ANNUAL REPORT OF THE EUROPEAN ENVIRONMENT AND HEALTH COMMITTEE (EEHC)

(Prepared by the EEHC Secretariat in consultation with the Secretariat at the United Nations Economic Commission for Europe)

This report is submitted in compliance with the requirement set out in paragraph 65 of the Declaration adopted at the Third Ministerial Conference on Environment and Health (London, June 1999), to report annually to the Regional Committee and to the United Nations Economic Commission for Europe (UN ECE) Committee on Environmental Policy. It summarizes the work done and the decisions taken by the EEHC since September 2001.

As requested in paragraph 66 of the London Conference Declaration, the EEHC also submits its proposals for the agenda of the Fourth Ministerial Conference on Environment and Health, to be held in June 2004, for approval by the Regional Committee and the UN ECE Committee on Environmental Policy.
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Introduction

1. The European Environment and Health Committee (EEHC) met in Istanbul from 19 to 21 November 2001 and in Sofia on 13 and 14 June 2002. In addition, an intergovernmental meeting was held as an extended session of the Budapest Working Group in Lucca, Italy, on 18 and 19 April 2002. The work of the EEHC, including preparation for the Fourth Ministerial Conference on Environment and Health, was financially supported by Italy, the United Kingdom and the European Commission.

2. Information on current membership (representatives of countries, intergovernmental/international and nongovernmental organizations, and major groups) can be found on the EEHC’s Web site (www.eehc.dk). The Co-chairpersons were Dr Corrado Clini and Dr Heinz Schreiber; the unexpected death of Dr Alán Pintér, Vice-chairman, on 29 September 2001 was a serious loss.

Commitment to action following the London Conference: Highlights

Protocol on Water and Health to the 1992 Convention on the Protection and Use of Transboundary Watercourses and International Lakes

3. To date, seven countries have ratified the Protocol, which is expected to enter into force by the end of 2003. The first Meeting of the Parties is expected to be convened in Budapest, perhaps “back-to-back” with the Fourth Ministerial Conference on Environment and Health.

4. The expert group for development of an evidence base and reporting scheme under the Protocol, established under the Working Group on Water, held its first meeting in Bonn in October 2001. It identified indicator diseases and pointed to the need to include surveillance of water quality, risk characterization of water supply structures, and development of management plans as important components of any future work.

5. Other meetings have been held on surveillance techniques (Budapest, November 2001; aquifer recharge for drinking-water production (Budapest, November 2001); and risk assessment of the deliberate use of toxic substances in water supplies (Copenhagen, November 2001).

6. A joint WHO/United Nations Economic Commission for Europe (UN ECE) meeting within the context of the International Congress and Trade Fair ECWATECH (Moscow, 4–7 June 2002) is expected to lead to programmes on assessment and reduction of water-related diseases in central Asia, and to facilitate implementation of the Protocol in the Russian Federation, with special attention to the issue of access to safe water for the (urban) poor.

7. Implementation of the Protocol is progressing in line with the priorities defined in a number of international fora, and future activities will show sufficient flexibility to take into account recent shifts in political priorities.

Transport, environment and health

8. At the first WHO/UN ECE High-level Meeting on Transport, Environment and Health, held on 4 May 2001, participants established a joint WHO/UN ECE ad hoc expert group to carry out additional background work before a decision is made whether to start negotiations on a Framework Convention on Transport, Environment and Health.

9. The Expert Group identified priority areas and actions for further work at the pan-European level, under a rationalized WHO/UN ECE framework. These priority areas include: (a) integration of environmental and health aspects into transport policy; (b) demand-side management and modal shifts; (c) urban transport and (d) cross-cutting issues (for instance, meeting the specific needs of the newly
independent states (NIS) and south-east European countries, as well as issues related to ecologically 
particularly sensitive areas). The Expert Group proposed that these priority areas should be addressed by 

10. THE PEP is due to be launched, and a ministerial declaration adopted, at the second WHO/UN ECE 
High-level Meeting, in Geneva on 5 July 2002. The meeting is also expected to endorse both an 
evaluation of implementation of the Charter on Transport, Environment and Health, based on a survey 
carried out by the WHO Secretariat, and the mid-term review of the UN ECE Programme of Joint Action 
on Transport and the Environment.

