



Environmental Health track report 2020

A summary report of the Congress track on environmental health, urban health, climate change, health determinants and Sustainable Development Goals at the 16th World Congress on Public Health, 12-16 October 2020

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The 16th World Congress on Public Health (WCPH) was held online between 12 - 16 October 2020. This report summarises the key messages from the track on environmental health, urban health, climate change, health determinants and Sustainable Development Goals.

During the congress, there have also been plenary sessions and sessions in other tracks that addressed these themes. These are however not reflected in this track report.

Key Messages

1. The public health sector should consider environmental change in the development and implementation of public health services and interventions. Sustainable development requires urgent action and a global partnership to solve the world's most complex problems.
2. Interruptions to food and water security generate disease, famine, conflict and in severe circumstances mass migration, disproportionately harming the most disadvantaged, and ultimately harming everyone.
3. Health professionals are needed in the overall process of transformation necessary to achieve the Sustainable Development Goals (SDGs). Achieving goals requires the education process for healthcare professionals covering all of topics of climate change, energy and air pollution to a much greater extent than before.
4. For a healthy, sustainable future, we need to move from the current political economy, which is a global driver of ill-health, to a public health promoting political economy, for example by using wellbeing budgets.

Introduction and background

The track on ‘Environmental health, urban health, climate change, health determinants and Sustainable Development Goals’ addressed questions, among others, of water security, environment-related diseases, chemical exposure, healthy neighbourhoods and air pollution. Environmental health includes both the direct pathological effects of chemicals, radiation and some biological agents, and the (often indirect) effects on health and wellbeing of the broad physical, psychological, social and aesthetic environment which includes housing, urban development, land use and transport.

The fellows attended all workshops, seminars, and World Leadership Dialogues during the WCPH that covered topics on environmental health. During the WCPH, public health and environmental matters such as climate change were widely addressed and discussed. It was emphasized that climate change is caused by humans and that climate change translates into a global public health emergency that affects most heavily those living in poverty, outdoor workers, and children. The public health sector should consider the Green Deal as an argument for achieving goals at national levels, and align national public health policies with the goals of this document. It is incumbent upon the global public health community to commit and take a leadership role to fight the climate crisis.

In the plenary session ‘Leading the way to a healthier world’, we learned that COVID-19 also taught us about the value of health and about leadership. Once a pandemic - such as COVID-19 - lies in the past, there rises a challenge to make a positive sustainable change at global level to prevent this from happening again. Despite the immediate reversal of some sustainability trends, the pandemic has actually opened doors for better, stronger environmental and social sustainability, which is important for cities and urban settlements.

Climate change, energy issues and air pollution – as a triad of health priorities

Air pollution in the European Union (EU) continues to be the top environmental threat to health, leading to approximately 400,000 early deaths annually and high health costs. Over 20 of the 27 EU countries fail to keep air quality standards, which for key pollutants are already less strict than what the World Health Organization (WHO) recommends. Furthermore, the energy issues

in the world demand new innovative ways for the provision of energy. This poses a potential risk as these innovations might be detrimental to health because innovations sometimes go faster than the health sector can study the negative effects for health. There lies a challenge and an opportunity for the health sector to not only prevent further damage from the air pollution and climate crises, but also to improve health outcomes by decarbonizing, building climate resilience, and amplifying the message around the interdependency between climate change and human health. The Sustainable Development Goals (SDGs) are directly related to health and specific goals are aimed to reduce inequalities related to environmental health.

Climate change and food and water insecurities

It is argued that without addressing climate change, there cannot be good health and well-being and/or reduced inequalities. Historical records testify that large scale interruptions to food and water supplies trigger widespread social upheaval that - when driven by systematic inequities in distribution - can overthrow governments. Climate change is accelerating and with it, increasing intensity and frequency of extreme events such as heatwaves, droughts, fires, storms and floods. These interrupt food and water supplies and income generation. Unless transformative and rapid reductions in global greenhouse gas emissions can be achieved promptly, the global population will be forced to deal with an escalation of shortfalls.

