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Title	WHO in Western Pacific Region and future partnership with WHO collaborating centres in achieving SDGs
Author(s)	Kim, Rokho
Citation	北海道大学環境健康科学研究教育センター主催 WHO環境化学物質による健康障害の予防に関する研究協 カセンター指定2周年記念 環境と健康に関する市民講演会 「これまでの成果と今後の展望~WHO研究協力センターとしての役割~」 2017年11月20日(月)開催 (北海道大学遠友学舎談話ラウンジ)
Issue Date	2017-11-20
Doc URL	http://hdl.handle.net/2115/67893
Туре	lecture
File Information	WHO in Western Pacific Region and future partnership.pdf



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# WHO in Western Pacific Region and future partnership with WHO collaborating centres in achieving SDGs

Dr. Rokho Kim

Coordinator, Health and the Environment (HAE)

WHO Regional Office for the Western Pacific

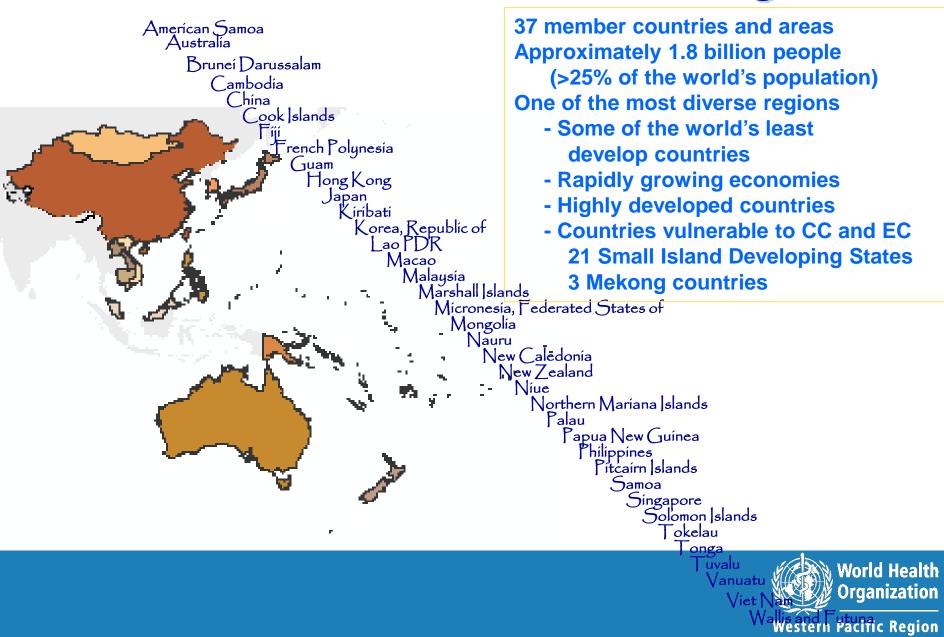


### Outline

- Introduction to HAE Programme of WHO WPR
- Environmental Burden of Disease in WHO WPR
- Importance of WHO Collaborating Centers
- Conclusion Future partnership to achieve SDGs