Implementing national environmental health action plans in partnership

11. A questionnaire survey carried out by the EEHC revealed a high level of interest among countries 
in carrying out national environmental health action plans (NEHAPs). In response, the EEHC established 
a special international steering committee, composed of representatives of 10 countries, with the task of 
evaluating the impact in countries of environment and health policies (including NEHAPs), arising from 
the Frankfurt, Helsinki and London Conferences.

Children’s health and the environment

12. The comprehensive joint WHO/European Environment Agency (EEA) publication entitled 
Children’s health and environment: a review of evidence was launched at the European Commission’s 
Green Week in April 2002. The WHO/United States Environmental Protection Agency project on 
prevention of children’s involuntary exposure to tobacco smoke was implemented at community level in 
Latvia and Poland, which are serving as models for other countries in economic transition in Europe. 
Work on children’s health and environment indicators is progressing, with a joint WHO/EEA workshop 
scheduled for the autumn of 2002. An informal meeting on children’s health and environment initiatives 
in Europe is due to be held in September 2002. Other achievements include the production of information 
material on air pollution, developed jointly with the International Pediatric Association, and preparation 
of activities on injuries and asthma.

Early human health effects of climate change and stratospheric ozone depletion

13. Guidelines on how to assess the health impacts of climate change and prevention strategies, 
developed by WHO, the United Nations Environment Programme (UNEP), the World Meteorological 
Organization and Health Canada, are available for review; they will be tested in a number of WHO 
Member States. WHO, together with the Italian Ministry for Environment and UNEP, organized a 
meeting on the combined health effects of climate change and stratospheric ozone depletion, and provided 
information for an assessment of the impact of ozone depletion. Preliminary results of the project on 
“Climate change and adaptation strategies for human health” include findings on heat mortality, increase 
of tick-borne encephalitis and Lyme disease in central Europe, and changes in water- and foodborne 
diseases.

Environment and health research

14. The Liaison Group on Environment and Health Research for Europe, jointly established by the 
European Commission, the European Science Foundation and WHO, continued to report to the EEHC in 
preparation for the Fourth Ministerial Conference on Environment and Health. A meeting to review the 
progress in environment and health research in Europe, and its relevance to public health policies and 
actions, is planned to be held from 8 to 10 May 2003, hosted by Denmark and with financial support 
expected from the European Commission.
Good practice in health, environment and safety management in enterprises

15. The European Conference on Promoting Workplace Health (Barcelona, 17–18 June 2002) demonstrated that the model for integrated workplace health management has been extensively incorporated into the workplace health projects, programmes and policies of leading public health institutions, local authorities, social partners and government institutions from many EU and non-EU European countries, as well as into the public health programme of the European Commission. Social and health insurance institutions have confirmed their commitment to participating in the development of new models for preventing work disabilities in their countries, taking account of the tools proposed in WHO’s European policy and the integrated workplace health management model.

Access to information, public participation and access to justice in environment and health matters

16. Negotiations are under way for a Protocol on Strategic Environment Assessment to the UN ECE Convention on Environmental Impact Assessment in a Transboundary context. The Protocol is expected to be adopted at the Fifth Ministerial Conference “Environment for Europe” in Kiev in May 2003. In November 2001, a seminar on health impact assessment in strategic environment assessment was held in Orvieto, Italy.

Economic perspectives on environment and health

17. The WHO European Centre for Investment for Health and Development in Venice will look into the socioeconomic determinants of health. An in-depth analysis of the cost/benefit of the malaria control programme in Azerbaijan and Armenia has been undertaken by the Roll Back Malaria programme.

Preparations for the Fourth Ministerial Conference on Environment and Health

18. The Fourth Ministerial Conference on Environment and Health is scheduled to take place in Budapest from 23 to 25 June 2004. In its role as Steering Committee, the EEHC considered consultation with and input from Member States, as well as from civil society groups, to be a vital element in securing a successful outcome of the Budapest Conference, and it initiated several actions to help ensure participation in the preparations.

