to a long-term goal to bring emissions down to zero and a regular review of national commitments every five years to check progress. This review mechanism, which will start in 2018, is vital if the 2-degree target is to be reached.

WFPHA welcomed and agreed to participate with these groups beyond Paris based on three pillars of mitigation within health care provision, building resilience of health care institutions, and providing public health leadership to civic society with respect to the impact of climate change on the world emphasizing the poorest countries and communities.

The Paris Platform for Healthy Energy

Parallel to all of our work with hospitals and health systems, HCWH’s Healthy Energy Initiative was also actively engaged in the lead-up to Paris and during COP21 as well. The Healthy Energy Initiative is a collaborative effort.
with partners in eight countries to address the health impacts of energy choices. Recognizing that more than 7 million people die every year from air pollution, much of it related to fossil fuel combustion, particularly coal, the Health Energy Initiative seeks to engage the health sector in advocating for a rapid transition to clean, renewable energy.

To this end, WFPHA endorsed the Paris Platform for Healthy Energy as a way to reflect this common agenda across borders and to engage ever greater numbers of health sector actors in this advocacy. In this way we are continuing the joint efforts begun 4 years ago when the WFPHA and the South African Public Health Association with the WHO, World Medical Association, and others initiated these efforts at the climate summit in Durban SA. In addition the Working Group continues to contribute to the efforts to enlarge the Global Green and Healthy Hospitals network taking part in Conferences in South Africa, USA, and most recently the founding of the Asia network in Seoul, Korea. Finally, at the end of September, WFPHA concluded its representation of the Health Sector on the Bureau of the Strategic Approach to Chemicals Management Treaty administered by the United Nations Environment Program at its ICCM4 continuations meeting in Geneva. This meeting made plans for activities through 2020 and identified new areas of concern with respect to endocrine disrupting chemicals and residual pharmaceuticals in drinking water.

The working group will have a conference call in early 2016 to chart its course over the next period and prepare any policy issues needed for the General Assembly meeting in May in Geneva. It is actively seeking more members and interested in expanding its activities into new areas with impact on the public’s health.