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Instructions for use

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

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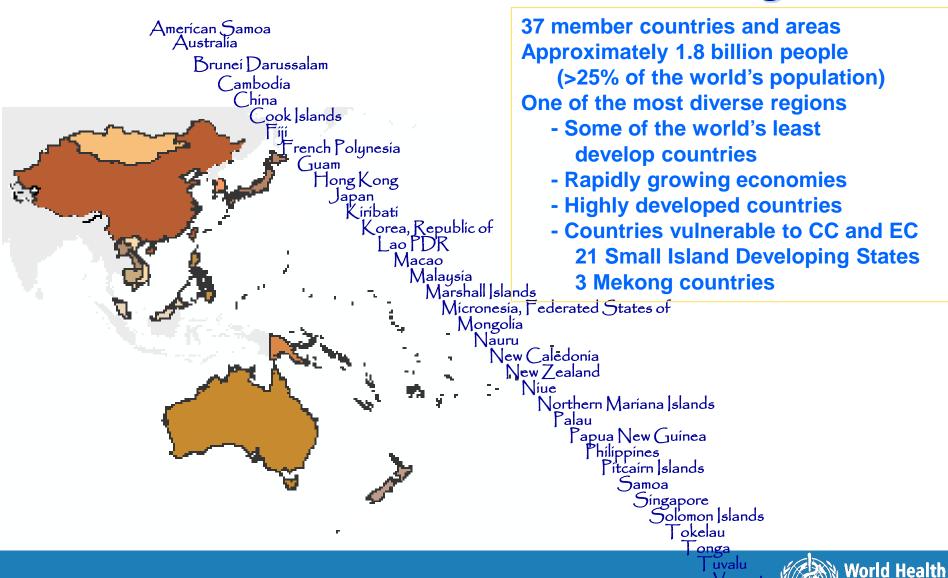