19. A questionnaire was circulated in the summer of 2001 to solicit countries’ input into the overall theme of the Conference and the priority topics they would like to have considered for inclusion on the agenda. A similar questionnaire was also circulated to nongovernmental organizations (NGOs) and other civil society groups through the European Health and Environment Network (eHEN).

20. In selecting the overall theme of the Conference, the EEHC considered that it should support political decisions and outcomes, result in action-oriented commitments, be a pan-European priority and bring added value to the environment and health agenda in Europe. Applying these criteria to the views expressed in the questionnaires, and considering the health of future generations to be at the heart of sustainable development, the EEHC decided that the overall theme of the Budapest Conference will be “The future for our children”.

21. In selecting possible priority issues to be addressed under this overall theme, the EEHC considered that they should clearly support the theme, be priorities identified by the countries, generate policy decisions that would result in concrete actions, and be feasible within the preparatory time frame. To assist it in selecting the specific agenda items, the EEHC convened an extended meeting of the Budapest Working Group, in which all WHO Member States were invited to participate and make their views known. Seventy-four representatives of ministries of health and of the environment from 43 countries, as
well as representatives of six intergovernmental and international organizations and six NGOs participated in the meeting: the report is available on the EEHC Web site. The meeting supported the development of an action plan on children’s health and environment, as a framework within which action on the various priority issues could be taken forward. There was also general support for the development of a core set of environment and health indicators, as one important outcome of the Budapest Conference, and for work on applying the precautionary principle in relation to children’s health and environment.

22. The priority issues identified by countries can be grouped into three main areas, which may each be the subject of a Conference session. The first concerns the progress made in environment and health in Europe since the Frankfurt Conference. It will assess this progress since 1989, with a focus on the newly independent states; evaluate the impact of international policies on environment and health in countries; and review the extent to which decisions taken at the London Conference have been implemented and identify areas where further action is needed. The second area focuses on strengthening the basis for policy-making. It will examine the impact of the environment on health, based on evidence concerning the environmental burden of disease, and the need to develop a pan-European system for policy-oriented reporting and assessment (environment and health indicators), as well as to organize and share the information gathered from such assessment, monitoring and reporting. It will also examine practical application of the precautionary principle in environment and health decision-making, with special reference to children. The third main area highlights issues of emerging or increasing importance, including climate change and health, with the related aspects of energy and sustainable development, the indoor environment (housing) and health; and tourism, environment and health. In these three areas, the progress made on environment and health, environment and health indicators, the precautionary principle and housing are expected to be particularly important in terms of the overall theme and outcomes of the Budapest Conference.

23. One major outcome of the Budapest Conference is envisaged to be a ministerial commitment, in the form of an action plan or perhaps a charter, to follow up action on children’s health and the environment. This commitment will be discussed at an intergovernmental meeting of officials from ministries of health and the environment in early 2003. While each priority issue on the Conference agenda will have a clear relevance to the health of children, a conference declaration may also include recommendations for action that would be relevant to the general population.

24. It is crucially important that the Budapest Conference and other European initiatives, as well as relevant global actions, in environment and health, and particularly those with regard to children, fit well together in order to create synergies rather than overlaps and possible conflict. Close contact has therefore been established with the organizers of the Fifth Ministerial Conference “Environment for Europe”. Due account is also being taken of the work of other intergovernmental organizations, *inter alia*, The European Commission (with its Sixth Environmental Action Programme), the United Nations Children’s Fund, UNEP and the Organisation for Economic Co-operation and Development. In addition, and in line with resolution EUR/RC51/R7 on health and sustainable development adopted by the Regional Committee at its fifty-first session in September 2001, the EEHC will also consider the recommendations and conclusions of the World Summit on Sustainable Development when further developing the agenda for the Budapest Conference.

25. The involvement of NGOs and other civil society representatives in preparations for the Budapest Conference, as well as in the meeting itself, is considered to be very important, and a strategy for such participation will be developed by eHEN. Equally, it is essential to involve young people themselves in the Budapest Conference process, and a strategy will be developed to ensure their meaningful participation. Lastly, a communication strategy will also be developed, to ensure proper advocacy and involvement of civil society and policy-makers.