Health Impact Assessment of climate change: monitoring and experiences

Most scientific communities and governments accept that a global warming process is occurring and are concerned about its alarming environmental and health consequences. The extreme conditions associated with climate change such as severe storms, floods and prolonged heatwaves and droughts, are expected to increase the burden of climate-sensitive diseases - e.g. heat-related illness, new and emerging infectious diseases, respiratory diseases or threats to food security - considerably. Moreover, the health impact assessment of climate change shows that the vulnerable populations are affected most by climate change and that climate change makes particular populations vulnerable. This could be explained by richer countries having more resources to deal with the effects of climate change. Standard indicators for climate-sensitive health outcomes alone will not adequately capture changing risks typically related to climate change, and indicators of vulnerability and exposure, adaptation planning and resilience for

health, and learning and knowledge management should be included in environmental health analyses. Analyses such as the *vulnerability index*, which analyses exposure, adaptability, and sensitivity, should be simultaneously context-specific and extended over time to track not only the full dimension of health impacts but also the efforts needed to adapt and increase resilience.

Essential Public Health Operations

The 10 Essential Public Health Operations (EPHO) defined by the WHO¹, - in particular EPHO3 - include climate change, green health services and sustainable development as important issues to consider when identifying current and future weaknesses in health services and public health interventions. It is important to consider the EHPOs when informing the development of new policies, programmes or projects. To deal with and solve the world's complex problems, sustainable development of public health requires urgent action and global partnerships.

Commercial determinants of health: detrimental to public health and the environment

Commercial determinants of health can be defined as strategies and approaches used by the private sector to promote products and choices that are detrimental to health and the environment. There is little understanding on how to manage commercial determinants of health and there is a lack of tools, skills and resources to identify, monitor and mitigate possible risks. Public health actors need guidance on working with the private sector (if, how and under what conditions), and there is a need for stronger public health governance mechanisms to support an ethical public health environment.

How can these issues be addressed? First, through political practices: transparency and identification and monitoring of the effects of the private sector on health outcomes. Second, moving from our current political and economic systems, which do not tackle the global drivers of ill-health, to a health-promoting political economy. This could be achieved by using tools such as wellbeing budgets, co-operatives, strong public sectors, regulations of Transnational Corporations (TNCs) for environment and health protection, local accountability for business,

¹ <https://www.euro.who.int/en/health-topics/Health-systems/public-health-services/policy/the-10-essential-public-health-operations>

and fair taxation. In other words, an economy of well-being, in which the well-being of citizens drives economic prosperity and vice versa².

Sustainable public health: better individual choices

Humans have used 2.2 trillion out of the 2.8 trillion metric tons of our available carbon budget. If we keep moving like this, we will see a 1.5 degrees Celsius temperature rise (compared with pre-industrial numbers) in 10 years. The price of inaction is high: the environmental risks are currently leading to 12.6 million deaths annually. There is a need for education, and responsible consumption and production. The commercial determinants of health, as discussed above, should come first as a priority to be able to change individuals' habits, as commercial strategies are of great influence over individual choices. Nonetheless, we can still look at what we individuals can do. We can make sustainable individual choices by recognising our unsustainable previous habits, recognising our motivations, adapting our environment, and creating rewards. The achievement reports on the Sustainable Development Goals (SDGs), also point out to the need of reviewing individual indicators. It was noted that the poorest 50% are accountable for only 10% of lifestyle emissions. Ways to contribute could be:

- eating less animal protein would save between 65 and 90 gigatons CO₂
- saving water would save energy would save between 0.9 and 1.5 gigatons CO₂;
- using LED lightning which would save between 16 and 18 gigatons CO₂
- using smart thermostats which would save between 7 and 7.5 gigatons CO₂
- Lastly, educating girls, equal rights, healthy individuals, family planning, higher wages for women, and more resilient families and communities would save us 85.42 gigatons CO₂

Perspectives for the future

The challenges that came forward in the track 'Environmental health, urban health, climate change, health determinants and Sustainable Development Goals' showed us that there is still a lot to do in order to work towards a healthy planet with healthy people while leaving no one behind. Healthy environments are key to a good quality of life. We must ensure that leaders,

² <https://www.oecd.org/about/secretary-general/the-economy-of-well-being-iceland-september-2019.htm>

policymakers and we ourselves commit to protecting the environment and implementing beneficial interventions, that will protect the future of the next generations and the planet.



The European Public Health Association, or EUPHA in short, is an umbrella organisation for public health associations in Europe. Our network of national associations of public health represents around 20'000 public health professionals. Our mission is to facilitate and activate a strong voice of the public health network by enhancing visibility of the evidence and by strengthening the capacity of public health professionals. EUPHA contributes to the preservation and improvement of public health in the European region through capacity and knowledge building. We are committed to creating a more inclusive Europe, narrowing all health inequalities among Europeans, by facilitating, activating, and disseminating strong evidence-based voices from the public health community and by strengthening the capacity of public health professionals to achieve evidence-based change.



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