Outline

- 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

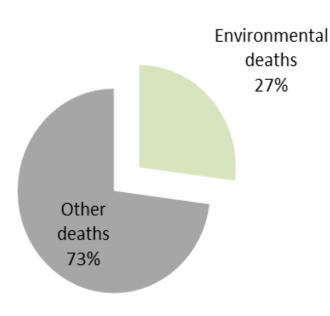


Organization

Western Pacific Region



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

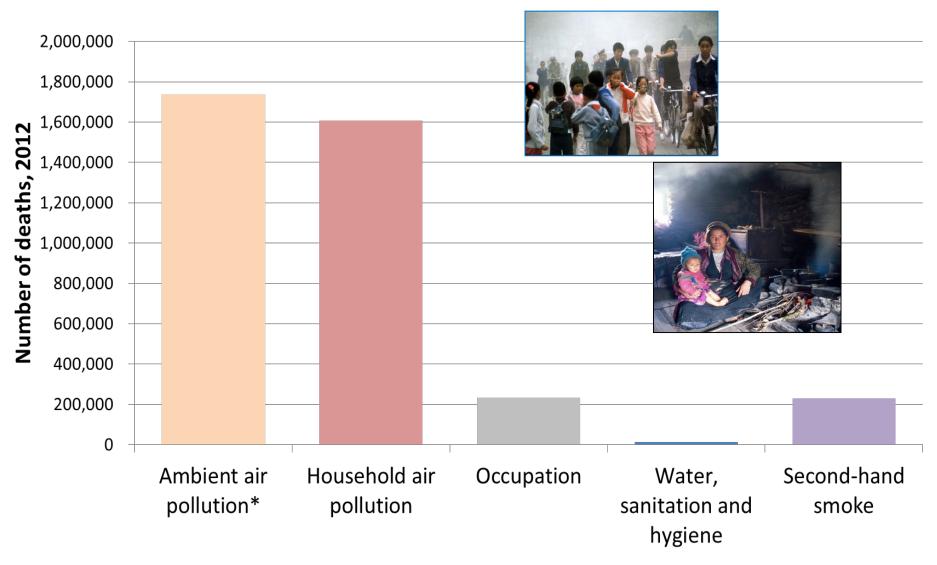


27% of all healthy life years lost

Globally: 23% of deaths caused by the environment

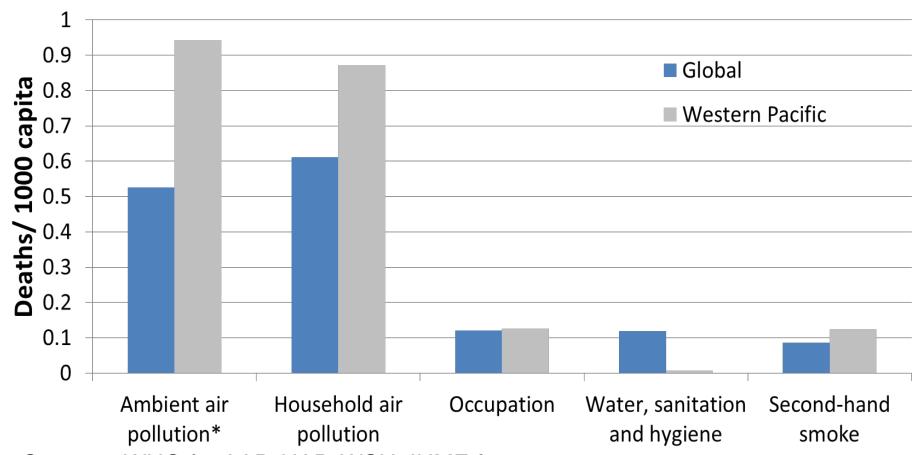


Major environmental risks to health, WPR



^{*} Preliminary estimate

Environmental deaths per 1000, WPR and World, 2012



Sources: WHO for AAP, HAP, WSH; IHME for occupation, SHS



"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

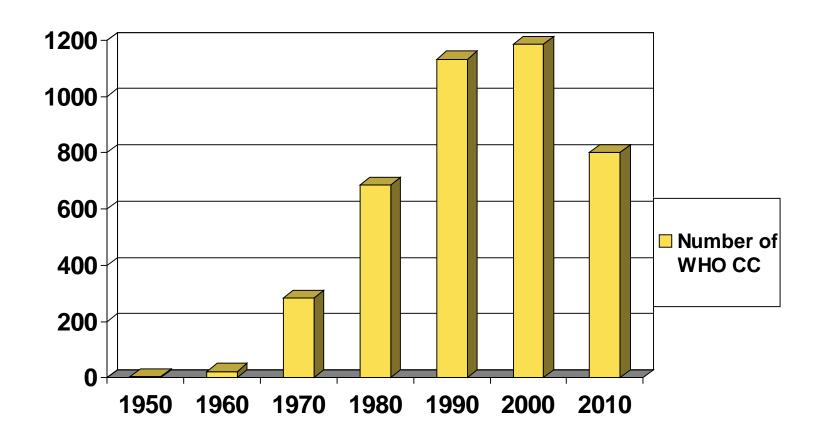


An early model of collaboration

- 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

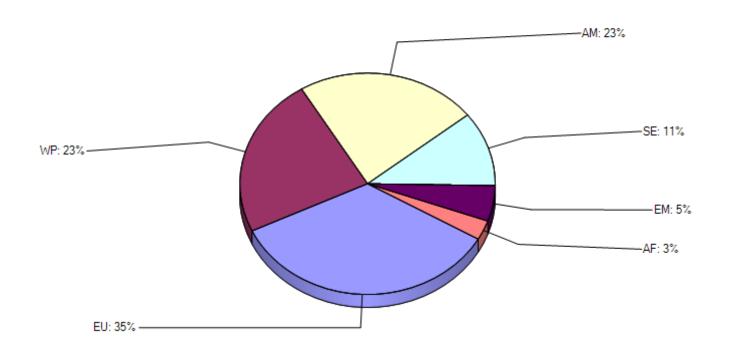


Number of WHO CCs worldwide



Distribution by WHO region

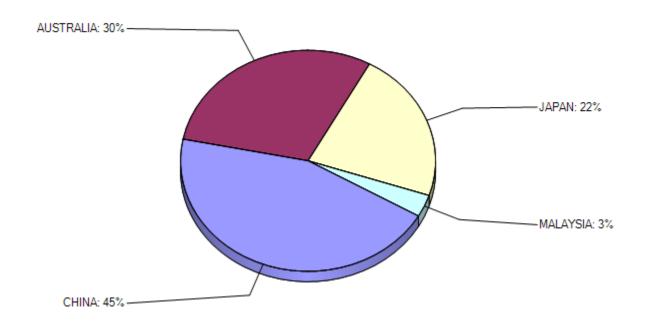
Percentage of Collaborating Centres by Region



WHO CCs in WPRO (I)

As of November 2017 there are 191 WHO CCs in WPRO

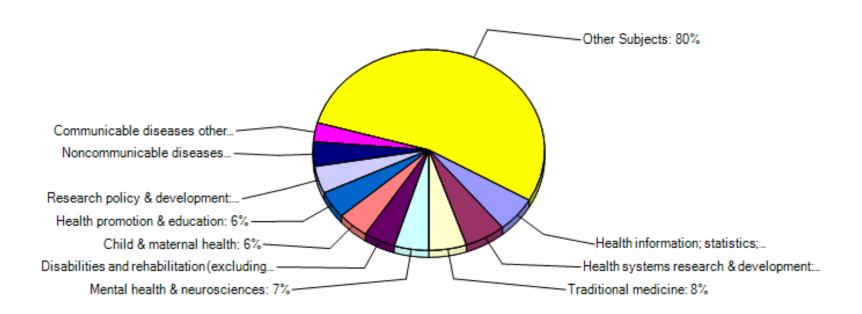
Percentage of Collaborating Centres by Country





WHO CCs in WPRO (II)

