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

Dr. Rokho Kim

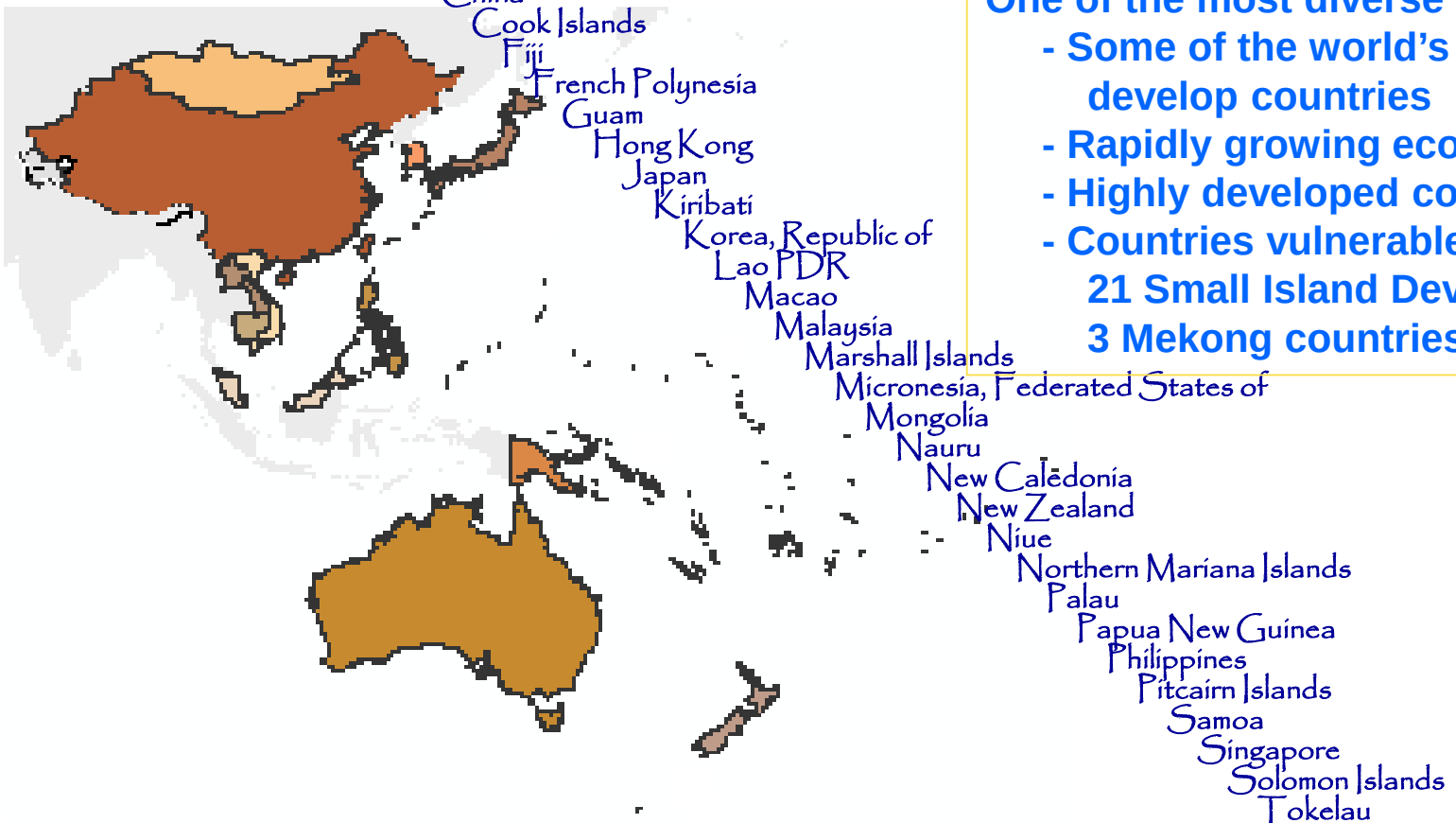
Coordinator, Health and the Environment (HAE)

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

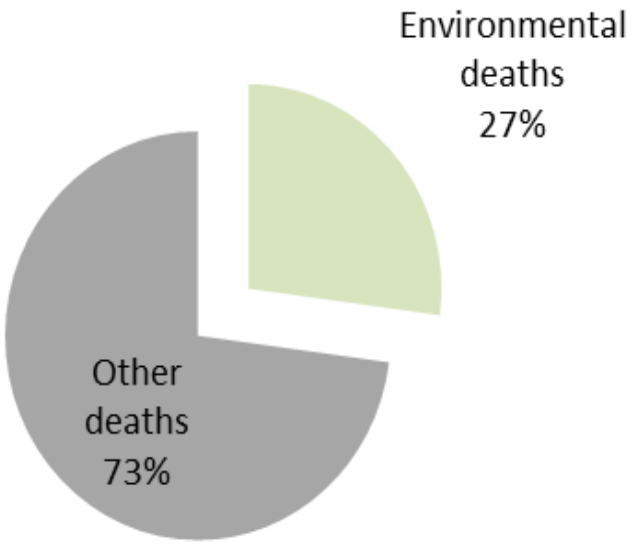
Countries in the Western Pacific Region



- 37 member countries and areas
- Approximately 1.8 billion people
  (>25% of the world's population)
- One of the most diverse regions
  - Some of the world's least develop countries
  - Rapidly growing economies
  - Highly developed countries
  - Countries vulnerable to CC and EC
    - 21 Small Island Developing States
    - 3 Mekong countries