### **Countries in the Western Pacific Region**



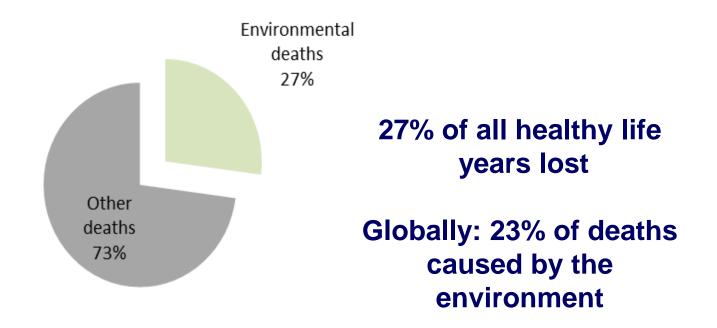
#### COUNTRIES AND AREAS OF THE WHO WESTERN PACIFIC REGION



Mongolia

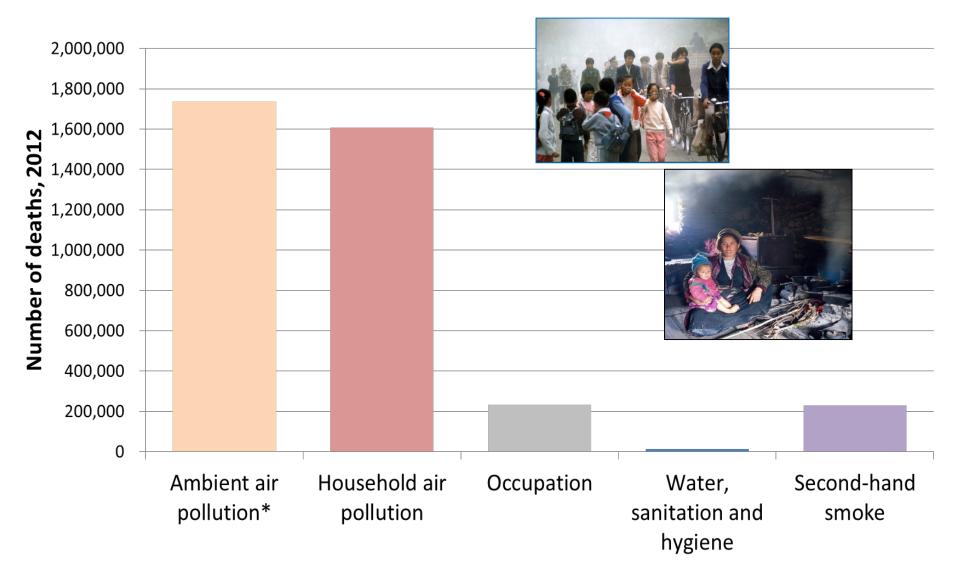
Republic of Korea

# Share of deaths which could be prevented by environmental improvements, WPR



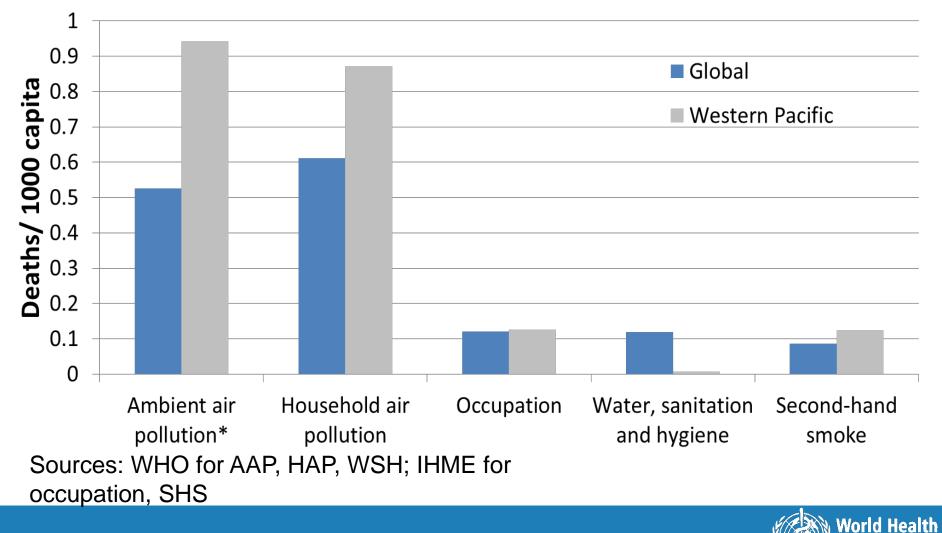


### Major environmental risks to health, WPR



\* Preliminary estimate

### Environmental deaths per 1000, WPR and World, 2012



Western Pacific Region

"In everything we do, WHO relies on the expertise of hundreds of formal WHO Collaborating Centres, in your countries, and thousands of the best brains in science, medicine, and public health, in your countries. They give us their time freely and it is my strong impression that they do so with pride."