Percentage of Collaborating Centres by Subject









ZERO









CLEAN WATER

AND SANITATION

















Children are at the heart of the Sustainable Development Goals

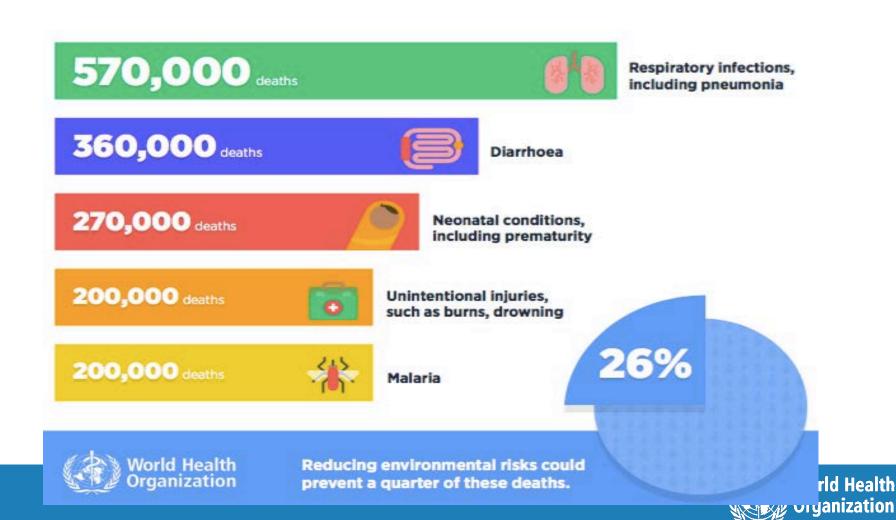
SDG 3: Ensure healthy lives and promote well-being for all at all ages

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

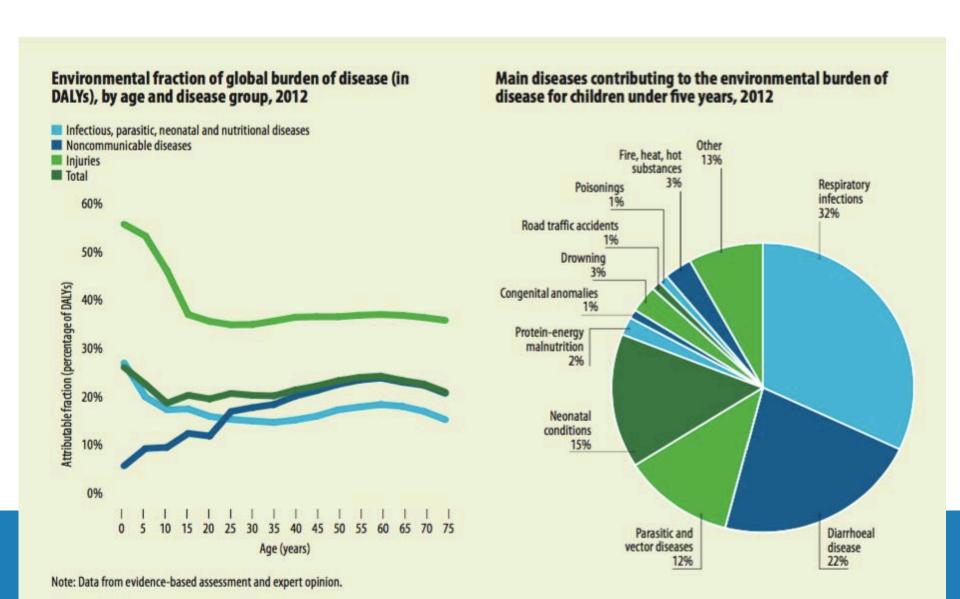
Effects of the environment on children's health are seen in every WHO regions



- 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



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.

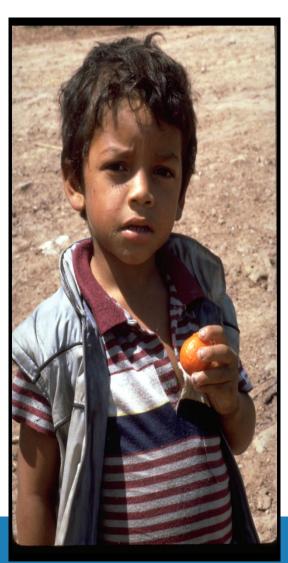


Electronic and electrical waste (e-waste)





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



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!





































Manage hazardous waste, reduce the use of harmful chemicals

INDUSTRY



Monitor health outcomes, tobacco control, regulate harmful chemicals

POLICY-MAKERS



Clean fuel for heating and cooking, no mould or pests, remove unsafe building materials, no lead paint

HOUSING



Reduce the use of hazardous pesticides, no child labour

AGRICULTURE



the SDGs, sectors
must work together
to build healthy
environments



Safe sanitation and hygiene, free of noise pollution, promote good nutrition

SCHOOLS



Reduce emissions, increase public transport

TRANSPORT



Green spaces, safe walking and cycling paths

URBAN PLANNING



Safe water, sanitation and hygiene, reliable electricity

HEALTH-CARE FACILITIES

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).