Countries and Areas of the
WHO Western Pacific Region
Mongolia
China
Republic of Korea
Japan
Hong Kong SAR
Macao SAR
Lao People's Democratic Republic
Philippines
Viet Nam
Cambodia
Malaysia
Singapore
Brunei Darussalam
Northern Mariana Islands
Guam
Marshall Islands
Federated States of Micronesia
Palau
Nauru
Kiribati
Papua New Guinea
Solomon Islands
Tuvalu
Tokelau
Samoa
Wallis & Futuna
American Samoa
Vanuatu
Niue
French Polynesia
Fiji
Cook Islands
Tonga
New Caledonia
Pitcairn Islands
Australia
New Zealand

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

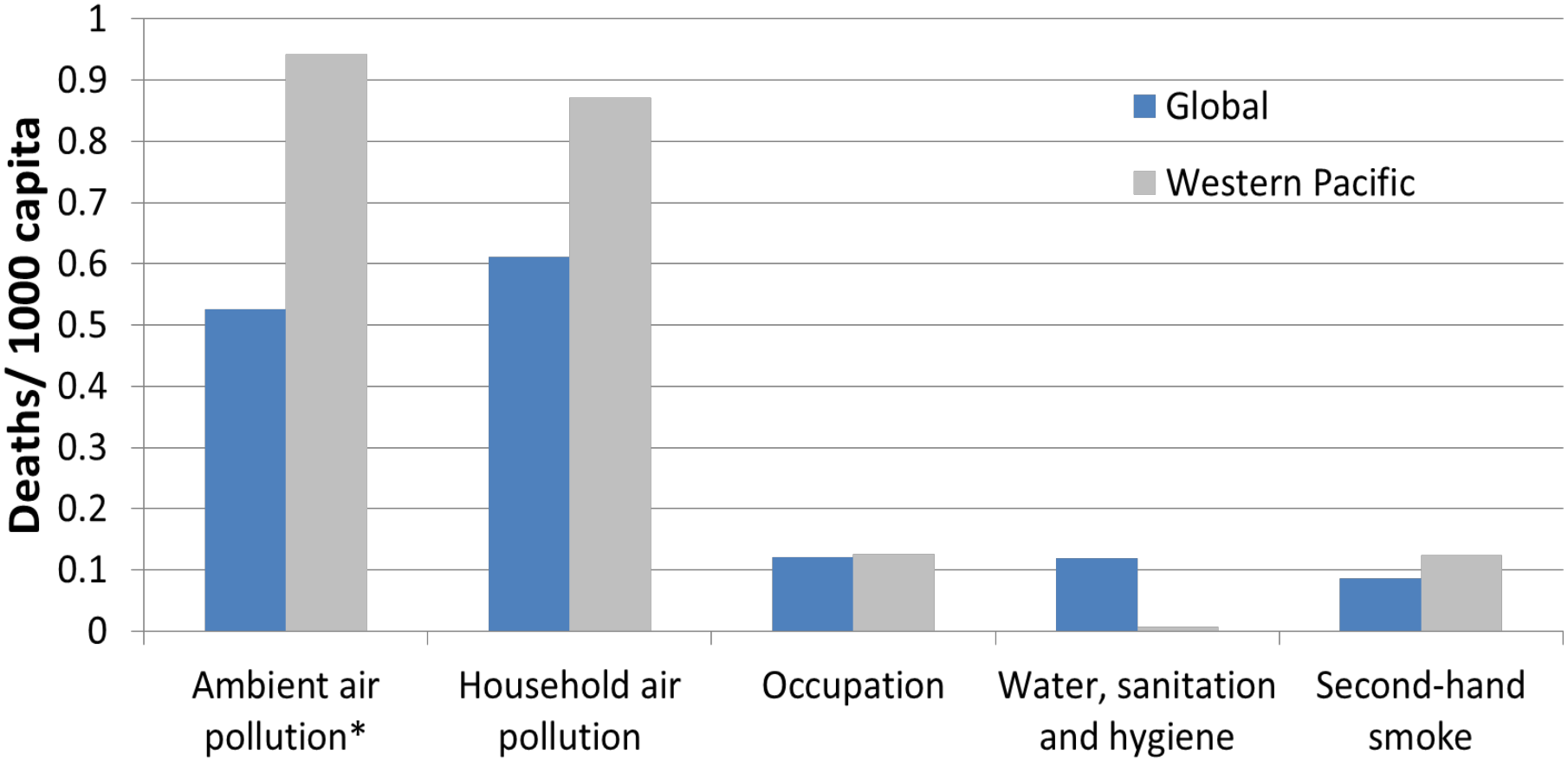
Major environmental risks to health, WPR





* 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 Sixty-fourth World Health Assembly, 16 May 2011