Dr Margaret Chan, Director-General, in her address to the Sixtyfourth World Health Assembly, 16 May 2011



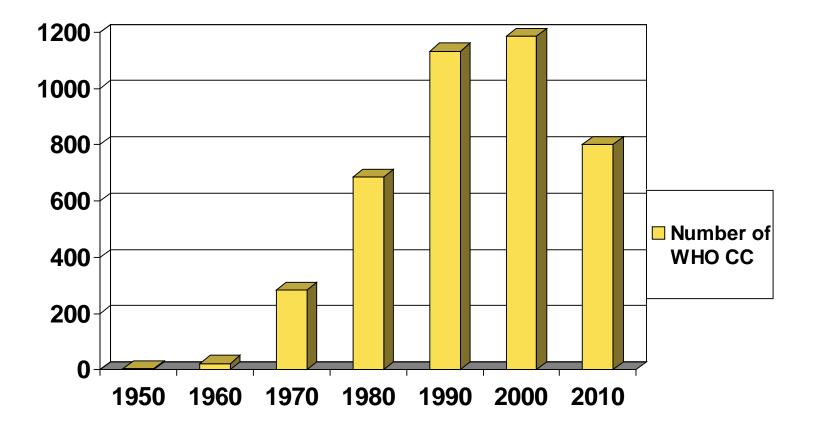
### An early model of collaboration

- 1949 Second World Health Assembly: "research in the field of health is best advanced by assisting, coordinating and making use of the activities of existing institutions"
- Today, about 800 collaborating centres in over 80 countries worldwide





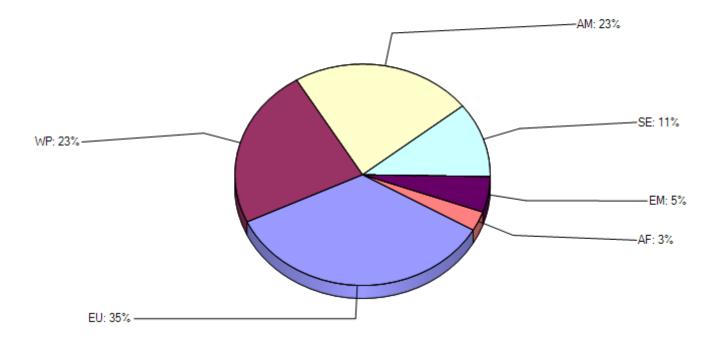
### Number of WHO CCs worldwide





### **Distribution by WHO region**

Percentage of Collaborating Centres by Region

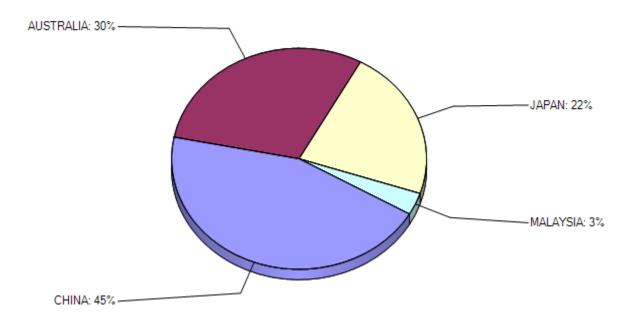




### WHO CCs in WPRO (I)

#### As of November 2017 there are 191 WHO CCs in WPRO

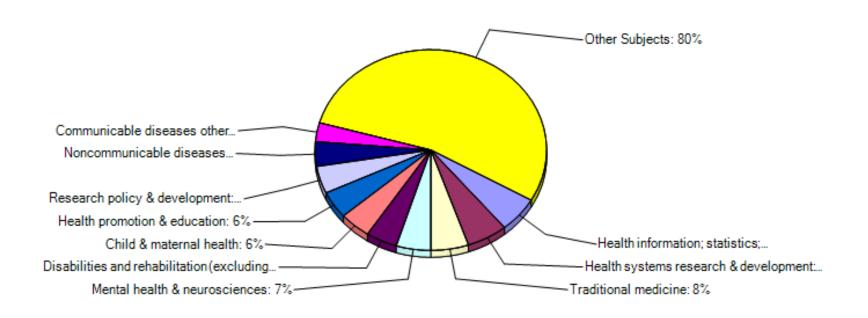
Percentage of Collaborating Centres by Country