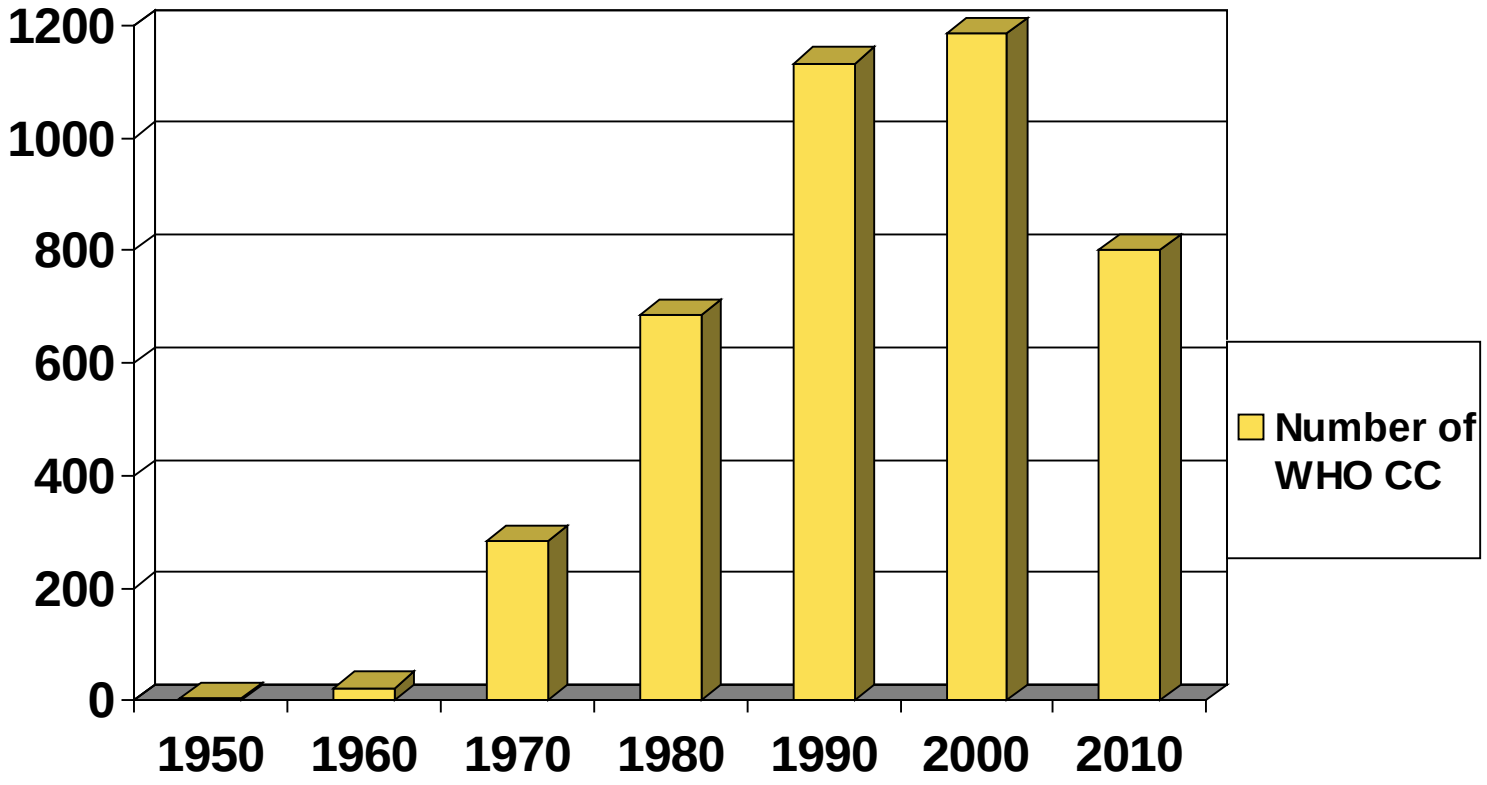
An early model of collaboration

- 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"

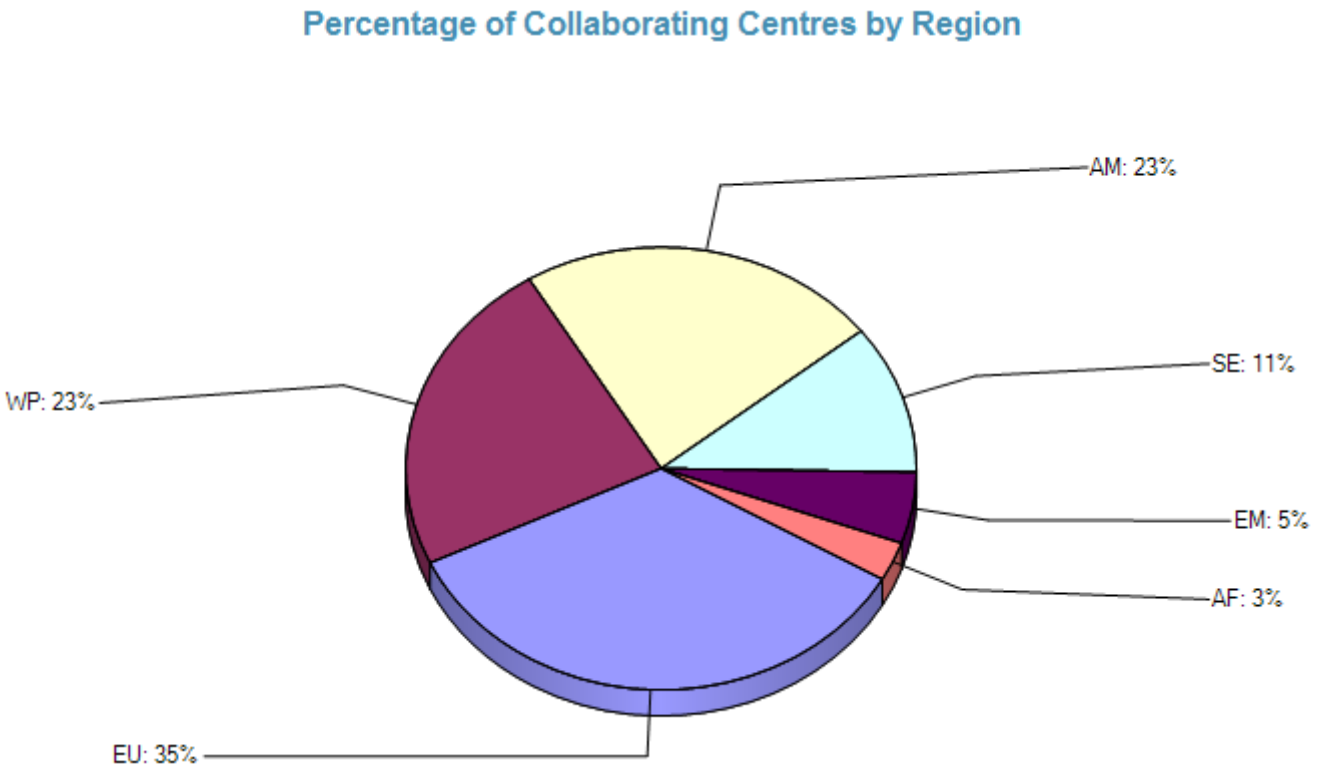
- Today, about 800 collaborating centres in over 80 countries worldwide



Number of WHO CCs worldwide

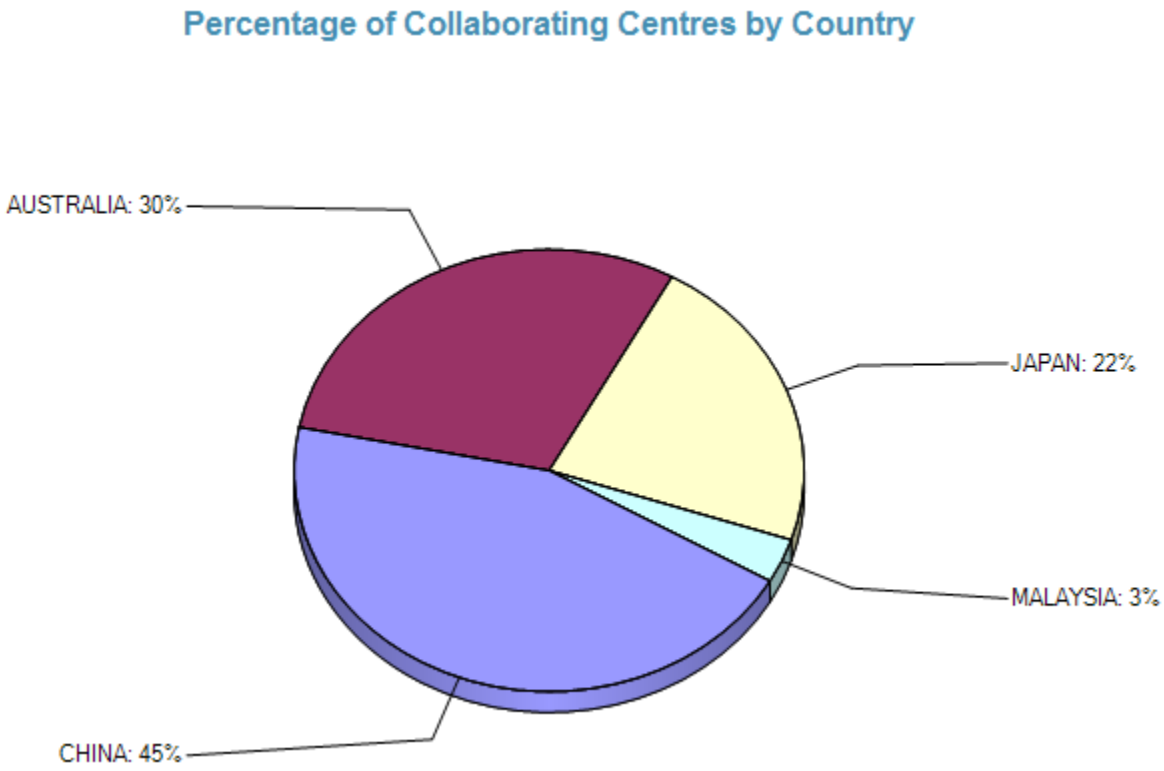


Distribution by WHO region

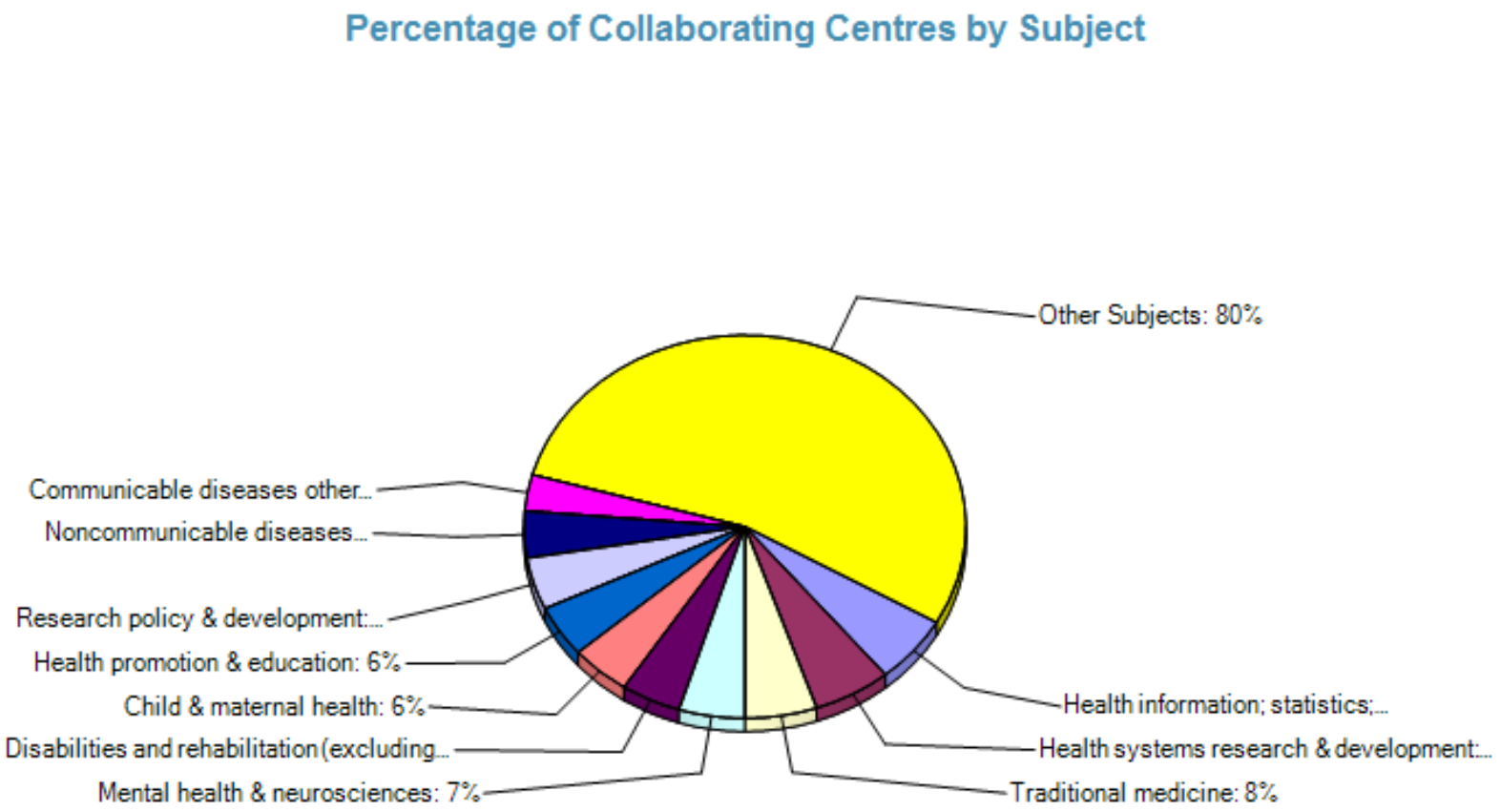


WHO CCs in WPRO (I)

As of November 2017 there are 191 WHO CCs in WPRO



WHO CCs in WPRO (II)




1 NO POVERTY
2 ZERO HUNGER
3 GOOD HEALTH
4 QUALITY EDUCATION
5 GENDER EQUALITY
6 CLEAN WATER AND SANITATION
7 AFFORDABLE AND CLEAN ENERGY
8 DECENT WORK AND ECONOMIC GROWTH
9 INDUSTRY, INNOVATION AND INFRASTRUCTURE
10 REDUCED INEQUALITIES
11 SUSTAINABLE CITIES AND COMMUNITIES
12 RESPONSIBLE CONSUMPTION
13 CLIMATE ACTION
14 LIFE BELOW WATER
15 LIFE ON LAND
16 PEACE AND JUSTICE
17 PARTNERSHIPS FOR THE GOALS
SUSTAINABLE DEVELOPMENT GOALS