### WHO CCs in WPRO (II)

Percentage of Collaborating Centres by Subject







### Children are at the heart of the Sustainable Development Goals

SDG 3: Ensure healthy lives and promote well-being for all at all ages

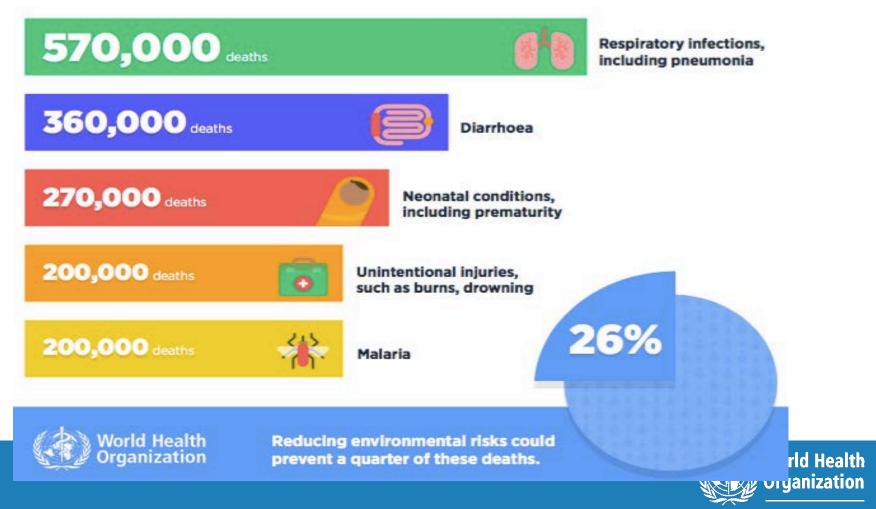
In 2015, 5.9 million children under five years of age died

• Up to 26% of their deaths could have been prevented by addressing environmental risks.

 The prenatal and early childhood period represents a window of particular vulnerability to environmental health hazards



# Each year 1.7 million child deaths under 5 are attributable to the environment



Western Pacific Region

### Effects of the environment on children's health are seen in every WHO regions



- The distribution of environmental hazards is not uniform
  - Much of the related burden of disease falls on developing regions and countries
- Three of the most common causes of death for children under five, diarrhoea, malaria, and pneumonia, are tied to environmental factors
  - Most prevalent in low and middle income countries (LMICs)
  - Child mortality is highest also in those countries.



# Children suffer from environmentally burden of disease much more than adults

#### Main diseases contributing to the environmental burden of Environmental fraction of global burden of disease (in DALYs), by age and disease group, 2012 disease for children under five years, 2012 Infectious, parasitic, neonatal and nutritional diseases Noncommunicable diseases Other Fire, heat, hot 1396 Injuries substances Total 3% Respiratory Poisonings infections 60% 1% 32% Road traffic accidents 196 50% Drowning 3% Attributable fraction (percentage of DALYs) **Congenital anomalies** 40% 1% Protein-energy 30% malnutrition 2% 20% Neonatal conditions 10% 15% 0% 15 20 25 30 35 40 45 50 55 60 65 70 75 Parasitic and Diarrhoeal Age (years) vector diseases disease 22% 12%

Note: Data from evidence-based assessment and expert opinion.

### **CHEMICALS**

SDG 12.4: Environmentally sound management of chemicals and all wastes by 2020

Over 140 000 synthetic chemicals have been produced, the majority of which have not been tested for human safety

•Children worldwide are exposed to chemicals through food, water and household products, which have been linked with changes in neurological, endocrine and immune system development, as well as asthma, allergy, obesity, diabetes, neurodegenerative disorders and cancer

•Lead (Pb), which was commonly used in paint and petrol, accounts for 600 000 new cases of intellectual disability per year.

- Use of lead in petrol has been eliminated in all but two countries
- 59 countries have begun to phase-out lead paint



### **E-WASTE**

SDG 12.4: Environmentally sound management of chemicals and all wastes by 2020

- •20 million-50 million tons of e-waste are produced every year
  - Projected to increase by 19% between 2014 and 2018
- Discarded electronics are often shipped to LMICs, where valuable parts are extracted by burning and with acid
  - Done by children, whose small hands can handle tiny parts, exposing them to chemicals and toxicants, leading to reduced IQ, attention deficits, lung damage, DNA damage and cancer

●Up to €49 billion in resources may be retrieved from properly recycled e-waste

 Safer techniques including use of personal protective equipment are necessary to prevent the ultimate cost of the health and lives of children.