Children are at the heart of the Sustainable Development Goals

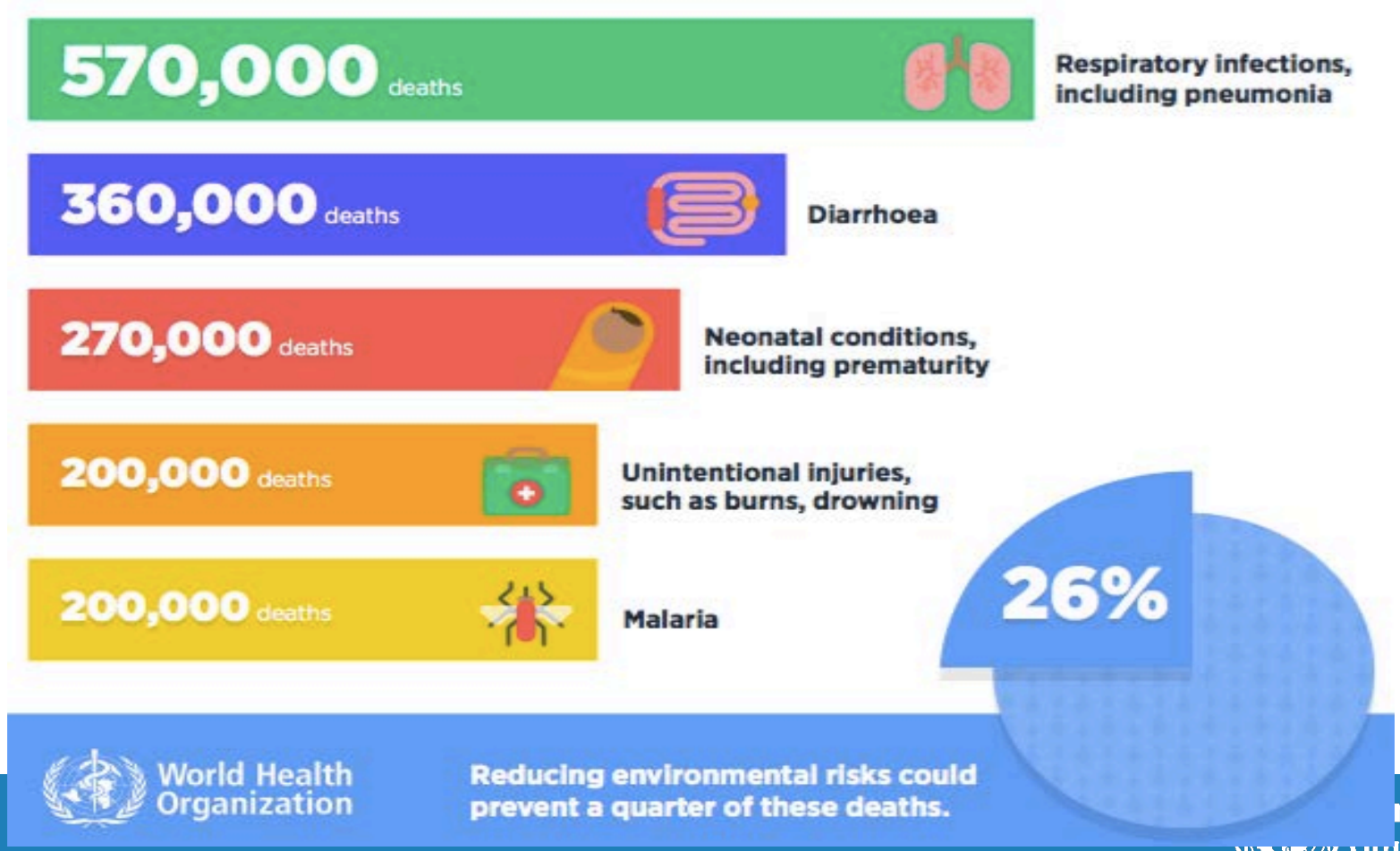
SDG 3: Ensure healthy lives and promote well-being for all at all ages

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



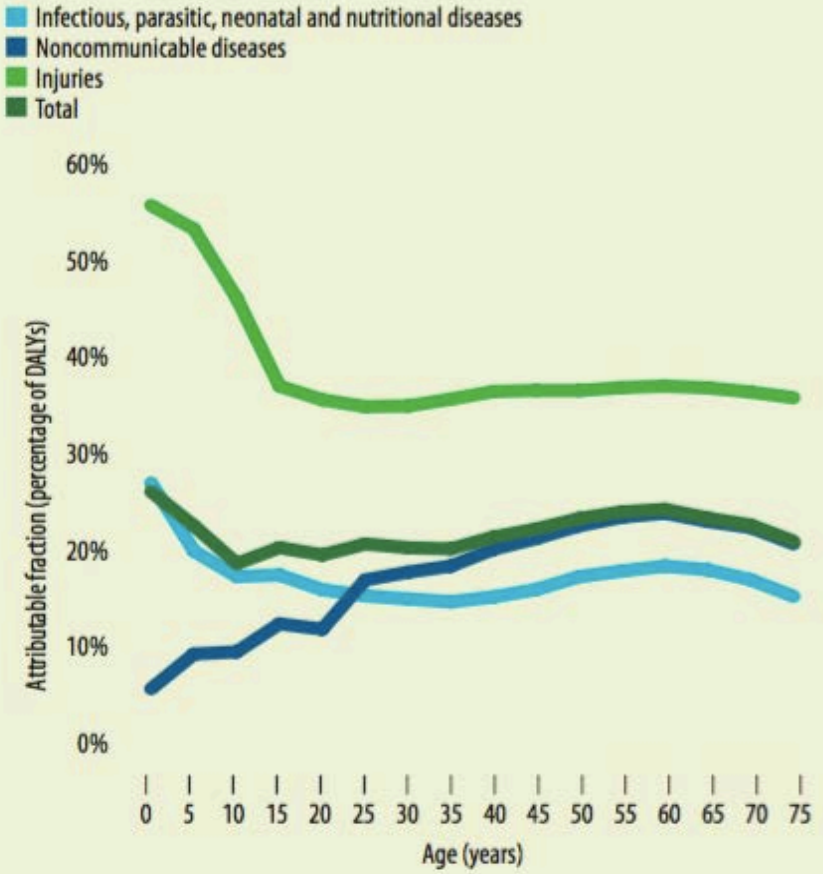
Effects of the environment on children's health are seen in every WHO regions



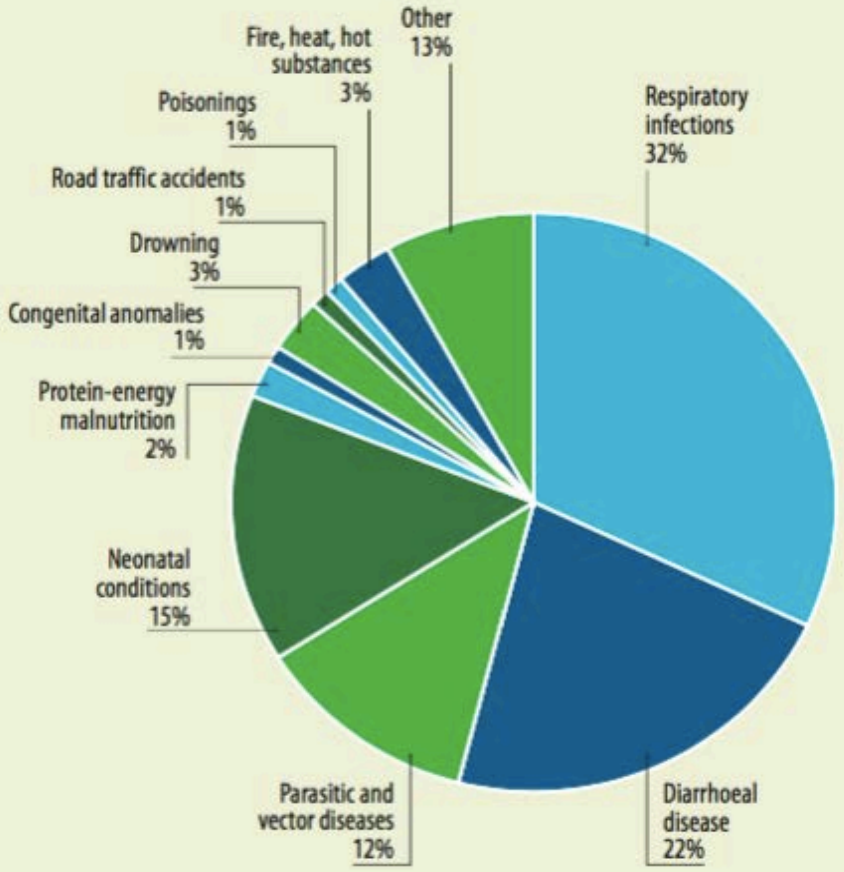
- The distribution of environmental hazards is not uniform
  - Much of the related burden of disease falls on developing regions and countries
- Three of the most common causes of death for children under five, diarrhoea, malaria, and pneumonia, are tied to environmental factors
  - Most prevalent in 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

Environmental fraction of global burden of disease (in DALYs), by age and disease group, 2012



Main diseases contributing to the environmental burden of disease for children under five years, 2012



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

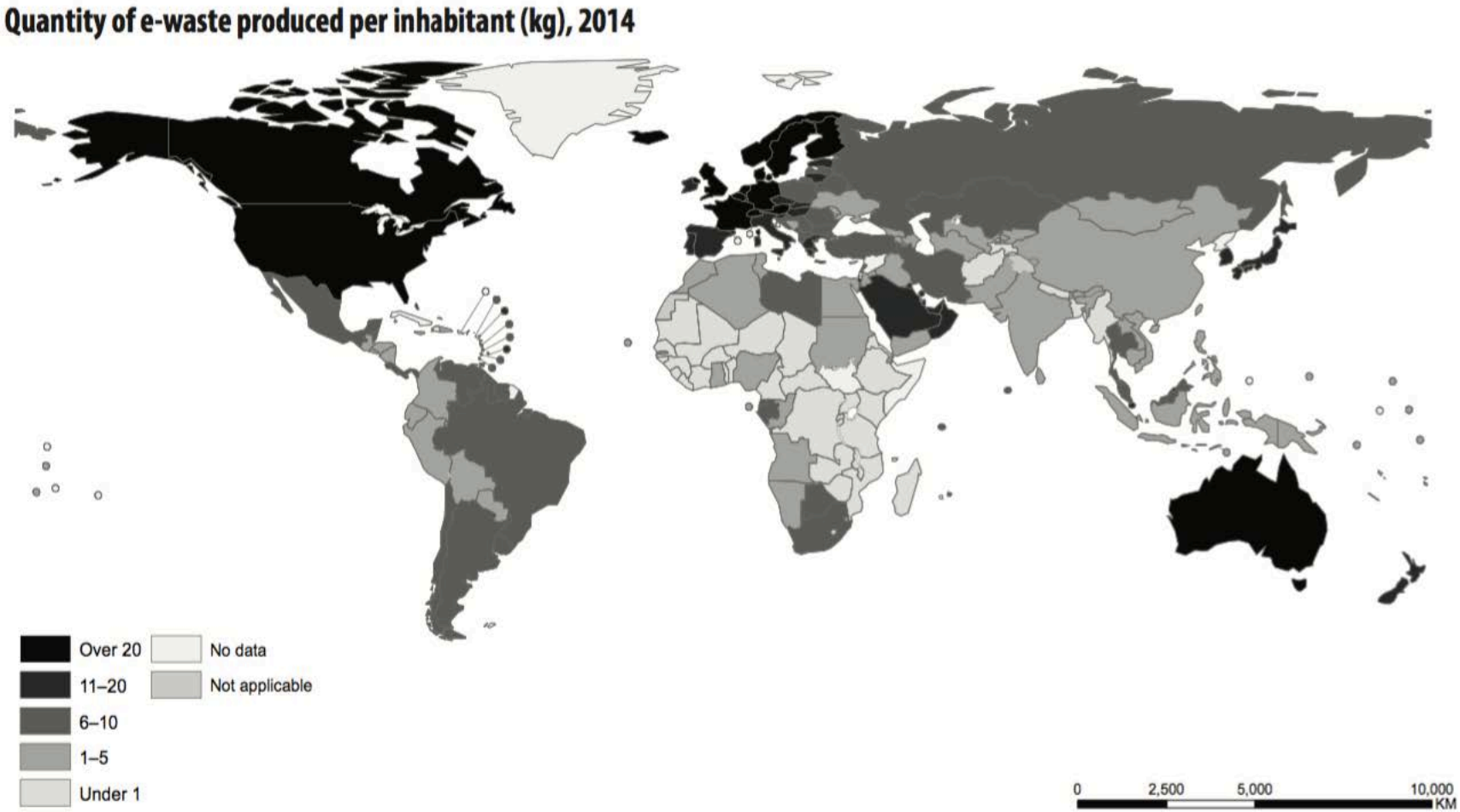
- Lead (Pb), which was commonly used in paint and petrol, accounts for 600 000 new cases of intellectual disability per year.
  - Use of lead in petrol has been eliminated in all but two countries
  - 59 countries have begun to phase-out lead paint