### **Electronic and electrical waste (e-waste)**



Quantity of e-waste produced per inhabitant (kg), 2014



### EDCs (endocrine disrupting chemicals) : emerging issue



SDG 6.3: Minimize releasing hazardous chemicals by 2030

Endocrine disrupting chemicals are linked with liver, thyroid, reproductive health and neurodevelopmental defects

Leaching from plastic food packaging allows these chemicals to contaminate food



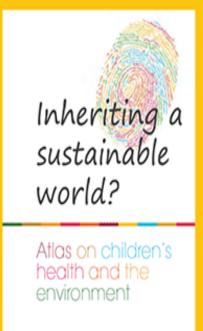
Organization

# Challenges of Children's EH as of 2017

- Traditional issues remain: WASH, household air pollution and vector borne diseases
  - Environmental justice and health inequity in developing countries
  - WASH and household energy interventions can save lives easily
- Emerging issues are of growing concern: climate change, electronic waste, chemicals and ambient air pollution
  - Changes wrought by industrialization, globalization and urbanization
  - In both developed and developing with different type of hazards

#### Precautionary Principle

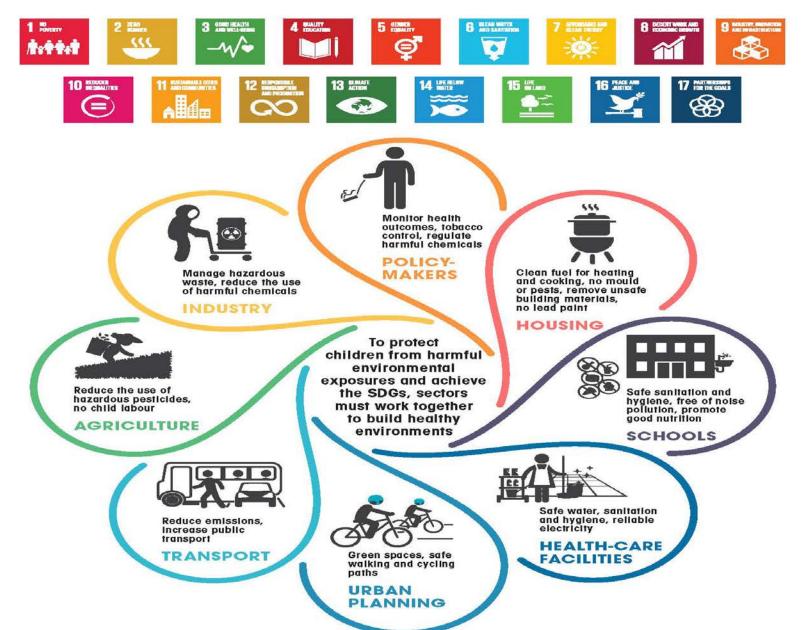
Where there are threats of serious or irreversible damage to the health of children, lack of full scientific certainty should not be used as a reason to postpone preventive measures







# Conclusion: Healthy environments for children are key to achieving SDGs!



## Future priorities of collaborating to achieve SDGs -1

- Identify data gaps to support monitoring of indicators related to SDGs 3, 6, 11, 12 and 13, and explore model-based estimates to support SDG monitoring where data are lacking
- Consider cost-benefit analyses of various data scenarios
- Collate national policies and legislation to identify areas for improvement and focus



## Future priorities of collaborating to achieve SDGs -2

- Identify ways to collaborate with other UN agencies such as the United Nations Environment Programme (UNEP) on environmental indicators, International Labour Organization (ILO) on occupational health indicators, etc.
- Identify ways of accessing funds from sources such as the Global Environment Facility (GEF) and the Green Climate Fund (GCF).



### ありがとうございました!

Special acknowledgement : Ms Marin Noel Bruné Children s Environmental Health World Health Organization