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)



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

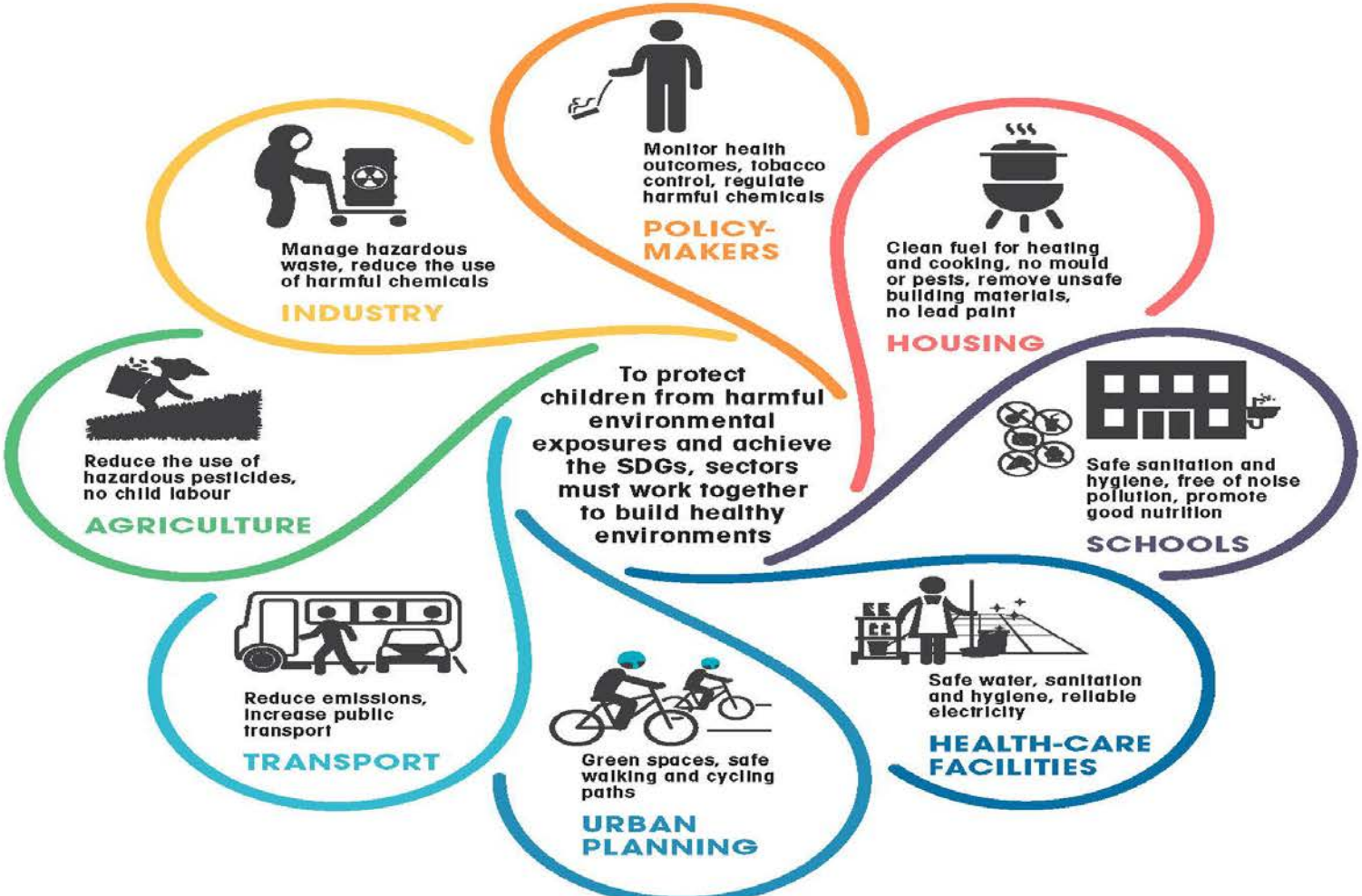


<u>Precautionary Principle</u>

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!
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World Health Organization